**OFF-CAMPUS CLINICAL EDUCATOR MANUAL**

**University of Central Arkansas**

**Department of Communication Sciences and Disorders**



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**Dear Clinical Educators:**

**The University of Central Arkansas Department of Communication Sciences and Disorders is committed to the provision of clinical training that will position our students to excel among future professionals. Our program could not provide quality clinical experiences without our clinical educators. We would like to express our appreciation for your willingness to pay it forward by guiding our students through their practicum education. Your clinical practicum knowledge and expertise is extremely valued and we thank you for your help with preparing our students to meet the challenges of excellence in service to our field.**

***Candice Robinson, MS, CCC-SLP***

***UCA CSD Externship Coordinator***

**CLINICAL EDUCATOR 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 verification documents to the externship coordinator.

**CLINICAL EDUCATION TRACKING SYSTEM**

The UCA CSD department uses the Calipso software to manage documentation for clinical education experiences. Clinical educators must provide their ASHA number and email address to the externship coordinator in order to receive registration instructions for Calipso. Registration instructions will be sent once verification forms have been received and approved. Registration is free and specific instructions for Calipso navigation/use is located in APPENDIX A.

**SUPERVISION OF PRACTICUM**

Students are assigned to external sites through the externship coordinator AFTER an affiliation agreement has been secured. **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 clinician needs as determined by the supervisor. Please refer to APPENDIX C for a guide that you can utilize to assist with supervising. Please note that the guide is adjustable according to the skill level of the student you’ve been assigned.

**CLINICAL SCHEDULING FOR STUDENTS**

Clinical educators are responsible for orienting students to their respective sites. Clinical educators should assist with all onboarding and provide any written documentation of expectations. An example of expectations is located in APPENDIX D.

Student experiences and completed coursework are all listed in Calipso for each clinical educator to review regarding their assigned student. Please discuss areas of need with your assigned student and consider exposure to as many of the nine areas within the scope of practice as possible. Clinical educators can arrange to have students work with other supervisors for low exposure areas, but must notify the externship coordinator in advance to ensure that the secondary supervisor has been verified before the student begins.

We know that clinical educators are working all types of schedules (10-hour days, weekends, half-days, etc.). We politely request that you provide your assigned student at least a 30-minute break during the middle of each day for lunch. Please let the externship coordinator know if that will be a problem at your setting.

**INVASIVE PROCEDURES**

In an age of changing technology and increasingly invasive procedures within the scope of our clinical practice, we have established a few new guidelines for practicum students. The purpose of these guidelines is to protect **patients/clients, the University, and Practicum Sites,** and to continue to provide valuable education to our students without placing them, or anyone else, at risk.

We, therefore, ask that when invasive evaluation and treatment procedures are utilized at your clinical site that you, the supervisor, remain as the primary clinician for those procedures and treatments, relegating the student to a secondary role for assistance and learning. As long as students are involved in the direct care of patients/clients they are able to receive hours for those visits. UCA students should not be alone/without direct supervision for such procedures. These procedures include Modified Barium Swallows/Video fluoroscopy, Fiberoptic Endoscopic Evaluations of Voice and/or Swallowing, Video stroboscopic Examinations of the Larynx, Deep Pharyngeal Neuromuscular Stimulation, and Electrical Stimulation. Of course, other such procedures may emerge in the future. If you have any questions or concerns about other procedures please feel free to contact the externship coordinator.

**ABSENCES**

A speech-language-pathology practicum student should demonstrate professional behavior while at their practicum site. Part of the display of professionalism relates to responsible attendance and punctuality. Practicum students are expected to be at their placement sites on the scheduled days that they are assigned for the entire semester.

Practicum students are allowed to miss 3 days during the semester at off campus sites for health or personal emergencies. Any *additional* days missed, will need to be made up at the end of the semester. Missed days do not include days missed due to the supervisor’s absence.

When a student is absent from his or her site for any reason, he or she will email the externship coordinator with the following information:

Date of absence

Total number of absences. (Example: Jane Doe, Sept. 3, 2nd absence).

If only a half day is missed, then the student will indicate “½ day”.

If the supervisor is absent, the student should also notify the externship coordinator of the relevant information (Date of absence, Supervisor out). Of course, students should discuss and be familiar with the most effective way to notify their supervisor if they have to be out.

**CLOCK HOUR APPROVAL**

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. Instructions on how to use Calipso can be found in Appendix B. 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 B- or lower is obtained. If a grade of B- or lower is obtained during a practicum experience, a Remediation Plan of Action may be developed as described in the “Evaluation Procedures” section.

**EVALUATION PROCEDURES**

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 (final evaluation) to determine a rating which reflects the independence and competence of the clinician during each practicum experience. The ratings/grades will be used to determine attainment of the competencies on the KASA (Knowledge and Skills Acquisition) Form. 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. See Appendix B for Skill Descriptors.

* Evaluation
* Intervention
* Preparedness, Interaction, Personal Qualities

CALIPSO ratings for Evaluation; Intervention; and Preparedness, Interaction, and Personal Qualities are based on a 5-point scale, which is described on the next page.

**CLINICAL RATING SCALE**

This rating scale is designed as a continuum with each student progressing from the Early Emerging stage to more independence. Supervisors will utilize this rating scale during the Midterm and Final Performance Evaluations. Please review these descriptions below:

**Early Emerging>>>>Emerging>>>>Present>>>>Developing Mastery>>>>Independent**

**Description of the Ratings**

**1 – 1.99 =Early Emerging**: skill not evident most of the time. Student requires direct instruction to modify behavior and is unaware of need to change. Supervisor must model behavior and implement the skill required for client to receive optimal care. Supervisor provides numerous instructions and frequent modeling. (Skill is present <25% of the time).

**2 – 2.99 =Emerging**: Skill is emerging, but is inconsistent or inadequate. Student shows awareness of need to change behavior with supervisor input. Supervisor frequently provides instructions and support for all aspects of case management and services. (Skill is present 26-50% of the time).

**3 – 3.99 =Present**: Skill is present and needs further development, refinement or consistency. Student is aware of need to modify behavior. Supervisor provides on-going monitoring and feedback; focuses on increasing student’s critical thinking on how/when to improve skill. (Skill is present 51-75% of the time). COMPETENT

**4 – 4.99 =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. Supervisor acts as a collaborator to plan and suggest possible alternatives. (Skill is present 76-90% of the time).

**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. Supervisor serves as consultant in areas where student has less experience; Provides guidance on ideas initiated by student. (Skill is present >90% of the time).

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

**GRADING SCALE**

Grades are based on weighted average clinical ratings received on the final evaluation in Calipso.

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

The clinical educator may rate knowledge and skills according to the clinical rating scale, and then realize that the number received at the bottom of the evaluation does not reflect the grade that they feel the student earned (ie: receiving a total score of 3.4 but feeling like the student deserved a B.) If/when that happens, supervisors can adjust the totals at the bottom by adding numbers to the adjustment box without having to rate skills higher in the section above. Please reach out to the externship coordinator if you have any questions regarding this adjustment feature.

**STUDENT EVALUATION OF CLINICAL EDUCATOR AND SITE**

Clinical educators and clinical sites are both evaluated at the end of the semester by graduate clinicians. These evaluations are submitted through Calipso. Supervisors are expected to monitor and adjust teaching styles to meet the needs of the students. Supervisors who receive poor ratings consistently may be asked to complete professional development geared toward effective teaching/clinical supervision and submit proof of training to the externship coordinator.

**PROFESSIONAL INFRACTION**

Students are expected to know and abide by the standards outlined in the Clinical Practicum Handbook as well as the ASHA Standard and Code of Ethics. Student who are non-compliant may receive written notice of any violations while in clinical practicum. Clinical educators are encouraged to reach out to the externship coordinator and provide in writing, examples of violations that have occurred. The externship coordinator will schedule a meeting with each educator and student to determine the appropriate course of action.

**CLINICAL EXPECTATIONS**

1. The site will have a current Affiliation Agreement with the UCA CSD department.
2. The SLP will provide orientation to the Facility.
3. The SLP will be responsible for scheduling and supervising training activities.
4. All supervisors must hold **current** CCCs in Speech-Language Pathology from the American Speech-Language-Hearing Association and state licensure. Supervisors completing their clinical fellowship year are not eligible to supervise.
5. The SLP supervisor should notify the UCA faculty contact **immediately** if there are issues or problems that emerge. Small problems handled early will not, hopefully develop into large issues.
6. The SLP will provide direct supervision in real time and must never be less than 25% of the student’s total contact time with each client/patient and must take place throughout the practicum. These minimum requirements should be adjusted upward if the student’s knowledge, experience, and competence warrants.
7. Supervisors must be on-site which is in the building, at all times when services are being provided by the student.
8. The SLP must provide frequent feedback to the student. Clinical ratings of practicum skills will be completed at mid-term and at the end of the semester by the supervisor.
9. The SLP shall monitor and approve weekly clock hour submissions to verify that direct contact hours obtained at the Facility were supervised according to the aforementioned standards.
10. The SLP shall provide and maintain records and reports required by the School to assist in following accreditation procedures. This will include copies of ASHA cards and Site information forms.
11. The site must maintain a sufficient level of speech language pathologists to carry out regular duties. Students will not be expected nor allowed to perform services in lieu of certified speech language pathologists. Students will sign all reports and documentation with the word “Student”.
12. The site will permit authorities responsible for accreditation of the School to inspect the Facility’s clinical setting and services as necessary and with the Affiliate’s permission.

**IMPORTANT DATES**

|  |  |
| --- | --- |
| **Activity** | **Date** |
| Start Date for Student | September 3, 2024 |
|  |  |
| HOLIDAYS/Students allowed off | October 17, 2024 (Fall Break) |
|  |  |
| Clinical Hours approved on Calipso website by supervisor | Each week |
|  |  |
| Midterm Performance Evaluations completed by supervisors on the Calipso website and reviewed with student | By Friday, October 11, 2024 |
|  |  |
| Final semester performance evaluation completed on Calipso website and reviewed with student | By November 21, 2024 |
|  |  |
| Last Day at site | November 21, 2024 |

**APPENDIX**

**A Calipso Instructions for Supervisors**

**B Calipso Skill Descriptors**

**C Suggested Sequence of Learning**

**D Clinical Expectations Example**

**APPENDIX A**

**CALIPSO INSTRUCTIONS FOR CLINICAL EDUCATORS/SUPERVISORS**

[**https://www.calipsoclient.com/uca**](https://www.calipsoclient.com/uca)

**DESIRED CLASS/COHORT:** Aspen Class of Summer 2025

**Step 1: Register**

* Before registering, have available your **1)** CALIPSO Registration PIN (provided via “CALIPSO registration” email sent by [no-reply@calipsoclient.com](mailto: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**](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**

* 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**](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 “Clock hours” 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.”
* 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 (optional)**

* 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** bydragging 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 “clock hour 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 clock hour form that the student should correct, exit the form by clicking on the “Clock hours List” link at the top of the page in the blue stripe to return to the student’s Clock hours List. Click on the “Un-submit” button towards the right end of the line for the clock hour form in question. This returns the form to the student’s Daily Clock hours 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.

**APPENDIX B**

**SKILL DESCRIPTORS**

The following lists are the knowledge and skills that students are rated on during mid-term and final evaluations. In Calipso, they are presented in a table format. Here, we have listed them out with examples for your reference.

**EVALUATION SKILLS**

**1. Conducts screening and prevention procedures.**

For example:

1. Selects appropriate screening tool based on age of client and disorder being screened.
2. Administers screening tool appropriately.
3. Modifies screening tool based on clients’ needs.
4. Interprets screening results correctly.
5. Makes appropriate referrals based on screening results.

**2. Performs chart review and collects case history from interviewing patient and/or relevant others.**

For example:

1. Introduces self and others to client/caregiver.
2. Outlines the purpose of the session and the sequence of events to the client and caregiver.
3. Conducts interview and elicits relevant information in an organized manner, pursues pertinent points and records all pertinent data in an accurate and non-disruptive manner.

**3. Selects appropriate evaluation instruments/procedures.**

For example:

1. Selects appropriate assessment tools taking individual needs into consideration. (e.g.,

selects materials that are developmentally appropriate).

**4. Administers and scores diagnostic tests correctly.**

For example:

1. Administers tests according to instructions.
2. Scores formal tests.
3. Uses informal testing procedures (behavioral observations, non-standardized procedures)

**5. Adapts evaluation procedures to meet patient needs.**

For example:

1. Modifies administration for formal tests when necessary including but not limited to:
2. changes order when needed,
3. instructs at level appropriate for client,
4. identifies and reacts during instruction to personal needs of client,
5. varies level of structure (spontaneous vs. clinical directed), and
6. uses behavior management techniques effectively.

**6. Possesses knowledge of etiologies and characteristics for each communication and swallowing disorder.**

**7. Interprets and formulates diagnoses from test results, history, and other behavioral observations.**

For example:

1. Synthesizes all information to formulate diagnostic impressions.
2. Formulates recommendations.

**8. Makes appropriate recommendations for intervention.**

**9. Completes administrative and reporting functions necessary to support evaluation.**

For example:

1. Writes reports in a professional manner (e.g., appropriate terminology, grammar, spelling).
2. Follows diagnostic report format used at the facility
3. Follows reporting procedures

**10. Refers clients/patients for appropriate services.**

For example:

1. Considers need for referral and/ or continued services.
2. Formulates appropriate recommendations for referral.
3. Makes appropriate referrals to other professionals.

**TREATMENT SKILLS**

**1. Develops appropriate treatment plans with measurable and achievable goals that meet clients/patients’ needs. Collaborate with clients/patients and relevant others in the planning process.**

For example:

1. Develops appropriate long-term goals.
2. Develops appropriate short-term goals/objectives.
3. Develops appropriate session objectives to meet short-term goals/objectives.
4. Plans and sequences appropriate session activities.
5. Collaborates with parents/clients/others in the planning process.

**2. Implements intervention plans (involve clients/patients and relevant others in the intervention process).**

For example:

1. Implements intervention plans (approach/techniques).
2. Involves family/client/others in the intervention process.

**3. Selects and uses appropriate materials and instrumentation.**

For example:

1. Develops or selects instructional materials, as needed.
2. Uses materials within the session.

**4. Sequences tasks to meet objectives.**

**5. Provides appropriate introduction/explanation of tasks.**

**6. Measures and evaluates clients’/patients’ performance and progress.**

For example:

1. Elicits and records information/data in an organized manner and pursues pertinent points.
2. Evaluates and interprets the client’s performance following a session.

**7. Uses appropriate models, prompts or cues. Allows for patient response time.**

**8. Adapts treatment session to meet individual patient needs.**

For example:

1. Uses behavior management techniques.
2. Identifies verbal/nonverbal cues (fatigue, off task behavior)
3. Uses verbal and nonverbal reinforcers
4. Anticipates and reacts to personal needs of clients
5. Uses allotted time.
6. Provides opportunity for optimum participation by each client.
7. Varies the level of structure imposed on the client when appropriate (e.g., spontaneous vs. clinician directed.)

**9. Completes administrative and reporting functions necessary to support intervention.**

For example:

1. Writes progress reports, daily progress notes, session plans
2. Maintains client’s files and charts

**10. Identifies and refers clients/patients for services as appropriate.**

For example:

1. Considers the need for referral and/or continued services.
2. Formulates appropriate recommendations for referral.
3. Makes appropriate referrals to other professionals.

**PROFESSIONAL PRACTICE, INTERACTION, and PERSONAL QUALITIES**

These skills are self-explanatory. Click on the ? in Calipso for detailed descriptions of some of the knowledge and skills. If you are having issues with professionalism, please contact the externship coordinator immediately for assistance.

APPENDIX C

SUGGESTED SEQUENCE OF LEARNING

(adjust as needed for skill level of student clinician)

This is a suggested scenario for guiding students through the process of learning about the facility and becoming independent practitioners. UCA recognizes that students vary in their abilities to become independent, their knowledge of the disorders, and their level of confidence. Caseload and the number of days assigned will also impact independence.

**Week 1:**

* **Orientation to facility (guidelines, rules and policies, personnel)**
* **Observation of services provided by the SLP**
* **Learning and researching therapy and diagnostic procedures utilized at site**
* **Attending conferences/staffing as an observer**
* **Co-treating with SLP**

**Week 2:**

* **Continuing observation of services provided by the SLP**
* **Co-treating with SLP for more sessions than previous week**
* **Reviewing paperwork, charts, billing notes, etc.**
* **Attending meetings as an observer**

**Week 3:**

* **Able to provide therapy for approximately ½ the caseload**
* **Beginning to learn and administer diagnostic tests and screening instruments**
* **Writing progress notes, charting, etc.**
* **Beginning to demonstrate flexibility in time management and scheduling**

**Week 4:**

* **Taking initiative to work with a new client/patient**
* **Able to provide therapy for ½ to ¾ of the caseload**
* **Able to administer diagnostic tests**
* **Able to understand and plan treatment for client/patient**

**Week 5:**

* **Able to interpret diagnostic tests**
* **Able to carry ¾ of the caseload**
* **Able to administer diagnostic tests and interpret the results**

**Week 6:**

* **Able to carry almost a full load at the site**
* **Comfortable with administering a diverse battery of tests**
* **Able to complete documentation needed for each client/patient seen**

**Week 7 (mid-term) to the end:**

* **Able to carry a full load on the days at the site**
* **Able to complete paperwork necessary for the facility**
* **Able to participate in staffing meetings, conferences, in-services**

**APPENDIX D**

**CLINICAL EXPECTATIONS EXAMPLE**

**Supervisor: Candice Robinson, M.S., CCC-SLP**

**Contact Info:** [**crobinson@uca.edu**](mailto:crobinson@uca.edu) **Phone: 501-450-5776**

My goal this semester is to assist you in developing and refining your clinical management skills. I will assist you in the analysis of treatment, development and maintenance of clinical records, and execution of professional communication. I look forward to watching your confidence build with your clinical responsibility.

**Expectations**

1. We will meet as a group **weekly (same time and day)** for discussion and planning.
2. Keep a notepad in each treatment session to jot down questions that come to mind during service-delivery. Then we can address what you are thinking or questioning.
3. Apply what you’ve learned in class by bringing your ideas to our meetings.
4. Never be afraid to ask, but make sure you’ve done your homework before you do!
5. Paperwork is expected to be accurate and timely. Follow your templates and if I say to edit by stating “…,” write what I have stated. Your grade will reflect an inability to meet deadlines.
6. If I recommend something, DO IT! You are working under my license.
7. Leave your 4.0 mindset at the door. Clinic grades are reflected differently.
8. Give your best to your client EVERY session. If this were your family member, how hard would you try?
9. If you are ill and sessions must be cancelled, text me and email the clinic director. We will determine make-up sessions once you return.
10. Call the client two days prior to sessions starting to remind them of the start date/time. Be prepared to provide directions to the clinic if they are needed.

**Therapy Flow**

1. Perform testing (formal or informal) to gather baseline.
2. Establish treatment plan and get it approved by your supervisor.

**WEEKLY (Turn in session plans by Thursday at midnight.)**

1. **Establish session plan and get it approved by your supervisor.**
2. **Begin and complete session.**
3. **Clean therapy room. (Clorox wipe all materials used.)**
4. **Mark attendance in the EMR.**
5. **Formulate SOAP for each session and get it approved by your supervisor.**
6. **Turn in Calipso Hours for the week in the appropriate categories by Monday at 8am.**
7. Complete final progress report and get it approved by your supervisor.
8. Hold an end of semester conference with client/caregiver to review the final progress report.

**First supervision meeting with me:**

* Complete a full review of the client file. Know the following:
  + What is the diagnosis?
  + What are the deficit areas?
  + What tests were given? Do any new tests need to be performed based on the recommendations of the previous progress note?
  + What were the recommendations from the previous clinician?
* Are there any new areas that need to be targeted?
* Be prepared to tell me the rationale that you want to use as evidenced based practice with this client.
* Check that the client’s hearing screening and diagnostic reports are not more than one year old.If so, then we will need to perform diagnostic measures prior to starting treatment.
* Prepare some sample Long-Term and Short-Term goals that you think might need to be addressed. Utilize the goal-writing form to assist you.

**What you can expect from me:**

1. Feedback, written and/or verbal.
2. Guidance through choices and questions.
3. Constructive feedback regarding ALL previously mentioned areas of professionalism.
4. Availability within reason. If I am here and available, come in. If I’m not, please request a specific meeting time. Please text or call me if there’s an issue during the week and I will work something out with you.
5. Be prepared for my presence in your sessions. It’s not necessarily due to performance. I may see something that I think needs to be immediately addressed or think of something to try based on the responses you are receiving.

I want you to be informed and prepared to impact those you serve. Thank you for allowing me to share my experience with you! I look forward to a wonderful semester!

*We very much appreciate your expertise and the depth and breadth of knowledge you bring to our students.* **If there are any questions or assistance needed, please do not hesitate to contact the externship coordinator. Thank you for investing in the clinical education of UCA CSD graduate clinicians!**

