

CLINICAL PRACTICUM HANDBOOK

MASTER OF SCIENCE

COMMUNICATION SCIENCES AND DISORDERS

A GUIDE FOR GRADUATE CLINICIANS & CLINICAL FACULTY

**Department of Communication Sciences and Disorders
COLLEGE OF HEALTH AND BEHAVIORAL SCIENCES**

**2200 Bruce Street, Suite 101
Conway, AR 72035**



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COMMUNICATION SCIENCES AND DISORDERS FACULTY AND STAFF

(ABBREVIATED LIST)

- **Darshon Reed**, Ph.D., Interim Chair, andersond@uca.edu
- **Brent Gregg**, Ph.D., CCC-SLP, Professor, Program Director, bgregg@uca.edu
- **Candice Robinson**, M.S., CCC-SLP, Clinic Director, crobinson@uca.edu

COMMUNICATION SCIENCES AND DISORDERS CLINICAL FACULTY

- **Natalie Benafield**, AuD, CCC-A, Assistant Professor, nbenafield@uca.edu
- **Sandra Kemper**, Ed.D., CCC-SLP, Assistant Professor, skemper@uca.edu
- **Katy Oswalt**, M.S., CCC-SLP, Clinical Instructor, aoswalt@uca.edu
- **Towino Paramby**, CscD, CCC-SLP, Associate Professor, tparamby@uca.edu
- **Lauren Rogers**, Ed.S., M.S., CCC-SLP, Clinical Instructor, lrogers26@uca.edu
- **Jennifer Simpson**, M.S., CCC-SLP, Clinical Instructor, jsimpson8@uca.edu
- **Sun Thao**, Ph.D., CCC-SLP, Associate Professor, skim@uca.edu
- **Richelle Weese**, M.S., CCC-SLP, Clinical Instructor, rweese@uca.edu
- **Stephanie White**, AuD, CCC-A, Assistant Professor, swhite@uca.edu

COMMUNICATION SCIENCES AND DISORDERS ADJUNCT FACULTY

- **Jeffrey Adams**, EdD, CCC-SLP, Adjunct Instructor, jadams@uca.edu
- **Jill Fitzpatrick**, M.A., CCC-SLP, Adjunct Instructor, jfitspatrick@uca.edu
- **Amber Lingle Goff**, M.S., CCC-SLP, Adjunct Clinical Instructor, agoff5@uca.edu
- **Christina Gonzalez**, M.S., CCC-SLP, Adjunct Clinical Instructor,
- **Patricia Kay Hall**, M.S., CCC-SLP, Adjunct Clinical Instructor, phall@uca.edu
- **Allison Keith**, M.S., CCC-SLP, Adjunct Clinical Instructor, akeith6@uca.edu
- **Nicole Slough**, M.S., CCC-SLP, Adjunct Clinical Instructor, nslough@uca.edu
- **Kathryn Weaver**, M.S., CCC-SLP, Adjunct Clinical Instructor, kweaver@uca.edu

COMMUNICATION SCIENCES AND DISORDERS ADMINISTRATIVE STAFF

- **Pat Puckett**, Administrative Specialist, ppuckett@uca.edu
- **Amanda Rehm**, Administrative Specialist, arehm@uca.edu

CSD FULL FACULTY LIST

<https://uca.edu/csd/facultystaff/>

CLINIC POLICIES ACKNOWLEDGEMENT FORM

University of Central Arkansas
Department of Communication Sciences & Disorders

The CSD Clinical Practicum Handbook is to be used in conjunction with the CSD Graduate Program Student Handbook. The Clinical Practicum Handbook, detailing clinical policies and procedures, is required for students' use throughout their clinical practicum course work.

The CSD Clinical Practicum Handbook is a live document and reflects the policies and procedures of the CSD Speech-Language-Hearing Center and clinical education at any given time. As such, all information contained in it is subject to change, and it is both the students' and faculty's responsibility to access this document regularly and be aware of current policies as well as any changes.

The UCA student handbook is available online at: <https://uca.edu/student/student-handbook/>

Acknowledgement of Receipt of Clinical Practicum Handbook

I, (*print name*): _____ have access to, have read, and will utilize information in the UCA Clinical Practicum Handbook. I understand that I should be knowledgeable regarding all policies and procedures as outlined in the CSD Graduate Program Student Handbook as well as the UCA Student Handbook. I also understand that I should be knowledgeable regarding the clinical policies and procedures, documentation, grading policies, and all the other information contained in this document. I understand that I will have the opportunity to SUGGEST off-campus sites that I would like to be assigned, however those suggestions are NOT GUARANTEED.

(Student Signature)

(Date)

(Print, sign, and turn in to the clinic director during your first semester of clinical practicum.)

CHAPTER 1: GENERAL PROGRAM INFORMATION

DEPARTMENT MISSION STATEMENT

The mission of the Department of Communication Science and Disorders is the preparation of professionals qualified to provide independent professional diagnostic and therapy services to a diverse population with a wide range of communication needs.

The congruent philosophies among the Department, College, and University Mission statements can be identified as follows:

- UCA** ...excellent graduate programs in selected disciplines
 ...strives to maintain the highest academic quality
 ...assures that its curriculum remains current
 ...advancement of knowledge
 ...service to the community
- CHBS** ...graduates are well qualified for professional advancement and community services
 ...importance of interdisciplinary collaboration, adherence to the highest standards of ethical practice and lifelong learning
 ...the faculty and administrators seek to create a culturally bias-free learning environment
- CSD** ...to prepare speech-language pathologists who are capable and fully qualified
 ...excellence in classroom and clinical instruction
 ...research and the scholarship of service
 ...community of learners for lifelong development
 ...responsiveness to the needs of the state and profession
 ...collaborative approaches and innovative curricula

STUDENT SUPPORT

The University of Central Arkansas provides programs and services designed to help students succeed at UCA. Students can find these services, programs, and resources online at <https://uca.edu/studentssuccess/>. Students can also look at the Student Support Guide online at <https://uca.edu/studentssuccess/guide/>.

NOTICE OF NON-DISCRIMINATION

The University of Central Arkansas is an affirmative action/equal opportunity institution dedicated to attracting and supporting a diverse student, faculty, and staff population through enhanced multicultural learning environments and opportunities. In keeping with its non-discrimination policy in employment, admissions, and other functions and programs, the university considers employees and students on the basis of individual merit without regard to gender, race or color, ethnicity, religion, spiritual beliefs, national origin, age, familial status, socioeconomic background, sexual orientation, disability, political beliefs, intellectual perspective, genetic information, military status, or other factors irrelevant to participation in its programs (Board Policy 502). Persons having

questions or seeking information regarding the university's implementation of regulations and requirements related to this policy should contact one of the following:

<p><i>Associate General Counsel & Compliance Officer</i> Wingo 206 201 Donaghey Avenue Conway, Arkansas 72035 (501) 450-3247</p>	<p><i>Director, Disability Resource Center</i> Student Health, Room 202 Conway, AR 72035 (501) 450-3136</p>	<p><i>Associate Vice-President Human Resources & Risk Management</i> Wingo 103 201 Donaghey Avenue Conway, Arkansas 72035 (501) 450-5051</p>
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ENGLISH PROFICIENCY

Non-Native English Speakers

Graduate students who are non-native speakers of English are assessed during their first semester of graduate school. The clinical faculty conducts informal screening of intelligibility and oral communication, in English, of all graduate students. Any student, whatever their native language, who is identified by an instructor, whether academic or clinical, as having spoken or written language proficiency that does not meet the above standard will be offered the opportunity to receive assessment and intervention through appropriate venues, to include the program's Speech-Language-Hearing Center (SLHC). The student will not be required to participate as a client in therapy; however, the student will be held responsible for development of communication skills sufficient to achieve effective clinical and professional interaction with clients and relevant others. Efforts will be made to assist students in locating appropriate services/resources. Appropriateness of continuation as a student clinician will be made on a case-by-case basis if a student has been identified as presenting a deficiency in spoken and/or written English. Students who have been identified as needing services to improve their English must be approved by the SLHC Clinic Director for admission into, or continuation of, the clinical practicum experience.

International Students

International students must achieve a **Test of English as a Foreign Language (TOEFL)** score of 79 on the internet-based exam. They may alternatively submit a score of 6.5 or better on the **International English Language Testing System (IELTS)**. International students seeking admission should refer to the UCA website (<http://uca.edu/international/international-graduate-admission/>) for further information.

NOTE: Institutional TOEFL results from other universities will not be accepted. Completion of an English as a Second Language program at another university will not be accepted.

Non-General American English Speakers

CSD graduate students identified as presenting with language differences that may interfere with successful completion of clinical training will be counseled by their Academic Advisor and the SLHC Clinic Director. Strategies to improve their oral and/or written proficiency will be provided to the student via documented consultation with the Academic Advisor and/or the SLHC Clinic Director, and via feedback received from clinical faculty/instructors. Documented consultation may be drafted as a clinical remediation plan. If documented consultation does not meet the student's needs, attempts will be made to provide resources for individualized intervention,

including, at the student's request, the program's SLHC. The student will not be required to participate as a client in therapy; however, the student will be held responsible for development of communication skills sufficient to achieve effective clinical and professional interaction with clients and relevant others.

Students with Communication Disorders

Students with communication disorders that may interfere with successful completion of clinical training will be counseled by their Academic Advisor and/or the SLHC Clinic Director. Students will be provided with information on assessment and intervention services available in the community, including the program's SLHC. The student will not be required to participate as a client in therapy; however, the student will be held responsible for development of communication skills sufficient to achieve effective clinical and professional interaction with clients and relevant others.

ETHICAL AND PROFESSIONAL STANDARDS

The Department of Communication Sciences and Disorders adheres to the ethical and professional standards of the American Speech-Language-Hearing Association Code of Ethics, accessible on the ASHA website at <http://www.asha.org/Code-of-Ethics/>. In addition, all faculty, staff, and students are required to adhere to the rules and regulations of the Health Insurance Portability and Accountability Act (HIPAA).

MASTERS OF SCIENCE IN COMMUNICATION SCIENCES AND DISORDERS PROGRAM

The M.S. program in Communication Sciences and Disorders at UCA is committed to the provision of a clinical training program that will position you to excel among future professionals. Our program will provide quality clinical and educational experiences consistent with requirements for competencies across the speech-language pathology scope of practice. You will find that our program requirements align with those of the American Speech-Language-Hearing Association (ASHA), and, according to their standards, will allow you to: a) interpret, integrate, and synthesize core concepts and knowledge, b) demonstrate appropriate professional and clinical skills, and c) incorporate critical thinking and decision-making skills while engaging in the prevention, identification, evaluation, diagnosis, planning, implementation, and/or intervention of various communication disorders.

CLINICAL EDUCATION OVERVIEW

Your clinical practicum experiences will be varied and inclusive of practice across all areas of communication disorders. These experiences will cover much of the lifespan and will take place in our on-campus clinic (The UCA Speech-Language-Hearing Center), as well as in schools, hospitals, clinics and other sites serving both children and adults with a variety of diagnoses and treatment needs. Clinical education will include simulations, screenings, diagnostic testing, and intervention across multiple contexts.

We will seek your ongoing input regarding your interests and possible career preferences in order to best plan your practicum work, while balancing that with the required ASHA standards. We will also provide a comprehensive overview of the volume of opportunities awaiting you in your chosen field. We hope that your clinical experience will be rewarding as you prepare to meet the challenges

of excellence in service to the field of Communication Sciences and Disorders.

PROFESSIONAL PROTOCOL FOR CLINICAL PRACTICE

Speech-language pathology is a professional discipline. Professions require certain behaviors of their practitioners. All students enrolled in the clinical practicum must adhere to the highest standards of professional behaviors and ethics. UCA requires the highest professional standards of all its students. The Professional Dispositions and Essential Functions Document outlines expectations that the department has for the graduate students regarding the possession of qualities that are necessary to successfully complete the CSD graduate program. All students are required to read and sign the Professional Dispositions and Essential Functions document during graduate student orientation. This signed form is kept in the student's advising file.

SPEECH-LANGUAGE-HEARING CENTER

Clinical services are provided by graduate students under the direct supervision of qualified faculty holding the Certificate of Clinical Competence from the American Speech-Language-Hearing Association, as well as licensure credentials from the state of Arkansas. The UCA Speech-Language-Hearing Center (SLHC) is dedicated to providing the highest quality of services for our clients, making every effort to consider the impact and significance of the specific problem on the whole person.

Mailing Address: UCA SLHC
201 Donaghey Avenue
UCA Box 4985
Conway, AR 72035

Physical Address: 2200 Bruce Street, Suite 101 (use with GPS for directions)

Phone: (501) 450-3176

Fax: (501) 450-5474

Hours of Operation: Monday-Thursday
9:00 a.m. - 5:00 p.m.
**Schedule changes and other clinic closing may happen at the discretion of the SLHC Clinic Director. However, dates will be shared with students, faculty, and clients at the start of each semester.*

Closed: 12:00 p.m. - 1:00 p.m. for lunch
For University Holidays as we follow the UCA Academic Calendar.

SLHC ADMINISTRATIVE OFFICES

The SLHC Administrative Offices are located in the Integrated Health Sciences Building. The offices for the Clinic Director, Candice Robinson, and Administrative Specialist, Amanda Rehm, are located on the first floor in IHSB 156 and IHSB 155, respectively. The CSD offices for the Department Chair and Administrative Specialist, Patricia Puckett, are located on the fourth floor in IHSB 464 and IHSB

462, respectively.

NONDISCRIMINATORY STATEMENT

Clients are treated in a nondiscriminatory manner—that is, without regard to gender, race or color, ethnicity, religion, spiritual beliefs, national origin, age, familial status, socioeconomic background, sexual orientation, disability, political beliefs, intellectual perspective, genetic information, military status, or other factors irrelevant to participation. The institution and program comply with all applicable laws, regulations, and executive orders pertaining thereto.

CLINIC ACCESSIBILITY & PARKING

Clinic facilities are accessible to individuals with physical disabilities through a ground level entrance. Parking is available for clients at designated areas in the parking lot behind the IHSB. Upon first meeting, student clinicians will provide the client or their guardian with a parking pass, which should be hung in their vehicle for all sessions attended. Clients may park in any open spot designated "Client Parking Only." All of the therapy rooms in the clinic accommodate wheelchairs.

CLIENT WAITING ROOM

There is an area of the building for clients and caregivers to wait for their scheduled therapy sessions. The waiting room is shared with the Interprofessional Teaching Center and has signs from two of our building sponsors: Conway Regional Medical Center and Pediatrics Plus. Client check-in upon arrival is NOT required. When it is time for a session to begin, students call for their clients in the reception area and escort them back to their assigned treatment room. Caregivers are free to participate in or observe therapy sessions from the observation deck. Otherwise, a caregiver should remain in the waiting area until the session has been completed.

SPEECH-LANGUAGE-HEARING CENTER SERVICES

The UCA Speech-Language-Hearing Center (SLHC) has been providing consultation, evaluation, and therapy services to people of all ages in Conway and surrounding communities for over 30 years.

The UCA SLHC provides diagnostic and therapy services in the areas of stuttering, accent reduction, voice, traumatic brain injury, neurological impairment, aural rehabilitation, auditory processing disorders, articulation, language, social interaction, phonological awareness and early reading skills, augmentative and alternative communication, feeding and swallowing, and other areas related to speech, language, and hearing.

DESCRIPTION OF SERVICES

CONSULTATIONS

Individuals who have concerns regarding theirs or a family member's communication and/or swallowing abilities may arrange for a consultation with a licensed, certified speech-language pathologist. A consultation may last no more than 15 or 20 minutes. It can be done via phone or in person. Individuals may receive recommendations for screening or further testing or may be provided with a list of community resources.

SPEECH/LANGUAGE SCREENING

A screening procedure usually lasts no more than 15 or 20 minutes. It consists of brief observations of the person's speech, language, and hearing functions. Screening is to determine if additional evaluation is warranted to diagnose a communication disorder. Screening services are billed and should be paid for at the time services are rendered.

DIAGNOSTIC EVALUATION

This procedure consists of in-depth assessment of all aspects of the client's communication difficulties. It involves gathering detailed information about the individual, including a case history using a questionnaire and interviews. A battery of tests is usually administered to the client for

determining the nature, consistency and severity of the communication impairment and to identify the basis of the problem. The purpose of a diagnostic evaluation is also to ascertain the client's candidacy for therapy. A diagnostic evaluation may last one to four hours. The student writes an extensive report following the diagnostic session. Diagnostic services are billed and should be paid for at the time services are rendered.

Some facilities require diagnostic evaluations annually while other facilities require them at different intervals. The UCA SLHC will determine diagnostic needs for current clients on a case-by-case basis. The need will be communicated with the families and scheduled with a diagnostic team during a separate appointment time due to the time constraints required for adequate testing. The cost for re-evaluation is free for current clients.

THERAPY SERVICES

Communication disorders generally necessitate prolonged treatment. The therapy program consists of individual or group sessions between the client and the clinician, for the recommended time per week, for a full semester or more. Counseling of the client's parents, caregiver, or significant others is also an integral part of the program. Therapy services are billed monthly and should be paid in full by the end of the semester in which services were rendered.

AUDIOLOGICAL SERVICES

The audiological suite (IHSB 125) contains a two-room, sound-treated audiometric booth where audiological evaluations and hearing screenings occur. Portable audiometers, otoscopes, and tympanometers are also housed within this space. All audiological equipment is calibrated yearly in May. Audiological services are billed and should be paid for at the time services are rendered.

SPEECH-LANGUAGE-HEARING CENTER PROGRAMS

- **Adult Language Diagnostic and Treatment:** Evaluation and treatment of speech, language, and cognitive disorders in clients with varying neurologic diagnoses including but not limited to post-stroke aphasia, traumatic brain injury, dementia, and neurodegenerative disorders (e.g., ALS, Parkinson's disease, other dysarthria or motor speech disorder) are provided. Clients are seen weekly for individual and/or group therapy. Therapy focuses on improving communication skills via a multi-modal approach.
- **Aural Rehabilitation for Children and Adults:** Assessment and intervention services are provided for individuals with hearing loss from infancy through adulthood. Individual and/or group intervention focuses on optimizing amplification with hearing aids and/or cochlear implants and other assistive technology. Comprehensive treatment to improve or develop auditory perception and comprehension skills, vocabulary and expressive communication skills, as well as effective participation in a variety of interactive situations is provided.
- **Autism Screening/Assessments for Children:** Level 2 Screening Services are offered for children between the ages of 18-36 months whose parents or physicians presented with concerns following a Level 1 screener. The Level 2 screening test utilized at the SLHC is the Rapid Interactive Screening Test for Autism in Toddlers (RITA-T).

- **Birth-Three Program:** This program provides early intervention services for children age three or younger and their families. Individual and group therapy sessions focus on collaborating with caregivers and sharing strategies associated with the development of communication skills in young children. Children with communication delays and their parents participate in a naturalistic, play-based setting.
- **Brain Fitness:** This program seeks to maximize thinking, memory, and communication in a social setting for those demonstrating mild memory losses and who may have been diagnosed with Mild Cognitive Impairment (MCI). Group cognitive-communication therapy is held weekly at various locations each semester. Individuals with more severe memory impairments due to dementia may also access services in the event that the need arises.
- **Child Speech-Language Diagnostic and Treatment:** Children and adolescents who experience communication difficulties are scheduled for a comprehensive speech and language evaluation. For those who are diagnosed with a speech and/or language disorder, weekly individual or group therapy services may be recommended.
- **Dysphagia Assessment and Intervention:** Diagnostic and therapy services are provided for adults and children in the areas of dysphagia (swallowing).
- **Hearing Screenings:** To assist the local area public and private schools, each fall MS-CSD students conduct hearing screenings for local students.
- **Let's Get Together:** Let's Get Together is a pragmatic language group offered to provide opportunities for children, teens, and adults with social communication difficulties to interact with peers, learn and practice skills for social interaction, and develop/maintain friendships/relationships. Social skills lessons are developed based on the needs of the participants and may include skills such as turn-taking, topic maintenance, compromising, accepting no, interruption, etc. whereby both direct teaching and practice occurs. Different groups are available at different times throughout the year for specific age groups.
- **Read to Succeed:** Read to Succeed integrates traditional speech and language therapy with Orton-Gillingham based, multi-sensory/multimodal literacy instruction. Read to Succeed is designed to improve literacy skills for students in 3rd to 5th grade who demonstrate difficulty with reading (decoding, word recognition, and comprehension), writing, and spelling. Instruction is heavily focused on phonemic awareness, phonics, morphological awareness, vocabulary, oral reading fluency, and comprehension utilizing evidence-based practice.
- **Smooth Sailing:** This summer program is designed to provide speech services to school-aged children who stutter. It is specifically geared toward children who need to manage their stuttering and enhance fluency in both learning and recreational activities. The program features individual and group therapy sessions, fluency assessment and recommendations for home programs, fluency enhancing activities, and recreational activities to help transfer fluency skills outside of the clinical environment.

- **Voice Assessment and Intervention:** Voice and upper airway diagnostics and therapy are conducted with both children and adults. Collaborative evaluations with the physician and SLP include videostroboscopy and/or Fiberoptic Endoscopic Evaluation of Swallowing (FEES). Acoustic assessment, as well as respiratory muscle strength testing and training is performed.
- **Wellness Screenings:** UCA employees and retirees may have their speech, language and hearing screened throughout the calendar year.

SCHEDULING AN APPOINTMENT

Clients or families interested in services at the UCA SLHC may review services offered online at www.uca.edu/slhc or call to inquire about services at 501.450.3176. The clinic administrator will determine all forms required and will also provide information regarding cost/billing. Appointments typically begin with a formal evaluation that is scheduled with a diagnostic team. Copies of testing performed outside of UCA will be requested prior to scheduling.

NEW CLIENTS

New clients wishing to enroll in speech and language services must complete required clinic forms. The clinic administrator will provide the required documentation electronically through our EMR system, ClinicNote. Instructions for access to the ClinicNote Patient Portal will be provided. Clients may request paper documentation if computer accessibility is limited. Required information includes but is not limited to.

- Attendance Policy
- Authorization for Release of Protected Healthcare Information
- Case History Form
- Clinical Agreement
- Notice of Privacy Practices (reviewed & given 1st session; signed in Clinical Agreement.)
- Release of Information

Forms must be updated annually or any time there's a break in services.

CLIENT SCHEDULING POLICY

It is the policy of the UCA SLHC to schedule clients for services based on their registration order. This order is determined by the date & time of receipt for each semester's registration forms. Notice of registration will be given to all clients prior to the open registration start date which is typically two months prior to the start of the next semester.

Exemptions are made to this policy. Exemptions may take into consideration the nature and severity of certain communication disorders, research/grant needs and the clinical requirements of students as reflected by the accreditation policies of the American Speech-Language-Hearing Association.

CANCELLATION OF APPOINTMENTS BY CLIENTS

When a client cancels a session, this information should be provided to the student clinician and their assigned supervisor as soon as possible. The cancellation and reasoning (if provided) should be logged within the client's attendance record. Sessions canceled by clients will not be rescheduled

or made-up. Please refer to the attendance policy in the appendix for detailed information.

CLINIC FEES AND PAYMENT INFORMATION

SLHC FEES

All rates for services in the UCA Speech Language Clinic, whether group or individual, are listed on the fee schedule. A full explanation of services in the clinic is provided in the Description of Services section of this handbook. In the event that a client is not financially able to fully pay for therapy, scholarships may be an option if funds are available at that time. An application for client scholarship is required. Clients and/or clinical educators may contact the UCA SLHC Clinic Director for information if they would like to request a scholarship.

BILLING PROCEDURES

The UCA SLHC does not bill insurance, Medicare, or Medicaid. Services are self-pay only and prices automatically reflect discounted rates. Clients are billed according to the type of services received. Diagnostic services require payment immediately after completion. Special Programs require prepayment for a designated amount of sessions and prepayment is nonrefundable. Treatment services are billed monthly based on sessions attended. Clients will receive monthly invoices with stated amounts owed as well as due dates.

CLIENT PAYMENT INSTRUCTIONS

Payments can be made using cash, check or credit card. Payments can be given to the SLHC Clinic Administrator in the SLHC office, IHSB 155. The client will receive a receipt for the payment. Payments not received at the time of services can be paid using one of the following methods:

- Contact UCA SLHC Administrator at 501-450-3176 to make a credit card payment by phone
- Mail checks to:
UCA SLHC
201 Donaghey Avenue
PO Box 4985
Conway, AR 72035

Charges must be paid in full in order for services to be continued the following semester.

DISCOUNT PROCEDURES

When financial hardship limits access to therapy services, the client or clinical educator should request an application for client scholarship. Once the form is complete, it should be submitted to the UCA SLHC Clinic Director.

REFUND, RETURN AND CANCELLATION POLICY

Fees paid for professional services provided in the UCA Speech-Language-Hearing Center are non-refundable.

CHAPTER 2: CLINICAL RESOURCES, POLICIES AND PROCEDURES, SAFETY

INFORMATION TECHNOLOGY HELP DESK

The IT Help Desk is located in room 103 of the Math and Computer Science building. Students in need of assistance with technology should contact the IT Help Desk at 501-450-3107.

CLINIC AND BUILDING ACCESS

Students are able to enter the building outside of normal business hours by scanning their valid UCA ID from one of the building's entrances. Students must also scan their UCA ID in order to gain access to the clinic spaces (SLHC and ITC). Students should only enter/exit the ITC side of the first floor through the client and/or student lobby when they are scheduled to utilize the space with a client.

The building closes at 7pm. Students should only remain in the building past 7pm if a faculty member is present for night classes or special events. Students are encouraged to leave promptly once any night class or special event has ended. Students are not allowed to utilize clinical spaces outside of normal business hours including the weekends.

FIRST FLOOR FACULTY BREAKROOM

The first floor Faculty Breakroom is restricted to faculty only unless the student is preparing liquids and foods for a feeding and swallowing patient. Students may reserve the Community Classroom or Activities of Daily Living (ADL) suite in the Interprofessional Teaching Center if they desire to complete therapeutic cooking with their clients.

CONTROL ROOM

The Control Room (Room 133) contains six computers. This equipment allows supervisors to directly observe service delivery as well as record sessions for clinical teaching purposes through a system called VALT. Students should knock before entering this room when supervision is in progress. Students have limited access to this room for session review. Students must follow the schedule provided by the Clinic Director for VALT access.

GRADUATE LOUNGE AREA

The graduate lounge area is located on the second floor of the Integrated Health Sciences Building. This area provides tables and seating, as well as refrigerators, microwaves, and vending machines for student use. This space is shared with the other programs in the building.

TREATMENT RESOURCE ROOM/TOYS

Treatment manuals and other materials utilized for therapy are located in the Treatment Resource Room (IHSB 145) in the treatment room hallway. Materials are available on a first-come-first-served basis and must be reserved through a student worker.

The clinic provides a variety of toys, puzzles, and/or games for clinical use. All toy items are located within the cabinets/storage closet of the pediatric group room (IHSB 127). Board games are located

in the metal cabinets on the right wall of the clinic workroom. All toys and games are checked out via the honor system. There are sign-out sheets available for documentation of the item use and return. Ensure that all pieces of games and materials remain together and that they are returned in an orderly fashion. Be respectful of other students that may need the items. When the pediatric group room is scheduled for a session, the items will be unavailable for use. Plan ahead and acquire all needed items before 8:30am or during the lunch hour (noon to 1pm).

DIAGNOSTIC RESOURCE ROOM

Assessments and other materials utilized for evaluations are located in the Diagnostic Resource Room (IHSB 134). Assessments are available on a first-come-first-served basis and are available for check-out up to 24 hours. Proper protocol should be used when checking out all resources.

TREATMENT ROOMS

There are ten treatment rooms located on the first floor of the IHSB in the UCA SLHC.

TREATMENT ROOM RESERVATIONS

Treatment rooms are assigned to students for specified periods of time. However, other departments may request to utilize the space within the SLHC. Therefore, all changes in clinical space must be approved by the clinic director. Students/supervisors/other departments may request to utilize an alternative space for a treatment session by emailing the clinic director and agreeing to the room reservation policy.

TREATMENT ROOM AND FURNITURE AND USAGE

All of the treatment rooms are equipped with an observation deck with a two-way mirror. Video recording and observation equipment are located in all rooms.

Each observation deck has a cabinet that contains cleaning supplies, gloves, tongue depressors, hand sanitizer, tissues, and a laptop for use with teletherapy or data entry.

Each therapy room contains furniture appropriate for each room. Furniture should remain in that room but if removal is necessary, **return it** to the proper location immediately after the therapy session. Furniture cannot sit in the hallway at any time.

Students are expected to keep therapy rooms as neat as possible. Do not adhere any tape or command strips to the walls of the treatment room. If items need mounting, utilize sticky tack on the glass portion of the mirror or on the underside of the table. If supplies are low or clocks are not accurate, please notify a student worker or the clinic administrator. After each therapy session, follow proper protocol for cleaning.

STUDENT WORKROOM

The student workroom (Room 158) will be used for the purposes of clinical documentation and session preparation. This room should be used for:

- Planning session plans and writing soap notes

- Adding PHI to Progress Reports and Treatment Plans
- Adding PHI to Diagnostic Reports
- Printing out documents with PHI

This room is not to be used as:

- A place to study
- A place to meet as a group
- To utilize computers for other purposes besides adding PHI
- To print out class materials

LOCKERS AND MAIL FILES

All graduate student clinicians will be assigned a locker for the purpose of storing materials needed for therapy in the student workroom. Students are not allowed to switch lockers. The loss of any valuables left in the locker is not the responsibility of the department. Students should not use any adhesive to attach things to the sides of the locker. Extremely large items will need to be kept in the student's car or elsewhere.

Throughout the semester, clinical information is exchanged through mail files. Mail files are located in the upper left file drawer of the student worker desk in the student workroom. Mail files are for clinic correspondence only and are not a storage location for materials or worksheets. Keep these files clean and check them frequently. Clinical educators also have mail files. Paperwork to be approved by the clinical educator should be placed in the appropriate educator's file by the due date. *Client records or flash drives containing PHI should never be left in any mail file. Any documents with PHI must be hand-delivered.*

DOCUMENTATION STATION

This area is located in the labeled cabinet underneath the printer in the student workroom. Clinic forms/documentation are located in hanging files. If a particular form is running low, please inform a student worker so more copies can be made.

COPY MACHINE

Copy machines are located in the SLHC Lobby and on the 4th floor of the IHSB. However, clinicians must have a note from a clinical educator in order to ask a student worker for copies or scans. The note must include the number of copies needed and the clinical educator's signature. The student worker will keep this note. Routine therapy materials are expected to be printed and copied by clinicians outside of the SLHC. If something needs to be copied for a client or caregiver immediately, the clinician may ask the student worker directly without a note from the clinical educator. The client/caregiver must be present.

LAMINATION MACHINE

The SLHC has a laminating machine for clinical use. During the first semester of clinical practicum, each student will be provided with 10 laminating sheets. Students are cautioned to use them sparingly, as all other sheets must be independently purchased.

CLIENT FILES

Client files are kept in locked and secured areas of the building. Active client files are kept in locked file cabinets at the checkout station in IHSB 157. Active clients are assigned unique identification numbers. These numbers are used on the client's permanent file.

Research clients are assigned numbers (i.e. R2 or SG 2) according to the guidelines of their respective IRB approvals. Research files are housed within the offices of the clinical educator assigned to the client.

Supplemental files are housed in locked file cabinets on the fourth floor. If supplemental information is needed for treatment planning, the file must be checked out through a student worker or administrator.

Diagnostic files are kept in the Clinic Administrator's desk for checkout.

Inactive files are kept in locked cabinets on the fourth floor.

Files must be checked out through a student worker or the clinic administrator. Client files or content from client files ***should never leave the SLHC building***. Files can be checked out but must be returned as soon as the user is finished and must always be returned before the end of the day. Files should also be in line of sight of the student who has checked out the file. All active files are inventoried at the end of each working day to make sure that all have been returned. If a client file becomes too full, then a supplementary file should be made. Students should see the clinic administrator to inquire about existing supplementary files and/or obtain a new supplementary file.

CLINIC MATERIALS

The department provides a wide variety of therapy materials for use in the clinic to enhance the learning process during clinical practicum. These include stimulus materials, formal tests, and speech and language therapy programs. Purchasing and maintaining therapy materials is an expensive task. To ensure that materials are not misplaced and that they are maintained in the best possible condition, specific borrowing procedures have been developed. These procedures are outlined in the following paragraphs. Use of materials in the resource rooms is a privilege that may be revoked if procedures are not followed.

ASSESSMENTS

Diagnostic assessments utilized for evaluations are located in the assessment room (IHSB 134). Assessments are available on a first-come-first-served basis. Students must check out assessments through a student worker. Please follow the guidelines when checking out diagnostic tests:

- **Step 1:** Determine which assessments will be needed on which date(s).
- **Step 2:** Speak to a student worker about your request. If a student worker is unavailable, you must wait and address it until one becomes available.
- **Step 3:** The student worker will determine if your request can be fulfilled and will share that information with you.

- **Step 4:** The student worker will complete your request and the assessment will be placed on the order cart in IHSB 157 on the requested date(s).

Reservations of assessments can be made up to one week in advance. Assessments can only be kept for 24 hours (1 business day). If an assessment is checked out on a Friday, then it must be returned on the next business day (Monday).

Diagnostic test forms are very expensive. To prevent waste of forms, clinicians should use worksheets, photocopies and/or other recording sheets for initial data collection. Black and white copies of all protocols are located in IHSB 157. Once data is collected, students can transfer the data to an original test protocol form. **Only use one form per client.**

TREATMENT MATERIALS

Treatment manuals and other materials used for therapy are located in the Materials Resource Room (Room 145), in the treatment hallway. Materials are available on a first-come-first-serve basis. All students must follow these procedures for checking out treatment materials:

- **Step 1:** Determine all materials needed 24 hours in advance of when they are required.
- **Step 2:** Fill out a google form from the link provided at the beginning of your practicum experience.
- **Step 3:** Retrieve your materials from the order cart located in IHSB 156 next to the checkout station.

Materials may be removed from clinic spaces. Materials can only be kept for 24 hours (1 business day). If a material is checked out on a Friday, then it must be returned on the next business day (Monday).

AUDIOMETERS

Audiometers must remain within the clinic, with the exception of off-site hearing screenings. If audiometers are checked out for off campus screenings, they must be returned by the end of the day. If an audiometer needs to be checked out for Friday morning off-site screenings, it must be checked out by 4pm the evening before.

DIGITAL RECORDERS

Digital recorders can be checked out for use with diagnostic or therapeutic activities. Digital recorders are not allowed outside of the clinical space. Please see the user manual of the digital recorder type for assistance regarding use.

IPADS/LAPTOPS

iPads and extra laptops are stored in IHSB 154 in one of the filing cabinets. If you wish to check out an iPad or laptop for therapeutic use, you must ask a student worker or the clinic administrator.

If using video recording for therapeutic use, do not attach any identifiable information to the saved clip and delete it immediately after the session. All videos saved to the devices will be removed at

the end of each semester. iPads are not allowed outside of the clinical space.

Supervisors may request additional apps to utilize on the iPads by submitting a Clinic Purchase Request Form to the clinic administrator. All apps must be approved by the Clinic Director.

STUDENT WORKERS

The department utilizes student workers to assist in the maintenance of materials within the resource rooms and to ensure records are accurate. A student worker will be able to assist you with any questions or concerns you may have regarding the materials the department provides for therapeutic use. If a student worker is not available, please wait until they return to their work station or see the clinic administrator. Please let a student worker know of any damaged or missing items from the material rooms, game cabinets, toys, or assessments. Please keep the resource rooms neat and organized by maintaining the organization of materials.

VIDEO EQUIPMENT

The SLHC uses Video, Audio, Learning Tool (VALT) to support student learning and engagement in clinical practice. This tool allows clinical faculty and students to observe and record sessions. Students and faculty can annotate sessions for later review. Clinical educators can share recorded sessions with students. To access VALT recordings, students must check the times listed on the control room door for VALT availability. If available, a student may login to the VALT system utilizing his or her myUCA email address and password. All students are expected to follow HIPAA guidelines and protect patient confidentiality. Headphones are available within the control room for private listening of the recorded session. Please turn off the monitor when finished within the control room. Login instructions and reminders are provided in each control room for reference.

RECORDING SESSIONS

All therapy sessions are recorded for educational purposes. Clinical educators are able to share recorded sessions with their assigned students through the VALT system. Students should not independently record their sessions.

OBSERVATION

Each treatment room is equipped with an observation deck for caregivers, clinical educators, or other individuals to observe therapy sessions. Observers should be advised to remain quiet within the observation deck, as not to disturb ongoing therapy sessions. The hallway door should be closed, as light from the hallways can be seen in the therapy room through the one-way mirror. Additionally, leaning too close to the mirror can cause individuals within the room to see the shadows of any observers present at the observation deck.

CLINICAL POLICIES AND PROCEDURES

ATTENDANCE POLICY FOR CLIENTS

Policy: Client attendance is a key part of making progress in therapy. Clients are required to sign the attendance policy prior to the initiation of services.

Procedure: Clients agree to the attendance policy by signing it in ClinicNote prior to scheduling services. During the first session of therapy, the student will review the Attendance Policy signed with the client/caregiver.

ATTENDANCE POLICY FOR STUDENTS

Policy: Students must be present for delivery of clinical services, pre-clinic and post-clinic meetings, weekly seminar meetings, and meetings with supervisors. Any absences from clinical service delivery must be reported to the clinic director.

Procedure: In the event an absence is unavoidable in providing clinical services, the student should:

1. Call the supervisor the moment that he or she knows about the absence. If it is before or after normal business hours, a message should be left on the supervisor's office phone unless instructed to do otherwise. The student is also responsible for contacting the client and canceling the session unless the supervisor requests that the student do otherwise. Sessions should only be canceled for health reasons or emergencies.
2. Therapy sessions canceled by the student will have to be made up.
3. In the event that a student must be absent from a meeting with the supervisor, the supervisor should be notified following the same procedure listed above.
4. In the event that the student is absent from a weekly seminar meeting or colloquium, the clinic director should be notified prior to the meeting.

ATTENDANCE RECORD

Policy: An attendance record is kept for each client receiving therapy. The Attendance Record indicates the date and length of time that the client receives therapy or is absent.

Procedure: The attendance record is used to keep track of attendance. Attendance Records are arranged numerically by the client's ID number in a notebook located in the student workroom. The student is responsible for filing an Attendance Record in the notebook and keeping an accurate record at all times. If a client withdraws or is dismissed from therapy, the date should be noted on the Attendance Record. An example of this form can be found in the Appendix.

AUTHORIZATION TO DISCLOSE/EXCHANGE INFORMATION

Policy: This signed authorization form is required to authorize any exchange of clinical information to outside agencies/persons. This is required for compliance with HIPAA regulations.

Procedure: Prior to requesting information from an outside agency or disclosing information to an outside agency, the client or legal representative must give written permission on an Authorization Form for this to occur. This is especially important to remember during the diagnostic process because information from other agencies is often needed and diagnostic results are often shared when families request, with other agencies.

*A separate Authorization Form must be signed for each location where information is being sent. For instance, a student should obtain two separate Authorization Forms if copies of a report are being sent to a school district and also to a referring physician. These signed forms are placed in the Release and Consent section of the client's file.

CLIENT/DIAGNOSTIC FILE CHECKOUT

Policy: Client files are to be kept within the building at all times. Client files are available for check out to assist with therapeutic and/or diagnostic planning.

Procedure: To maintain the integrity and privacy of clients, the following procedures should be followed:

1. Ask a student worker for either the client file number or the initials for the diagnostic assigned.
2. The student worker will document your name and the date and will gather the requested files.
3. All files must be returned by end of the day. Return files directly to the student worker.

CLIENT NUMBERS

Policy: In order to maintain privacy, all new clients are assigned a file number. The majority of files are labeled in numerical sequence. Some files are labeled based on research requirements.

Procedure: The SLHC Clinic Director will assign all numbers. All clients should be referred to by number instead of name. If you receive a file labeled "R" or "SG", then your client file will be housed with your assigned supervisor instead of with the other client files.

CLINIC FEES

Policy: Clients and their families pay for the services that are provided at the UCA SLHC.

Procedure: The clinic administrative specialist collects the fees and provides receipts. All questions regarding fees and charges should be directed to her. If the student is notified that the clinic administrative specialist needs to talk with the client or family member regarding payment, the student should personally walk the client to her to make sure the conversation occurs.

CLINICAL AGREEMENT

Policy: The Clinical Agreement is a document that covers many important topics including the provision of services by students, the supervision of students by ASHA certified speech language pathologists and audiologists, and the ability to release the client only to designated individuals.

Procedure: During the first session of each semester or at the beginning of a Diagnostic Evaluation, the student should review the Clinical Agreement Form and have the client or legal guardian sign and date the form or initial and update a previously signed form. This form should be placed in the client's file. A copy of the clinical agreement can be found in the Appendix.

CONFLICT OF INTEREST

Policy: Students should disclose any relationship that he or she has with a client in the UCA SLHC to the clinic director.

Procedure: Any time that a student discovers that he or she has a relationship with a client in the UCA Clinic, this should be reported to the clinic director as soon as it is discovered. Students will not be assigned to provide services to any family member or anyone with which he or she has a personal relationship that might impact services.

COPY MACHINE REGULATIONS

Students must have a note from a supervisor in order to ask a student worker for copies or scans. The note must include the number of copies to be made and the supervisor's signature or initials. The student worker will keep this note. These instances should be rare. Routine therapy materials are expected to be printed and copied by students outside of the SLHC. If something needs to be copied for a client or caregiver immediately following the session the student may ask the student worker directly without a note from the supervisor. The client/caregiver must be present. This is the only exception to the above guideline.

DRESS CODE

Policy: It is important that students dress professionally when providing services at the UCA SLHC. The intention is for students to be modest, respectful, and professional. Please refer to the dress code guidelines on pp. 32.

Procedure: Students who are in violation of the dress code will be given a written reminder for the first offense. The second offense will be a meeting with the clinic director. If there is a third offense, the supervisor will notify the clinic director and a plan of action will be developed.

DIVERSITY AWARENESS

Policy: It is important that students honor and are sensitive to clients and their families regarding culturally and linguistically diverse issues.

Procedure: Be aware of the different belief systems that may be held by clients and their families. Do not assume that clients or their families have the same belief system as the mainstream culture. Be aware of the possibilities of this when planning therapy activities, planning topics for conversation, and while conducting interviews.

EATING AND BEVERAGES

Policy: Students should not eat, drink, or chew gum while providing services unless this activity is part of the session.

Procedure: Since it is a clinical environment, distractions that detract from providing therapy should be avoided. Having food or beverages can detract unless it is part of the activity that is planned.

ELECTRONICS AND CELL PHONES

Policy: Students should never record or take pictures of clients on personal cell phones or iPads. Cell phones should always be turned off and put away during service provision, unless approved for stopwatch purposes.

Procedure: Any phone calls made to clients must be done in a private environment where others will not be able to hear. Hallways, student workrooms, and public spaces are not considered private environments. Students are encouraged to utilize the control room or empty treatment rooms for client interaction via phone.

EMAIL ACCESS

Policy: Students are given a UCA email address. It is imperative that students respond to their UCA emails at least twice a day, every weekday.

Procedure: All correspondence with supervisors regarding clients should be sent through UCA email and not through other accounts. Remember that HIPAA protected information should never be sent through email. CALIPSO accounts for students will also be set up through UCA email accounts. Information on CALIPSO is not HIPAA protected.

GIFTS AND GRATUITIES

Policy: Expensive gifts should not be exchanged or given by the student or received by the student.

Procedure: It is permissible for small gifts to be given or received at the end of a semester but nothing elaborate should be exchanged.

HIPAA

Policy: Students must practice HIPAA compliant behaviors throughout their clinical practicum experience.

Procedure: HIPAA compliant activities are reviewed with clinicians before starting practicum. In addition, when clients arrive for services for the first time, each client must receive:

1. Notice of Privacy Practices (NPP)-- given to client or legal guardian
2. Acknowledgement of Receipt of NPP-- signed and placed in client file

*If the policy is updated, then a new NPP and Acknowledgement Form must be signed.

NON-DISCRIMINATION POLICY FOR CLIENTS

Policy: The UCA Speech-Language-Hearing Center does not and shall not discriminate on the basis of gender, race or color, ethnicity, religion, spiritual beliefs, national origin, age, familial status, socioeconomic background, sexual orientation, disability, political beliefs, intellectual perspective, genetic information, or military status in any of its activities or operations. These activities include, but are not limited to, the provision of services. We are committed to providing an inclusive and welcoming environment for all members of our staff, clients, faculty, students, and the community we serve.

Procedure: The SLHC is committed to making sure that clients are not discriminated against when receiving services at the UCA SLHC. Anyone who has information that this non-discrimination policy has been breached should report this immediately to the clinic director.

PARKING PASSES FOR CLIENTS

Policy: Clients or guardians need to park in the designated parking spaces labeled "Client Parking Only" near the entrance to the SLHC.

Procedure: During the first meeting with the client or guardian, the student should ask if the client plans to park in the client parking area. If so, a parking pass for the semester can be obtained from the clinic administrative specialist to give to the client. Please instruct the client to place the pass on their dashboard.

RECORD OF ACCESS

Policy: Record of Access Forms document who has had access and reviewed a client's file.

Procedure: An entry should be made on the Record of Access Form when any individual reviews a client file. The client has a right to know who has had access to their file so this must be documented. This form is located at the front of the client's binder.

RECORD OF INFORMATION RELEASED

Policy: An entry should be made on the Record of Information Released Form for any report or document that is mailed or given to an agency or guardian/client.

Procedure: The Record of Information Released Form should be in each client's folder to record any time that information is sent or given to anyone. Indicate the date and the kind of information that was sent (i.e. evaluation report, progress report) and to whom it was sent or given. This form is placed in the Release and Consent section of the folder. Remember: Prior to releasing any information to a third party, an authorization form signed by the caregiver must be in the file.

RECORD RETENTION OF CLIENT FILES

Policy: The SLHC maintains inactive client records for these time periods:

- Inactive file: from discharge for 6 years
- Only key summary documents for 7-10 years

Procedure: The SLHC maintains clinical documents for the time period specified above. Clients are notified about this when they start receiving services at the UCA SLHC.

SOCIAL MEDIA POLICY

Policy: The term "social media" in this policy is intentionally broad. Students should consider the potential ramifications of their post before posting on any internet public forum, including but not limited to Facebook, Instagram, Twitter, LinkedIn, YouTube, GroupMe, Reddit, blogs, comment sections of news sources, and similar online social media entertainment or networking sites.

Procedure: When interacting on social media, UCA CSD students should think critically about how they would like to be perceived publicly and to exercise good judgment. Please realize that your post may be viewed by a larger audience than predicted-nothing is private once it is on the internet. Students should ask themselves if they would like their parents, grandparents, instructors, friends, clinical educators, clients, future employers, etc. to see their posts. Avoid posting things that could be interpreted as offensive, harassing, or an infringement of the rights of others. Students should be aware that employers commonly review social media sites when considering new hires; therefore, students should carefully consider what they contribute to their online profile.

Social media may have a significant impact on personal, professional, and organizational reputations. Because a student's online presence can impact the student, the clients who are served by the student, the department, and the university, the following rules must be followed. Keep in mind that the inappropriate use of social media may lead to ethical violations under the ASHA Code of Ethics ([ASHA Ethical Use of Social Media](#)).

1. Students should use good judgment for their posting on social media, as well as comments made to others on social media sites.
2. Posting photos or recordings of class or any clinical experiences is specifically prohibited.
3. Never share any information, description, photos or videos regarding a client, or their protected health information.

4. Refrain from following or “friending” any clients or families through social media.
5. Do not misrepresent the services you provide or your level of expertise.
6. The use of social media for sharing of class material with anyone who is not enrolled in the course and sharing of academic assessment material (e.g. tests) without express permission from the instructor is explicitly prohibited.
7. The posting of insulting or offensive comments may violate the ASHA Code of Ethics. Students should strive for civility in all social media interactions. Consult the ASHA Civility Digital Toolkit (<https://www.ash.org/about/civility/>) for information regarding professional conduct on social media.
8. Students should report an inappropriate use of social media by peers to the CSD Department Chair or SLHC Clinic Director immediately.

TRAFFIC FLOW

Policy: Entry into the building for students, faculty, and other UCA personnel will be restricted to the south-central, west, and east sides of the Integrated Health Sciences building. Clients will enter from the north-central entrance to the reception area.

TRANSPORTING CLIENTS

Policy: Students should never drive or ride with clients or their caregivers.

Procedure: Any events that occur out of the UCA SLHC should be planned so that it is in close proximity to the UCA SLHC or in a location where the student can meet the client at the destination. Supervisors must be present if meeting offsite for therapeutic purposes.

USE OF CLIENTS IN RESEARCH

Policy: Clients used as a part of research should abide by the standards outlined in the Citi Training Research standards and be fully informed that they are participating in a research project.

USE OF VIDEO RECORDING

Policy: Recordings of clinical sessions should remain part of the client’s file. Supervisors should place any therapeutic recordings in the client’s file for students to checkout to view.

Procedure: All video recordings made of a client become part of the client’s file. Students can check out the client’s file to view the video. Recordings on jump drives should never leave the SLHC building and should be viewed in a private and secure location. Recordings should never be made on personal iPads or personal devices.

VALT

Policy: All therapy sessions are recorded for educational purposes. Supervisors may share recorded sessions with students.

Procedure: Viewing therapy sessions on VALT should follow this procedure:

1. Check times listed on supervision room door for VALT availability to students.
2. If available, log into the VALT system utilizing your myUCA email address and password.

SAFETY

ACCESS TO SLHC

Access to the SLHC will be restricted to approved students and approved clinical educators who are providing treatment to SLHC/ITC clients. All individuals, including clients, who enter the treatment area will abide by all clinic policies, procedures, requirements, which may include wearing masks and being screened for possible infectious diseases.

Only those with approved access should be present in the SLHC. Building hours of operation are typically 7am-7pm, Monday through Friday. Students should limit their presence in the building outside of operational hours.

EMERGENCY PROCEDURES

In case of an emergency, students should follow UCA Emergency Policies and Procedures that are posted in each area of the building (Building Emergency Plan). In the event of significant injury to an employee, student, or visitor, the relevant personnel will complete an Incident Reporting Form provided by the Clinic Administrator.

In the event of a building evacuation, all clinicians will exit the building with their clients and meet at the designated evacuation spot. All client families should know where to meet so they can leave campus if necessary. Once cleared for re-entry, clinicians may return and gather their belongings.

PROFESSIONAL LIABILITY INSURANCE

UCA carries professional liability insurance coverage for all CSD students and faculty. The coverage is renewed annually.

GENERAL GUIDELINES FOR INFECTION CONTROL

The following guidelines are for prevention of infection from diseases transmitted from blood, bodily fluids, excretions, and secretions during patient care:

1. Every patient's blood, bodily fluids, excretions, secretions, and tissues must be treated as potential infections.
2. Contact of blood/bodily fluids with mucous membranes and breaks in the skin create a potential for exposure and should be avoided.
3. Students and employees are expected to wear gloves when caring for the patient in which there will be exposure to blood, specimens containing blood, bodily fluids (including saliva), excretion of secretions, blood-soiled items, and the surfaces or objects exposed to these substances.
4. Students and faculty are expected to seek treatment from the Student Health Center if a percutaneous wound occurs (i.e. puncture wound, cut with a sharp object) or if mucous membrane is splashed in the eye or mouth. The nurse practitioner should be contacted within 24 hours after the exposure.
5. Students and faculty are expected to clean up minor blood/bodily fluid spills immediately with an antibacterial, disinfectant solution. Clorox wipes are

available in each treatment room. Students and faculty are expected to contact the UCA SLHC Clinic Administrator or Clinic Director for assistance in housekeeping as necessary for larger jobs.

6. Pregnant, immunosuppressed, and individuals with communicable diseases must take special precautions when caring for all patients.
7. Clients or students who arrive for evaluation or treatment sessions with a fever or other signs of infection (i.e. chicken pox or influenza) are to be directed to return home. Clients may return to the clinic after being free from fever for 24 hours.

HANDWASHING

See the Center for Disease Control for information about handwashing:

<https://www.cdc.gov/handwashing/when-how-handwashing.html>

Students should wash their hands before and after working with a client. In the event that handwashing isn't possible, hand sanitizer should be utilized. Hand sanitizer is located in every therapy room. Listed below are important practices for the student to implement in order to cut down on the spread of germs:

- Wash hands before and after every patient contact
- Wash hands immediately within the session if you have contact with any of your own or the patient's bodily fluids.

STANDARD PRECAUTIONS

All faculty, staff, and students will be required to follow standard infection control procedures. Student trainings for infection control are required prior to participating in clinical practicum experiences. These trainings include but are not limited to the following: Standard precautions, donning and doffing PPE, masking rules and maintenance, bloodborne pathogens, COVID-19 infection control, health emergencies, and CPR.

IF AN INJURY OCCURS

In the event of significant injury to an employee, student, or visitor, the relevant personnel will complete an Incident Reporting Form provided by the UCA SLHC Clinic Administrator.

CHAPTER 3: THE CLINICAL PRACTICUM EXPERIENCE

GENERAL INFORMATION

The primary purpose of the clinical practicum experience is to provide clinical training opportunities that allow students to demonstrate and enhance their knowledge and skills in communication and swallowing disorders. For this reason, continuous enrollment in clinical practicum during the duration of the graduate program is required. Students engage in seminars and hands-on, interprofessional, experiential learning and become competent in the assessment and treatment of communication and swallowing disorders. Practicum within the UCA SLHC occurs for three semesters and encompasses a planned series of experiences consisting of the provision of therapeutic, diagnostic, and screening services; meeting with clinical educators; and the documentation, planning, and participation in specialty clinics. All clinicians will obtain clinical hours under the direct supervision of UCA clinical faculty, all of whom are certified by the American Speech-Language-Hearing Association and licensed by the Arkansas Board of Examiners in Speech Pathology and Audiology or the equivalent board from another state. During the last two semesters, graduate clinicians will participate in externships and will be supervised by community speech-language pathologists. Students are responsible for keeping track of their clinical hours and are expected to continuously self-reflect on their experiences and skills acquired to ensure they are making satisfactory progress toward their clinical competencies and requirements.

COLLOQUIUM MEETINGS

Colloquium meetings typically occur three to four times in each of the spring and fall semesters. Colloquiums are held on Tuesdays from 1:45pm to 3:30pm. Topics for colloquium include but are not limited to student research topics, guest speakers from specialty areas, or round table discussions of case studies.

SLHC WEEKLY MEETINGS

As a part of clinical practicum, all graduate students will participate in weekly or biweekly, one-hour clinical seminar meetings with the Clinic Director. These meetings will cover topics relating to the field of speech-language pathology such as ethics, evidence-based practice, professionalism, and other areas of need.

CLINICAL PRACTICUM

Students must be enrolled in clinical practicum in order to accrue clinical hours. The number of semester credit hours in which the student enrolls will vary from semester to semester depending on the student's program of study.

Students in the MS-CSD program are assigned direct clinical experiences during the second semester of the graduate program. The amount of direct client contact assigned varies based on client availability and student requirements.

Students within the SLHC are typically assigned to one to two clients each semester.

Students will typically participate in three clinical externships in a pediatric, school, and medical/adult setting. An abbreviated breakdown of clinical practicum experiences can be found in the table below.

Semester Timeline	Clinical Course	Practicum Placement	Case Load
Fall 1	CSD 6101 (Clinical Seminar 1: Assessment)	None	None
Spring 1	CSD 6180 (Advanced Clinical Practicum I)	UCA SLHC	Hours vary
Summer 1	CSD 6180 (Advanced Clinical Practicum I)	UCA SLHC	Hours vary
Fall 2	CSD 6280 (Advanced Clinical Practicum I)	UCA SLHC, Externship 1	Hours vary
Spring 2	CSD 6580 (Advanced Clinical Practicum I)	Externship 2	8-12 weeks, Days and hours vary
Summer 2	CSD 6580 (Advanced Clinical Practicum I)	Externship 3	8-12 weeks, Days and hours vary

OBSERVATION PREREQUISITES

Prior to participating in hands-on clinical training, new graduate students must provide documentation of 25 hours of guided observation of therapy and/or assessments. Documentation must include the signature of the undergraduate program clinic/program director and ASHA number. If entering graduate students have not completed guided observation hours, they will be enrolled in a special course during their first semester in order to gain the required observation hours.

CLINICAL REQUIREMENTS

Requirements for the Certificate of Clinical Competence by ASHA include the completion of a minimum of 400 hours of supervised clinical experience with patient/client populations across the lifespan and from culturally and linguistically diverse backgrounds. This includes the following breakdown:

1. A minimum of 25 observation hours prior to beginning the graduate program or during the graduate clinical experience.
2. Up to 50 hours of required clinical experience may be accrued in an undergraduate accredited program and counted towards the total hour requirement.
3. A minimum of 325 hours of clinical experience must be accrued at the graduate level.
4. At least 375 clock hours must be earned through direct client/patient contact.
5. If the student's final clinical grade falls below B, or if the student withdraws from any portion of their clinical practicum, clinic hours accumulated for that semester

will not be counted towards the 325 graduate clinic hours or the 400 hours required for ASHA certification.

A full list of requirements can be found online at <https://www.asha.org/certification/2020-slp-certification-standards/>

COUNTING CLINICAL HOURS

The SLHC clinical faculty and externship clinical educators work to provide rigorous and exceptional clinical training. When counting clinical clock hours, only time spent by the graduate clinician providing direct therapy services or evaluations can be recorded. Hours spent in conferences or peer meetings in which evaluation, treatment, and/or recommendations are discussed or formulated may **not** be counted towards clinical clock hours. That also includes observations, report writing, and planning. Time spent with the client or caretaker engaging in information-giving, counseling, or training for a home program may be counted as direct contact time if the activities are directly related to an evaluation and/or treatment. Students who are not sure how much time to log should consult their clinical educator.

CALIPSO

The UCA graduate program utilizes the CALIPSO system for documenting student clock hours. It is the student's responsibility to keep up with clinical clock hours and submit clock hours for approval on a weekly basis. Clinical educators must approve a student's clock hours before they can be counted towards the student's required number of hours. Each university using CALIPSO has their own unique account and accounts do not transfer.

CLINICAL PARTICIPATION REQUIREMENTS

The following list includes requirements for students before they may start their clinical practicum. These requirements must be maintained throughout all clinical experiences.

- **CALIPSO:** During a student's first semester of graduate school, he or she will be required to enroll in CALIPSO, a web-based student tracking system. The cost is \$100 (subject to change) and is paid directly to CALIPSO. This is a one-time fee. Students will be sent a PIN early in the semester with instructions on registration for the system.
- **Castlebranch:** Castlebranch is a background screening and compliance tracking company, which will be used to ensure that students are eligible and cleared to complete clinical services in a variety of settings. Graduate students will pay a one-time fee of \$94 (subject to change) to Castlebranch, which includes a criminal background check and access to Castlebranch. There will be other out-of-pocket costs that students will incur such as vaccinations and yearly TB skin tests which will be logged on Castlebranch. Students can obtain these for a modest cost at the UCA Student Health Center. Students may be required to pay for and pass a drug screening. Documents that must be uploaded to Castlebranch are noted below with an *.
- **Clinic Note:** Clinic Note is the EMR system for clinical documentation. Each

student using the system will be required to pay \$50 (subject to change) per semester of use.

- **Child Maltreatment Training**
- **Clinic Handbook Review***
- **COVID-19 Vaccination:** Many externship sites require the COVID-19 vaccination and boosters. Although the university will not request this information, it is important to note that failure to have the COVID-19 vaccination and full boosters might limit the choices of off campus placements that are possible for the student.

- **CPR Certification* (Must be hands-on through the American Heart Association.** Course information will be provided at the beginning of the fall semester for those that are needing this training. Cost ranges from \$60-\$80 dollars typically.
- **Criminal Background Check*:** Arkansas State Criminal Background Checks are required prior to a student first enrolling in clinical practicum. A student cannot begin to provide services without this document on file. If the background check shows any type of criminal activity, this will be managed on a case by case basis. Any serious offense could jeopardize a student's current standing in the program. Any adverse findings on the CBC or other background checks may limit or prohibit participation in clinical experiences depending on the seriousness of the offense and the clinical site requirements. Any criminal activity reported on a student's CBC or any additional charges or convictions occurring after or out of the preview of the CBC or other checks, must be shared with the clinic director. Students are responsible for informing the clinic director of any criminal charges or convictions occurring before or during the student's program. Failure to disclose this information may have repercussions ranging from remediation to dismissal from the program.
- **Drug Test***
- **Health Insurance***
- **Immunization Records*:** Students are required to either show that they have had the Hepatitis B series of shots or sign a waiver stating that they are declining the Hepatitis B series. Proof or the declination must be secured prior to the student starting practicum. It is important to note that failure to have the Hepatitis B series might limit the choices of off campus placements that are possible for the student. Students are also required to show proof of receipt of the Measles, Mumps & Rubella vaccine as well as flu shots.
- **Photo Identification:** For the purposes of identification, students will have their picture taken during the first semester of graduate school. The pictures are distributed to UCA faculty and used solely for identification purposes.
- **Pre-Practicum Meetings:** At the beginning of each clinical semester, meetings will be held to discuss the plans for the semester and to review guidelines. These meetings are mandatory.
- **Professional Dispositions, Behaviors, and Essential Functions***
- **Simucase:** All graduate students will be required to purchase and register as members of Simucase. Simucase is a web-based platform that provides simulation-based experiences in observation, assessment, diagnosis, and

intervention. It allows students to master specific clinical skills, meet clinical competencies, and practice interprofessional collaboration. *Membership cost is \$99 annually.* Registration is required by September 15 of your first semester in graduate school. (NOTE: You must follow instructions to stop auto-renewal of account.)

- **Speech and Hearing Screening:** Each student is required to have a speech and hearing screening during their first semester of graduate school. If a student fails the screening, the student will meet with the clinic director or advisor to discuss a plan of action.
- **TB Skin Tests (Annual)*:** TB skin tests are required. Proof of a current negative TB skin test is required prior to starting practicum. Prior to the start of a semester when a TB test expires, the student should have a new test completed so that the TB test is not allowed to expire. If the TB test is not updated, the student will be pulled from their current practicum.

DRESS AND PERSONAL APPEARANCE GUIDELINES

It is important that clinicians dress in a way that is conducive to providing diagnostic or therapy services that do not distract the client from the services provided. Any student who is not dressed appropriately will not be allowed to participate in the clinic. It may be beneficial to keep a change of clothing, sweater etc. in your locker to use if needed. A written reminder will be given to the student after their first occurrence of inappropriate attire or other violations of the dress code. A second occurrence will result in a meeting with the clinic director. A third occurrence will result in the development of a plan of action addressing the dress code violations.

These business casual guidelines should be followed for all clinical placements and externships. If an off-campus facility provides a student with a differing dress code policy, the student must abide by the facility's policy.

- **Name Badge:**
 - Clinicians must wear their name badge when providing services to clients/patients.
- **Physical Appearance:**
 - Clinicians should always be clean and professional in appearance, including hair and nails.
- **Hair:**
 - Hair should be a "natural" color (i.e., no blue, green, purple, or similar hair colors).
- **Tattoos:**
 - Clinicians' tattoos should be covered up.
- **All Clothing:**
 - Clothing must be clean, neat, non-distracting, and in good condition.
 - No scrubs are allowed.
- **Slacks/Pants:**

- Pants must not be excessively baggy or ride too low on the hips.
- No denim, sweatpants, or shorts are allowed.
- Capri pants are allowed.
- Black scrub sets including both bottom and top are allowed. Black scrub jackets are allowed or students can wear solid long-sleeved t-shirts under the scrub top.
- Cloth leggings are allowed as long as shirt covers buttocks.
- Shirts/Tops:
 - Sheer tops must have an appropriate shirt or camisole worn underneath.
 - No low-cut tops or spaghetti straps are allowed.
 - T-shirts are not allowed.
- Dresses/Skirts:
 - Skirts must be of reasonable length and not shorter than 3 inches above the knee.
- Shoes:
 - Shoes must look professional.
 - Tennis shoes and/or flip flops are allowed if they do not appear too worn.
- Nails:
 - Length must remain moderate.
- Piercings:
 - Any visible or potentially visible body piercing jewelry, with the exception of earrings, must be removed when providing services to clients/patients.
- Fragrances:
 - Clinicians should limit any body fragrance usage, as many clients have allergic or negative reactions to these fragrances.

If it is determined that personal appearance may present a conflict, the clinician will be assisted to identify appropriate options, such as removal of excess or potentially harmful jewelry, covering of offensive tattoos, or other reasonable means to resolve the conflict.

When in doubt of any allowable or disallowed items, please check with a clinical educator or the Clinic Director.

PROFESSIONAL COMMUNICATION

An important component of professional behavior is your language. In general, professional language is conservative, with no swearing or use of slang words or expressions. As communication professionals, we are in fact held to a very high standard in terms of our communication skills.

Professional language should not be equated with professional jargon. It is important to explain specific terminology to clients and their families, but your language should contain vocabulary and style appropriate to the person. Thus, your language should be direct and focused, not condescending, but not obtuse either. Pay attention to the body language and facial expressions of clients and their families, fellow students, and supervisors, as that can be a good guide to whether you are successfully communicating to them.

PROFESSIONAL PRACTICE COMPETENCIES

Guidance for expectations in professional behavior can be found in the ASHA Code of Ethics and in the Council on Academic Accreditation Standard 3.1.1 “Professional Practice Competencies”. Listed below are a basic set of professional behavior expectations for clinical practicum.

- Show up on time.
- Show up prepared.
- Show up properly attired (professional dress, well-groomed).
- Show up in a frame of mind appropriate to the professional task.
- Accept the idea of “on time,” “prepared,” “appropriate,” and “properly” are defined by the situation and the clinical supervisor.
- Recognize that professional duties and situations are about completing tasks and solving problems in a beneficial way. This includes behaving professionally even when you believe that your client, clinical instructor, other students, persons in position of authority, or other workers in a setting are NOT behaving in a respectful or appropriate manner.
- Place the importance of professional duties, tasks, and problem-solving above your own convenience.
- Strive to work effectively with others for the benefit of the persons served. This means you pursue professional duties, tasks, and problem-solving in ways that make it easier (not harder) for others to accomplish their work.
- Properly credit others for their work.
- Sign your work.
- Take responsibility for your actions, your reactions, and your inaction. This means you do not avoid responsibility by offering excuses, blaming others, emotional displays, or helplessness.
- Do not accept professional duties or tasks for which you are personally or professionally unprepared.
- Do what you say you will do by the time you said you would do it, to the extent you said you would do it, and to the degree of quality you said you would do it.
- Take active responsibility for expanding the limits of your knowledge, understanding, and skill.
- Vigorously seek and tell the truth, including those truths that may be less than flattering to you.
- Accept direction (including corrections) from those who are more knowledgeable or more experienced. You provide direction (including corrections) to those who are less knowledgeable or less experienced.
- Accord respect to the values, interests, and opinions of others that may differ from your own, as long as they are not objectively harmful to the person served.

- Accept the fact that others may establish objectives for you. While you may not always agree with those goals, or may not fully understand them, you will pursue them as long as they are not objectively harmful to the person served.
- When you attempt a task for the second time, you seek to do it better than you did it the first time. You revise the ways you approach professional duties, tasks, and problem-solving in accordance with the principles of evidence-based practice.
- Accept the imperfections of the world in ways that do not compromise the interest of those you serve, or your own pursuit of excellence.
- Base your opinions, actions, and relations with others upon sound empirical evidence and examined personal values consistent with the above.
- Expect all of the above from other professionals.

(Above adapted from University of Wisconsin-Madison Department of Communicative Disorders)

FAILURE TO COMPLY WITH THE GUIDELINES FOR PROFESSIONAL BEHAVIOR

All privacy and security measures should be followed. If there is a violation of any of these policies, it will result in the following sequence of penalties:

1. First offense: Written warning
2. Second offense: Meeting with the SLHC Clinic Director
3. Third offense: Sanction— The sanction will be a penalty that will have consequences consistent with the violation. The most serious sanction could be the removal of the student from clinical practicum.

SCHEDULING PROCEDURES FOR CLINICAL ASSIGNMENTS

Clinical training programs are obligated to provide a breadth of clinical experiences in order to train well-rounded clinicians and to satisfy ASHA requirements. Accordingly, every semester, the clinical staff carefully examines each student's previous clinical practicums to ensure that each clinician has been exposed to and/or has demonstrated mastery of:

- Working with pediatric and adult clients
- Providing individual and group intervention
- Utilizing indirect and direct therapy intervention techniques
- Whenever possible, clinical faculty also attempt to supply:
 - Diagnostic experience
 - Counseling opportunities (e.g., via parent training, fluency support groups, adult language groups, etc.)

Scheduling of clinical practicum is done by the SLHC Clinical Faculty. Students are placed on teams and a rotation schedule to ensure a variety of experiences across the program. In some cases, additional clinical assignments may be requested or necessary to meet the needs of the students.

In some instances, a decision to change the rotation schedule may be deemed necessary by the SLHC Clinical Faculty and/or SLHC Clinic Director. Factors governing the changes are numerous and may be weighed differently depending upon the perceived needs of the individual student. If such a change is necessary, any of the following factors may be considered:

- Disorder courses taken: Situations may occur in which students may be assigned a placement prior to having a course. In the event this happens, students will be appropriately oriented to the placement.
- Clock hours previously accrued in **graduate** clinical placements
 - Each student's clinical hours are logged in CALIPSO. The scheduling team uses summary sheets from this database showing each student's number of hours accrued toward the goal of 5 client contact hours in each of the nine disorder areas specified by ASHA. Those areas include Speech Sound Disorders, Fluency, Voice and Resonance (including respiration and phonation), Receptive and Expressive Language, Hearing (including the impact on speech and language), Swallowing (including feeding), Cognition, Social Aspects, and Communication Modalities.
- Clock hours projected in current clinical assignments
- Anticipated date of graduation: Students demonstrating shortages in any of the designated areas of clinical concentration and who are enrolled in their last semester of practicum receive top priority in scheduling of clinical assignments. For detailed information regarding the hours required for certification by ASHA, see "Clinical Practicum Overview."
- Future plans for healthcare/school externships (i.e., semester planned, type of clientele, etc.)
- Previous clinical educators and locations of clinical assignments
- Prioritized list of desired clinical placements for the following semester
- Participation in specialized departmental training grant programs

Clinic scheduling is something that cannot always be planned for in advance, as we are serving the public and our clients often change their schedules at the last minute, or wait to confirm their plans until the start of the semester. Furthermore, we frequently add clients in the middle of the semester and there can be other opportunities (screenings, etc.) in the community that arise during the semester. With the exception of UCA class meeting times, it is mandatory that students be available during the day for clinic. **A student may be assigned clients at any time (morning or afternoon) and may also be assigned additional responsibilities around those clients.** If students work outside of school/clinic, any work scheduling **MUST** be done around clinic, and may **NEVER** take a priority over clinical assignments and availability. This is important because 1) we have a professional responsibility to serve those clients and community partners that count on us for our services and **2) in order to complete ALL necessary clinical clock hours and obtain competency across all areas, students must be available for any and all clinical opportunities. Prioritizing work, babysitting, travel to weddings, etc. may result in a delay in completion of the program.**

EXTERNSHIPS

Externships are designed to provide students with depth and breadth of experiences with clients across the lifespan, with a variety of disorders and severities, and culturally/linguistically diverse populations. All experiences are designed to expose students to:

- the planning and delivery of client-centered care
- interactions with clients, families, healthcare providers, teachers, staff, and other allied professionals
- evidence-based practice
- the utilization of and experience with various documentation procedures

Externship placements occur during the fall, spring, and summer semesters of the second year of the graduate program. All students will have at least two placements during their graduate program, though most students will have additional externship opportunities. The typical sequence for externships is as follows:

- **2nd Fall Semester (12-15 weeks):** two days per week at an externship site. These placements are typically public school or pediatrics settings.
- **2nd Spring Semester (12-15 weeks):** four-five days per week at an externship site. These placements can be one facility for the entire week or two different externship sites with varying schedules.
- **2nd Summer Semester (10-12 weeks):** four-five days per week at an externship site. This is a student's final placement of the program, and will typically match the student's needs for their hours and skill development. These placements could be a medical, pediatric, or outpatient setting, and could be at a single facility or split between two different sites with varying schedules.

ELIGIBILITY FOR EXTERNSHIPS

The department requires several types of prerequisites that must be met prior to a student's assigned externship placements. These are similar to the requirements students must meet prior to beginning on-campus practicum experiences.

- **Academic Requirements:** At the end of the first summer semester and prior to being placed off-campus, a student must have a major graduate GPA of 3.0 or higher. If their overall GPA falls below a 3.0 the semester before an off-campus placement, the placement will be canceled for the following semester. The student will be allowed to be placed for off-campus practicum only after regaining a GPA of 3.0 and with approval from the student's academic advisor. Departmental procedures regarding retention can be found within the UCA CSD Graduate Student Handbook.
- **Clinical Requirements:**
 - If a student receives a final overall rating below a 3.0 in clinical practicum for the previous semester, the student's performance will be

- reviewed prior to deciding their readiness for an externship placement.
- If a student receives a rating below a 3.5 on any of the skill items on the final Performance Evaluations in the preparedness, interaction, and personal qualities of items #10-18, the student's performance will be reviewed regarding their readiness for an externship placement.

- **Training and Documentation Requirements:**

- **Criminal Background Check (CBC):**

- A CBC must be completed and paid for by the student prior to starting clinical practicum. Students who do not comply with this requirement will be unable to participate in clinical practicum. The CBC is a state background check completed by the Arkansas State Police. Results must be sent to the Clinic Director.
- Some sites will require additional background checks. These might include a federal background check, or a Child/Adult Maltreatment Registry check, or other exclusion database checks. Additional background checks must be completed and paid for by the student prior to starting at that site.
- Any adverse findings on the CBC or other background checks may limit or prohibit participation in clinical experiences, depending on the severity of the offense and clinical site requirements.
- Any criminal activity reported on a student's CBC or any additional charges or convictions occurring after or out of the purview of the CBC or other checks, must be shared with the clinic director. Students are responsible for informing the clinic director of any criminal charges or convictions occurring before or during the student's program. Failure to disclose this information may have repercussions ranging from remediation to dismissal from the program. Results may or may not be shared with a clinical site depending on the nature and seriousness of the offense. A clinical site may refuse to allow a student to be placed at the site after being informed of the background check results. If this is the case, then an alternative placement will be sought if possible. If not possible, this could extend or terminate a student's program depending on the seriousness of the offense. All students should be advised that ASHA certification and state licensing boards may deny, suspend, or revoke certifications or licensure for serious offenses.

- **TB Skin Test:** TB skin tests providing negative results must be completed annually. Students are responsible for submitting documentation to verify that their TB skin test is current and provide retesting prior to the start of the upcoming semester when their TB skin test expires.
- **HIPAA Training:** HIPAA training will be provided at the university prior to a student providing clinical services. Externship placements may also require students to attend their own HIPAA training prior to students providing services at their facility.

- **Standard Precautions:** Standard precautions training will be provided at the university prior to a student providing clinical services. Externship placements may also require students to attend their own standard precautions training prior to students providing services at their facility.
- **Hepatitis B:** Hepatitis B or a Declination Form must be submitted by the student prior to the start of practicum. If the series of vaccinations have been started but are not yet completed – or if the student opts not to have the Hepatitis B series – a Hep B Declination should be signed until the series of vaccinations has been completed. The vaccine is offered at a nominal fee by the university’s Student Health Center. Many sites may require the Hep B series.
- **Site Specific Prerequisites:** Externship sites may have additional requirements for students who are placed at their facility. Students are responsible for obtaining and paying for these required procedures and/or training. If a student does or cannot meet the qualifications of a site, then an alternative site will be sought if possible. If not possible, this could extend a student’s program. Common possible requirements are as follows:
 - Physical examination
 - Flu shot
 - Drug screen
 - Personal health insurance
 - Immunization records
 - CPR certification
 - Federal background check
 - COVID vaccination and booster

PROCEDURES FOR CLINICAL ROTATION SELECTION AND PLACEMENT

Students will be assigned to a minimum of two off-campus placements during their graduate program. These field placements occur during the final three semesters of a student’s program. Placements will provide a wide variety of experiences to ensure that students have a range of experiences.

SITE INFORMATION FORMS

On CALIPSO, a list of sites with information about each facility is available. Students have access to this information and can learn about sites that are available in Arkansas and nationwide. The Site Information Forms provide documentation about what is required at the site, whether or not the affiliation agreement is current, and caseload information.

NEW SITES

If a student wants to request a clinical site that is not listed on the Site Information Form list, then they may request that particular site when completing the form, “Suggestions for Off-Campus Placements.” This form will be distributed by the Clinic Director and specific deadlines for submission will be provided.

Students should not contact sites on their own. Any requests for site placement whether in state or out of state, should go through the clinic director. Suggestions should be listed in order of

preference and submitted to the clinic director by the due date provided. Students are allowed to request a maximum of two new clinical sites per semester.

Any new clinical site requested by a student cannot be guaranteed as a placement. Due to the nature of the affiliation agreement process, there will be facilities or agencies who may be unwilling or unable to sign the affiliation agreement. If an agreement cannot be signed, the student will be notified. Also, if sites are slow to respond to inquiries regarding placement or the affiliation agreement process, attempts to secure the site may also be terminated. A good faith effort will be made to secure new sites, but there is not a guarantee. Students should be prepared in the event that a placement cannot be established so that other arrangements can be made.

Students going out of state will be notified at least a month prior to placement regarding whether or not the placement is secured. In the event that an agreement is not established, the student will be expected to complete the semester in the Central Arkansas area and must arrange to do so. It should also be noted that sites can change their minds due to unforeseen events and can decline taking a student at the last minute. If this occurs, the student will be expected to return to the Central Arkansas area for placement. If the student is unable to return to the Central Arkansas area for placement, it could delay their program of study.

SITE SELECTION

When considering placements, several factors are considered. These factors include:

- A. Student's prior clinical experiences, training, and performance
- B. Student's clinical hour needs
- C. Knowledge and skills relative to the site
- D. Current ASHA certification and state licensure
- E. Student's interest and request for type of site and location
- F. Quality of the site and learning environment

CLINICAL PLACEMENT ASSIGNMENTS

Prior to placement, the clinic director will verify that supervisors have current ASHA certification, have worked nine months full-time post-clinical fellowship year, and have completed the two hours of required training in the area of supervision. When clinical site assignments are made, students will receive an email from the clinic director stating the start and end date of the practicum, the name of the facility, the days of the assignment, the name and contact email of the supervisor, and initial instructions about contacting the site. These assignments are made close to the end of the semester preceding the placement semester. Central Arkansas placements are typically assigned within a 50-mile radius of where the student is planning to live during that semester.

CLINICAL ASSIGNMENT REQUEST FOR CHANGE

Once a student has been assigned to a clinical site, the student will not be allowed to change his or her clinical site assignment unless there are exceptional circumstances that exist to warrant a change. If a student believes these conditions exist, he or she should submit a Written Request for Change to the clinic director. The clinic director will take the request to the clinic committee. This

committee will consider the legitimacy of the request and a decision will be made. If the student is not satisfied with the decision of the clinic committee, the student can appeal to the chair of the department.

CLINICAL ASSIGNMENT CANCELED BY SITE

Occasionally, situations occur within a facility and the placement has to be canceled for the semester. This can happen at the beginning of the semester or anytime during a semester. The clinic director will work to find a suitable solution to the situation if this occurs.

RECEIVING ASSIGNMENTS AND MAKING FIRST CONTACT

Once decisions have been made regarding placements, students are notified in Calipso. They will also receive an email with start/end dates as well as instructions regarding when to send an introductory email/photo to their supervisor. The student should follow these instructions once they are received.

PROCEDURES AND TRAINING REQUIRED BY FACILITY

Many facilities require that students have additional procedures such as drug screenings, physical exams, background checks, and training prior to arriving for their first day. If this is the case, the student will be notified and should plan to do this.

REVIEW OF SITE INFORMATION

Clinical supervisors are required to complete the Site Information Form that is located on the CALIPSO site. These forms include information about the facility, pre-requisites, and a description of the client population served at the facility. Students should review this information to prepare for their clinical experience.

CALIPSO PREPARATION

Students are required to update their contact information in CALIPSO at the beginning of each semester and throughout the semester if anything changes. This includes information regarding their clinical rotations for the semester. This information should be completed by the end of the first full week.

ATTENDANCE

Students are expected to demonstrate professional behavior while at their externship sites. Attendance and punctuality are essential components of a student's professional behavior. Students are expected to be present and on time at their externship sites on their scheduled days. Students are allowed to miss up to three days during the semester without having to make them up. Any additional days missed will need to be made up at the end of the semester. These three days are intended for emergencies or personal business and not for vacation. Missed days do not include any days missed due to a clinical educator's absence.

Any time that a student is absent from his or her site for any reason, the student must notify the Clinic Director on the day of the absence (or prior, if possible). This notification

should include the date of the absence, whether the student or the clinical educator is absent, and how many absences the student or clinical educator has accrued for the semester. For example, if the student is absent, the notification should include the student's name, date of absence, and total number of student absences: **Sally Smith, June 5, 2022, 2 absences**. If only a half day is missed, then the student can specify ½ day. If the clinical educator is absent, the notification should include the student's name, date of absence. and total number of clinical educator absences: **Sally Smith, June 5, 2022, 2 absences for clinical educator**.

Students should never arrange with their externship clinical educator to be out. Any non-emergency requests must be made through the Clinic Director.

BLACKBOARD

The student is able to gain access to Blackboard through the MyUCA portal. It is linked to a student's clinical practicum course number. Students will be asked to upload assignments to Blackboard throughout the semester.

CHECKING UCA EMAIL

Students should check and respond to their UCA emails at least twice per day, Monday through Friday.

WEEKLY CLINIC SCHEDULE

Off-campus assignments are made for specific days of the week. All assignments are assumed to be for the entire day. The entire day means that the student is at the facility for the length of the day that is required by the supervisor. The start and ending times can vary according to the facility but is typically an 8-hour day.

HOLIDAYS AND BREAKS

During field assignments, the students will observe the facility's holidays and not the university holidays. For example, if a student is placed at a medical facility during the spring semester, the student is expected to be at their site during spring break since medical facilities do not close for spring break.

NAME BADGE

Students should wear their name badge at all times when working with clients or patients. The only exception is when a facility has their own name badge that the student is asked to wear. All name badges should identify the individual as a student.

CELL PHONE USAGE

Cell phones should be turned off and placed out of sight when doing fieldwork. Only breaks or lunchtime are appropriate times to have cell phones out and visible.

WEARING A WATCH

All students should wear a watch to their sites. Most sites are very reliant on schedules and the length of sessions so a watch is necessary to be on time for the next session. Do not rely on your cell phone to keep up with the time.

CLEAR REPORTS (Clinical Learning Experiences and Reflections)

These reports describe therapy and diagnostic experiences at the site, highlight key discoveries, describe important practices learned, and indicate any need for follow up by the clinic director. These reports are turned in monthly by uploading them to Blackboard for the clinic director to review. These CLEAR reports provide a context for the student to reflect on experiences that he or she has had. They also allow the program to learn about experiences that each student is having at their sites. The template can be found on CALIPSO. If a student is placed at two or more sites, one CLEAR form is completed with a different font used for each site and each entry. Each successive report builds on the previous one.

CLOCKHOURS

Students are required to post clock hours obtained through their practicum on a weekly basis. The department uses the CALIPSO software system to manage student's placements and clock hours. It is the student's responsibility to keep up with these hours in a methodical and accurate way prior to posting these hours on CALIPSO. Students are required to obtain a minimum of 375 clock hours overall and a minimum of 325 clock hours while enrolled in their graduate program. These clock hours must show depth and breadth of experiences across the lifespan, with culturally and linguistically diverse populations, and vary in complexity of the disorders.

It is expected that students log clinical hours weekly and submit them to their clinical educator for approval. Students are responsible for correctly logging hours (number and type of hours obtained) and logging hours in a timely fashion. Students are also responsible for monitoring the type of hours earned over the course of the graduate program. Specific instructions on how to log hours in CALIPSO are reviewed during orientation.

STUDENT EVALUATION PROCEDURES

Students enrolled in clinical practicum will be formally evaluated on their clinical performance at least twice each semester. The CALIPSO performance evaluation allows the student to be rated in the following areas:

- Evaluation Skills
- Treatment Skills
- Professional Practice, Interaction, and Personal Qualities

CALIPSO ratings are based on a 5-point scale. Supervisors rate all skills that the student has demonstrated for each of the disorder areas in evaluation, treatment, and professional practice, interaction, and personal qualities. The rating is based on the student's skill performance and the level of support that is provided by the supervisor.

Rating	Skill Performance— Student	Level of Support— Supervisor
5	Independent	Skill is consistent and well developed. Student can modify own behavior as needed and is an independent problem-solver. Student can maintain skills with other clients and in other settings, when appropriate. (Skill is present >90% of the time).
4	Developing Mastery	Skill is developed/implemented most of the time and needs continued refinement or consistency. Student is aware and can modify behavior in-session and can self-evaluate. Problem-solving is independent. (Skill is present 76-90% of the time).
3	Present	Skill is present and needs further development, refinement or consistency. Student is aware of the need to modify behavior. (Skill is present 51-75% of the time).
2	Emerging	Skill is emerging but is inconsistent or inadequate. Student shows awareness of need to change behavior with supervisor input. (Skill is present 26-50% of the time).
1	Early Emerging	Skill is not evident most of the time. Student requires direct instruction to modify behavior and is unaware of need to change. (Skill is present <25% of the time).

(Adapted from: Vanderbilt University, Department of Hearing and Speech Sciences; University of Georgia Speech and Hearing Clinic Supervision Rating Scale Continuum.)

GRADING POLICY

Clinical practicum grades will be derived from a student's final, overall rating for the semester. The grading policy and scale are as follows:

Clinical Practicum Semester 1:	Clinical Practicum Semester 2-5:
A = overall rating of 3.5 and higher B = overall rating of 3.0 – 3.49 C = overall rating of 2.75 – 2.99 D = overall rating of 2.5 – 2.74 F = overall rating of below 2.5	A = overall rating of 4.0 and higher B = 3.5 – 3.99 C = 3.0 – 3.49 D = 2.5 – 2.99 F = below 2.5

If a student receives below a B for practicum, the practicum must be retaken and the clinical hours will not be counted. A Remediation Plan of Action will be developed after a meeting with the Clinic Director. Additional factors may impact a student's practicum grade, including completing required assignments, completing requested documentation, weekly reporting of clinical hours, and other clinical practicum responsibilities. Failure to submit these assignments in a timely and complete manner may result in a reduction of the final grade, depending on the quality and tardiness of the submission.

CLINICAL EDUCATOR/SUPERVISOR FEEDBACK

At the end of each semester, students will complete a Supervisor Feedback Form for each of their clinical educators in CALIPSO. This is a crucial element in helping educators achieve excellence in supervision and gives the program one of the elements needed to evaluate the effectiveness of the clinical placement. Students may evaluate their educators beginning on the Monday of the final week of the practicum and prior to their individual final appointment with the Clinic Director at the end of each semester. Clinical educators receive this feedback once it has been reviewed by the Clinic Director.

LINES OF COMMUNICATION

In the event that the student has a concern regarding the clinical education support and/or clinical performance, the student may do the following in a hierarchical order:

Step 1: The student should directly discuss the concern with the clinical educator. A discussion with the clinical educator should include information about individual learning style and suggestions about the most beneficial learning style for the individual student clinician.

If the concern is not resolved:

Step 2: The student should contact the Clinic Director, who will in turn hold a meeting with the clinical educator and the student. The Director will act as a facilitator and may include the Departmental Chair in this, or subsequent meetings. If the concern is in regard to the Clinic Director, the student should contact their faculty advisor to act as the facilitator.

If the concern is not resolved:

Step 3: The student should contact the Chair of the Department. Additional meetings with the clinical educator, the Clinic Director, and the Department Chair may take place.

COMPLETION OF PRACTICUM

Once clinical practicum is completed for the semester, students will meet with each of their supervisors (diagnostic, therapy, screening, etc.) to make sure:

- a. All documentation has been completed. This includes the client's active file for those students on campus.
- b. All clock hours have been entered and approved.
- c. Performance evaluations have been reviewed and finalized.
- d. All materials have been returned.

EXTENSION OF PLACEMENT

Students will follow established start and ending dates of the practicum. In cases where illness or emergencies impact attendance, the student should immediately be in contact with the Externship Coordinator. If a student is unable to complete a practicum due to illness or emergencies, a plan will be developed.

REMEDIATION PLAN OF ACTION (R-POA)

If a student receives a rating below a 3.0 on any areas within the Evaluation Skills or Treatment skills by the end of the semester, then the Clinic Director will consult with the student's clinical educator(s) to determine if there is a concern. If a concern is expressed, a Remediation Plan of Action (R-POA) will be developed. This plan will be implemented as soon as possible and could include many possibilities for remediation, depending on the areas and skills of concern. Among other options, this may include special assignments, a change in placement for the following semester, or a specially-designed practicum in the on-campus clinic. If a student is placed outside of the Central Arkansas area for the next semester, the student may be required to remain in Central Arkansas. The decision will be made by the Clinic Director in collaboration with the clinic committee. A R-POA may also extend a student's program of study or delay his or her graduation date.

If the student fails to perform at a level of 4.0 or higher in any area within the Preparedness, Interactions, and Personal Qualities section by the end of the semester, then the Clinic Director will consult with the student's clinical educator(s) to determine if there is a concern. If a concern is expressed, a R-POA will be developed as described above for the areas of concern.

DISMISSAL FROM CLINICAL PRACTICUM

Several factors can cause a student to be dismissed from clinical practicum. Some of these are listed below, but this is NOT an exhaustive list. In the event that there is a concern, the clinic committee will review the concerns and make recommendations to the full faculty about how to proceed. The student will be notified in writing once a decision is reached regarding the student's situation. These factors might include:

- ❖ A student who is in violation of the Professional Dispositions and Essential Functions document
- ❖ A student in violation of HIPAA
- ❖ A student who is unable to complete an established remediation plan by the due date
- ❖ A student who has been asked to leave their off-campus clinical site due to unprofessional behavior

CHAPTER 4: CLINICAL FACULTY GUIDELINES

CLINICAL FACULTY OVERVIEW

Clinical faculty focus principally on excellence in instruction and engagement providing clinical education and experiences in their areas of specialty. Clinical faculty have autonomy in designing and developing clinical experiences for students that are consistent with program and professional standards. In addition to instructional responsibilities on campus, clinical faculty also may be professionals in a practice site and provide clinical education of students; collaborate and develop professional relationships with industry and governmental agencies; and/or coordinate internships, co-ops, service learning and other student activities outside the classroom.

VETTING CLINICAL SITES

Sites often inquire about the possibility of providing practicum experiences to UCA students. The externship coordinator will work with sites to ensure that they have the ability to provide the clinical education that is required. The site will be required to follow these steps and procedures in order to be considered for a practicum placement.

1. Identify a point of contact.
2. Have an initial meeting to discuss site history and possible opportunities.
3. Secure an affiliation agreement between both parties.
4. Identify the supervising therapist.
5. Supervising therapist must complete verification process.
6. Supervising therapist must complete orientation.
7. Supervising therapist must provide a plan of communication for clinical assignments.

CLINICAL EDUCATOR VERIFICATION/REQUIREMENTS

Individuals providing clinical education must meet degree requirements, hold the Certificate of Clinical Competence (CCC) from ASHA, state license, two hours of professional development in clinical supervision, and 9 months of full-time clinical experience post clinical fellowship. Clinical educators are responsible for submitting the required documents to the department administrative assistant. Additionally, proof of certification and licensure should be uploaded into CALIPSO. Completion of professional development should be verified through the ASHA website by each clinical educator.

SUPERVISION OF PRACTICUM

Students are distributed as evenly as possible among the clinical faculty each semester. At least 25% of each session, including screening, identification and treatment, requires direct supervision by an SLP who holds the CCC in the appropriate area; however, the program recommends 50-100% direct supervision for new graduate clinicians. More frequent supervision will be dependent upon billing requirements (ie: if treating a Medicare patient, the student must be supervised 100% of the time and be "in line of sight), as well as clinician needs as determined by the clinical educator.

CLINIC SCHEDULING FOR STUDENTS

The Clinic Director is responsible for assigning students to their respective clients, specialty programs, and diagnostic teams. Clinical educators receive notice of their assignments prior to each semester. Students receive notice of their assignments after grades are posted.

Clinical educators are responsible for orienting students to their respective clients/clinics. Clinical educators are ultimately responsible for meeting the specific needs of individual that is being served. Therefore, clinical educators should provide written documentation of expectations, conduct midterm and final evaluations, and provide verbal and/or written feedback to ensure quality client care.

CLINIC SCHEDULING FOR PATIENTS

The Clinic Director works with the Clinic Administrator for facilitating client appointments. This includes sharing information about clinical services offered, registration, and billing.

END-OF-SEMESTER PAPERWORK

At the end of the semester, clinical educators are responsible for submitting the required clinic paperwork to document clinical competencies met by students. This includes completing a final evaluation of each supervised student on CALIPSO. Clinical educators are also asked to finalize all client files by completing the client file checklist and clinical recommendation forms. This ensures that all documents are present in each client file and it provides a way for the clinic administrator to schedule current clients for ongoing treatment/diagnostic needs.

CLINICAL EDUCATION TRACKING SYSTEM

The CSD department uses the CALIPSO software to manage documentation for clinical education experiences. Clinical educators must provide verification of supervision eligibility, completion certificate for 2 hours of continuing education in the area of supervision, their ASHA number, and email address to the Clinic Director in order to generate the PIN to be used for registration. Once clinical educators receive a PIN, he/she will be able to register as a clinical educator for CALIPSO. Instructions for registering as a user of CALIPSO will be attached in the email containing the registration PIN. All clinical educators must register as a user for the specific program in which he/she is supervising. Having access to CALIPSO via one graduate program does not grant access to other programs.

VERIFYING CLINICAL HOURS

Clinical educators are expected to approve clinical hours tracked and submitted by students on a weekly basis through CALIPSO. Hours submitted to clinical educators by students should contain the appropriate identifying information. Hours submitted should be closely monitored by clinical educators for accuracy. Clinical educators should keep in mind that clock hours will be credited to a clinician's practicum experience when they obtain a grade

of B or better in each practicum experience. Clock hours will not be recorded for practicum experiences in which a grade of C or lower is obtained. If a grade of C or lower is obtained during a practicum experience, a Remediation Plan of Action may be developed as described in the “Clinical Practicum: Student Evaluation Procedures” section.

STUDENT EVALUATION PROCEDURES

The Clinical Skills Competency Form (CSCF) was designed to collect information regarding a student’s professional and interpersonal skills. Students enrolled in clinical practicum will be formally evaluated on their clinical skills competency at least twice each semester through CALIPSO. Clinical educators and clinicians complete the appropriate sections of the form at mid-term and at the conclusion of the semester to determine a rating which reflects the independence and competence of the clinician during each practicum experience. The CSCF ratings/grades will be used to determine attainment of the competencies on the KASA. Grades of B or better will indicate attainment of the appropriate KASA knowledge and skills. However, grades of C or lower will indicate that those competencies have not been attained.

Clinical Practicum grades will be derived from a combination of demonstrated clinical growth and the evaluation of skills in the areas of preparation, clinical behavior during therapy/assessment sessions, evaluation skills, interpersonal relationships, and personal qualities. Students will receive mid-term and final evaluations. The CALIPSO performance evaluation allows the student to be rated in the following areas:

- Evaluation
- Intervention
- Preparedness, Interaction, and Personal Qualities

CALIPSO ratings for Evaluation; Intervention; and Preparedness, Interaction, and Personal Qualities are based on a 5-point scale:

1 = Not Evident/Not Met: Skill has been taught; however, specific repeated direction from clinical educator/supervisor does not alter unsatisfactory performance, or specific repeated direction/demonstration is required to perform clinical skills and to accurately evaluate self/client (Skill is present <25% of the time)

2 = Emerging/Not Met: Specific supervisory direction results in some generalization and application of knowledge to perform competently and to accurately evaluate self/client (Skill is present 26-50% of the time)

3 = Present/Met: General and some specific supervisory direction results in competence and accurate evaluation of self/client (Skill is present 51-75% of the time)

4 = Consistent/Met: Demonstrates independence but some supervisory direction needed to perform competently and accurately evaluate self/client (Skill is present 76-90% of the time)

5 = Exceptional/Met: Demonstrates independence by taking initiative; displays superior competencies and accurately evaluates self/client (Skill is present >90% of the time)

CALIPSO ratings for Professional Practice are based on a “Met or Not Met” rating. If a student earns a mark of “Not Met” in this section, the clinical educator is responsible for counseling the student regarding the unsatisfactory performance and sharing that information with the UCA Clinic Director. The CSD faculty is responsible for closely monitoring that specific skill to ensure student success. Should the student continue to demonstrate unsatisfactory performance with the same skill and receive another mark of “Not Met”, the student will be required to meet with the Clinic Director and a Remediation Plan of Action will be developed.

The overall practicum grade is determined by averaging and weighing the individual ratings scores based on the number of hours obtained from clinical educators. A graduated grading scale based on expected skill level is used to determine the overall rating and practicum grade for clinical performance.

The CSCF ratings/grades will be used to determine attainment of the competencies on the Knowledge and Skills Assessment (KASA). Grades of B or better will indicate attainment of the appropriate KASA knowledge and skills. However, grades of C or lower will indicate that those competencies have not been attained. If a grade of C or lower is obtained during a practicum experience, a Remediation Plan of Action will be developed.

STUDENT EVALUATION OF CLINICAL EDUCATORS

Clinical educators are evaluated at the end of the semester by graduate clinicians. These evaluations are submitted through CALIPSO. Course evaluations are previewed by the Clinic Director before being shared. Clinical educators are expected to monitor and adjust teaching styles to meet the needs of the students.

Clinical educators who receive consistently poor ratings may be asked to complete professional development geared toward effective teaching/clinical supervision and submit proof of training to the UCA Clinic Director.

PROFESSIONAL INFRACTION

Students are expected to know and abide by the standards outlined in the UCA Clinical Practicum Handbook as well as the ASHA Standards and Code of Ethics. Students who are non-compliant may receive written notice of any violations while in clinical practicum via the Essential Functions Violation Form. Clinical educators should immediately discuss any infraction with the Clinic Director. The Clinic Director will determine the consequence of the infraction and will write it up according to departmental policies and procedures using the Professional Practice and Essential Functions Report (Appendix D). Any infraction given to a student should be reflected in CALIPSO on the final evaluation.

FACULTY MEETINGS

Clinical faculty are represented by the Clinic Committee. The Clinic Committee typically meets once or twice a month to discuss issues related to clinical education. Day and time of clinical faculty meetings vary by semester. Department faculty meetings are held 1-2 times monthly. Clinical faculty are expected to attend department faculty meetings. External clinical educators are encouraged to bring any suggestions or concerns directly to the Clinic Director and he/she will present those concerns to the Clinic Committee.

CLINICAL PRACTICUM

Weekly meetings are held during all semesters in which clinicians are assigned to on-campus practicum. Day and time of meetings vary by semester. Meeting topics include clinic business as well as preparatory models of education to assist clinicians prior to being placed in externship sites. These models include but are not limited to: Clinical Methods Module, Public School Module, and Medical Module.

MATERIALS REQUESTS

Clinical faculty in need of resources/materials for their particular clinic may request items by using the Clinic Purchase Request Form found in the pool drive. The request will be reviewed and approved by the Clinic Director before being routed to the Departmental Chair. The Departmental Chair has the ultimate authority to approve any purchase requests.

PART-TIME CLINICAL EDUCATORS

The following guidelines apply to all off-campus clinical educators (CE):

- The off-campus clinical educator is expected to provide the student with clinical orientation, observation, and practicum that is as consistent as possible with the student's clinical interests, needs and capabilities and with the facility's caseload, space, equipment, staff, and client management policies and procedures.
- The off-campus clinical educator to whom the student is assigned is expected to hold a current ASHA Certificate of Clinical Competence in the appropriate area. ASHA requires that we obtain verification of each educator's current ASHA membership and state licensure. The clinical educator is expected to update this information in CALIPSO.
- The clinical educator at the facility is expected to supervise a minimum of 25% of the work being done by the student clinician. However, our program encourages at least 50% direct supervision. Supervision should be adjusted according to student need.
- Supervision should be appropriately scheduled throughout the duration of the off-campus assignment. Supervision should be adjusted according to billing guidelines. For example, if a student is treating a Medicare patient, supervision must be 100% and the supervisor must be in line-of-sight.
- The off-campus educator is expected to communicate with the assigned department liaison for monitoring of the supervisory process and if necessary, schedule phone calls or face-to-face visits for review of the student's performance

and progress.

- The off-campus clinical educator should expect access to risk management information and liability insurance.
- The off-campus clinical educator understands that the student, while not being considered an employee of the facility, will be subject to all of the facility's policies and procedures and will be directly responsible to the off-campus clinical educator and/or the department liaison.
- The off-campus clinical educator is expected to monitor and approve hours submitted via CALIPSO.
- The off-campus clinical educator is expected to provide frequent and consistent feedback to students regarding their clinical performance. Clinical educators will also provide formal evaluations at midterm and the end of the semester.
- The off-campus clinical educator is expected to have 2 hours of professional development/continuing education in clinical instruction/supervision prior to mentoring.

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APPENDICES

APPENDIX A

AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION CODE OF ETHICS
SEARCH LINK
Revised 2023

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

AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION SCOPE OF
PRACTICE IN SPEECH-LANGUAGE PATHOLOGY
Revised 2016

<https://www.asha.org/policy/SP2016-00343/>

APPENDIX B (Client Forms)

Client Bill of Rights
AUDIOLOGY OR SPEECH-LANGUAGE PATHOLOGY SERVICES

UCA SPEECH-LANGUAGE-HEARING CENTER

Clients as consumers receiving audiology or speech-language pathology services have:

1. THE RIGHT to be treated with dignity and respect;
2. THE RIGHT that services be provided without regard to race or ethnicity, gender, age, religion, national origin, sexual orientation, or disability;
3. THE RIGHT to know the name and professional qualifications of the person or persons providing services;
4. THE RIGHT to personal privacy and confidentiality of information to the extent permitted by law;
5. THE RIGHT to know, in advance, the fees for services, regardless of the method of payment;
6. THE RIGHT to receive a clear explanation of evaluation results, to be informed of potential or lack of potential for improvement, and to express their choices of goals and methods of service delivery;
7. THE RIGHT to accept or reject services to the extent permitted by law;
8. THE RIGHT that services be provided in a timely and competent manner, which includes referral to other appropriate professionals when necessary;
9. THE RIGHT to present concerns about services and to be informed of procedures for seeking their resolution;
10. THE RIGHT to accept or reject participation in teaching, research, or promotional activities;
11. THE RIGHT, to the extent permitted by law, to review information contained in their records, to receive explanation of record entries upon request, and to request correction of inaccurate records;
12. THE RIGHT to adequate notice of and reasons for discontinuation of services; an explanation of these reasons, in person, upon request; and referral to other providers if so requested.

Adopted by ASHA 11/93

Attendance Policy
UCA Speech Language Hearing Center
University of Central Arkansas

Your attendance is vital to making progress! We hope that coming to our Clinic and being on time is a priority for you. In the event that you are unable to be present for a session, please contact your clinician directly, or notify the clinic office at 501-450-3176, and your clinician will be informed.

- Patients who call or arrive greater than 20 minutes after their originally scheduled appointment time will be considered a no show and will not receive treatment at that time.
- If a third no show or cancellation/reschedule with no 24-hour notice should occur, the patient may be dismissed from the clinic unless extenuating circumstances exist.
- Attendance of overall sessions must remain at 80% regardless of cancellation notice.
- Sessions missed will not be made up.
- The clinic will close due to inclement weather (tornadoes, snow, flooding). If it is unsafe for you to travel to UCA due to weather, please do not do so. During the Fall and Spring semesters, if Conway Public Schools close or move to virtual or AMI days, then the UCA SLHC will also close. In Summer, the client must make the decision about the safety of travel due to weather. Sessions missed for inclement weather will not be made up.
- Clients will only be billed for sessions attended.
- If a participant misses a special program session, those sessions will not be made up.

Signature/Date

Authorization for Release of Protected Healthcare Information

UCA Speech Language Hearing Center
University of Central Arkansas

In compliance with the Health Insurance Portability and Accountability Act (HIPAA), the Speech Language Hearing Center of the University of Central Arkansas requires your written consent before releasing or disclosing any personal information. Your consent to share this information may be withdrawn in writing at any time, as long as such documents are specific as to information covered, dated, and signed.

COMPLETE ONE FORM FOR EACH REQUEST

I, _____, on behalf of _____ D.O.B. _____
(print name) (client's name)

request that the:

- University of Central Arkansas Speech Language Hearing Center
- _____ (Provider/Business/Institution Name)
_____ (Address)
_____ (Phone)
_____ (Fax)

Release the following information from my/client's record: (Check all that apply)

- Progress Reports (from date: _____ to date: _____)
- Treatment Plan (from date: _____ to date: _____)
- Diagnostic Reports (from date: _____ to date: _____)
- Other: _____ (from date: _____ to date: _____)

This information is to be released to:

- | | |
|---|---|
| <input type="checkbox"/> UCA Speech Language Hearing Center
University of Central Arkansas
201 Donaghey Avenue, Box 4985
Conway, AR 72035-0001
Phone #: 501-450-3176
Fax #: 501-450-5474 | <input type="checkbox"/> _____
Provider/Business/Institution Name

Address

City/State/Zip

Phone Number

Fax Number |
|---|---|

Client/Guardian's Signature

Date

Clinical Agreement

UCA Speech Language Hearing Center
University of Central Arkansas

My signature on this form indicates that I fully understand and agree with the following terms and conditions:

1. I hereby grant the UCA Speech-Language-Hearing Center permission to render appropriate services to the client.
2. I understand that services rendered at the UCA Speech-Language-Hearing Center are performed by graduate students in the UCA CSD Department under the direct supervision of faculty who hold Arkansas state licensure and a current ASHA certificate of clinical competence.
3. I hereby release UCA Speech-Language-Hearing Center, UCA and its trustees, and officers from all responsibility in case of illness or injury of any kind to the above-named client during provision of services.
4. I understand that under the provisions of the Privacy Rule of HIPAA, that protected health information may not be disclosed without my written authorization. I have been provided with the Notice of Privacy Rights and I understand my rights under the Privacy Rule.
5. I hereby give my consent to the UCA Speech-Language-Hearing Center to record via audio or videotape the client for use in analyzing the client's communication abilities and in the training of speech-language students at the University of Central Arkansas.
6. The UCA Speech Language Hearing Center does not and shall not discriminate in the delivery of professional services or in the conduct of research and scholarly activities on the basis of gender, race or color, ethnicity, religion, spiritual beliefs, national origin, age, familial status, socioeconomic background, sexual orientation, disability, political beliefs, intellectual perspective, genetic information, military status, or other factors irrelevant to participation in its programs.
7. I understand that the client's current records will be kept for 6 years and that only a summary document will be kept after the sixth year for up to 10 years.
8. I understand that I am financially responsible to the UCA SLHC for all charges for services rendered. I agree that UCA SLHC may take all of the following actions regarding amounts owed to the clinic: a. Contact me via telephone at any telephone number provided, b. Leave voicemail or answering machine messages for me, c. Send emails or text messages to any account or number provided, or d. Use pre-recorded voice messages or an automatic dialing device to contact me.
9. I hereby grant the University of Central Arkansas Speech-Language Hearing Center permission to release client to the following persons:

Name

Name

Signature of client /legal guardian

Date

UCA SPEECH-LANGUAGE-HEARING CENTER

Notice of Privacy Practices

This is the Department of Communication Sciences and Disorders Notice of Privacy practices and describes how the Speech-Language-Hearing Center may use and disclose your protected health information (PHI) and how you can access this information. Please review this information carefully. The Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule requires that we protect the privacy of health information that identifies clients, or when there is reasonable basis to believe the information can be used to identify a client. This Notice describes your rights as a client and our obligations regarding the use and disclosure of PHI.

Uses and Disclosures Statement

- We may use or disclose your PHI without your authorization or opportunity to agree or object in order to treat you, obtain payment, or operate the UCA Speech-Language -Hearing Center. These disclosures can be made electronically, in writing or orally.
- Other uses and disclosure may be made without your authorization or opportunity to agree or object if the law requires us to disclose PHI.
- In most situations not associated with treatment, payment or operations, we may use or disclose your PHI only with your written authorization.
- Students enrolled in the department will have access to PHI on a need to know basis.
- The Federal Educational Rights and Privacy Act (FERPA), state law, and professional ethics also protect the privacy of a UCA student's PHI when they are more stringent than HIPAA.

Examples of Uses and Disclosures for Treatment –Authorization Not Required

- We may disclose PHI regarding treatment, coordination, and management as it relates to services related to speech, language, swallowing, or hearing disorders.

Examples of Uses and Disclosures to Obtain Payment- Authorization Not Required

- We may use and disclose your PHI for payment related activities as it is related to (1) submitting forms with your name, birth date, address, insurance, social security number, diagnoses, and procedures performed; (2) responding to inquiries for purposes of obtaining payment.

Examples of Uses and Disclosures to Operate the UCA Speech-Language-Hearing Center- Authorization Not Required

- We may leave telephone messages asking that you return our call.
- We may share PHI with organizations that assess the quality of care that we provide, E.g.: accreditation agencies.
- We may provide PHI to you as needed to supply you with information about your diagnosis or treatment.
- We may communicate with you about your treatment alternatives or other health related benefits and services.

Your Rights

You have the following rights regarding your PHI, and the UCA Speech-Language-Hearing Center must act on your request within 60 days.

- You may request restrictions on certain uses and disclosures of PHI, but we are not required to agree to a requested restriction.
- You may request access to PHI in alternative communication format and/or location.
- You may request to inspect and/or request a copy of your own PHI.
- You may request that your information be amended.
- You may revoke your authorization, except to the extent that we have acted upon it.

Our Responsibilities

- The law requires us to maintain the Privacy of PHI.
- The law requires that we provide individuals with Notice of our Privacy Practices.
- The law requires that we abide by the terms of the Notice of Privacy practices and provide notice of revisions.
- The law requires that we limit the disclosure of any patient to the minimum necessary for the immediate purpose.

Questions/Concerns

For more information about the Policy on Privacy Practices contact the UCA Speech-Language-Hearing Center, Box 4935, University of Central Arkansas, Conway, AR 72035 (501) 450-3176.

Complaints

If you believe your privacy rights have been violated you may submit a complaint in writing to the department chair at the address listed above or Office of Civil Rights U.S. Department of Health and Human Services 233 N. Michigan Ave. Suite 250. Chicago IL 60601. No one will act against you for filing a complaint.

Frequently Asked Questions Regarding Evaluations

What is the purpose of the appointment?

The purpose of the appointment is to evaluate speech, language and hearing skills, to learn whether or not there is a problem, to study the nature of the problem, to determine whether or not therapy is indicated at this time, to make preliminary plans for therapy if it is recommended and to provide helpful suggestions.

How long will it take?

You can expect to spend approximately 1 ½ to 4 hours at our facility. If the assessment requires more than 2 hours, clients may be asked to schedule multiple dates.

How much will it cost?

Charges will be based on the type of assessment performed. Fees will range from \$3.00 to \$56.00 and will be based on the annual fee schedule for the SLHC. In some instances, insurance claims may be submitted.

What will be done during the evaluation?

We will talk with you (and/or your child), observe you (your child) in a variety of tasks, check your (your child's) hearing, and discuss our findings with you.

What will you tell me?

We will discuss the results of our evaluation with you and indicate whether or not therapy is advisable at this time. If therapy is recommended, we will discuss the alternatives available to you here and elsewhere.

What do I have to do to get ready for the appointment?

We will schedule the appointment only after we have received the required documentation. Documentation includes but is not limited to registration forms, case histories, and any former evaluations that have been completed. Please work with the clinic administrator to submit all necessary documents.

What is the purpose of the Information Release Form?

This authorizes us to obtain information, when appropriate, from other agencies or professionals who have seen you (your child). If we receive these reports prior to the appointment, we will have a broader range of information to consider in helping you or your child. Of course, this information will be treated in a confidential manner.

What if I find that I cannot keep the appointment after it has been made?

Remember, this time is reserved for you alone. If you find that you will be unable to keep your appointment, call us at (501) 450-3176 immediately, so that we can substitute someone else in your place. You can also indicate whether or not you want us to make an appointment for you at a later date. If it is necessary for you to call, please ask to speak with the SLHC Clinic Administrator.

Where is the UCA Speech-Language-Hearing Clinic located?

The clinic is located in the Integrated Health Sciences building on the campus of the University of Central Arkansas. Please utilize the following address for GPS:

2200 Bruce Street
Conway, AR 72035

We follow ADA compliance regarding building accessibility.

Where can I park?

Parking is available in the back of the Integrated Health Sciences building. Please park in the purple-lined spots labeled client parking only. We will provide a parking decal for you to hang in your car for your designated times.

APPENDIX C (Clinician Forms)

Attendance Record Example
UCA Speech-Language-Hearing Center

Client #: _____
Semester: Fall

Schedule: (day & time) M/W _____
Student/Supervisor: _____

Date	Present	Length of Session	Absent	Reason for Absence
Wed-Sept 2				
Mon - Sept 7			X	Labor Day
Wed-Sept 9				
Mon-Sept 14				
Wed-Sept 16				
Mon-Sept 21				
Wed-Sept 23				
Mon-Sept 28				
Wed-Sept 30				
Mon-Oct 5				
Wed-Oct 7				
Mon-Oct 12				
Wed-Oct 14			X	ArkSHA
Mon-Oct 19				
Wed-Oct 21				
Mon-Oct 26				
Wed-Oct 28				
Mon-Nov 2				
Wed-Nov 4				
Mon-Nov 9				
Wed-Nov 11				
Mon-Nov 16				
Wed-Nov 18				

Speech-Language-Hearing Center (SLHC) Emergency Procedures Summary

General Information

- ◆ In the event of an alarm or official notice to evacuate the building, use the nearest exit and stairway.
- ◆ Do not use elevators.
- ◆ Take keys and cell phone if possible.
- ◆ Secure offices if possible.
- ◆ Evacuate the building and gather at the grassy lot between Thompson Hall and Burdick Hall.
- ◆ Follow directions by UCA PD, Conway Fire Department, or other emergency responders.
- ◆ If possible, assist persons with disabilities or special needs. If unable to assist, notify emergency responders of locations and numbers of disabled/special needs persons in the building.
- ◆ Do not return to the building until authorized by UCA PD; cessation of alarm does not mean it is safe to re-enter the building.

Active Shooter

- ◆ Take shelter in a room that can be locked. Close and lock all windows and doors. Turn off lights. Exit the building only if safe to do so.
- ◆ Get down on the floor and ensure no one is visible from outside the room.
- ◆ Call 911. Advise the dispatcher of the events, your location, remain in place until authorized by UCA PD.
- ◆ If an active shooter enters your office or classroom, remain calm; call 911 and leave the line open.
- ◆ If the shooter leaves the area, proceed immediately to a safe place and do not touch anything.

Earthquake | Tornado | Severe Weather

- ◆ Move to a designated shelter area, preferably the audiology booths in the audiology lab.
- ◆ Stay away from windows.
- ◆ Fire doors in hallways should be closed.
- ◆ Remain in a safe area until authorized to leave.
- ◆ Evacuate when authorized and stay clear of any damaged areas, fallen debris, or downed power lines.

- ◆ Follow directions by UCA PD, Conway Fire Department, or other emergency responders.

Power Outage

- ◆ Turn off and unplug computer.
- ◆ Use the lighted emergency exits to move to a safe area.

Bomb Threat

- ◆ Evacuate the building to the grassy lot across Bruce street and between Thompson and Burdick Halls.
- ◆ Do not use cell phones or radios.
- ◆ Report unusual objects to UCA PD, but do not touch.
- ◆ Do not return to the building until authorized by UCA PD; cessation of alarm does not mean it is safe to re-enter the building.

Fire

- ◆ Activate the nearest fire alarm pull station and call 911 or the Conway Fire Department @ 450-6147.
- ◆ Evacuate the building to the grassy lot across Bruce street and between Thompson and Burdick Halls.
- ◆ Do not return to the building until authorized by UCA PD; cessation of alarm does not mean it is safe to re-enter the building.

Suspicious Person

- ◆ Do not physically or verbally confront the person.
- ◆ Do not let the person into the room or building.
- ◆ If the person is inside, do not block their access to an exit.
- ◆ Call 911 and give the dispatcher information about the person and direction of travel.

Suspicious Object

- ◆ Be aware of normal surroundings.
- ◆ Do not touch or disturb object.
- ◆ Call 911.
- ◆ Notify faculty or staff immediately.
- ◆ Be prepared to evacuate.

Confidentiality, Video/Audio Recording Agreement

UCA Communication Sciences and Disorders/Speech-Language-Hearing Center

As an employee, student-employee/student clinician, I acknowledge that I may have access to highly sensitive and confidential personal, medical, student, or workplace information. I may receive this information directly from individuals or indirectly from third parties who may provide this to me for work related purposes. I further agree that I will maintain the confidentiality of personal medical information and information contained in patient/student records. Information I receive of a confidential or personal nature will be used or disclosed to others only when it is legally permissible to fulfill the essential requirements of my job/clinical practicum assignment, and then on a strict need- to-know basis.

As a condition of my employment/participation in clinical practicum, I agree to the following (*initial each line before printing, signing, and dating below*):

CONFIDENTIALITY

- _____ I agree to maintain strict confidentiality about the details of the sessions and performance of any participant(s). Failure to maintain confidentiality will be considered a violation of the Health Insurance Portability and Accountability act (HIPAA).
- _____ I understand that clients may be discussed with supervisors, faculty members, and students only when such discussions serve a clinical or educational purpose. Clients are not to be identified or discussed with friends, roommates, or any other person outside of the clinic.
- _____ I understand that client chart(s) may NEVER be taken from designated areas or left unattended.
- _____ I understand that written drafts of reports and other client information containing any personal health information must be shredded and not placed in trash cans. I agree to take these items to the location where they can be properly disposed.
- _____ I understand that client information cannot be entered into any web-related tools or artificial intelligence software.

The UCA Communication Sciences and Disorders/Speech-Language-Hearing Center offers high quality audio/video to provide multiple learning opportunities through a digital recording system named VALT. The department requires graduate students give consent to the use of audio and video recording of their individual or group sessions for educational purposes.

VIDEO/AUDIO RECORDING USE

- _____ I authorize UCA CSD/SLHC to audio and video record my performance during clinical activities which include clinical sessions, simulations, screenings, and assessments.
- _____ I understand that video records will be used for educational purposes. Educational purposes include providing feedback to students to improve their performance, formally assessing student achievement and/or competency, evaluating and improving college or program curriculum, evaluating and improving our teaching assessment processes using human and non-human simulations, grievances and scholarly purposes.

_____ I understand that video recordings are maintained on a private network server. Video recordings are accessible only with appropriate credentials.

_____ I understand that UCA CSD/SLHC will not release or make publicly available any recordings or portions of recordings made during individual sessions. All video recording viewing is limited to individuals with a legitimate educational need.

_____ I understand that the audio/video recordings may be permanently deleted at the discretion of UCA CSD/SLHC.

_____ I agree to only access video recordings that are pertinent to my educational experience. Furthermore, I will not observe live recordings of any other sessions that are not directly related to my educational experience.

LIMITED CONSENT (only initial if you want to provide limited consent)

_____ *I consent to video/audio recordings for self-evaluation and therapeutic purposes related to client care. However, I do not consent to having my image used for research or classroom-based educational learning.*

_____ **Printed Name**

_____ **Signature**

_____ **Date**

Professional Dispositions, Behaviors, and Essential Functions Policy

The *Professional Dispositions and Essential Functions Policy* is provided to undergraduate CSD students during their junior and senior years. These students will be asked to sign that they have read the policy and understand it. Master's students will be provided the policy when they are informed that they have been accepted for admission to the graduate program. Admission to the master's program is contingent upon completion of the form. The form must be signed before students begin their program of study, which affirms they have read the policy, understand it, and possess the required skills and traits. Signed copies will be maintained in each student's advising file.

UNIVERSITY OF CENTRAL ARKANSAS The Department of Communication Sciences and Disorders Required Professional Dispositions, Behaviors, and Essential Functions

The Department of Communication Sciences and Disorders (CSD) offers undergraduate and graduate programs to prepare individuals for clinical practice as speech-language pathologists. Speech-language pathologists provide diagnostic and therapy services to infants, children and adults with speech, language, hearing, swallowing and cognitive communication disorders. CSD students must have sufficient intellectual ability and physical ability to meet the curricular and clinical demands of the programs. Also, students must be proficient in oral and written English and possess certain non-academic dispositions, behaviors and essential functions expected of professionals engaged in clinical practice.

The Council of Academic Accreditation of the American Speech-Language-Hearing Association (ASHA) accredits professional training programs and requires that program graduates be qualified to deliver entry-level clinical services. Accredited programs must provide evidence that their graduates have acquired the knowledge and skills necessary for the Certificate of Clinical Competence (CCC) and possess the *non-academic* professional dispositions, behaviors, and essential functions for clinical practice. However, completion of the UCA program does not guarantee that a student will receive the CCC offered by ASHA.

Because the CSD Department is dedicated to training professionals who possess the intelligence, integrity, compassion, communication, and the intra- and inter-personal qualities necessary to practice effectively, faculty have adopted the following list of required dispositions and essential functions for CSD students. *These are mandatory for admission to, retention in, and completion of the master's training program.* Failure to meet the required professional dispositions, behaviors, and essential functions can be cause for immediate dismissal or other lesser consequences. The consequences for violations of the required Professional Dispositions, Professional Behaviors, and Essential Functions Policy will be determined by the CSD faculty.

Required Professional Dispositions, Professional Behaviors, and Essential Functions

- 1. Professionalism:** The ability to maintain appropriate hygiene, dress, and demeanor and to follow departmental policies, procedure, and ASHA's Code of Ethics.
- 2. Collaboration:** The ability and willingness to work together with students, faculty, & clients.
- 3. Trustworthy:** The ability to be reliable, honest, and responsible in dealings with peers, faculty/staff, and clients and caregivers.
- 4. Respect:** The ability to demonstrate consideration and regard for self and others regardless of ethnicity, age, sexual orientation, gender, or religious affiliation.
- 5. Reverence for Learning:** The ability to demonstrate reverence for knowledge, experience, and being prepared for academic and clinical responsibilities.
- 6. Emotional Maturity:** The ability to control emotions by exhibiting appropriate social behavior in the classroom and clinic and during other departmental activities and interactions.
- 7. Flexibility:** The ability to accept and adapt to change.
- 8. Sensory/observational Ability:** The ability to visually and auditorily identify typical and disordered fluency, articulation, voice, resonance, respiration, oral and written language, hearing and balance, swallowing, cognition, and social interactions related to communication.
- 9. Social-pragmatic Ability:** The ability to demonstrate social awareness and the communication skills (both verbal and nonverbal) that are necessary for establishing rapport with clients, conducting clinical sessions, counseling clients and interacting with colleagues, faculty, and other professionals.
- 10. Oral and Written Language (receptive and expressive) Ability:** The ability to demonstrate facility with oral and written language, (reading, writing, spelling) sufficient to meet curricular and clinical demands.
- 11. Physical Ability:** The ability to participate in classroom and clinical activities for a defined workday and manipulate equipment for the purpose of assessment and treatment (e.g. medical equipment, Alternative Augmentative Communication devices, hearing aids, test protocols, etc.) in a safe and efficient manner.

Individuals, who are candidates for admission to the master's program, who feel they may not possess the above noted professional dispositions, behaviors, and essential functions, should contact the Chair of the Department of Communication Sciences and Disorders. Any admission candidate, who may require academic accommodations to fulfill the essential functions due to a disability is encouraged to contact the Office of Disability Resource Center at (501) 450-3613. The Department of Communication Sciences and Disorders at the University of Central Arkansas seeks to ensure that qualified persons with disabilities are not denied admission or subject to discrimination in admissions. The Department is committed to support students with disabilities, who may require reasonable academic accommodations to complete their course of study.

APPENDIX D (Supervision Documents)

Calipso Instructions for Supervisors

CALIPSO INSTRUCTIONS FOR CLINICAL SUPERVISORS

- Before registering, have available your **1)** CALIPSO Registration PIN (provided via “CALIPSO registration” email sent by no-reply@calipsoclient.com or perhaps alternatively provided by the program Clinical Coordinator), **2)** ASHA card, **3)** state licensure card, and **4)** teacher certification information if applicable. If possible, have available scanned copies of your certification and licensure cards for upload during the registration process.
- Go to your student’s school’s unique login URL provided in the CALIPSO registration email, or go to <https://www.calipsoclient.com/uca>
- Schools are listed alphabetically; locate your student’s school, and click on the school name link.
- Click on the “Supervisor” registration link located below the login button.
- Complete the requested information and click “Register.”
- On the following screen, again complete the requested information and click “Save” at the bottom of the page. A “Registration Complete” message will be displayed and you will automatically be logged into CALIPSO.

Step 2: Login to CALIPSO

- For subsequent logins, go to your student’s school unique login URL provided in the CALIPSO registration email, or go to <https://www.calipsoclient.com/uca>, locate your student’s school, and login to CALIPSO using your 8-digit ASHA number and **password that you created for yourself during the registration process (Step 1)**.

Step 3: View Clinical Assignment / Select Student

- From the Supervisor’s lobby page, use the class selection dropdown menu at the top of the page to choose the appropriate class/cohort for your student and click **Change** to activate that cohort.
- Click the **View > Student Information** link.
- Click the **Clinical Assignments** link to view contact information and other details about a new student assignment.
- Or, to locate your student if not assigned via Clinical Assignments, use the “Add Student of Interest” dropdown menu to select your student and then click **Add**.

Step 4: View Student Clock Hour Records

- Click on “Clockhours” then “Experience Record” to view a summary of clock hours obtained and clock hours needed.
- Students may be required to gain a minimum of (20) hours in the evaluation and treatment of children and adults for both speech and language disorders which is summarized in the table at the bottom of the page.
- Please note the student’s Clinical Competency Level (I, II, or III) on the page header if applicable.
- Print/save clock hour record by clicking “Print Experience Record.”
- Click “Student Information” located within the blue stripe to return to the student list.

Step 5: View Student Cumulative Evaluation

- Click on “Cumulative evaluation” to view a summary of your student’s clinical competency across the 9 disorder areas.
- Upon completion of the clinical program, students must obtain a competency score set by the program for all clinical skills listed on the form.
- Please make note of any areas of deficiency (highlighted in orange.)
- Click “Student Information” located within the blue stripe to return to the student list.

Step 6: View Student Immunization and Compliance Records

- Click “Compliance/Immunizations” to view a record of compliance and immunization documents.
- To create a document to save and/or print, click “PDF.”
- An electronic file of the original documents can be accessed, if necessary and if uploaded by the Clinical Coordinator, by clicking “Files” located within the blue stripe.
- Click “Home” located within the blue stripe to return to the home page.

!Step 7: Complete Site Information Form

!This form will take approximately 20 minutes to complete. The bulk of the information requested is used by the graduate program to **maintain their ASHA accreditation**. This form only needs to be completed once unless the requested information changes.

- From the home page, click on the “Site Information Forms” link under the Management header.
- Click “Add new form.”
- Complete the requested information. Click “Save.”
- The new site form will post to a table. To finish completing, click on the “Edit” link in the Basic Info column. Check to see that all of the information is complete, and check the box that states “Check here to mark this section as complete.”

!Step 7 Cont’d: Complete Site Information Form

- Continue to complete the remaining 5 sections of the form by clicking on each remaining tab (Facility/Department/Student/Misc./Appendix VI-B*) and complete the requested information. After completing the information in each section, check the box that states “Check here to mark this section as complete”. Click “Save.” [*Note: Appendix VI-B tab only needs to be completed if the program you are supervising for is a new program in candidacy]
- After all tabs have been completed, click on the “Site Form List” link located near the top of the page or on the “Site Forms” link located within the blue strip.
- If any sections are incomplete, they will be flagged with a red explanation point. To complete those fields, just click on “edit” and make the necessary changes.
- Once each section is assigned a green checkmark, a “Submit” link will display within a column of the table. Click “Submit” and verify that the status changes to “Submitted.”

To Edit/Update a Submitted Form:

- To edit a previously submitted form, simply click the “Copy” link located in the next to the last column. Edit each section as necessary by clicking on the “Edit” link for the corresponding section, making changes, and clicking “Save.” Once editing is complete, click “Submit” and verify that the status changes to “Submitted.” Delete the older version by clicking on the red “X”.

Step 8: Upload Documents for Student or Clinical Administrator

- The file management feature allows you to upload any type of file (e.g. Word, PDF, JPEG, audio/video) pertinent to the clinical experience for a specific student.
- Select the desired student and then click on the “Documents” link to upload your own file and/or view a file uploaded by your student.
- **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 student and clinical administrator access or “private” for clinical administrator access only.
- **Move files** by dragging and dropping from one folder to another.
- **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 9: Complete Midterm Evaluation

- Login to CALIPSO (step two)
- Select the desired “Class” and click “change.”
- Click “New evaluation”.
- Complete required fields designated with an asterisk and press save.
- Continue completing 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, review it with the student. Type his/her name with the corresponding date as well as your name with the corresponding date located at the bottom of the page.
- Check the “final submission” box located just below the signatures.
- 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”. Students will then have access to view the submitted evaluation when logged into the system.
- To view the evaluation, click “Student Information” located within the blue stripe then “evaluations” located to the right of the student’s name.

Step 10: Complete Final Evaluation

- Login to CALIPSO (step two)
- Select the desired “Class” and click “change.”
- Click “Student Information” then “evaluations” located to the right of the student’s name.
- Identify the evaluation completed at midterm and click on “Make a duplicate of this evaluation.”
- The duplicated evaluation will appear in the evaluations list.
- Identify the duplicate (noted as “in progress”) and click on the “current evaluation” link highlighted in blue.
- Change “Evaluation type” from midterm to final.
- Complete evaluation by changing and/or adding scores for applicable skills across the Big 9 using the provided scoring method and saving frequently to avoid loss of data.
- Once the evaluation is complete, review it with the student. Type his/her name with the corresponding date as well as your name with the corresponding date located at the bottom of the page.
- Check the “final submission” box located just below the signatures.
- Click “save.”
- Receive message stating “evaluation recorded.”

Step 11: Approve Clock Hours

- At the completion of the rotation or as often as directed, your student will log their clock hours.
- An automatically generated e-mail will be sent notifying you that clock hours have been submitted and are awaiting approval.
- Login to CALIPSO (step two.)
- Click “clockhour forms pending approval.”
- Identify your current student’s record.
- Click “View/Edit” in the far-right column.
- Review hours, making sure student has entered the correct time in all disorder areas, as applicable.
- Complete the % of time the student was observed while conducting evaluations and providing treatment.
- Approve clock hours by selecting “yes” beside “Supervisor approval” located at the bottom of the page.
- Click “Save.”
- If it is determined that there are errors in the clockhour form that the student should correct, exit the form by clicking on the “Clockhours List” link at the top of the page in the blue stripe to return to the student’s Clockhours List. Click on the “Un-submit” button towards the right end of the line for the clockhour form in question. This returns the form to the student’s Daily Clockhours for the student to edit and re-submit. The student receives an email alerting them of the un-submitted form.

Step 12: View Your Supervisory Summary

- For an official record of this supervisory experience (past or present), click on the “Supervision summary” link located under the Management header on the home page.
- Select “Printable view (PDF)” to create a document to save and/or print.

Step 13: View Your Supervisory Feedback

- At the completion of the rotation, your student will complete a supervisory feedback form in CALIPSO.

- An automatically generated e-mail will be sent stating that you have feedback available to view.
- Login to CALIPSO (step two)
- Select the desired “Class” and click “change.”
- Click “Supervisor feedback forms.”
- Click “View/Edit” in the far-right column.

Step 14: Update Your Information

- Update e-mail address changes, name changes, certification expiration dates with corresponding scanned copies of your card by logging into CALIPSO (step two.)
- Click “Update your information.”
- Make changes and click “save” and/or click “Edit licenses and certification.”
- Update information and upload supporting files and click “save” located at the bottom of the screen.

Professional Disposition and Essential Functions Report

Student Name:

Date of Report:

Faculty/Clinical Supervisor(s) Present:

Location of Meeting (course # if appropriate):

Description of Incident (attach any supporting documentation as appropriate):

Functions violated:

Narrative of Meeting with Student (attach additional information as appropriate):

Student Signature: _____

Faculty/Advisor Signature(s): _____

Date of Meeting: _____