

Hardin-Simmons University  
Speech and Language Graduate Clinic  
Handbook



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## Receipt & Acknowledgment of the Hardin-Simmons University Speech and Language Clinic (HSUSLC) Handbook

The Clinic Handbook is an important document intended to help you become acquainted with the Hardin-Simmons University Speech and Language Clinic.

The contents of this handbook may be changed at any time at the discretion of the Department. No changes in any benefit, policy or rule will be made without due consideration of the mutual advantages, disadvantages, benefits, and responsibilities such changes will have on you as a student and on the Hardin-Simmons University Speech and Language Clinic. *The department maintains its right and prerogative to change clinical policies and procedures as necessary and without prior notice.*

Please read the following statements and sign below to indicate your receipt and acknowledgment of the Hardin-Simmons University Speech and Language Clinic handbook.

- I have received a copy of the Hardin-Simmons University Speech and Language Clinic handbook. I understand that the policies, rules, and benefits described in it are subject to change at any time.
- I am aware that while enrolled in the graduate program, confidential information will be made available to me (e.g., patient files, student information, and other related data). I understand that this information is critical to the success of the department and must not be disseminated or used outside of the department premises. In the event of dismissal, whether voluntary or involuntary, I hereby agree not to utilize or exploit this information with any other individual or agency.
- My signature below indicates that I understand and agree with the above statements and acknowledge my responsibility to read the Hardin-Simmons University Speech and Language Clinic handbook, be familiar with its contents, and adhere to all policies and procedures.

\_\_\_\_\_  
Student's Printed Name

\_\_\_\_\_  
Classification

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

The signed original copy of this agreement will be filed in your department file.  
Revised 8/25



## Hardin-Simmons Speech and Language Clinic

### Purpose of Clinic Handbook

This handbook has been designed to assist graduate students in understanding and implementing clinic policies and procedures as well as understanding ethical and professional conduct required.

The policies and procedures in this handbook are to be considered guidelines. **The Hardin-Simmons Speech and Language Clinic may, at any time, change, delete, or discontinue any part or parts of the policies in this handbook without prior notice.** Policies and procedures may change as higher education, legislation, and economic conditions dictate. When changes are made, students will be provided with updated information for the handbook.

Carefully read this handbook as an orientation to requirements for clinical practicum, information related to documentation, and basic policies. You are encouraged to ask questions of your clinic supervisor or Director of Clinical Education. It is through the question-answer interchange that we are able to learn more about each other, express our views, and work together in an effective and professional manner.

# MISSION STATEMENTS AND PROGRAM GOALS

## UNIVERSITY MISSION

The mission of Hardin-Simmons University is to be a community dedicated to providing excellence in education enlightened by Christian faith and values.

## COLLEGE OF HEALTH PROFESSIONS MISSION

It is the vision of the College of Health Professions that the Hardin- Simmons University Graduate Program in Speech-Language Pathology will attract students who are committed to striving for excellence in the profession of speech-language pathology and Christian service throughout the world.

## SPEECH-LANGUAGE PATHOLOGY DEPARTMENT MISSION

The mission of the Hardin-Simmons University Speech-Language Pathology program is to equip highly competent speech-language pathologists who are enlightened by Christian faith and values and demonstrate the knowledge and skills needed to work in the diverse communities of the world.

## STRATEGIC GOALS

1. Attract and develop students who are committed to striving for excellence in the profession of speech-language pathology.
2. Cultivate a balanced and experienced faculty to accomplish the goals and mission of the program and university and meet ASHA standards, encouraging and promoting professional growth in faculty
3. Create a comprehensive and effective evidence-based program that promotes person-centered care and supports diversity.
4. Demonstrate commitment to Christian service throughout the world by making a positive impact on students, the University, and the communities in which we serve

## **CONFIDENTIALITY and HIPAA**

Hardin Simmons University and the Hardin-Simmons University Speech-Language Clinic respect the privacy and confidentiality of the clients served in the HSUSLC in regard to their medical information. HSUSLC faculty, staff, and students believe that protecting this information is an essential aspect of our clinic. The policies and procedures for protecting the private information of clients served in the HSUSLC are consistent with the requirements of HIPAA Privacy Standards and Texas law. First year graduate students receive training on HIPAA regulations and policies during Fall Orientation, and second year students will review and discuss them at the Fall Clinic Orientation Meeting. Any undergraduate participating in a clinical experience at the HSUSLC must complete training on HIPAA Privacy Standards.

### **Statement of Confidentiality/HIPAA**

The Confidentiality and HIPAA Agreement is a statement regarding confidentiality and student responsibilities as they relate to client management and confidential records to which a student in the Speech-Language Graduate Program may have access while participating in clinical activities. Because confidentiality and the Code of Ethics of the American Speech-Language-Hearing Association are the ethical foundation upon which the professions of Speech-Language Pathology and Audiology are based, students are required to undergo confidentiality training each year that they are participating in clinical experiences and to sign the Confidentiality and HIPAA agreement. Breaches of confidentiality or ethical guidelines will result in negative consequences to the student.

*Communicating information to clients and/or caregivers is part of developing clinical competencies. However, students should note their Clinical Supervisor retains the ultimate legal, ethical, and moral responsibility for the client's care. Students should not communicate information about the client's evaluation, treatment, and/or clinical decisions regarding evaluation and/or treatment without discussing all clinical decisions with their Clinical Supervisor. If a client and/or caregiver should ask the student clinician a question(s) that he/she feels unprepared to answer, he/she should defer to his/her clinical supervisor. Students and/or faculty may review information regarding privacy laws at any time using the following link:*

<https://www.hhs.gov/hipaa/for-professionals/privacy/laws-regulations/index.html>





## **Receipt and Acknowledgement of Confidentiality, Ethics and HIPAA Statement**

### **Statement of Confidentiality and HIPAA:**

- This is a statement of my understanding of the importance of ethics, confidentiality and HIPAA in all areas of client management. I understand that any violation of client confidentiality or HIPAA guidelines on my part may result in negative consequences, including denial of clinical privileges.
- I understand that legally, the information (not the actual file) is the client's record and belongs to the client. Any violation of confidentiality involving information found in a client's record is punishable in a court of law.
- I understand that the professional code of ethics of the American Speech-Language-Hearing Association stipulates that confidentiality of client information is a part of professional responsibility and integrity.
- Because of these legal and ethical considerations, any student enrolled in the Speech-Language Pathology Graduate Program who reveals contents of a client's record, except as it relates to the educational process in the classroom or at a clinical site with a supervisor, is subject to disciplinary action.
- I have received instruction on confidentiality and the ASHA Code of Ethics and understand how they are maintained. I understand that, if I am uncertain about the appropriateness of my actions, I will check with my supervisor prior to undertaking those actions.
- I agree to follow the confidentiality policy of the Hardin-Simmons Speech-Language Pathology Graduate Program and the Code of Ethics of the American Speech-Language-Hearing Association. Furthermore, the University Clinic will follow the standard rules outlined by HIPAA to ensure safe, confidential protection of each client's protected health information.

\_\_\_\_\_  
Student Printed Name

\_\_\_\_\_  
Classification

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

## ETHICAL CONDUCT

Students enrolled in speech-language pathology programs are regarded as professionals and MUST adhere to the ASHA Code of Ethics (<http://asha.org/Code-of-Ethics/>). Students will sign a document stating they have reviewed the Code of Ethics and agree to adhere to the principles and rules set forth in the Code. Any violation of the Code may result in the student's immediate dismissal from the program.

### ASHA Code of Ethics (2023)

<http://asha.org/Code-of-Ethics/>

#### PREAMBLE

The American Speech-Language-Hearing Association (ASHA; hereafter, also known as “the Association”) has been committed to a framework of common principles and standards of practice since ASHA’s inception in 1925. This commitment was formalized in 1952 as the Association’s first Code of Ethics. This code has been modified and adapted to reflect the current state of practice and to address evolving issues within the professions.

The ASHA Code of Ethics reflects professional values and expectations for scientific and clinical practice. It is based on principles of duty, accountability, fairness, and responsibility and is intended to ensure the welfare of the consumer and to protect the reputation and integrity of the professions. The Code of Ethics is a framework and a guide for professionals in support of day-to-day decision making related to professional conduct.

The Code of Ethics is obligatory and disciplinary as well as aspirational and descriptive in that it defines the professional’s role. It is an integral educational resource regarding ethical principles and standards that are expected of audiologists, speech-language pathologists, and speech, language, and hearing scientists.

The preservation of the highest standards of integrity and ethical principles is vital to the responsible discharge of obligations by audiologists, speech-language pathologists, and speech, language, and hearing scientists who serve as clinicians, educators, mentors, researchers, supervisors, and administrators. This Code of ethics sets forth the fundamental principles and rules considered essential to this purpose and is **applicable to the following individuals:**

- a member of ASHA holding the Certificate of Clinical Competence
- a member of ASHA not holding the Certificate of Clinical Competence
- a nonmember of ASHA holding the Certificate of Clinical Competence
- an applicant for ASHA certification or for ASHA membership and certification

ASHA members who provide clinical services must hold the Certificate of Clinical Competence and must abide by the Code of Ethics. By holding ASHA certification and/or membership, or through application for such, all individuals are **subject to the jurisdiction** of the ASHA Board of Ethics for ethics complaint adjudication.

The fundamentals of ethical conduct are described by Principles of Ethics and by Rules of Ethics. The four Principles of Ethics form the underlying philosophical basis of the Code of Ethics and are reflected in the following areas: (I) responsibility of persons served professionally and to research participants, (II) responsibility for one's professional competence; (III) responsibility to the public; and (IV) responsibility for professional relationships. Individuals shall honor and abide by these Principles as affirmative obligations under all conditions of applicable professional activity. Rules of Ethics are specific statements of minimally acceptable as well as unacceptable professional conduct.

The Code of Ethics is designed to provide guidance to members, certified individuals, and applicants as they make professional decisions. Because the Code of Ethics is not intended to address specific situations and is not inclusive of all possible ethical dilemmas, professionals are expected to follow its written provisions and to uphold its spirit and purpose. Adherence to the Code of Ethics and its enforcement results in respect for the professions and positive outcomes for those who benefit from the work of audiologist, speech-language pathologists, and speech, language, and hearing scientists.

## **PRINCIPLE OF ETHICS I**

Individuals shall honor their responsibility to hold paramount the welfare of persons they serve professionally or who are participants in research and scholarly activities.

## **RULES OF ETHICS**

A. Individuals shall provide all clinical services and scientific activities competently.

B. Individuals shall use every resource, including referral and/or interprofessional collaboration when appropriate, to ensure that quality service is provided.

C. Individuals shall not discriminate in the delivery of professional services or in the conduct of research and scholarly activities on the basis of age; citizenship; disability; ethnicity; gender; gender expression; gender identity; genetic information; national origin, including culture, language, dialect, and accent; race; religion; sex; sexual orientation; or veteran status.

D. Individuals shall not misrepresent the credentials of aides, assistants, technicians, students, research assistants, Clinical Fellows, or any others under their supervision, and they shall inform those they serve professionally of the name, role, and professional credentials of persons providing services.

E. Individuals who hold the Certificate of Clinical Competence may delegate tasks related to the provision of clinical services to aides, assistants, technicians, or any other persons only if those persons are adequately prepared and are appropriately supervised. The responsibility for the welfare of those being served remains with the certified audiologist or speech-language pathologist.

F. Individuals who hold the Certificate of Clinical Competence shall not delegate tasks that require the unique skills, knowledge, judgment, or credentials that are within the scope of their profession to aides, assistants, technicians, or any nonprofessionals over whom they have supervisory responsibility.

G. Individuals who hold the Certificate of Clinical Competence may delegate to students tasks related to the provision of clinical services that require the unique skills, knowledge, and judgment that are within the scope of practice of their profession only if those students are adequately prepared and are appropriately supervised. The responsibility for the welfare of those being served remains with the certified audiologist or speech-language pathologist.

H. Individuals shall obtain informed consent from the persons they serve about the nature and possible risks and effects of services provided, technology employed, and products dispensed. This obligation also includes informing persons served about possible effects of not engaging in treatment or not following clinical recommendations. If diminished decision-making ability of persons served is suspected, individuals should seek appropriate authorization for services, such as authorization from a legally authorized/appointed representative.

I. Individuals shall enroll and include persons as participants in research or teaching demonstrations/simulations only if participation is voluntary, without coercion, and with informed consent.

J. Individuals shall accurately represent the intended purpose of a service, product, or research endeavor and shall abide by established guidelines for clinical practice and the responsible conduct of research, including humane treatment of animals involved in research.

K. Individuals who hold the Certificate of Clinical Competence shall evaluate the effectiveness of services provided, technology employed, and products dispensed, and they shall provide services or dispense products only when benefit can reasonably be expected.

L. Individuals who hold the Certificate of Clinical Competence shall use independent and evidence-based clinical judgment, keeping paramount the best interests of those being served.

M. Individuals may make a reasonable statement of prognosis, but they shall not guarantee—directly or by implication—the results of any treatment or procedure.

N. Individuals who hold the Certificate of Clinical Competence may provide services via telepractice consistent with professional standards and state and federal regulations, but they shall not provide clinical services solely by written communication.

O. Individuals shall protect the confidentiality and security of records of professional services provided, research and scholarly activities conducted, and products dispensed. Access to these records shall be allowed only when doing so is legally authorized or required by law.

P. Individuals shall protect the confidentiality of information about persons served professionally or participants involved in research and scholarly activities. Disclosure of confidential information shall be allowed only when doing so is legally authorized or required by law.

Q. Individuals shall maintain timely records; shall accurately record and bill for services provided and products dispensed; and shall not misrepresent services provided, products dispensed, or research and scholarly activities conducted.

R. Individuals shall not allow personal hardships, psychosocial distress, substance use/misuse, or physical or mental health conditions to interfere with their duty to provide professional services with reasonable skill and safety. Individuals whose professional practice is adversely affected by any of the above-listed factors should seek professional assistance regarding whether their professional responsibilities should be limited or suspended.

S. Individuals who have knowledge that a colleague is unable to provide professional services with reasonable skill and safety shall report this information to the appropriate authority, internally if such a mechanism exists and, when appropriate, externally to the applicable professional licensing authority or board, other professional regulatory body, or professional association.

T. Individuals shall give reasonable notice to ensure continuity of care and shall provide information about alternatives for care in the event that they can no longer provide professional services.

## **PRINCIPLE OF ETHICS II**

Individuals shall honor their responsibility to achieve and maintain the highest level of professional competence and performance.

## **RULES OF ETHICS**

A. Individuals who hold the Certificate of Clinical Competence shall engage in only those aspects of the professions that are within the scope of their professional practice and competence, considering their certification status, education, training, and experience.

B. ASHA members who do not hold the Certificate of Clinical Competence may not engage in the provision of clinical services; however, individuals who are in the certification application process may provide clinical services consistent with current local and state laws and regulations and with ASHA certification requirements.

C. Individuals shall enhance and refine their professional competence and expertise through engagement in lifelong learning applicable to their professional activities and skills.

D. Individuals who engage in research shall comply with all institutional, state, and federal regulations that address any aspects of research.

E. Individuals in administrative or supervisory roles shall not require or permit their professional staff to provide services or conduct research activities that exceed the staff member's certification status, competence, education, training, and experience.

F. Individuals in administrative or supervisory roles shall not require or permit their professional staff to provide services or conduct clinical activities that compromise the staff member's independent and objective professional judgment.

G. Individuals shall use technology and instrumentation consistent with accepted professional guidelines in their areas of practice. When such technology is warranted but not available, an appropriate referral should be made.

H. Individuals shall ensure that all technology and instrumentation used to provide services or to conduct research and scholarly activities are in proper working order and are properly calibrated.

### **PRINCIPLE OF ETHICS III**

In their professional role, individuals shall act with honesty and integrity when engaging with the public and shall provide accurate information involving any aspect of the professions.

#### **RULES OF ETHICS**

A. Individuals shall not misrepresent their credentials, competence, education, training, experience, or scholarly contributions.

B. Individuals shall avoid engaging in conflicts of interest whereby a personal, professional, financial, or other interest or relationship could influence their objectivity, competence, or effectiveness in performing professional responsibilities. If such conflicts of interest cannot be avoided, proper disclosure and management is required.

C. Individuals shall not misrepresent diagnostic information, services provided, results of services provided, products dispensed, effects of products dispensed, or research and scholarly activities.

D. Individuals shall not defraud, scheme to defraud, or engage in any illegal or negligent conduct related to obtaining payment or reimbursement for services, products, research, or grants.

E. Individuals' statements to the public shall provide accurate information regarding the professions, professional services and products, and research and scholarly activities.

F. Individuals' statements to the public shall adhere to prevailing professional standards and shall not contain misrepresentations when advertising, announcing, or promoting their professional services, products, or research.

G. Individuals shall not knowingly make false financial or nonfinancial statements and shall complete all materials honestly and without omission.

### **PRINCIPLE OF ETHICS IV**

Individuals shall uphold the dignity and autonomy of the professions, maintain collaborative and harmonious interprofessional and intraprofessional relationships, and accept the professions' self-imposed standards.

#### **RULES OF ETHICS**

A. Individuals shall work collaboratively with members of their own profession and/or members of other professions, when appropriate, to deliver the highest quality of care.

B. Individuals shall exercise independent professional judgment in recommending and providing professional services when an administrative directive, referral source, or prescription prevents them from keeping the welfare of persons served paramount.

C. Individuals' statements to colleagues about professional services, products, or research results shall adhere to prevailing professional standards and shall contain no misrepresentations.

D. Individuals shall not engage in any form of conduct that adversely reflects on the professions or on the individual's fitness to serve persons professionally.

E. Individuals shall not engage in dishonesty, negligence, deceit, or misrepresentation.

F. Individuals who mentor Clinical Fellows, act as a preceptor to audiology externs, or supervise undergraduate or graduate students, assistants, or other staff shall provide appropriate supervision and shall comply—fully and in a timely manner—with all ASHA certification and supervisory requirements.

G. Applicants for certification or membership, and individuals making disclosures, shall not make false statements and shall complete all application and disclosure materials honestly and without omission.

H. Individuals shall not engage in any form of harassment or power abuse.

I. Individuals shall not engage in sexual activities with persons over whom they exercise professional authority or power, including persons receiving services, other than those with whom an ongoing consensual relationship existed prior to the date on which the professional relationship began.

J. Individuals shall not knowingly allow anyone under their supervision to engage in any practice that violates the Code of Ethics.

K. Individuals shall assign credit only to those who have contributed to a publication, presentation, process, or product. Credit shall be assigned in proportion to the contribution and only with the contributor's consent.

L. Individuals shall reference the source when using other persons' ideas, research, presentations, results, or products in written, oral, or any other media presentation or summary. To do otherwise constitutes plagiarism.

M. Individuals shall not discriminate in their relationships with colleagues, members of other professions, or individuals under their supervision on the basis of age; citizenship; disability; ethnicity; gender; gender expression; gender identity; genetic information; national origin, including culture, language, dialect, and accent; race; religion; sex; sexual orientation; socioeconomic status; or veteran status.

N. Individuals with evidence that the Code of Ethics may have been violated have the responsibility to either work collaboratively to resolve the situation where possible or to inform the Board of Ethics through its established procedures.

O. Individuals shall report members of other professions who they know have violated standards of care to the appropriate professional licensing authority or board, other professional regulatory body, or professional association when such violation compromises the welfare of persons served and/or research participants.

P. Individuals shall not file or encourage others to file complaints that disregard or ignore facts that would disprove the allegation; the Code of Ethics shall not be used for personal reprisal, as a means of addressing personal animosity, or as a vehicle for retaliation.

Q. Individuals making and responding to complaints shall comply fully with the policies of the Board of Ethics in its consideration, adjudication, and resolution of complaints of alleged violations of the Code of Ethics.

R. Individuals involved in ethics complaints shall not knowingly make false statements of fact or withhold relevant facts necessary to fairly adjudicate the complaints.

S. Individuals shall comply with local, state, and federal laws and regulations applicable to professional practice and to the responsible conduct of research.

T. Individuals who have been convicted of, been found guilty of, or entered a plea of guilty or nolo contendere to (1) any misdemeanor involving dishonesty, physical harm—or the threat of physical harm—to the person or property of another or (2) any felony shall self-report by notifying the ASHA Ethics Office in writing within 60 days of the conviction, plea, or finding of guilt. Individuals shall also provide a copy of the conviction, plea, or nolo contendere record with their self-report notification, and any other court documents as reasonably requested by the ASHA Ethics Office.

U. Individuals who have (1) been publicly disciplined or denied a license or a professional credential by any professional association, professional licensing authority or board, or other professional regulatory body; or (2) voluntarily relinquished or surrendered their license, certification, or registration with any such body while under investigation for alleged unprofessional or improper conduct shall self-report by notifying the ASHA Ethics Office in writing within 60 days of the final action or disposition. Individuals shall also provide a copy of the final action, sanction, or disposition—with their self-report notification—to the ASHA Ethics Office.





## Clinical Agreement

Before beginning Clinical Practicum, each student will be required to sign both a clinical agreement and a confidentiality statement in order to ensure that the welfare of each individual who is served is protected.

The Clinical Agreement reads as follows:

*I understand that by registering for clinical course credit and obtaining clinical contact hours in the HSU Speech-Language Pathology Graduate Program, I agree to the following policies and procedures:*

1. To review and adhere to the principles and rules set forth in the Code of Ethics of the American Speech-Language-Hearing Association.
2. To follow the laws and requirements of the Texas State Board of Speech-Language Pathology and Audiology.
3. To follow the rules, policies, and procedures of assigned off-campus practicum sites.
4. To follow the rules and standards of conduct established by the Hardin-Simmons University Department of Speech-Language Pathology and the Hardin-Simmons University Speech and Language Clinic as set forth in the graduate handbooks.
5. To understand that all clinical activities (evaluation, treatment, conferences, and reports) must be supervised by appropriately credentialed faculty members or certified speech-language pathologists. Furthermore, the student recognizes that he/she is working under the license of the supervisor, and it is the supervisor who is responsible and accountable for evaluation and treatment decisions.

\_\_\_\_\_  
Student Printed Name

\_\_\_\_\_  
Classification

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

## **Initial Clinical Requirements**

Prior to beginning clinical practicum, graduate students must have completed and submitted all prerequisite paperwork. In order for a student to begin participating in clinical practicum, the following paperwork, documentation, and training must be completed and on file:

- 25 hours of observation
- Immunization record (For a list of immunizations, refer to the Documentation Checklist located in the Appendices)
- CPR
- Criminal background check
- Liability insurance (cost will be added to each graduate student's tuition)
- Health Insurance Portability and Accountability Act (HIPAA) and Federal Educational Rights and Privacy Act (FERPA) training
- Additional requirements as stipulated by off-campus placement sites

### **Current CPR card**

- The department will schedule a CPR class for all first-year students at the beginning of the first fall semester.
- Each student is responsible for the cost of this class.
- Each student is responsible for placing a copy of his/her CPR card in his/her academic file (Mrs. Sanchez office) as well as the "Personal Document" file in *Calipso*

### **Criminal Background Check**

- The university will conduct a criminal background check on all first-year students. This must be completed prior to beginning clinical practicum.
- The cost of the background check is minimal and is the responsibility of the student.
- Some clinical placements may require additional background checks. If so, this cost will be the student's responsibility.
- Each student is responsible for placing a copy of the Criminal Background Check in his/her "Personal Document" file in *Calipso*.

### **Identification**

- Students will purchase a name badge at the beginning of their first semester. Students *must* wear their badges at all clinical practicum sites including the HSUSLC.

### **HIPAA and FERPA Training**

- Students in the SLP graduate program must complete HIPAA and FERPA training. This training is offered through the HSU Human Resources Department. This training will be completed during the first semester of graduate school and an acknowledgement of completion will be placed in the student's clinical file as well as the "Personal Document" file in *Calipso*. It is recommended that students keep a copy for themselves

### **Additional Requirements**

- Some off campus placement sites may have additional requirements. If so, any cost will be the responsibility of the student.

# Knowledge of Assessment and Skills (KASA)

**Prior to graduation, all graduate students must demonstrate they have acquired all the knowledge and skills as set forth by the Council for Clinical Certification (CFCC).**

Retrieved from [www.asha.org/certification/2020-SLP-Certification-Standards](http://www.asha.org/certification/2020-SLP-Certification-Standards))

## Standard V-A

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

## 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.

## Professional Attire for HSUSLC and Off-Campus Placements

Everyone, including graduate students, faculty, staff, and student workers, are expected to dress professionally. Everyone should dress modestly and decently (no breast, belly, or butt showing). Individuals who project professional images through attention to their appearance instill confidence in their clients that the same careful attention will be given to their treatment program. Remember - not only are you representing Hardin-Simmons University, but the profession of Speech-Language Pathology as well.

- Clothing needs to be clean and in good condition. Dirty, frayed and/or ripped clothing is unacceptable. Remember, clothing fads are not professional dress (including deconstructed jeans). Look your best - clean, neat, and professional.
- Name tags are to be worn for all client interactions both on campus and at externship sites.
- Hair should always be clean and neat. Extreme colors (pink, blue, purple, cherry red, green, bright yellow) or extreme haircuts are not appropriate. For male students, hair should be no longer than collar length.
- Fingernails are a common cause of infection in healthcare settings. Nails should be clean, appear professional and be an appropriate length. Avoid distracting nail designs. Nail polish should not be chipped, pealed, or otherwise not well kept.
- Makeup should be tasteful and attractive. Goth-style makeup is not appropriate.
- Facial hair must be neat and well-trimmed and should not interfere or distract clients during therapy sessions.
- Body piercings other than one ear piercing are not allowed and are considered professionally inappropriate. When entering the clinic or your externship sites, be sure to remove all body jewelry from visible piercing sites.
- Visible tattoos are not allowed and are considered inappropriate for the clinical setting. All tattoos must be covered when entering the clinic or your externship sites.
- Students must wear their HSU SLP apparel and name tag while providing therapy at the HSUSLC. Name tags will be worn at all externship sites.
- Slacks and jeans are appropriate to wear to class. All pants must sit at or just below the waist. Neither underwear nor your belly should be exposed at any time. Leggings and exercise pants are not considered professional dress and are prohibited in clinical settings. If your apparel does not meet this requirement, you will be asked to return when appropriately dressed. **Shorts are not allowed at any time. This includes classes, treatment, or any activity where HSU and the HSUSLC are being represented. Exceptions may be made for outdoor activities. Clinicians should check with the Director of Clinical Education or the Interim Program Director for guidance on appropriate dress for these activities.**
- Professional clothing is often dictated by externship placement. When at externship placements, wearing scrubs may be appropriate. Neon and/or wild extreme patterns or any depiction of violence or violent characters are not acceptable. Students should follow the dress code of their clinical placement whether the placement is on or off campus.
- Shoes should be sensible and comfortable. Closed heel/toe flats, boots, or athletic shoes are appropriate. No flip flops, open toed shoes, or high heels are allowed.
- Heavy cologne/perfume should not be worn due to possible patient allergies.

# HSU Speech-Language Clinic Policies and Procedures

## General Information

The graduate program in Speech-Language Pathology will follow policies and procedures regarding the expectations of student academic and clinical integrity provided in the Hardin-Simmons Graduate Catalog and the ASHA Code of Ethics. During orientation at the beginning of each new cohort, the University Academic Integrity Policy and Internet Code of Ethics will be reviewed. The ASHA Code of Ethics provides graduates with a clear definition of ethical and professional conduct. At the beginning of every cohort, the Program Director and Director of Clinical Education will review these policies with the graduate students. Each student will then sign a Confidentiality and Ethics statement and Clinical Agreement acknowledging they have been provided with and have read the University Code of Conduct and ASHA Code of Ethics, as well as clinical expectations. **The student's signature will also acknowledge that the student completely understands the expectations of the program.**

## Orientation

Prior to the Fall Semester, each first-year cohort will participate in a three-to-four-day orientation. Students will participate in teambuilding activities and discussion as well as review all policies and procedures for the SLP graduate program and Hardin-Simmons University Speech and Language Clinic (HSUSLC). HIPAA regulations, ASHA Code of Ethics, Universal Precautions training, and an introduction to *Calispo* and *ClinicNote* will be discussed.

**Orientation is mandatory for all first-year students. Students who enroll in January will also complete a mandatory orientation.**

## HSUSLC Supervisors and Staff

Students completing clinical hours in the HSUSLC will be supervised by the HSUSLC Director of Clinical Education and other university clinical supervisors. All clinical supervisors are licensed by the state of Texas to practice as an SLP and have a Certificate of Clinical Competence (CCC) from the American Speech-Language and Hearing Association (ASHA).

Clinicians will also be supervised by additional supervisors during off-campus placements. All supervisors must be registered and approved before HSU SLP students receive any clinical hours from the supervising SLP. If an off-campus SLP is not approved by the HSU Director of Clinical Education, he/she may not supervise any HSU SLP students. No clinical hours will be approved for the student if supervised by an unapproved supervisor.

## Simucase

Students are required to purchase a yearly membership to *Simucase*. This is an online learning platform of videos and simulations that will assist students in improving reasoning and critical thinking skills and enhancing their clinical competency. These videos and simulations will be used in clinical and academic classes throughout the graduate program.

## **Professional Behavior**

Graduate classes and clinical practicum are preparing students for success in the field of speech-language pathology. As students prepare to enter the field the following professional behaviors should be followed.

- Emails are an effective and efficient way to communicate important information between professors, supervisors, and students. Please check email several times a day and respond to ALL emails in a timely manner. Students must also adhere to the HSU Internet Code of Ethics. ([Hardin-Simmons University - Internet Code of Ethics](#))
- Sensitive topics should not be addressed via email. The student should arrange an in-person meeting with professor or supervisor.
- Be respectful in all communication (verbal and written) with classmates, professors, supervisors, clients, and family members.
- Exhibit consistent professional conduct in all academic and clinical interactions.
- Refrain from using personal phones and electronic devices in classes and clinical sessions.
- Be punctual for all scheduled classes, meetings, and clinical sessions.
- Actively participate in all interactions with professors and supervisors.

Additional information is located in the appendix section of this handbook.

## **Social Media**

Social media includes any online or electronic format which allows users to share information and establish online communities for socializing. This can include, but is not limited to, Facebook, Instagram, Twitter, Pinterest, and Snapchat. Any information posted is open to misinterpretation or can inadvertently reveal protected information. Students are responsible and accountable for all information posted to their account. To maintain a professional relationship with clients and family members, students should not engage in social media communications via any social media sites. Students should exercise caution when interacting on social media sites and adhere to all professional and ethical guidelines of the professions.

## **Gifts and Gratuities**

Clients/families often want to show their appreciation for the services they received during the semester. Gifts under a \$10 value may be accepted. Monetary gifts to students are prohibited. If a client/family would like, they may make a monetary donation to the clinic or provide a donation of therapy materials. If a client/family wishes to donate, see the Director of Clinical Education for details and procedures.

## **Inclement Weather**

During inclement weather, students will be notified through the HSU Alert System (students are automatically enrolled in the system). If the university is closed the HSUSLC will also be closed. It is the responsibility of each student clinician to ensure his/her clients are aware of the closure. Students assigned to an externship site will follow the policy of the facility—if the facility is open, the student clinician is expected to be in attendance.

## **Lamination**

Lamination is free of charge for all materials being used for therapy in the HSUSLC. All laminations are completed by a student worker. Students should complete a lamination request form and leave materials on the student worker's desk located in the reception area. Please do not ask the student worker to cutout laminating for you. Lamination will only be completed at posted times. Materials may also be laminated at Mardel's (4705 South 14<sup>th</sup>) for a small fee.

## **Cell Phones/Smart Watches**

Cell phones are not allowed in the therapy room while providing treatment. Smart watches are allowed but clinicians are cautioned not to allow them to become a distraction. If at any time, a supervisor believes the watch has become a distraction, the clinician may be asked to remove it prior to a treatment session.

## **Recorders**

The HSUSLC has purchased recorders that can be checked out for evaluations or therapy sessions. This will guarantee that HIPAA regulations are being followed. Recorders are located in the Documentation Room and are to be returned immediately following the session.

**Recorders are not to leave the Clinic building at any time!** There may be instances when a clinician will need additional access to the recording obtained. If so, the recorder will be kept in the office of the Director of Clinical Education until no longer needed.

## **iPads**

No personal iPads may be used while providing treatment. The department has several iPads for therapy use and they may be checked out with the Director of Clinical Education. If you want to use an iPad, you must reserve one the day before intended use to ensure the iPad is charged.

## **Observation**

Parents and others may observe a therapy session upon request. The observer will be assigned one of the Clinic's iPads and/or headphones. The Director of Clinical Education or student worker will log the observer into the Valt system and direct the observer to a secure observation area. Once the treatment session is concluded, the observer will return the iPad and headphones to the student worker who will then disinfect the devices. All undergraduate students observing in the clinic must sign a Confidentiality Agreement and follow the professional dress code outlined in the Graduate Student Handbook. Observers are responsible for upholding the ASHA Code of Ethics as well as the policies and procedures of the HSUSLC.

## **Client Sign -In**

It is important to know who is in the clinic at any given time in case of an emergency. Therefore, clients are to sign in prior to each session. It is the student clinician's responsibility to ensure client attendance has been documented. The sign-in labels are located at the reception desk in the waiting area. Once a client has signed in, the student worker will remove the label and place on the daily attendance sheet located in the Attendance Notebook.

## **Swipe Card Access**

The HSUSLC is a secured building and is accessed through swipe card only. Students will use their identification card to enter the clinic through the door located on the far southeast corner of the building. Please make sure the door completely closes behind you. There are additional rooms within the building that are swipe access only. Therefore, students should have their identification card with them at all times. **Only individuals with an identification card are to be in any of the secured areas.**

## **Parking**

Student parking is located in the parking area at the back of the building. Please do not park in the spaces in front of the building. Those spaces will be reserved for faculty.

## **Playground Use**

Clinicians are encouraged to utilize the playground area when appropriate for a client's goals/treatment plan. Please make sure you have the parent's/guardians permission and clear entrance with the supervisor or Director of Clinical Education.

## **Non-Discriminatory Policy**

The HSUSLC serves individuals from Abilene and the Big Country area. The HSUSLC services are provided free of charge to all individuals and/or their families. Services scheduled each semester are limited to the number of appointments that the clinical educators can adequately supervise. The HSUSLC follows the Hardin-Simmons University non-discrimination policy and does not discriminate in the delivery of clinical services. The HSUSLC will provide services to any individual that may benefit if supervision and space are available.

<https://www.hsutx.edu/title-ix/>. *All HSUSLC faculty, staff, and students are strongly encouraged to review information and resources provided on the ASHA website each semester.*

<https://www.asha.org/Practice/multicultural/>



## Infection Control Guidelines

The goals of an effective infection control procedure are:

- To provide as safe an environment as possible, based upon our current knowledge, for our patients, students, faculty, and staff.
- To comply with the most recent recommendations published by the American Speech-Language-Hearing Association and the Centers for Disease Control.
- To provide a practical and effective infection control model which will be carried into practice by our students, faculty, and professional clinical staff.

In order to achieve these goals, the following guidelines are to be followed.

- The responsibility for completing effective sterilization and disinfection procedures rests with the students and faculty.
- Students and faculty will wash/disinfect their hands a) immediately prior to the treatment of each patient, b) at any point during treatment when contact with contaminated items has been made, and c) at the conclusion of treatment.
- Students and faculty will wear properly fitting disposable gloves for intraoral examinations. Gloves are **not** to be reused after administration of any treatment procedure on a patient (a new pair of gloves is to be used for each patient treated). It is also important to remember that gloves do not serve as substitutes for careful handwashing. Hands should be thoroughly washed with appropriate handwash preparation that is provided, both before gloving and after gloves are used in clinical areas.
- Items manufactured for single-use only, such as tongue blades, oral probes, and drinking cups are not to be reused and are to be disposed of properly.
- **All items** used in the treatment session are to be disinfected prior to returning to the material storage area. Visibly soiled toys and manipulatives must be cleaned in the kitchen (Room 147).

**Failure to comply with the above general considerations will be considered a minor clinical violation which will result in appropriate disciplinary action.**

### Handwashing

According to the CDC, handwashing is one of the best ways to protect yourself and others.

- Handwashing is **MANDATORY**:
  - At the beginning and end of a treatment session.
  - When hands are obviously soiled.
  - After contact with the face, nose, hair, mask, glasses, excretions, etc.
  - Immediately after removing gloves.
  - Before and after eating.

## Handwashing procedure

- Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.
- Lather your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.
- Scrub your hands for at least 20 seconds (hum “Happy Birthday” twice)
- Rinse your hands well under clean, running water.
- Dry your hands using a clean towel or air dry them.
- Use the paper towel to turn off the faucet, turn off the light switch, and/or open the door. Paper towel should then be properly disposed of.

## Use of hand sanitizer

If soap and water are not readily available and hands are not visibly soiled, an alcohol-based hand sanitizer that contains at least 60% alcohol may be used. CAUTION: If more than a few mouthfuls of alcohol-based sanitizer is swallowed, alcohol poisoning is possible. Keep out of reach of children and supervise their use.

1. Apply the gel product to the palm of one hand (read the label to learn the correct amount).
2. Rub your hands together.
3. Rub the gel over all the surfaces of your hands and fingers until your hands are dry. This should take around 20 seconds.

## Use of Gloves

- All personnel working with the oral or nasal cavities must wear properly fitting disposable gloves during all treatment procedures. Disposable gloves are only to be applied immediately prior to actual examination or treatment.
- Clinicians must remove and discard gloves if it is necessary to leave the environment or if any contaminated surface is touched. **IT IS FORBIDDEN TO WEAR SALIVA OR BLOOD CONTAMINATED GLOVES WHILE WALKING THROUGH THE HALLWAYS OR IN CLINICAL AREAS.**
- Do not touch phones, doors, cabinets or charts with saliva or blood contaminated gloves.
- Upon completion of patient treatment and following environmental decontamination procedures, gloves are to be removed and discarded.
- To remove gloves, grab one glove at the wrist and peel off from wrist to fingertips. While holding removed glove in the remaining gloved hand, use bare hand to remove second glove, wrist to fingertip.

**All flat surfaces and materials must be disinfected before vacating the room.**

## Documentation

### ClinicNote

*ClinicNote* is an electronic medical record software program that is HIPAA compliant. Students are required to purchase *ClinicNote* each semester they are scheduled in the HSUSLC.. This program will be used for all clinical documentation (i.e., evaluation, daily notes, etc.) and training will be provided. *ClinicNote* may only be accessed in the Documentation room located in Room 137.

### Documentation Timeline

HSUSLC policy holds student clinicians and supervisors to a timely completion of all documents. Following an evaluation, the student clinician's initial draft is due to the supervisor within **48 hours of the assessment completion**. Revisions may be necessary and will be performed in a timely manner so that the final evaluation document is signed and dated within **ten business days of the initial encounter**. The same timeline will be used to generate progress notes and discharge summaries. All daily notes (i.e., SOAP notes) are to be completed **on the day of service**. All SOAP notes are due to the supervisor by 11:59 pm on date of service. If any revisions are required, the final documentation should be signed and dated **no later than 48 hours from the Point of Service (POS)**.

It is important to understand that anything beyond these timelines could be considered unacceptable. As such, if a student has more than two daily notes that are late, she/he will be unable to participate in Clinical Practicum until the notes are completed and signed. Additionally, the student clinician will be considered in **major** violation of the student handbook which may result in the student being placed on a remediation plan.

### Calipso

*Calipso* is the system used to track clinical placements, clinical hours, and important student documents. HSUSLC will use the *Calipso* software and students are responsible for the one-time fee. The student's information is password protected. Each student as well as clinical educator (supervisor) will have a unique password. This password should not be shared with anyone. Students should note that the clinical educator to whom they are assigned can view the student's personal information at any time. At the beginning of the graduate program, each student will register as a "Student User". When logging in for the first time, the student will be prompted to pay the student fee.

Students are to create a "Personal Document" file within the "Student Information" tab. The following documents will be uploaded, by the student and appropriately named:

- Immunizations (TB test results, Tetanus, COVID if applicable, additional immunizations)
- Certificate of FERPA training
- Certificate of HIPAA training
- CPR card
- Background Check
- Undergraduate observation hours and clinical hours, if applicable.

Clock hours obtained during clinical practicum are to be submitted **weekly** to each supervisor. A separate clinical hour sheet is to be submitted for each clinical site (Long EC, KDK, HSUSLC, off-campus placements). In the “Comment or Additional Information” box at the bottom left of the form, please indicate the client’s initials and the amount of time seen. If the hours are obtained through “*Simucase*” please indicate the name of the simulation. The completion month noted at the top of the form is the month in which the hours were obtained. **Clinicians are to record the actual amount of time spent in direct contact with the client. Hours are not to be rounded up!**

Clinical hours must be submitted to the supervisor for approval by Friday at 11:00 p.m. Failure to *submit* hours on time will result in the clock hours not being counted in the designated area. Late hours may be submitted, but those hours **will not** count towards the 400 required hours needed for certification. **The first time hours are submitted late, the clinician will receive a verbal warning. Each subsequent late submission will result in a reduction in clinic grade by 1 point. For additional information concerning documenting clinical hours, please refer to the document “Documenting Clinical Clock Hours” located in the appendix.**

### **SOAP Notes**

“SOAP” stands for subjective, objective, assessment, and plan and is an effective and standard means of documentation utilized in the medical industry. SOAP notes in the HSUSLC are written for every treatment session or cancellation and are to be completed immediately following the session. The initial draft of the note may be completed in a Word document on a student’s personal computer. **In order to remain HIPAA compliant, no identifying information is to appear on the initial document. Refer to the client by initials only.** The supervisor will review the notes, make corrections, and return to the student. Once the supervisor makes the final approval, the student clinician will input the note into *ClinicNote* and submit to supervisor for final approval and signature. Once the supervisor and student clinician have signed the note, the student clinician will place a copy in the client’s folder.

### **Progress Reports**

Progress Reports are written on each client at the end of the semester. These reports will document client attendance, progress, and future plans for treatment. The initial draft of the report may be completed in a Word document with no identifying information included. Upon final approval of supervisor, the student clinician will input the report into *ClinicNote* and submit to supervisor for signature. Once the supervisor and student clinician have signed the report, the student clinician will place a copy in the client’s folder.

### **Client Communication**

All communication with client/parent is to be documented in the “Client Communication” tab in *ClinicNote*.

### **Treatment Plans**

Treatment plans for each session are due to the supervisor Fridays by noon. Additional information concerning treatment plans will be provided during the first clinic meeting of each semester.

## **Clinical Facilities**

### **The HSU Speech-Language Clinic**

The Hardin-Simmons University Speech-Language Clinic (HSUSLC) is a part of the Speech-Language Pathology Graduate Program which is within the College of Health Professions (COHP). The university clinic is located in the Houston- Lantrip building at 917 Lineberry Blvd. across from the HSU main campus. The purpose of the clinic is to provide clinical services to the community and to provide practicum experiences for graduate students pursuing a Master of Science degree in Speech-Language Pathology. The HSUSLC is a private clinic, serving individuals across the life span at no cost.

The HSUSLC follows the University's academic calendar, providing services in the Fall and Spring semesters. The clinic will be open during the following hours:

Monday 1:00 p.m. – 5:00 p.m.

Tuesday 1:00 p.m. – 5:00 p.m.

Wednesday 1:00 p.m. – 5:00 p.m.

Thursday 1:00 p.m. – 5:00 p.m.

A university identification card is required to access the building. The student worker manning the reception desk will be available to admit clients for their session.

### **Clinic Reception Desk**

The Clinic Reception Desk is located in Room 121A. This desk will be attended by a student worker Monday through Thursday from 1-5:15pm. The student worker will be responsible for admitting clients into the building as well as maintaining the reception area and the waiting area at the end of each day. Student workers are to remain cautious when admitting individuals into the clinic and should contact the Director of Clinical Education or a professor with any concerns.

### **Clinic Waiting Area**

The Clinic Waiting Area is located in Room 121. This area is for clients and their families. Students should not congregate in this area. Clinicians may wait for their clients in the reception area.

### **Conference Rooms**

The Clinic has two conference rooms. Room 122 is located in the waiting area and may be used for client/parent conferences or small group meetings. The other conference room is Room 144 and may be used for student conferences or small group meetings. Students may reserve Room 122 by using the Conference Room Reservation Form located at the reception desk. Room 144 may be reserved with the Director of Clinical Education.

### **Graduate Student Area**

A work area has been designated for student use. This area is for preparation of therapy and/or class projects. The area has a large worktable and students are encouraged to use this space to work on therapy materials as well as to study. Please remember to return supplies where they belong. Be professional and courteous and clean up your area – it is your responsibility.

## Treatment Rooms

The Director of Clinical Education assigns treatment rooms for all therapy sessions and will take into consideration which treatment room meets the needs of individual clients. Each room has chairs, a table, and a white board along with some supplies. Disinfecting supplies are provided in each room so the room can be disinfected after each therapy session. **Please note that disinfecting materials must be kept out of clients' reach at all times.** Furniture should not be removed from the treatment room unless to accommodate a client. After the session, it is the clinician's responsibility to return the furniture to the room.

A refrigerator is located in the Kitchen to store clinicians' lunches or food for therapy activities. All food must be dated and initialed. Please do not leave food in the therapy room at the end of the session. All unused food should be placed in the waste basket located in the kitchen area. ***If using food in a therapy session, student clinicians must check to see if the patient has any food allergies.***

## Student Documentation Room

This room is a swipe card room. Students will use their personal swipe card to gain access to this room. Students should not allow anyone else to follow them into the room without swiping their card. Unauthorized entry (i.e., "piggybacking") into this room may be considered a **major** violation of the student handbook. Students should be in this room only to write reports and complete other confidential clinic paperwork. **No personal items, other than phones, are allowed in this room. This includes backpacks, textbooks, and tablets. Phones are only allowed for obtaining an access code to *ClinicNote*. The phone is not to be accessed again during the documentation process.** No food or drink is allowed in this room. This room will be available Monday through Friday from 7 am.to 7 pm. and additional times requested by the student and approved by the Interim Program Director or the Director of Clinical Education. **Please note that individuals not enrolled in the SLP program or clinical practicum are not allowed access to this room. This room contains all client 'hard files "and access is strictly limited.**

## Materials Room

Testing protocols and materials for therapy use are located in Room 129. Please note that the door leading into the therapy area should remain locked at all times for the safety of the individuals we serve. Materials located in this area are for use in the clinic only! After disinfecting, materials are to be returned to the appropriate place utilizing the photo located on each shelving unit. Mandatory Friday workdays will be scheduled if this organization is not maintained. **Personal therapy materials are not to be stored in the materials room and no materials may be removed from the building! Please notify the Director of Clinical Education when materials are broken or need to be replaced.**

## Craft Supplies Room

Treatment/craft supplies (e.g., scissors, markers, paper, crayons, glue, etc.) are located in Room 133. These materials are not for personal use. Organization in this area is important, so please make sure all items are returned to the appropriate spot. **Please notify the Director of Clinical Education when supplies need to be replenished.**

## Clinical Practicum Assignments

Throughout the graduate program, various off-campus placements in the community and surrounding area will be coordinated so that students may achieve their clinical clock hours. Students are required to provide their own transportation, and **placements may be up to one hour away from the university.**

Student clinicians will take on caseloads and responsibilities commensurate with their progression through the program. All clinical placements are made by the Director of Clinical Education to ensure that all students can gain experience across ASHA's "Big 9" (articulation, fluency, voice and resonance, receptive and expressive language, hearing, swallowing, cognitive aspects of communication, social aspects of communication, and communication modalities). For more information about the "Big 9" visit: <https://www.asha.org/events/slp-summit-glossary/>

### Fall and Spring Semesters

All graduate students are expected to participate in clinical practicum during the Fall and Spring semesters as well as during the Summer semester. Hours for each practicum are determined by the site and Director of Clinical Education. **It should be noted, there will be times when the practicum may occur after traditional hours and students are required to attend if assigned to that practicum site.**

Students will submit a Placement Application Form to request a clinical placement. The Director of Clinical Education will review each request to evaluate the student's knowledge and skills, needs of the externship site, and the facility's ability to provide the level of supervision needed by the student. Additionally, diversity of the patient population and the breadth and depth of the potential experience will be assessed. The form for fall and spring semester placements can be found at

<https://www.hsutx.edu/wp-content/uploads/2020/10/Student-Placement-Request-Fillable.pdf>

The requests are due to the Director of Clinical Education on/or before November 1 for the Spring semester and July 15 for the Fall semester.

**Students who refuse an externship placement will not be allowed to complete clinical requirements for that semester which will delay completion of the program.**

**Whenever possible, the Director of Clinical Education will notify students of their Clinical Practicum site on/or before August 15 for the Fall semester and December 24 for the Spring semester.**

## Summer Semester

Summer Clinical Practicum is a full-time off-campus placement. These placements could take place nationwide as there are no in-person didactic classes during the summer. Sometimes, opportunities come available for students wishing to combine mission work and summer clinical practicum outside of the U.S.

The summer clinical practicum process should begin in the first semester with a discussion with the Director of Clinical Education. Students who wish to complete a summer externship outside of the Abilene area are expected to identify a potential summer placement and contact the facility to determine whether they would be willing to welcome students. After this discussion, the student will need to submit a formal placement request to the Clinic Director which is available online at

<https://www.hsutx.edu/wp-content/uploads/2020/10/Summer-Placement-Request-Fillable.pdf> **(Please note: this form requests different information from the form completed for fall and spring placements).** The student will need the following information: facility name and contact person's phone number and email address. This request must be submitted by February 28. When reviewing the request, the Director of Clinical Education will consider the student's knowledge and skills, needs of the externship site, and facility's ability to provide the level of supervision needed by the student. Additionally, diversity of the patient population and the breadth and depth of the potential clinical experience will be assessed. **If the summer placement application is submitted late, it may delay the summer practicum start date.**

Please note if you choose to go to a location/facility which is not typically used as a university externship, the Director of Clinical Education must make the necessary arrangements to obtain a mutual agreement between the University and the externship site. *Every attempt will be made by the Director of Clinical Education to finalize the summer placement by April 15; however, there may be exceptions, particularly if the placement site has an alternative procedure for determining student rotations.*

### Clinical Clock Hours

By graduation, student clinicians must be able to document attainment of at least 375 clinical clock hours of supervised clinical experience in the practice of speech-language pathology and 25 observation hours. Up to 75 of the direct contact hours may be obtained through clinical simulation.

Students should strive to earn the following number of clock hours during each semester to ensure reaching their final goal of 375 hours:

- Fall 1: 40 hours
- Spring 1: 60 hours
- Summer: 140 hours
- Fall 2: 60 hours
- Spring 2: 110 hours

**Please note: Clinical Practicum will continue until graduation, even if the required 375 hours are completed. COMPETENCY IS NOT DETERMINED BY HOURS.**



The clinical and diagnostic practicum experiences provide students opportunities for the following, which are specified in ASHA's 2020 standards:

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

Across the clinical experiences, all student clinicians are supervised a minimum of 25% of the time for all treatment sessions and a minimum of 50% for all assessments. Supervision may exceed this percentage depending on the needs of the clinician. All supervisors are licensed by the state in which they practice, certified by ASHA and have completed the required supervision training. The Director of Clinical Education will verify each supervisor has met the ASHA 2020 standards for supervision by using the ASHA's Certification and Ethics Verification website.

### **Attendance and Punctuality**

All student clinicians are expected to be on time and attend all scheduled therapy sessions whether at an off-campus practicum site or the HSUSLC. Students should arrive at least 15 minutes prior to assigned times and must be prepared. Absences are approved only for illness and family emergencies and funerals. **Students should not cancel any assigned clinical times without prior approval from the Director of Clinical Education.** At the discretion of the Director of Clinical Education and/or externship supervisor, students may be required to reschedule any missed therapy sessions. Job interviews are to be scheduled only on days when the student is not assigned to clinical practicum. Any absences require written documentation from a physician, health clinic, etc. The Director of Clinical Education must be notified, **by telephone call**, prior to any absence. Voice messages are not acceptable! Excessive **unapproved** absences or tardiness (2 or more) may result in a reduction in the student's clinic grade for that semester. **Please note: clinical practicum is your JOB during graduate school.**

## Clinical Evaluations

### Clinical Evaluations by Supervisors

Each student will be evaluated by his/her clinical supervisor twice during each clinical placement (midterm and end-of-term).

- The clinical supervisor will discuss the evaluation with the student, providing time for the student to discuss and reflect on his/her clinical knowledge and skills with the supervisor.
- On the final evaluation of each externship, students must demonstrate clinical competence by receiving a clinical practicum grade of at least a B. Students must also demonstrate ethical competence by receiving a score of at least a 4 on the Ethics portion of the clinical evaluation at the conclusion of each externship.
- Students who fail to meet these requirements will be placed on clinical probation and on a remediation plan.
- The remediation plan will be developed by the Director of Clinical Education and/or Program Director and signed by the student.
- Students who do not meet the requirements of the remediation plan or make lower than a B for a second time will be dismissed from the program.

The Program Director will ensure that the remediation plans are implemented. The student will meet weekly with his/her mentor and program director or Director of Clinical Education to discuss progress and his/her timeline for completing the prescribed remediation. Each meeting will be documented, and all participants will sign the meeting document. Students will be aware of what progress they are making and where they are with regard to the timeline. Students who are on remediation plans may request a meeting at any time regarding the remediation and/or timeline.

### Evaluation of Clinical Instructors

At the end of each clinical placement, student clinicians are to complete an “Evaluation of Clinical Instructor” form in Calipso. This form is located in Calipso and instructions are located in the “Student Instructions for *Calipso*” handout in the appendix of this document.

### Clinician Self-Evaluation

At the end of each semester, clinicians will complete a “Self-Evaluation” form located in *Calipso*. For instructions on completion of this form, refer to “*Calipso* Instructions for Students” located in the appendix of this handbook.

### Evaluation of Off-Campus Placement

At the end of each off campus placement, clinicians will complete an “Evaluation of Off Campus Placement” and the instructions are located in the “*Calipso* Instructions for Students” located in the appendix of this handbook.

## Clinical Practicum Grading Procedure

The final grade in clinical will be based on the clinical experience grade and the final grade in the clinical class. The following procedure will be utilized to determine your **FINAL** clinical grade.

### Clinical Experience Grade

- The clinical experience grade will be determined by averaging evaluations for all clinical experiences. The weight each experience carries will be determined by the number of hours obtained for that clinical experience. Example:

- 1-25 hours grade will count one time
- 26-50 hours grade will count two times
- 51-75 hours grade will count three times
- 76 hours and above grade will count four times

- Example 1

Experience	# of Hours	Letter Grade	Total
Experience 1	50	B (85 x2)	170
Experience 2	15	C (70 x1)	70
Experience 3	74	B (85 x3)	255
Experience 4	135	A (100 x4)	400

$$170+70+255+400=895/10= 89.5 \text{ FINAL CLINICAL EXPERIENCE GRADE}$$

- Example 2

Experience	# of Hours	Letter Grade	Total
Experience 1	30	A (100 x1)	100
Experience 2	120	B (85 x4)	340

$$100 + 340 = 440/6= 88 \text{ FINAL CLINICAL EXPERIENCE GRADE}$$

**The Clinical Experience Grade WILL NOT be rounded up!**

### Clinical Class Grade

Your clinical class grade will be determined based on course assignments grade. A list of assignments and possible points can be found in the Assignment section of this syllabus.

### Final Overall Clinical Grade

The overall clinical grade will be determined by utilizing the following formula: Clinical Experience grade will count as 80% of the final grade with clinical class grade will count as 20% of the final grade.

	Grade
Clinical Experience	88 x8 =704
Clinical Class	98 x2=196

$$704+196=900/10= 90 \text{ FINAL OVERALL CLINICAL GRADE}$$

**The Final Overall Clinical Grade WILL NOT be rounded up!**

## **Clinical Conduct**

Clinical violations will be dealt with according to the severity of the violation. Clinical violations are broken down into two categories: minor and major.

Some examples of minor violations may include:

- inappropriate dress, tardiness to clinical appointments, failing to contact the clinic in a timely manner if ill.

*If the violation is considered minor, the student could receive: a verbal or written warning, lowering of clinical grade, or clinic placement termination. A behavioral contract outlining an action plan may be implemented.*

Some examples of major violations may include:

- disrespectful attitude, incomplete or lack of documentation, neglect/disregard for a client and/or breach of confidentiality.
- providing unauthorized individual with access to the documentation room

*If the violation is considered major and/or is recurring, the student could be dismissed from clinical, dismissed from the program and, in some cases, be immediately removed from clinical before the end of the semester. If the student is removed from clinical, the student will receive a final grade of "F" and be dismissed from the program.*

## **Academic and Clinical Progress**

In order to meet requirements for ASHA's Certificate of Clinical Competence (CCC) and document the knowledge and skill assessment (KASA), student records are maintained on each graduate student. The KASA guidelines decree the knowledge and skills that the SLP program expects the students to master by the time of their graduation. The SLP program will monitor and document each student's adequate progress in relation to the KASA guidelines.

<https://www.asha.org/Certification/2020-SLP-Certification-Standards/>

### **KASA Standards**

Students not meeting departmental requirements for acquisition of knowledge and skills must complete remediation plans as defined by the program director in conjunction with the Clinical Director, faculty members, and/or clinical supervisors. Failure to complete the remediation plan will result in dismissal from the program.

### **Student Grievances**

Procedures for handling Student Grievances regarding grades can be found in the Graduate Catalog.

<http://hsutx.smartcatalogiq.com/2020-2021/Graduate-Catalog/Academic-Policies/Graduate-Studies-Grievance-Committee>

Procedures for handling student grievances (other than grades) with fellow students, faculty, or staff can be found on page 60 of the Hardin-Simmons University Student Handbook.

[REVISED-2022-2023-Student-Handbook-08-17-22.pdf \(hsutx.edu\)](#)

*Students may file a complaint with the Council on Academic Accreditation (CAA) by writing to:*

Chair, Council on Academic Accreditation in Audiology and Speech-Language Pathology  
American Speech-Language-Hearing Association  
2200 Research Boulevard, #310  
Rockville, MD 20850

Council on Academic Accreditation Complaint Procedures:

For more information regarding the CAA's complaint procedures please visit their website:

<https://caa.asha.org/?s=filing+a+complaint>

# Appendices

## Responsibilities of Graduate Clinician

- Adhere to the ASHA Code of Ethics at all times. Any violation of the Code may result in the graduate student's immediate dismissal from the program.
- Assist the externship supervisor in carrying out various functions and responsibilities. Graduate clinicians are considered a full-time member of the clinical team and should participate fully in responsibilities deemed appropriate by the externship supervisor
- Accept assignments and feedback in a professional manner and with a positive attitude. Graduate clinicians should conduct themselves professionally both in actions and communication. Making derogatory statements about other professionals and or clients is not acceptable. **Adhere to the ASHA Code of Ethics at all times**
- Observe policies, procedures, and code of conduct established by externship site.
- Follow the externship site's calendar as well as the site's arrival and dismissal times. Graduate clinicians are to mirror the externship supervisor's work schedule.
- Record clinical hours weekly into CALIPSO. Graduate clinicians may also serve as the "CALIPSO expert" for the site.
- Review clinical hour totals frequently. It is the graduate clinician's responsibility to notify the Director of Clinical Education immediately if concerned about number of hours being obtained at the externship site.
- Complete an evaluation of the externship experience at the end of the experience. The evaluation must be completed for a grade to be assigned to the experience. The evaluation form may be found in CALIPSO.
- Respect confidentiality at all times.
- Maintain communication with the externship supervisor. Actively seek feedback and ask questions.

## Professional Competence

When participating in clinical practicum, graduate students are expected to behave in a professional manner at all times. Graduate students are expected to meet all professional responsibilities and competencies including:

- Arriving on time and maintaining timelines
- Being prepared and organized for all treatment sessions
- Taking responsibility for one's own actions without being instructed directly to do so
- Refraining from blaming others or engaging in emotional display
- Communicating clearly and respectfully
- Responding constructively to criticism
- Refraining from negative communication regarding externship sites and/or supervisors
- Demonstrating self-reliant behaviors such as resourcefulness and reliability
- Seeking and obtaining feedback
- Collaborating and sharing knowledge
- Demonstrating a commitment to learning by seeking new ideas, exploring new methods, and contributing beyond assignments
- Learning self-advocacy skills by asking questions, asking for clarification, addressing questions and concerns in a timely manner
- Placing professional duties above one's own convenience (i.e. not scheduling employment interviews during times scheduled at externship sites)
- Taking initiative
- Demonstrating active participation in all interactions
- Responding in a timely manner to all communication from faculty and/or supervisors
- Utilizing appropriate non-verbal communication in interactions with others (no heavy sighing, rolling eyes, making faces)
- Representing HSU and externship sites in a professional manner

Failure to meet these professional competencies will result in lowering clinical grades and may result in removal from clinical practicum which may delay completion of graduate studies.



## Documenting Clinical Clock Hours

Direct client/patient contact hours must be within the scope of practice of speech-language pathology and must be completed under the supervision of an ASHA certified speech-language pathologist.

Hours that may be counted toward meeting the required hours for certification and licensure requirements include direct contact with client/patient or client's/patient's family in assessment, intervention, and/or counseling. This can include but is not limited to actual service delivery, recording data, information seeking and giving, or training for a home program as long as directly related to assessment or intervention,

If a client/patient has two or more diagnoses, the clinical hours can be distributed among the diagnoses in accordance with the time spent addressing each diagnosis.

Only one student should be working with a client/patient at a time. If students are working as a team, each student can record the time they spent in direct interaction with the client. If each student has a particular client/patient assigned to them, they each can count the time they spent providing intervention for their client/patient.

Hours are to be submitted in *Calipso*. For accuracy, hours are to be submitted weekly. Include all hours obtained for the week on one form. If a graduate clinician has more than one externship supervisor, a separate clock hour form is submitted for each supervisor.

The following activities CANNOT be counted toward clinical clock hours:

- Report writing
- Planning sessions
- Learning assessment tools/procedures
- Participation in multidisciplinary staffings
- Meeting with professionals regarding diagnosis and treatment
- Conference with clinical instructors/supervisors

Direct supervision must be in real time and should never be less than 25% of the student's total contact time with each client/patient.

The following activities are within the scope of practice for speech-language pathology and may be counted toward clinical hours:

- Prevention
- Pre-referral and Screening
- Assessment
- Intervention
- Counseling

## **Core Functions for Future Speech-Language Pathology Practitioners**

Adapted from the Council of Academic Programs in Communication Sciences and Disorders (2023). A guide for future practitioners in audiology and speech-language pathology: Core functions. <https://www.capcsd.org/academic-and-clinical-resources/>

The Core Functions are intended to serve as a guide for educational programs in speech-language pathology to inform students, initiate discussions between students and programs regarding student success, empower students to make informed choices, facilitate strategies to achieve student success, assist programs and students in identifying and advocating for appropriate resources and accommodations, and advance the profession of speech-language pathology through the lens of justice, diversity, equity, and inclusion.

The Core Functions will not be utilized to discriminate against individuals for any reason, to accept or deny students into a program, to presumptively judge individuals' potential for success, to stand alone as a student assessment or intervention plan, or to dismiss students from a program.

### **1. Communication**

Statements in this section acknowledge that speech-language pathologists must communicate in a way that is understood by their clients/patients and others. It is recognized that linguistic, paralinguistic, stylistic, and pragmatic variations are part of every culture, and accent, dialects, idiolects, and communication styles can differ from general American English expectations. Communication may occur in different modalities depending on the joint needs of involved parties and may be supported through various accommodations as deemed reasonable and appropriate to client/patient needs. Some examples of these accommodations include augmentative and alternative communication (AAC) devices, written displays, voice amplification, attendant-supported communication, oral translators, assistive listening devices, sign interpreters, and other non-verbal communication modes.

- a. Employ oral, written, auditory, and non-verbal communication at a level sufficient to meet academic and clinical competencies
- b. Adapt communication style to effectively interact with colleagues, clients, patients, caregivers, and invested parties of diverse backgrounds in various modes such as in person, over the phone, and in electronic format

### **2. Motor**

Statements in this section acknowledge that clinical practice by speech-language pathologists involves a variety of tasks that require manipulation of items and environments. It is recognized that this may be accomplished through a variety of means, including, but not limited to, independent motor movement, assistive technology, attendant support, or other accommodations/modifications as deemed reasonable to offer and appropriate to client/patient needs.

- a. Engage in physical activities at a level required to accurately implement classroom and clinical responsibilities (e.g., manipulating testing and therapeutic equipment and technology, client/patient equipment, and practice management technology) while retaining the integrity of the process
- b. Respond in a manner that ensures the safety of clients and others

### **3. Sensory**

Statements in this section acknowledge that speech-language pathologists use auditory, visual, tactile, and olfactory information to guide clinical practice. It is recognized that such information may be accessed through a variety of means, including direct sensory perception and /or adaptive strategies. Some examples of these strategies include visual translation displays, text readers, assistive listening devices, and perceptual descriptions by clinical assistants.

- a. Access sensory information to differentiate functional and disordered auditory, oral, written, and visual communication
- b. Access sensory information to correctly differentiate anatomical structures and diagnostic imaging findings
- c. Access sensory information to correctly differentiate and discriminate text, numbers, tables, and graphs associated with diagnostic instruments and tests

### **4. Intellectual/Cognitive**

Statements in this section acknowledge that speech-language pathologists must engage in critical thinking, reasoning, and comprehension and retention of information required in clinical practice. It is recognized that such skills may be fostered through a variety of means, including assistive technology and /or accommodations/modifications as deemed reasonable and appropriate to client/patient needs.

- a. Retain, analyze, synthesize, evaluate, and apply auditory, written, and oral information at a level sufficient to meet curricular and clinical competencies
- b. Employ informed critical thinking and ethical reasoning to formulate a differential diagnosis and create, implement, and adjust evaluation and treatment plans as appropriate for the client/patient's needs
- c. Engage in ongoing self-reflection and evaluation of one's existing knowledge and skills
- d. Critically examine and apply evidence-based judgment in keeping with best practices for client/patient care

## **5. Interpersonal**

Statements in this section acknowledge that speech-language pathologists must interact with a diverse community of individuals in a manner that is safe, ethical, and supportive. It is recognized that personal interaction styles may vary by individuals and cultures and that good clinical practice honors such diversity while meeting this obligation.

- a. Display compassion, respect, and concern for others during all academic and clinical interactions
- b. Adhere to all aspects of relevant professional codes of ethics, privacy, and information management policies
- c. Take personal responsibility for maintaining physical and mental health at a level that ensures safe, respectful, and successful participation in didactic and clinical activities

## **6. Cultural Responsiveness**

Statements in this section acknowledge that speech-language pathologists have an obligation to practice in a manner responsive to individuals from different cultures, linguistic communities, social identities, beliefs, values, and worldviews. This includes people representing a variety of abilities, ages, cultures, dialects, disabilities, ethnicities, genders, gender identities or expressions, languages, national/regional origins, races, religions, sexes, sexual orientations, socioeconomic statuses, and lived experiences.

- a. Engage in ongoing learning about cultures and belief systems different from one's own and the impacts of these on healthcare and educational disparities to foster effective provision of services
- b. Demonstrate the application of culturally responsive evidence-based decisions to guide clinical practice

Students enrolled in the Master of Science in Speech-Language Pathology program are educated on the Core Functions of Future Speech-Language Pathologists and their importance to prepare students for success either with or without any reasonable accommodations.



### Step 1: Register as a Student User on CALIPSO

- Before registering, have available the PIN provided in the CALIPSO registration e-mail.
- Go to your school's unique login URL provided in the CALIPSO registration email, or go to <https://www.calipsoclient.com/school-login>
- Schools are listed alphabetically; locate your school in the list, and click on the school name link.
- Click on the "Student" registration link located below the login button.
- Complete the requested information, being sure to enter your "school" e-mail address, and record your password in a secure location. Click "Register Account."
- Please note: **PIN numbers are valid for 40 days.** Contact your Clinical Coordinator for a new PIN if 40 days has lapsed since receiving the registration e-mail.

### Step 2: Login to CALIPSO

- To login, go to your school's unique login URL listed in the header at the top of this page, or go to <https://www.calipsoclient.com/school-login>, locate your school, and login to CALIPSO using your school e-mail and **password that you created for yourself during the registration process (Step 1)**.
- Upon logging in for the first time, you will be prompted to pay the student fee (if applicable) and to provide consent for the release of information to clinical practicum sites.

### Step 3: Enter Contact Information

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

#### Step 4: View and Update Immunization and Compliance Records

- Before each semester, click on “Student Information” and then “Compliance/Immunizations” to view a record of compliance and immunization records.
- Missing or expired records are highlighted in red.
- Upload an electronic file(s) of immunization, training or screening documents as required by your program by clicking on the “Files” link located within the blue stripe at the top of the page.
- Click the “Edit Compliance/Immunization data” link located just beneath the blue strip to enter the effective dates for the immunization, training or screening items as required by your program. Click in the box to the right of the item for which a date is to be entered, and select the effective date from the pop-up calendar. Click the “Save the changes below” button to save the entered dates.
- To create a “Health Record” document to save and/or print for clinical placements, click “Printable view (PDF)” located within the blue stripe.
- Click “Home” located within the blue stripe to return to the home page.

#### Step 5: View Clinical Assignments & Site Information Forms

- Within “Student Information,” click the [Clinical Assignments](#) link to view information pertaining to the current semester’s placement, including contact information for your Supervisor.
- Note the details of your assignment’s Semester, Clinical Course, Site and Clinical Setting; when entering clock hours (*see Step 7a*), be sure to record your clock hour entries to match the assignment.
- Additional information about the Site may be available under “Site Information Forms” Click the “Home” link to return to the Lobby page, then click **View** > [Site Information Forms](#).
- To view available information, identify the desired site and click “View” located in the fifth column under submitted. [Please note: “In progress” forms are not accessible to students; only “submitted” forms are accessible to students.]

## Step 6: View/Upload Documents and Clinical Placement Files

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

## Step 7a: Enter Daily Clock Hours

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

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

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

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

- Click on the “Daily clockhours” link located within the blue stripe.
- Select the record you wish to view (posted by supervisor, semester, course, and setting) from the drop-down menu and click “Show.”
- Click the “Copy” button located next to the date of a previous entry.
- Record the new clock hours (changing the date if necessary) and click “save” located at the bottom of the screen. You will receive a “Clockhour saved” message.

- To **view/edit** daily clock hours, click on the “Daily clockhours” link located within the blue stripe.
- Select the record you wish to view (posted by supervisor, semester, course, and setting) from the drop-down menu and click “Show.”
- Select the desired entry by clicking on the link displaying the entry date located along the top of the chart. Make desired changes and click save.
- Please note: Supervisors are not notified and are not required to approve daily clock hour submissions.

### Step 7b: Submit Clock Hours for Supervisor Approval

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

### Step 8: View Clinical Performance Evaluations

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

### Step 9: View Cumulative Evaluation

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



### Step 10: View KASA

- Click on “Student Information” and then “KASA” to view your progress in meeting the academic and clinical requirements for graduation. KASA stands for Knowledge and Skills Acquisition, which is a “roadmap” of academic and clinical standards toward certification requirements.
- Upon graduation, all requirements should have been met, represented with a green check mark.

### Step 11: View Performance Summary

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

### Step 12: View My Checklist

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

### Step 13: Complete Self-Evaluation

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

#### Step 14: Complete Supervisor Feedback Form

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

#### Step 15: Complete Evaluation of Off Campus Placement

- At the completion of each clinical course or as directed by your Clinical Coordinator, complete feedback for each off-campus placement.
- From the lobby page, click “Student Evaluation of Off Campus Placement.”
- Click “New off campus placement evaluation.”
- Complete form and click “Save.”