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Department of Speech & Hearing Science  
The Ohio State University Speech-Language-Hearing Clinic

Graduate Handbook – Vol. II

Clinic Policies and Clinical Requirements for Certification

Revised August 15, 2021

## Preface

On behalf of The Ohio State University Speech-Language-Hearing Clinic, the clinical preceptors and clinic staff welcome you as you begin your clinical education at The Ohio State University. As you begin your professional preparation in the field of Speech-Language Pathology, we look forward to facilitating your clinical education experiences. We hope to give you many “tools” that will empower you in this process. This handbook is the first of many resources. It is designed to assist you with information related to the clinical aspects of our graduate programs (e.g., Speech and Hearing Science Clinical Seminars in Hearing Disorders, 6751, 6752, 6753, 6754, 6755, 7742, and 6844/7844) and in your pursuit of meeting standards for state licensure and/or national certifications. The information is intended to outline expectations during Clinical Seminars in Speech and Language Disorders 6751, 6752, 6753, 6754, 6755, or 7742, and 6844/7844 enrollments as well as the policies, procedures, and clinical operations of the Ohio State Speech-Language-Hearing Clinic. Another specific resource for Clinical Seminars in Speech and Hearing Disorders, (6751, 6752, 6753, 6754, 6755, 7742, and 6844/7844) courses is the Carmen website.

It is your responsibility to closely review this information and use it to guide your clinical experiences. Doing so will facilitate an excellent experience for clients/patients, will allow for appropriate clinical operations, will provide a good transition from one clinician to another, and promote a successful learning experience.

The Ohio State University Speech-Language-Hearing Clinic provides graduate clinicians the opportunity to obtain clinical experience in a business-oriented environment. This clinical environment allows for professional preparation not only in clinical service provision, but also in related aspects of speech-language pathology and audiology, including managed care, marketing, and quality management. With these learning opportunities come responsibilities and expectations similar to those that will be encountered in other professional work settings. Providing supervised services to clients/patients and their families in this clinic is a privilege afforded to graduate clinicians, and you will be expected to operate in a professional manner at all times. Consequences for violations of clinic policy are enforced uniformly for all clinical personnel and are similar to those that would be encountered in other work settings.

After reviewing this handbook, if you are uncertain about a procedure/policy or if you have a specific concern, you should ask/inform someone who has the ability to address these issues—your clinical preceptor, clinical advisor, or clinical director. The most successful interactions come from being well-informed and maintaining ongoing communication with the clinical staff.

Your clinical preceptors are more than willing to discuss your individual clinical cases with you. Go to them, but be willing to start the discussion with the information that this handbook provides along with other constructive information that you have gathered from your academic courses and previous clinical experiences.

We wish you the best of success in your educational endeavor.

Gail M. Whitelaw, PhD  
Clinic Director

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## **Clinic Handbook for MA SLP Graduate Students**

The guidelines, policies, and procedures in this handbook apply to all clinical settings for the duration of your time in the program. Throughout your clinical experiences, you are under the auspices of The Ohio State University Department of Speech & Hearing Science (SHS) and The Ohio State University Speech-Language-Hearing Clinic (OSU SLHC). You are expected to adhere to all policies and procedures outlined in this handbook, those provided to you in your Speech-Language Pathology Practicum and Clinic Seminars, and those posted on Carmen.

The OSU SLHC is a non-profit university clinic associated with The Ohio State University. It is located on the first floor of Pressey Hall, 1070 Carmack Road, Columbus, OH 43210. The mission of the OSU SLHC is to improve the quality of life of all individuals with communication difficulties, to provide cost-effective services that meet the unique needs of the client and their family, and to promote excellence in clinical training and education of future hearing-speech-language professionals.

The organization of this handbook mirrors the general sequence of events and requirements as students enter and progress through the program, starting with prerequisites for enrollment and moving through active participation in clinical placements. ***Matriculating students are expected to read the entire document prior to beginning the program.*** Please use the Table of Contents to refer to specific sections. The handbook and the checklist are intended to complement one another and aid in keeping track of all requirements for graduation and certification.

## Section 1: Prerequisites for Enrollment

### 1.1 – Prerequisite Academic Coursework

- A. All graduate clinicians must complete all required undergraduate-level coursework prior to the start of the program. For students who attended The Ohio State University for their undergraduate education, this includes completing all SHS Clinical Seminars in Speech & Language and/or Hearing Disorders in the sequence offered.
- B. Students who have been admitted on a “conditional” basis or graduate non-degree-seeking students are not eligible to enroll in **Speech-Language Pathology Practicum and Clinic Seminars** (see [Section 3.2](#)) until all of the prerequisite coursework has been completed. For more details, please refer to Volume I of the Graduate Handbook.
- C. MA SLP graduate clinicians wishing to enroll in any audiology coursework must obtain the permission of the instructor.

### 1.2 – Clinical Observation Hours

- A. All graduate clinicians must complete at least 25 hours of guided clinical observation by the end of Autumn Semester, Year 1. Some incoming graduate students will have completed these during the course of their undergraduate degree. For those who have not, guidelines for meeting this requirement will be provided during clinic orientation (aka Bootcamp).
  - a. See [Section 9.1](#) for instructions on how to observe sessions in the OSU SLHC.
- B. Graduate clinicians must keep signed documentation of guided observation hours on file in their **Graduate Clinician Folder**. See [Section 2.1](#) for more information on the **Graduate Clinician Folder**.
- C. Appropriate documentation of observation hours must also be logged in the **CALIPSO** online tracking system by the end of Autumn Semester of Year 1. All graduate clinicians are required to purchase a membership in **CALIPSO** for a one-time fee of \$85.00.
  - a. Graduate clinicians may create their account by following this link: <https://www.calipsoclient.com/osu/account/login>.
  - b. During clinical placements, graduate clinicians will be expected to log clinical hours and submit them to their clinical preceptors each month.
  - c. Further training on how to use the **CALIPSO** system will be provided at clinic orientation, during clinic advising meetings, and in your meetings with your assigned clinical preceptor.

### 1.3 – Knowledge of Professional Standards and Administrative Rules

- A. Graduate clinicians enrolled in Speech-Language Pathology Practicum and Clinic Seminars are expected to read, understand, and follow:
  - a. American Speech Language Hearing Association (ASHA) Code of Ethics: <http://www.asha.org/Code-of-Ethics/>.
  - b. Ohio Speech-Language-Hearing Association (OSLHA) Code of Ethics: <https://www.ohioslha.org/code-of-ethics/>.

- c. Ohio Law and Administrative Rules Governing the Practice of Speech-Language Pathology and Audiology: <<http://slpaud.ohio.gov/lawsandrules.stm>>.
- B. Once accepted into the program, students are required to meet and maintain the standards listed in the SHS Department Technical Standards [document](#).
- C. Each student must verify that all Technical Standards can be achieved with or without accommodations. Students who require accommodations are responsible for making their status known to the Office of Student Life Disability Services (SLDS) at The Ohio State University.
  - a. Students can find information about these services including eligibility and accommodations [here](#).
  - b. Accommodation requests for clinical placements must be documented on the **Accommodation Request Form** from the OSU SLDS, discussion with each clinical preceptor and approved by each clinical preceptor.
- D. Students with disabilities (including mental health, chronic or temporary medical conditions) that have been certified by the Office of Student Life Disability Services should inform all instructors and clinical preceptors of their needs each semester.
  - a. Students need to meet with instructors and clinical preceptors to review the proposed accommodations at the start of each term.

#### 1.4 – Knowledge of Health Insurance Portability and Accountability Act of 1996 (HIPAA)

- A. The OSU SLHC uses the “Privacy Rule”, a provision of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), which went into effect on April 14, 2003.
  - a. HIPAA formalizes expectations for all health professionals to follow regarding patient rights and for safeguarding identifiable health information. More information on HIPAA can be found here: <<https://www.hhs.gov/hipaa/for-professionals/privacy/index.html>>.
  - b. Specific questions or concerns regarding HIPAA compliance should be directed to the Clinic Director, who serves as the HIPAA privacy officer for the clinic.
- B. Graduate clinicians participating in clinical practicum in the OSU SLHC are trained in HIPAA Privacy regulations prior to beginning clinical practicum and will be expected to uphold privacy guidelines thereafter.
  - a. The training will be offered via a BuckeyeLearn online module.
  - b. After completing the BuckeyeLearn online module, the student must download the corresponding certificate and place it on file in their **Graduate Clinician Folder or uploaded in Carmen**.
  - c. Practicum or externship sites may require that graduate clinicians participate in additional training or site-specific training prior to beginning their practicum placement.
- C. Graduate clinicians may also be required to participate in training in Family Educational Rights and Privacy Act (FERPA) regulations, which apply primarily in public school and University settings.

#### 1.5 – Adequate Spoken and Written English Skills

- A. Graduate clinicians must demonstrate adequate spoken and written American English skills and speech/language skills.

- a. If a graduate clinician needs assistance with spoken and written American English, they should notify their clinical and academic advisors as soon as possible.
  - b. Graduate clinicians who are non-native speakers of English are required to receive a 550 (PBT – Paper-Based Test) / 79-80 (iBT – Internet-Based Test) along with a speaking subtest score of >28 on the TOEFL test or its equivalents (IELTS – International English Language Test System of >70, or etc.), and obtain minimum criteria of 4 on the Oral Proficiency Assessment offered through the English as a Second Language (ESL) Department at Ohio State.
  - c. For students with marked pronunciation difficulties, tutoring is available through the ESL department. However, dialectal and/or accented variations of English are expected and acceptable in proficient English speakers.
  - d. ASHA recommends that all students consider seeking resources for improving their writing skills, since inadequate writing skills are pervasive and problematic among the student population irrespective of cultural or linguistic background.
- B. All graduate clinicians are expected to use speech and language skills that reflect professionalism, which includes avoiding the use of slang and curse words in clinical settings.

### **1.6 – Technology Skills**

- A. All graduate clinicians wishing to participate in clinical practicum must have strong technology skills, particularly with Apple or Windows 10 computers and Microsoft applications (which are used in the OSU SLHC). Documents due to OSU SLHC preceptors should be submitted in Microsoft Word format.
- B. Each graduate clinician will be expected to use technology extensively across clinical settings for report writing, diagnostic, and treatment purposes. It is the graduate clinician’s responsibility to acquire appropriate technology skills and equipment prior to enrollment.
- C. Throughout the program, important messages will be conveyed via email (Microsoft Outlook) and via Carmen, OSU's online course management system.
  - a. See this link for more information about Carmen:  
<https://resourcecenter.odee.osu.edu/carmencanvas/getting-started-canvas-students>.
- D. Graduate clinicians may be required to access online training modules to prepare for their clinical placements. Many of these training modules are offered on the BuckeyeLearn website.
  - a. See this link for more information about BuckeyeLearn:  
[https://ohiostate.csod.com/LMS/catalog/Welcome.aspx?tab\\_page\\_id=-67&tab\\_id=-1](https://ohiostate.csod.com/LMS/catalog/Welcome.aspx?tab_page_id=-67&tab_id=-1).

### **1.7 – Time Management Skills**

- A. Effective time management skills are essential to successful participation in the wide range of clinical opportunities available at OSU and in the surrounding community.
- B. The time required to complete coursework and clinical assignments can exceed a standard 40-hour work week, depending on assigned placement(s) and other responsibilities.



- C. In light of this fact, it is strongly recommended that a graduate clinician design a long-term plan for the entire degree program in order to maintain a balance of clinical and academic responsibilities. This long-term plan should include:
  - a. Coursework/course load
  - b. Clinical assignments (including travel time to placements)
  - c. Graduate Administrative/Research/Teaching Assistant (GAA/GRA/GTA) assignments
  - d. Non-department job responsibilities
  - e. Topic specialization/thesis
  - f. Personal needs (e.g., sleep, exercise, meals).
- D. This plan will prove useful when filling out the **CF-02: SLP Clinic Request Form** each semester (see [Section 6.1](#)). Specific requests regarding clinical assignments and schedules may be conveyed to the OSU SLHC Placement Coordinator via this form.
- E. Students should be aware that taking on several major commitments (e.g., GAA/GRA/GTA assignments, non-department jobs, specialized placements, etc.) may increase the number of academic terms necessary to obtain their graduate degree.

## 1.8 – COVID-19 Policies and Procedures

- A. Along with the Graduate Handbook Vol. II, each graduate clinician received the “Speech-Language Pathology Protocols for Clinic Re-Opening amid COVID 19 Pandemic.” This document will be updated for both SLP and audiology and provided to you when the Autumn 2021 semester begins. The title will change to reflect the combined document. You are expected to follow all policies and procedures in that document including, but not limited to:
  - a. Hand hygiene
  - b. PPE
  - c. Disinfection Procedures
  - d. General administrative operating procedures
  - e. Patient screening procedures
  - f. Graduate clinician screening procedures prior to entering the building and if one were to begin feeling ill when in the OSU SLHC
  - g. Report positive COVID-19 test to Clinic Advisor and Clinic Director
  - h. Follow all return to clinic/work procedures

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## Section 2: Documentation Required to Participate in Clinic

### 2.1 – Summary of Required Documentation

- A. Each graduate clinician will be given an e-version of a **Graduate Clinician Folder**. They will submit their documentation in Carmen via assignments throughout clinic orientation.
- B. Current versions of the following documents must be filed in the **Graduate Clinician Folder**:
  - a. Policy acknowledgement statements, including:

- i. Code of Ethics/Employment (see [Section 1.3](#))
- ii. Technical Standards (see [Section 1.3](#))
- iii. Absenteeism (see [Section 5.3](#))
- iv. Child Abuse (see [Section 9.10](#))
- b. Signed receipt of the **CF-25: Code of Ethics Clinical Form**
- c. HIPAA training certificate (see [Section 1.4](#))
- d. Signed record of observation hours (see [Section 1.2](#))
- e. Signed record of undergraduate client contact hours (if applicable)
- f. **CF-125: Guided Observation Form** (if applicable)
- g. Acknowledgement of completed and passed FBI/BCI background check (see [Section 2.2](#))
- h. Immunization Record (see [Section 2.3](#))
- i. Health Insurance verification (see [Section 2.4](#))
- j. CPR certification (see [Section 2.5](#))
- k. Universal Precautions training certificate (see [Section 2.6](#))
- C. **Graduate clinicians are expected to keep all documentation up-to-date and provide required information to clinical placement sites as requested.** Failure to do so may delay or preclude clinical assignments.
  - a. Questions and concerns should be directed to the OSU SLHC Placement Coordinator/Clinic Advisor.

## 2.2 – Background Check and Non-Conviction Statement

- A. Graduate clinicians must complete a non-conviction statement as part of the criminal record/ background check conducted by the University (BCI&I and FBI). This statement certifies that the graduate clinician has not been convicted of or pleaded guilty to child abuse or other crimes of violence set forth in Section 5104.09 of the Ohio Revised Code.
  - a. The non-conviction statement should be included in the **Graduate Clinician Folder**.
  - b. Students who have been convicted or pleaded guilty to child abuse or other crimes of violence are not permitted to participate in clinical practicum.
- B. A state and federal background check (BCI&I and FBI) is to be completed at The Ohio State University/Human Resources in the first several weeks of the program.
  - a. Unless otherwise instructed, to ensure compliance for all clinical placements, this background check (BCI&I and FBI) must be completed on campus at the student’s expense three times throughout the program.
  - b. Students will need to get background check clearance for a wide range of patient ages. Because of this background checks could cost up to \$125 per year (this figure is based on 2021 pricing, but is subject to change).

## 2.3 – Health and Immunization Status

- A. Graduate clinicians must provide documentation of their health status and keep it updated on an annual basis for the duration of the program.
  - a. Students must report known exposure to contagious diseases within the 6 months prior to and during their assigned clinical rotations, both to their immediate clinical preceptor(s) and to the OSU SLHC Placement Coordinators/Clinical Advisor.

- B. All immunizations required by Ohio law and recommended by the Centers for Disease Control and Prevention (CDC) **must** be up-to-date and properly documented prior to beginning the program. This includes immunizations for hepatitis B, measles, mumps, rubella, tetanus, and diphtheria.
  - a. Immunizations can be updated by a personal physician or clinic or at Student Health Services at OSU.
  - b. Immunity may require multiple spaced treatments (e.g., 3 injections of the hepatitis B vaccine distributed over 4 months). In this case, the graduate clinician is responsible for scheduling and attending all necessary appointments in the recommended sequence.
  - c. Documentation of immunizations must be maintained at the Wilce Student Health Center by uploading into the My BuckMD system and filed in the student's **Graduate Clinician Folder**.
    - i. Forms will be included in the packet of information sent to incoming graduate students during the summer prior to beginning the program.
- C. Students must comply with specific public health requirements (e.g., annual flu shots, annual Mantoux TB tests, annual physicals, drug testing, COVID-19) in order to participate in medical and/or educational clinical placements.
  - a. Some external sites require a current physical examination (within the past 12 months) that states the individual is "in good health and is free from communicable diseases."

#### **2.4 – Health Insurance**

- A. It is expected that graduate clinicians will maintain appropriate health insurance coverage. Documentation of this coverage is required by the OSU SLHC and a number of outside practicum sites and must be provided by the graduate clinician prior to beginning placement at these sites.
- B. Proof of health insurance must be placed on file in the student's **Graduate Clinician Folder** and should be updated yearly.

#### **2.5 – Cardiopulmonary Resuscitation (CPR)**

- A. Graduate clinicians are required to maintain current certification in basic cardiopulmonary resuscitation (CPR).
  - a. Documentation of current CPR certification must be kept in the student's **Graduate Clinician Folder**. A photocopy is acceptable.
- B. Training for this course can be obtained outside of The Ohio State University and must include infants, pediatrics, and adults and BLS (basic life support).

#### **2.6 – Universal Precautions**

- A. Graduate clinicians are expected to be familiar with and practice universal precautions.
  - a. All students will be educated in the proper use, storage, and disposal of personal protective equipment, including gloves, gowns, masks, and goggles.
  - b. Training in universal precautions is available through a BuckeyeLearn online module. It is also covered in the Clinical Seminars and in the Health Requirements Handbook.

- c. Upon completion of the BuckeyeLearn online module, the student must download the corresponding certificate and file it in their **Graduate Clinician Folder**.
- B. Graduate clinicians are responsible for obtaining training in specific precautions and regulations for each affiliated site to which they are assigned. They should discuss these requirements with preceptors at assigned sites.
- C. Additional precautions are being taken to ensure the safety of faculty, staff, graduate clinicians, and patients in light of the COVID-19 global pandemic. These precautions and clinic protocols are based on recommendations from the World Health Organization (WHO), Centers for Disease Control (CDC), and the Ohio Department of Health (ODH). These precautions and protocols should be implemented alongside the procedures detailed in [Section 9.6](#) and [Section 9.7](#) of this handbook and will be updated as the science of COVID-19 progresses.

## **2.7 – Professional Liability and General Liability Insurance**

- A. As of April 2009, the University provides appropriate professional liability and general liability insurance coverage for all students enrolled in our programs.
  - a. For detailed information regarding Aon Risk Services Northeast, Inc., students may request the University's Certificates of Insurance from the Clinic Advisor.
  - b. Of note, policy coverage applies to students while at the OSU SLHC or when working offsite in an internship, practicum, or work study approved by the MA SLP program. Coverage includes Licensed Professional Liability for students on a claims-made basis.
- B. Given this coverage, students do not need to purchase their own professional liability insurance in order to participate in clinical experiences at the OSU SLHC. However, an external site may require students to provide additional professional liability insurance at their own expense.

## **2.8 – Continuing Education Units (CEUs)**

- A. Graduate clinicians are strongly encouraged to obtain continuing education units (CEUs) outside of their academic and clinical classes by attending workshops, live or online courses, and Lunch & Learn opportunities.
  - B. Obtaining additional CEUs will allow graduate clinicians to:
    - a. Recognize that additional clinical skills and knowledge must be acquired throughout one's professional career.
    - b. Seek out topic areas of specific interests and needs and increase depth of knowledge in those areas.
    - c. Become acquainted with specific on-the-job knowledge and skills that may not be covered in clinical or academic courses.
    - d. Develop a plan for continually expanding on-the-job knowledge and skills.
-

## Section 3: Speech-Language Pathology Practicum and Clinic Seminars

### 3.1 – Purpose of Graduate Clinical Coursework

- A. Successful completion of graduate clinical coursework and rotations will prepare students to meet the requirements for the State of Ohio Licensure in Speech-Language Pathology and the Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP) from the American Speech-Language-Hearing Association.
- B. Ohio State academic programs are designed to prepare students to apply for applicable licensure or certification in Ohio. If you plan to pursue licensure or certification in a state other than Ohio, please review state and educational requirements for licensure and certification and state licensing board contact information at <https://odee.osu.edu/students/state-authorization#licensure>. Ohio State makes every effort to ensure state licensure and certification information is current; however, state requirements may change. Students need to contact the applicable licensing board(s) in the state where you may want to pursue licensure or certification before beginning an academic program to verify whether a program meets educational requirements for licensure or certification in the state.
- C. In order to receive the Certificate of Clinical Competence (CCC) from ASHA, graduate clinicians must demonstrate competency in the following areas:
  - a. Speech sound production, to encompass articulation, motor planning and execution, phonology, and accent modification
  - b. Fluency and fluency disorders
  - c. Voice and resonance, including respiration and phonation
  - d. Receptive and expressive language, including phonology, morphology, syntax, semantics, pragmatics (language use and social aspects of communication), prelinguistic communication, paralinguistic communication (e.g., gestures, signs, body language), and literacy in speaking, listening, reading, and writing
  - e. Hearing, including the impact on speech and language
  - f. Swallowing/feeding, including (i) structure and function of orofacial myology and (ii) oral, pharyngeal, laryngeal, pulmonary, esophageal, gastrointestinal, and related functions across the life span
  - g. Cognitive aspects of communication, including attention, memory, sequencing, problem solving, and executive functioning
  - h. Social aspects of communication, including challenging behavior, ineffective social skills, and lack of communication opportunities
  - i. Augmentative and alternative communication modalities
  - j. See ASHA's 2020 Certification Standards, Standard IV-C for more information: <https://www.asha.org/Certification/2020-SLP-Certification-Standards/>.
- D. Current requirements for obtaining an Ohio license to practice speech-language pathology can be found at <http://slpaud.ohio.gov/>. These requirements are similar to those for the ASHA CCCs.
  - a. Graduate clinicians interested in practicing speech-language pathology in other states are encouraged to contact the relevant state licensure boards in order to review state-specific licensing requirements.

- b. In general, Ohio licensure requirements are similar to those for other states.

### 3.2 – Sequence of Graduate Clinical Coursework

- A. Graduate clinicians are responsible for registering for the correct courses each semester. They are advised to consult the curriculum information provided in Volume 1 of the Graduate Handbook and online at <https://sphs.osu.edu/grad/ma>.
    - a. Incorrectly registering for any clinical practicum course (i.e., **6844**, **7844**, and/or **6189**) will result in denial of clinical hours for that semester and may delay progression toward graduation, as the course will need to be repeated.
  - B. First-year graduate clinicians will enroll in **6844: Practicum in Communication Disorders (1 credit per semester)** and **6751, 6752, 6753, 6754, 6755: Clinical Seminar in Speech and Language Disorders (2 credits per semester)** during the first three semesters of their graduate education (Autumn, Spring, and Summer of Year 1) in addition to required academic coursework for that term.
    - a. Enrolling in **6844: Practicum in Communication Disorders** enables students to be assigned to clients in OSU Speech-Language-Hearing Clinic (OSU SLHC).
    - b. During Year 1, the **Clinical Seminar** courses (**6751, 6752, 6753, 6754, 6755**) are designed to help graduate clinicians identify their suitability for and interest in various clinical settings. They provide opportunities to:
      - i. Visit various facilities in which SLPs work, including adult and pediatric medical facilities, skilled nursing facilities, schools, private practices, and specialty settings.
      - ii. Learn more about the clinic experiences available at each site, the site's expectations of students, and best student fit. Guest speakers will be invited to lecture on these topics.
  - C. Second-year graduate clinicians will enroll in **7844: Advanced Practicum in Communication Disorders (4 credits per semester)** and **7742: Advanced Clinical Seminar (1 credit per semester)** during the remaining three semesters of their graduate education (Autumn, Spring, and Summer of Year 2), unless otherwise advised.
    - a. Enrolling in **7844: Advanced Practicum in Communication Disorders** enables students to be placed at outside clinical sites, as well as specialty placements within the OSU SLHC.
    - b. During Year 2, **Clinical Seminar** courses (**7742.01, 7742.02**) will provide students with:
      - i. Additional training in necessary areas (e.g., hearing aids).
      - ii. Opportunities for resume writing and interview practice, with the goal of preparing students to enter the workforce.
  - D. Second-year graduate clinicians who opt to complete school certification will need to register for **6189: School Placement/Internship (4 credits)** in addition to **7844** and **7742** during the semester in which they are placed in the schools.
-

## Section 4: Overview of Clinical Experiences in Speech-Language Pathology

### 4.1 – Clinic Advising

- A. Throughout the program, students will participate in both group and individual advising sessions conducted by the OSU SLHC Placement Coordinators/Clinical Advisor.
- B. The Clinical Advisor's duties are:
  - a. To inform the graduate clinician of the clinical experiences that are available through the Department of Speech and Hearing Science.
  - b. To advise the graduate clinician as to the appropriate sequence of practicum experiences based on the graduate clinician's academic background and previous clinical experience.
  - c. To approve the clinical hours that have been transferred from other training program(s).
  - d. To approve the clinical hours and competencies at the time of graduation.
- C. Although individual advising is always available, it is mandatory for each student in the Autumn, Spring, and Summer semesters of Year 2 to help determine placement needs and interests.
  - a. These meetings provide the graduate clinician with recommendations on the hours and competencies that could be met in that semester's clinical experience.

### 4.2 – Sequence of Clinical Experiences

- A. The clinical program in Speech-Language Pathology at The Ohio State University is a lock-step program with planned experiences throughout six semesters. All clinical coursework and rotations are designed to meet ASHA Certification requirements and Ohio state licensure.
  - a. Graduate clinicians will participate in a variety of screening, diagnostic, and treatment opportunities across all areas of clinical competency (see [Section 3.1B](#) for a list of the ASHA "Big 9" areas).
  - b. Assigned caseload may vary from semester to semester, depending on the quantity and nature of clinical placements. As graduate clinicians progress through the program, they can expect an increase in their clinic load.
- B. Sequence of planned clinical experiences:
  - a. Semester 1:
    - i. Completion of 25 guided observation hours
    - ii. Client(s) with OSU SLHC preceptors. Locations can include, but are not limited to: OSU SLHC (housed in Pressey Hall), local preschools, and local private schools.
  - b. Semester 2:
    - i. Client(s) with OSU SLHC preceptors. Locations can include, but are not limited to: OSU SLHC (housed in Pressey Hall), local preschools, and local private schools.
  - c. Semester 3:
    - i. Clients with OSU SLHC preceptors, possibly in specialty clinics.
  - d. Semester 4:
    - i. Medical OR Public Schools Rotation. Typically, half the class will do a medical rotation and half will do a school rotation.
    - ii. Other settings (e.g., private clinics, specialized programs in schools).

- iii. Clients with OSU SLHC preceptors in specialty clinics.
  - e. Semester 5:
    - i. Medical OR Public Schools Rotation. Typically, the groups switch from Semester 4. Those who had a school rotation move to a medical rotation, those who had a medical rotation move to a school rotation.
    - ii. Other settings (e.g., private clinics, specialized programs in schools).
    - iii. Clients with OSU SLHC preceptors in specialty clinics.
  - f. Semester 6:
    - i. An additional rotation in an area of interest. Placement priority is given to graduate clinicians who need to complete various hours and/or competencies across the nine disorder areas, as defined by ASHA Standards (see [Section 3.1B](#)) to qualify for graduation and eligible for certification.
    - ii. Clients with OSU SLHC preceptors in specialty clinics.
    - iii. Additional and/or specialized clinical experiences, as designed by the graduate clinician in consultation with the Clinic Advisor/OSU Placement Coordinator.
- C. As graduate clinicians accrue competencies, students will earn outside placements. Placements will rotate each semester to enable students to gain a variety of experiences.
  - a. During the final 3 semesters, the majority of clinic experiences will be outside of the OSU SLHC. However, graduate clinicians may be responsible for regular clients and/or placed in various specialty clinics at the OSU SLHC.
- D. To augment academic and clinical experiences all graduate clinicians are required to create and maintain an account in **Simucase** during the first year of the program.
  - a. **Simucase** is a training program consisting of simulated client cases to help students practice gathering case histories, requesting documents from other professionals, selecting assessments, making treatment recommendations, and providing intervention for a variety of virtual patients.
  - b. Incoming students must pay an annual fee of \$99 (12 months, price subject to change) to participate in **Simucase**. Visit this website to get started: <<https://www.simucase.com/speech-pathology>>.
  - c. Depending on the availability of clinical placements during COVID-19, it may or may not be necessary to renew this membership during the second year in the program. The clinical advisor will keep students informed on this matter.

### 4.3 – Speech, Language, Hearing, and Cognitive Screenings

- A. Graduate clinicians will be offered opportunities to participate in various speech, language, hearing, and/or cognitive screenings at off-campus sites throughout the program. These opportunities are generally announced via email and will be governed by the same guidelines as other SHS Clinical Seminars and Practicum Experiences in Speech-Language Disorders placements.
- B. Students who choose to participate in outside screenings will be supervised by OSU clinical preceptors or by speech-language pathologists or audiologists in the community.
  - a. Time spent participating in outside screenings may **only** count toward the clock hour total required for graduation if the site preceptor holds their ASHA CCC's.



- b. If the site preceptor does **not** hold their CCC's, those hours cannot be counted toward the clock hour total. However, they may be counted toward equivalency and competency experiences. Appropriate documentation must be completed and submitted in **CALIPSO** (see [Section 1.2C](#) and [Section 6.4A-C](#) for more information on the **CALIPSO** online tracking system).
  - c. Occasionally, a graduate clinician may be contacted directly by a speech/language pathologist or audiologist to assist with a screening opportunity. The graduate clinician should discuss this opportunity with their clinical advisor to assure that the person providing the screening has appropriate licensure and/or certification status.
- C. If a graduate clinician commits to a screening opportunity—either by contacting the clinical preceptor or by following the stated sign-up protocol—then they are expected to fulfill that commitment.
- a. If the student cannot attend due to an illness or emergency, the student must notify the relevant preceptor in advance of the screening.
  - b. In the absence of a valid excuse, failure to fulfill a screening commitment may limit opportunities to participate in future screenings and may impact future clinical placements.

#### **4.4 – Adding New Clinical Sites and Managing Existing Ones**

- A. Once a preceptor has been identified at a new clinical site, the clinical practicum coordinator ensures that the preceptor's administration is willing to support clinical education and that the facility and SLP meet certain requirements described below. This occurs through meetings with SLP preceptor and/or administration to:
- a. Identify which of ASHA's nine areas of clinical practice will be available for the student at that site.
  - b. Determine the approximate number of clinic hours in each of the nine practice areas the student would probably accrue at that site.
  - c. Establish a back-up plan if the facility has an inconsistent census to ensure that the student obtains the needed experience in that semester.
  - d. Ensure that any possible SLP preceptor holds a state license, ASHA certification, and has obtained two hours of CEUs in supervision.
  - e. Provide additional resources to the facility regarding additional CEU opportunities in clinical supervision through the Council of Academic Programs in Communication Sciences and Disorders (CAPCSD).
- B. For existing sites, experiences are monitored using the following data:
- a. Feedback about SLP preceptors obtained from students placed with that preceptor.
  - b. Feedback about the site obtained from students placed there.
  - c. Check-ins with the preceptor and facility (in-person or over the phone) by the clinical practicum coordinator.
  - d. Verification of the types of hours and experiences obtained by students, as entered in **CALIPSO**.
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## Section 5: Planning for Clinical Placements

### 5.1 – Clinic Calendar

- A. The OSU SLHC follows the [academic calendar](#). Clinical assignments in the OSU SLHC are scheduled from the first day of the academic term until the last day of finals. Please refer to the Clinic Calendar and/or **6844/7844** syllabus for exact dates.
  - a. Graduate clinicians may need to contact OSU SLHC clients/families and/or practicum placement coordinators during break times in order to be prepared for the first day of clinic as designated by the Clinic Calendar.
  - b. Although the last day of clinic is often prior to the last day of finals, students are expected to be on campus through the last day of finals in order to participate in final conferences and complete any residual documentation.
- B. First-year graduate clinicians ***are granted*** the Autumn and Spring semester breaks.
- C. Second-year graduate clinicians participating in clinical placements outside of the OSU SLHC ***are not granted*** the Autumn and Spring semester breaks. Instead, graduate clinicians are expected to follow the calendar for their assigned clinical site.
  - a. Depending on the assigned clinical site, second-year graduate clinicians are expected to work throughout the Autumn and Spring OSU semester breaks and may be required to work on some holidays (e.g., Labor Day, MLK Jr. Day, Veteran's Day).
  - b. Attendance on holidays and the day before and after Thanksgiving is determined by site preceptors. It is the responsibility of the graduate clinician to discuss this obligation with individual preceptors and to make the OSU SLHC Placement Coordinator aware of any deviations to the schedule.
- D. Graduate clinicians are expected to make all travel and needed time off plans to accommodate the academic calendar and clinic placements. This includes, but is not limited to, family events, weddings, reunions, vacations, etc.
- E. Graduate clinicians are to refer to the syllabus for the current semester requirements. Due dates will also be posted on Carmen.
  - a. It is recommended that students check these documents throughout the semester to be aware of any changes.

### 5.2 – Scheduling Requirements

- A. The Department of Speech and Hearing Science attendance policy applies to all classes associated with clinical practicum (classes: 6844, 7844, and 6189). Since these classes involve working with both preceptors and clients/patients, additional scheduling requirements are noted in this section. For your review, the attendance policy ***for academic classes*** is listed here:
  - a. Each student is expected to attend every class in order to learn the content, actively engage with the material, and participate in class discussions and labs. Penalties apply to unexcused absences and excessive late arrivals. Final course grades will be reduced 1% for each unexcused absence or

excessive late arrival. If a student will miss class due to an unexcused absence (e.g. attending a wedding, travel, etc), please let the instructor know ahead of time. Get notes from another student in the class and let the instructor know if you have any questions about the material. Only religious holidays, deaths and illnesses will be excused. If a student misses more than three classes due to illness, they will be required to provide a doctor's note for each additional absence due to illness. Professors may also choose to require a doctor's note for specific classes, such as those that contain labs where students practice administering assessments (this will be conveyed by each professor at the start of the semester). Fraudulent use of excused absences will result in a decrease of the student's final grade by one letter grade. More than one fraudulent use of excused absences will result in dismissal from the program. For every excused absence, the student will turn in a 300-400 word reflection integrating the content of the lecture and readings for the missed lecture. This is due one week after the missed class. Arriving to class late is disruptive to the learning environment and is unprofessional. Students should consult with the course instructor if you have extenuating circumstances (vacations, car trouble, picking up people from the airport are not considered extenuating circumstances).

- b. ***For clinical practicum***, extended absences can result in a slower rate of skill development and delayed progression through the program. A doctor's note is required after two absences due to the weekly, continuous nature of clinic work. Fraudulent use of excused absences will result in an unsatisfactory grade (U) in the clinical practicum. Makeup assignments will be at the discretion of the preceptor. Prompt attendance includes early arrival at clinic block meetings as well as preparedness for clients' designated appointment times.
- B. All graduate clinicians are expected to be available for clinic assignments Monday through Friday, 8am to 5pm during Autumn and Spring of Year 1. During the first summer semester and all subsequent semesters, clinical placements may extend beyond these times (especially in medical settings).
  - C. Graduate students are required to report scheduling constraints on the **SLP Clinic Request Form** each semester (see [Section 6.1](#)).
    - a. The OSU SLHC Placement Coordinator will work with graduate clinicians to accommodate GRA/GTA/GAA positions within the Department Speech and Hearing Science and any additional coursework (i.e., Master's thesis or topic specialization).
    - b. GRA/GTA/GAA positions outside of the Department of Speech and Hearing Science may place an additional constraint to clinical schedules. The OSU Clinical Advisor/Placement Coordinator will make every effort to work with the student and the GRA/GTA/GAA coordinator to find appropriate placements that work with this schedule.
    - c. Any changes to a graduate clinician's schedule must be communicated to the OSU SLHC Placement Coordinator, as placement changes may occur throughout the semester.

### 5.3 – Clinical Practicum Attendance Policy

- A. ***Regular attendance for practicum is mandatory.*** Graduate clinicians are expected to be at their assigned site on their assigned days/times, from the arranged day of orientation through the last day of the University's finals week.

- B. Graduate clinicians should not plan on participating in clinical placements if they have a contagious/communicable disease (e.g., influenza; see [Section 9.7](#)). Preceptors should be contacted and made aware of the illness as soon as possible.
- a. Graduate clinicians are also expected to adhere to all additional guidelines regarding the COVID-19 global pandemic. These guidelines will be provided in a separate document and updated as the epidemiological study of COVID-19 advances (see [Section 9.6](#)).
- C. In case of illness or emergency, procedures for canceling clients and notifying the appropriate preceptor are determined by the particular practicum site. It is the responsibility of the graduate clinician to inquire about appropriate procedures and to follow them. ***In addition, the OSU SLHC Placement Coordinator is to be notified of the absence as soon as possible.***
- a. Emergency messages may be left in the clinic office (614-292-6251) or the department office (614-292-8207) for Pressey Hall classes and assignments. Graduate clinicians should ask their preceptor about the preferred mode of communication (e.g., email vs. phone) in the event of an emergency.
  - b. If assigned to OSU SLHC clients, the graduate clinician should consult the preceptor to determine cancellation. Clients should ***not*** come to the clinic if the clinician is absent and alternative arrangements have not been made.
  - c. Graduate clinicians are encouraged to contact their outside site preceptors to determine appropriate policies and contacts for emergency situations in those settings.
- D. Should an extenuating circumstance necessitate a ***planned*** absence from a clinical placement (e.g., professional conference, academic commitment, job interview), a letter of petition must be submitted to the appropriate OSU SLHC Placement Coordinator for consideration and approval.
- a. These letters of petition should ***only*** be proposed in special circumstances.
    - i. Multiple planned absences could affect future clinical placements and/or delay completion of requirements for graduation.
    - ii. The academic calendar affords “time off” during semester breaks. Graduate clinicians are encouraged to schedule events during these times (e.g., family vacations, weddings, etc.).
  - b. Letters of petition should be submitted as soon as the event is known—even if the event will not take place for another 6 months or a year—and must include an “absence plan” for making up the missed clinical time.
  - c. Graduate clinicians should ***not*** discuss the petition with the outside site preceptor until they receive approval from the OSU SLHC Placement Coordinator.
  - d. The OSU SLHC Placement Coordinator will reach out to the site preceptor to determine whether the absence plan described in the letter is acceptable.
- E. Following an absence, the graduate clinician must contact their preceptor to arrange a make-up session or clinic day, depending on the assignment. This make-up is required, unless the site preceptor decides otherwise.
- F. If a graduate clinician demonstrates chronic tardiness and/or absence from a clinical assignment, action will be initiated by the assigned preceptor and OSU SLHC Placement Coordinator. Consequences will be determined on a case-by-case basis and may include, but are not limited to:
- a. Formal documentation of the attendance pattern and concern.

- b. Denial of clinical hours.
  - c. Termination of clinical placement.
  - d. Requiring additional time in the program to complete required hours and competencies.
- G. If a site preceptor is unavailable for a period of time due to the preceptor's personal schedule, the graduate clinician should inform the OSU SLHC Placement Coordinator. Additionally, the graduate clinician should request if there is another opportunity at the site (e.g., shadowing another professional, working with another clinical preceptor) during that time period.
- a. If no such opportunities are available, the graduate clinician should contact the OSU SLHC Placement Coordinator for an assignment/project or other work that will allow for the continuation of their clinical education.

#### **5.4 – Transportation to Practicum Sites**

- A. Graduate clinicians are responsible for providing their own transportation to and from assigned practicum sites, including any travel required to the assigned site's auxiliary locations.
- B. Clinical sites are in the greater Columbus area, including possible placements in facilities that are approximately a one-hour drive from the OSU SLHC.
- C. It is recommended that graduate clinicians have the following in place:
  - a. A road-worthy vehicle to provide safe and prompt transportation.
  - b. Sufficient funds to support costs of travel and parking.
  - c. A well-defined time management plan to allow for travel time.
- D. The Ohio State University assumes no liability for travel. The Department of Speech and Hearing Science advises each graduate clinician to obtain liability insurance for any travel to and from practicum sites (see [Section 2.7](#)).
- E. Any graduate clinician who chooses to limit their participation at clinic sites due to transportation availability, mileage concerns, travel time, or parking may delay their progression to graduation.

#### **5.5 – Clinic Name Tags and/or Badges**

- A. Every graduate clinician is to wear a name tag while involved in clinical activities at the OSU SLHC or at any event sponsored by the Department of Speech & Hearing Science.
- B. Name tags will be provided to each student upon arrival to campus. If this name tag is lost or the name needs to be changed, the graduate clinician is required to purchase a new name tag as soon as possible.
- C. Outside placement sites may also require the display of a name tag or ID badge. Each graduate clinician is responsible for addressing this requirement with the assigned preceptor.

#### **5.6 – Expenses Related to Clinical Placements**

- A. Graduate clinicians may incur additional expenses for participation in clinical rotations. These may include, but are not limited to:

- a. **CALIPSO** membership (see [Section 1.2C](#))
  - b. **Simucase** membership (see [Section 4.2D](#))
  - c. Background checks (see [Section 2.2](#))
  - d. Scrubs
  - e. Parking passes
  - f. Transportation costs (see [Section 5.4](#))
  - g. Replacement name tags or badges (see [Section 5.5](#))
  - h. Replacement OSU SLHC keys if initial keys provided are lost
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## Section 6: Participating in Clinical Placements

### 6.1 – Clinic Request Procedures

- A. Students are to complete a **SLP Clinic Request Form** each semester. This document provides students with the opportunity to:
  - a. Describe their class and/or work schedules (see [Section 5.2](#));
  - b. List their clinical areas of interest (e.g., populations, skill areas, facility types);
  - c. Request hours and competencies needed to meet the requirements for graduation and certification.
- B. The **SLP Clinic Request Form** must be submitted to the OSU SLHC Placement Coordinator by the date provided on the clinic calendar and/or **6844/7844** syllabus. Late submissions may delay or preclude clinical assignments for the following semester or cause the student to be considered for placement after other graduate clinicians have been placed.
  - a. The **SLP Clinic Request Form** must be filled out completely and correctly prior to submission. If a form is returned for corrections, this may also delay or preclude clinical assignments for the following semester.
- C. Students also use the **SLP Clinic Request Form** to indicate their interest in participating in specific placements that may require additional procedures. Those include:
  - a. The **Leadership Education in Neurodevelopmental Disabilities (LEND) interdisciplinary training program** at the OSU Nisonger Center. Students may apply and interview for a placement as part of the training grant.
  - b. **The OSU Wexner Medical Center.** During their 3<sup>rd</sup> semester in the program, students may state their interest in various hospital placements and participate in an interview process with future clinical preceptors.
  - c. **Nationwide Children’s Hospital.** During their 3<sup>rd</sup> semester in the program, students may state their interest in specialty areas of the hospital (e.g., craniofacial anomalies, AAC, ASD, pediatric swallowing) and participate in a phone interview.
  - d. **School placement and licensure.** Students who elect to participate in a public school placement may request a population specialty or age range. The Clinic Placement Coordinator will attempt to honor these requests when possible.

## 6.2 – Receiving Clinic Assignments

- A. The OSU SLHC Placement Coordinator considers many factors when determining placements for graduate clinicians. A non-comprehensive list of these factors may be found below. Additional questions about the process for determining placements should be directed to the OSU SLHC Placement Coordinator and/or the Clinic Director.
- a. Successful completion of prerequisite academic courses
  - b. Number of observation hours completed
  - c. Need for specific hours and/or competencies, as noted in **CALIPSO**
  - d. Overall clinical performance average
    - i. As a reminder, all graduate clinicians must maintain grades of “S” in SHS Clinical Seminars and Practicum Experiences in Speech-Language Disorders to continue in practicum courses and be assigned to clinical experiences outside the OSU SLHC.
  - e. Successful progression of skills as noted in **CALIPSO** formative and summative assessments, clinical educator comments on evaluations, and whether the student is on a clinic intervention plan (see [Appendix C](#))
  - f. Timely completion of the **CF-02: SLP Clinic Request Form** and other required documentation to participate in clinic
  - g. Consistent demonstration of adherence to Technical Standards as well as timely completion of all lesson plans, SOAP notes, progress reports, and other requests from preceptors during clinical experiences
  - h. Participation in group and individual clinic advising meetings
  - i. Availability of external site and appropriate preceptor for the student that meets the student’s clinical education and supervisory style needs
  - j. Consultation with OSU SLHC clinical educator/preceptors and academic faculty with regard to specific disorder knowledge skill outcomes
  - k. Input from outside site preceptor interviews indicating the site’s interest in the student
  - l. Student interest in various practice areas of the field, as indicated through the **CF-02** and one or more advising meeting with the clinical practicum coordinator
  - m. Schedule of graduate clinician
  - n. Appropriate accommodations for graduate clinicians with disabilities
  - o. Location of sites
- B. During finals week of each academic term, clinical assignments for the upcoming semester will be provided to the graduate clinicians. Graduate clinicians must follow all instructions in the email and notify OSU SLHC Placement Coordinator regarding any conflicts/concerns.
- a. Failure to adhere to these instructions and/or failure to provide any needed documents may result in a delayed start or termination of the clinical placement.
  - b. Information regarding outside placement site requirements and contact information will be provided by the OSU SLHC Placement Coordinator and/or site preceptor. It can also be found on the **CALIPSO** website (see [Section 1.2C](#) and [Section 6.4A-C](#) for more information on the **CALIPSO** online tracking system).
  - c. Graduate clinicians preparing for outside placements must refrain from contacting outside site preceptors until they receive permission to do so.

- C. Once clinical assignments are made, graduate clinicians are responsible for following all announcements regarding clinical assignments. These will be posted on Carmen and/or conveyed through email.
- D. Graduate clinicians assigned to clients in the OSU SLHC must attend a pre-treatment conference with their clinical preceptors prior to beginning treatment. They are expected to review a client's record in CounselEar thoroughly prior to the conference.
- E. Certain clinical assignments (e.g., AAC Clinic, Nationwide Children's Hospital) require graduate clinicians to attend specific protocol sessions, usually scheduled the first week of each academic term. Attendance is mandatory.
  - a. Graduate clinicians should take these protocol sessions into account when planning their semester breaks.
  - b. Those assigned to outside placements will be informed of any other necessary protocol sessions by their preceptor.

### 6.3 – Practicum Clock Hours and Certification

- A. Graduate clinicians pursuing certification and/or state licensure must meet the following clock hour requirements as specified by ASHA:
  - a. 400 clock hours of total supervised clinical experience
    - i. 25 hours must be spent in clinical observation, while 375 must be spent in direct client/patient contact
    - ii. 325 of the 400 clock hours must be completed while the graduate clinician is engaged in graduate study
  - b. Only hours earned at the graduate level can be evaluated to document competency across the 9 practice areas of speech-language pathology
  - c. Up to 20% (i.e., 75 hours) of direct contact hours may be obtained through alternative clinical education (ACE) methods. ACE may include use of standardized patients and simulation technologies.
  - d. ASHA's certification standards were updated in January 2020. Find them at this link: <https://www.asha.org/certification/2020-slp-certification-standards/>.
- B. Graduate clinicians are encouraged to participate in a wide range of clinical experiences and observations, but hours can **only** be obtained when the OSU SLHC Placement Coordinator has arranged the placement.
- C. Graduate clinicians **cannot** accumulate practicum hours for compensated professional services rendered in a facility, home, school district, or similar entity (e.g., babysitting a child with a communication disorder).
- D. Provided that the graduate clinician is not compensated for professional services, clinical hours may be counted under the following conditions:
  - a. The graduate clinician is enrolled in Speech-Language Pathology Practicum and Clinic Seminars.
  - b. The clinical site is deemed acceptable by the OSU SLHC Placement Coordinator.
  - c. The on-site preceptor is an approved OSU-affiliated preceptor.
  - d. The clinical caseload is prescribed by the approved OSU-affiliated preceptor.
  - e. Written evidence of the financial agreement is provided by the employer.



- E. Clinical experience obtained through courses other than **6844/7844** and/or **6189**, as a stipend requirement, or as part of an employment contract generally will not be counted toward the total required clinical hours.
- F. However, a graduate student receiving a traineeship, scholarship, or stipend from a practicum site **may** accrue clinical hours while working at the site, provided that:
  - a. The graduate clinician is enrolled in Speech-Language Pathology Practicum and Clinic Seminars.
  - b. The clinical site is deemed acceptable by the OSU SLHC Placement Coordinator.
- G. If graduate clinicians are aware of a potential new preceptor or site, the graduate clinician is encouraged to convey that contact information to the OSU SLHC Placement Coordinator.

#### **6.4 – Tracking Clinical Clock Hours**

- A. Graduate clinicians are responsible for maintaining ongoing records of their accrued clinical hours during each assigned rotation.
    - a. Hours will be divided out into areas of competency (see [Section 3.1B](#)). For instance, if you spent 40 minutes on articulation therapy and 20 minutes on language therapy, you should record time obtained in each of these KASA areas.
  - B. Preceptors will approve all hours submitted by the established due date in **CALIPSO** (usually the last business day of the month).
  - C. If students participate in speech-language-hearing screenings at an outside site, they should request that the clinic coordinator for that site contact the OSU SLHC Clinic Placement Coordinator to confirm the student's attendance. Clinical hours should be submitted to the OSU SLHC Clinic Placement Coordinator unless directed otherwise.
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## **Section 7: Guidelines for Professional Behavior in the Clinical Practicum**

### **7.1 – Graduate Clinician Responsibilities**

- A. Graduate clinicians who are assigned clients in the OSU SLHC are responsible for performing the following functions:
  - a. Accessing the Counsel Ear electronic medical record system to view client records and document services.
  - b. Understanding the cost of services and conducting appropriate billing procedures.
  - c. Conducting screenings, consultations, and evaluations as required.
  - d. Choosing a therapy room that meets the client's needs.
  - e. Informing the client and/or client's parents of the results of testing, treatment objectives, post-treatment progress, referrals, etc.
  - f. Enrolling clients in and/or discharging clients from therapy services as appropriate.
  - g. Contacting clients and their families via email, phone, and/or U.S. mail.

- h. Completing all documentation associated with the client's care, including diagnostic reports, lesson plans, progress notes (i.e., SOAP notes), and progress reports.
- i. Attending all required meetings with their assigned clinical preceptors.
- j. Recording client contact hours in **CALIPSO** to track progress toward graduation.

## **7.2 – Engaging in Evidence-Based, Supervised Clinical Practice**

- A. During all clinical placements, graduate clinicians are expected to:
  - a. Use resources provided in academic and clinical practicum classes and clinic block instruction to plan and administer diagnostic and therapy sessions.
  - b. Turn in all clinical documentation on time and in the manner requested by each clinical preceptor.
  - c. Implement preceptor feedback on all clinical practicum assignments.
- B. If unsure about instructions, graduate clinicians are expected to review notes, emails, and ask questions of their clinical preceptors.
- C. Clinical preceptors are licensed professionals who are ultimately responsible for client care. Therefore, graduate clinicians should discuss all recommendations and treatment decisions with their clinical preceptors ***prior*** to taking action.
- D. If an OSU SLHC client cancels a session, the graduate clinician is responsible for notifying the preceptor via the preceptor's preferred mode of communication (e.g., email or phone).
  - a. If a client misses multiple sessions, the graduate clinician is responsible coordinating the next appropriate step with their clinical preceptor.

## **7.3 – Client Record Keeping/Filing Procedures**

- A. Client records may only be accessed by authorized clinical personnel (preceptors, graduate clinicians, office personnel, and/or faculty).
  - a. Per HIPAA privacy rules, graduate clinicians should only access records belonging to their assigned clients. They should not access other client files, whether out of curiosity or as a favor to another graduate clinician.
  - b. Failure to comply will result in disciplinary measures.
- B. When consulting client records in the OSU SLHC, graduate clinicians must:
  - a. Stay within specific areas of the clinic (129, 141a, 142, 146, 148, other appropriate rooms in the OSU SLHC) when working on client records when possible. Client records may be accessed on the student's CounselEar account on their computer; however, guidelines for confidentiality and HIPAA must be followed (e.g. not opening client files in public places, such as a coffee shop or around people who are not authorized to have access to this information, such as roommates).
  - b. Never leave written client documents unattended.
- C. Clinicians must record each instance of contact with client (e.g., emails, phone call, text messages) in Counsel Ear as instructed by their clinical preceptor

- D. Printing, photocopying or photographing the contents of client record is ***strictly*** prohibited unless a graduate clinician obtains the express approval of their clinical preceptor. If permission is given, all identifying information must be deleted from the photocopied report before the copy is removed from secured areas.
- E. Sharing electronic copies of clinical documents that contain identifying information is also ***strictly*** prohibited unless explicitly instructed by the preceptor.
- F. The OSU SLHC has a zero-tolerance policy on failure to safeguard client information. Violation could result in dismissal from the program.

#### **7.4 – Dress Code**

The OSU Speech-Language-Hearing Clinic established dress code guidelines that are designed to be inclusive and functional for student clinicians while promoting a safe and sanitary environment. The following guidelines are to be implemented by graduate clinicians when observing or delivering clinical services in the OSU SLHC.

- A. Business casual attire: casual slacks/non-denim pants and skirts, collared shirts, blouses, sweaters, shirts with sleeves that cover midriff, free of holes, tears, and other significant signs of wear
- B. Name tag/badge
- C. Closed toed shoes

Clinic experiences that are coordinated through the Department of Speech and Hearing Science (e.g. Hilltop, Aphasia Initiative, Golf Camp etc.) may require specific attire due to weather and/or physical requirements of the setting (i.e. shorts, casual t-shirts, etc.). The clinical preceptor of that experience will provide dress code requirement modifications, as appropriate.

Tattoos and facial piercings may be requested to be covered and/or removed if they interfere with the delivery of clinical services and is up to the discretion of the clinical preceptor (i.e. tattoos that are distracting to the client or a piercing that interferes with modeling of speech sounds).

Please consult your clinical preceptor for any questions you have regarding the dress code requirements for your assigned clinical experience.

External placement will have their own dress code requirements that may include specific attire (i.e. scrubs, limiting choice of hair color/style, tattoos, and piercings).

#### **7.6 – Guidelines for Communicating about Clients in the OSU SLHC**

- A. Graduate clinicians should only discuss clients with clinical preceptors or other professional staff. Conversations should be limited to speech, language, and/or hearing problems (or related matters).
- B. Conferences between preceptors, graduate clinicians, clients, and/or parents should be conducted in treatment rooms.
  - a. Individual clients/cases should ***not*** be discussed in hallways, Room 35, or the Clinic office area (i.e., Rooms 139 and 141).
  - b. Graduate clinicians are advised to be discreet when discussing clients, as anyone has access to treatment and diagnostic rooms by way of closed circuit TV and one way mirrors with sound systems.

- C. Clients are not to be discussed with individuals who are not part of the clinic staff, including other professionals, without written permission from the client or the client's parents. This includes phone calls, emails, and personal meetings, as well as written reports and correspondence.
- D. If it is necessary to obtain additional information from other agencies or professionals in order to provide optimal client care, graduate clinicians must discuss these procedures with their clinical preceptor prior to raising the issue with clients/caregivers/other professionals. Once a plan of action has been determined, the graduate clinician is responsible for initiating and following through. This may involve scheduling conferences, e-communication, telephone contacts, letters, and so on.

## **7.6 – Maintaining Open Lines of Communication**

- A. Graduate clinicians should use surnames and appropriate titles (Prof., Dr., Ms., Mrs., Mr., etc.) when addressing clinical faculty and staff, adult clients/patients, and parents of clients/patients (unless an individual requests otherwise).
- B. Graduate clinicians are expected to respond in a timely manner to email, phone calls, and other means of communication with clients, caregivers, clinical preceptors, and clinical advisors.
- C. If extenuating circumstances arise that may interfere with the completion of any aspect of the program, graduate clinicians must inform their clinical advisors and/or OSU SLHC Placement Coordinator as soon as possible.
- D. Students are likewise encouraged to inform the OSU SLHC Placement Coordinator regarding any issues or concerns at outside clinical practicum sites.
- E. When seeking either verbal statements or written letters of recommendation from faculty members or clinical preceptors, graduate clinicians are required to provide the form “Authorization and/or Waiver for Letter or Statement of Recommendation”:  
<[http://registrar.osu.edu/policies/ferpa\\_authorization\\_release\\_information.pdf](http://registrar.osu.edu/policies/ferpa_authorization_release_information.pdf)> to the person(s) providing the recommendation.
  - a. This is a requirement of The Ohio State University and was put in place to protect student confidentiality.

## **7.7 – Social Media Policy**

- A. As the use of social media continues to evolve, it is vital that clinic personnel maintain confidentiality by following HIPAA guidelines (see [Section 1.4](#)).
- B. Graduate clinicians are to refrain from using social media when in clinical rotations unless it directly relates to service delivery interaction. If an assigned clinical rotation has and uses social media, graduate clinicians are to keep this site’s related social media separate from their personal accounts.
  - a. If social media interactions related to professional practice become antagonistic, students are advised to disengage from the dialogue in a polite manner and seek the advice of a preceptor.

- C. Graduate clinicians are to use their best judgment when posting material and should remain aware of the effect social media posts have on their own image. Any social-media-generated comments are to be professional and discreet. It is recommended that students consider the following guidelines:
  - a. Avoid posting material that is inappropriate or harmful to others.
  - b. Use disclaimers when expressing personal opinion.
  - c. Respect copyright and trademark laws.
  - d. Maintain the privacy of others by protecting confidential information.
  - e. Promptly clarify statements that are misinterpreted by others on the platform.
- D. The OSU SLHC has a zero-tolerance policy on violations of the Social Media Policy. Violation could result in dismissal from the program.
- E. Graduate clinicians should not “friend” their clients, preceptors, or professors while in the program.

### **7.8 – Telephone Usage Policy**

- A. It is preferred that graduate clinicians make telephone calls pertaining to clinical matters using designated phones in the clinic office and/or client’s preceptor’s office phone. Personal phones may also be used. Conversely, graduate clinicians are ***not*** permitted to use clinic office phones to make personal calls.
- B. Use of audible signal alerts on cell phones and pagers is prohibited during class, meetings, presentations, and clinical assignments.
- C. If used as a clock, timer, or calculator, cell phones are to be discreetly visible during delivery of services.

### **7.9 – Copier and Printer Use**

- A. Copiers and printers at clinical placements, including the OSU SLHC, are for clinic use ***only***. They may be used to print reports, client insurance information, therapy materials, etc.
  - a. Students may ***not*** use copiers/printers to print personal documents, class notes, journal articles, etc.
  - b. Graduate clinicians found in violation of this policy will be asked to stop using the copier. Ongoing violations may result in denial of clinical hours.

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## **Section 8: Evaluation of Clinical Skills/Performance**

### **8.1 – Feedback from Clinical Preceptors**

- A. Clinical preceptors are responsible for providing feedback to assigned graduate clinicians regarding clinical competency development throughout each academic term.
  - a. At a minimum, pre-treatment, midterm, and final conferences will be conducted to monitor the client’s progress and the graduate clinician’s performance with the client.
  - b. Feedback on a graduate clinician’s skills/competencies are provided weekly; however, formal grades are assigned at midterm and final conferences with the clinical preceptor. If the grade at midterm is

unsatisfactory, the graduate clinician will have the remainder of the term to improve upon skills following the above plan of action.

- c. During final conferences, clinical preceptors evaluate each graduate clinician's clinical competencies using an evaluation form in CALIPSO. They will review the electronic form(s) with the graduate clinician during a face-to-face meeting. At this review, the graduate clinician should append their electronic signature to the evaluation form.
    - i. See [Appendix B](#) for the complete Evaluation and Performance Rating Scale that is posted in CALIPSO. See [Section 1.2C](#) and [Section 6.4A-C](#) for more information on the **CALIPSO** online tracking system.
- B. Clinical preceptors are expected to help graduate clinicians identify and adhere to professional standards across settings. This includes following facility protocols and policies relevant to each practicum site.

## 8.2 – Clinical Practicum Performance and Grading

- A. **Clinical Practicum** courses (**6844/7844, 6189**) are graded on a "Satisfactory"/"Unsatisfactory" basis. To receive a grade of "Satisfactory" ("S"), students must comply with the department's Technical Standards and earn the following minimum scores from their assigned clinical preceptors out of a 5-point rating scale (See [Appendix B.1](#)):
- a. Semesters 1 & 2: **2.5**
  - b. Semesters 3 & 4: **3.0**
  - c. Semesters 5 & 6: **3.5**
- B. The increased minimum score required to pass each semester conveys the expectation that graduate clinicians will demonstrate a forward progression of skills in the nine disorder areas of speech-language pathology throughout their practicum experiences.
- C. Graduate clinicians must complete self-assessments throughout their clinical education. This information is intended as a starting point for review with each preceptor during the orientation meeting at the beginning of each semester for clinical placement at a given site.
- a. A "Self-Evaluation" in **CALIPSO** must be completed at the end of every semester and submitted by the date provided on the clinic calendar and/or **6844/7844** syllabus to receive a grade in 6844/7844, 6189.
    - i. See [Section 6.4A-C](#) for more information on the **CALIPSO** online tracking system.
  - b. Failure to complete the "Self-Evaluation" may result in the denial of clinical hours and/or receiving a "U" in the **6844/7844** clinical practicum course.
- D. Students should note that a passing grade of "S" in a specific course does not necessarily imply that all required clinical or knowledge skills outcomes have been attained and appropriately demonstrated in the clinical setting.
- E. Earning an unsatisfactory grade ("U") in a given practice area (articulation, language, voice, fluency, etc.) may result in the denial of clinical hours. Advancement and/or completion of the program will be delayed until the identified skill outcomes are satisfactorily demonstrated. If a student earns a "U" or is noted not to be

meeting all of the Technical Standards, the Clinic Advisor will inform the Clinic Director and the Clinic Director will be actively involved in all decisions regarding next steps.

- F. A pattern of insufficient progress (e.g. a grade of “U” in clinical skills, not meeting Technical Standards, or progressing with acquiring clinical practice skills) in the acquisition of knowledge and/or clinical skills outcomes may require the implementation of a remediation plan, probationary term, and/or denial of further enrollment in SHS Clinical Seminars and Practicum Experiences in Speech-Language Disorders. This will be done in collaboration with the Clinic Director.
  - a. Those who have been placed on a clinic remediation plan may not be eligible for all placement options in the current or subsequent semester.
  
- G. If a graduate clinician is not functioning at an expected clinical competency level based on formative and summative feedback (i.e. information in section 8.2, Calipso evaluations scores lower than the required minimum for that semester, documentation in Calipso, therapy planning notes, emails, other documentation), is not meeting Technical Standards, or is behaving in an unprofessional manner, the clinical preceptor will inform the clinic advisor and the following will occur:
  - a. Meet with the graduate clinician to develop a remediation plan.
    - i. The plan is to be designed by the graduate clinician with input from clinical advisor and clinic director. The final version of the action plan must be approved by all parties.
  - b. Consult the OSU SLHC Placement Coordinator (if necessary).
  - c. If the graduate clinician’s performance remains unsatisfactory at the end of the semester, all clinical preceptors currently assigned to the graduate clinician will meet with the clinic director and determine the extent and nature of the graduate clinician’s difficulty and any needed intervention.
    - i. If a preceptor is not available for the meeting, written input regarding the graduate clinician’s performance will be submitted.
  
- H. If egregious and/or consistent violations of guidelines or protocols occur (e.g. not maintaining client confidentiality, not adhering to OSU SLHC or outside site policies), the Clinic Director, Chair of Graduate Studies, and/or the Department Chair will be notified of the noncompliant behavior and disciplinary action will be taken. Disciplinary action could include, but is not limited to, denial of clinical hours, removal from clinical practicum site, repetition of a practicum placement, and/or delayed graduation status.
  
- I. If the student is on a remediation plan, all formal interactions between the student and their clinical preceptors will be documented in a written record (e.g., a record of memorandum describing the meeting and its outcome).

### **8.3 – Maintaining Eligibility for Enrollment**

- A. Students must remain in good academic and clinical standing to be eligible for clinic placements. Enrollment in Speech-Language Pathology Practicum and Clinic Seminars is restricted to MA SLP degree-seeking graduate students with a cumulative GPA of 3.0 or above.
  
- B. If a graduate student receives a “U” (“Unsatisfactory”) or does not meet Technical Standards in any Practicum (6844, 7844, 6170) clinical clock hours for that semester will be denied and the student will be placed on an intervention plan to improve performance in the subsequent semester.

- C. If a graduate student receives a “U” in a Clinical Seminar course (6751, 6752, 6753, 6754, 6755), continuation in the clinical program will be determined by the Clinic Director and an appropriate remediation plan will be put in place.
- D. Competency may be achieved by repeating the failed course and by completing a corrective plan of action outlined in an intervention plan.
  - a. This corrective plan of action will be detailed on the **CF-69: Clinic Intervention Plan** (see [Appendix C](#)), which is completed by the clinical preceptor, clinical advisor/OSU SLHC Placement Coordinators, and Clinic Director. This plan will be completed by the student and approved by the clinical advisor, and Clinic Director. The plan should include the following.
    - i. A copy of the **CF-69** will be provided to the clinician and a record of the meeting will be placed in the student’s permanent file.
    - ii. The student’s academic advisor will be informed of the student’s status.
  - b. If a student receives a “U” for two semesters (non-consecutive), the Graduate School will be notified, and the department will make a recommendation to the Graduate School that the student be denied further enrollment in Speech-Language Pathology Practicum and Clinic Seminars.
- E. A graduate student must maintain a 3.0 graduate cumulative point-hour ratio for all graduate credit hours taken at this University in order to graduate (Graduate School Handbook, Section 5.1). Moreover, a student who does not maintain reasonable progress toward a degree or who does not fulfill other graduate program requirements, including those regarding Technical Standards and misconduct, can be denied further registration in the program upon the recommendation of the Graduate Studies Chair to the Graduate School and after the Graduate School has formally warned the student that if the problems are not corrected by the end of the next semester, action will be taken. (Graduate School Handbook, Section 5). For the MA-SLP program, a student is deemed not to be making satisfactory progress if:
  - a. The student has obtained an unsatisfactory grade (i.e., a “U” or a “C+” or lower) in the same required course two times; or
  - b. The student has obtained an unsatisfactory grade (i.e., a “U” or a “C+” or lower) in two different required courses; or
  - c. The student has a cumulative GPA of less than 3.0 for two consecutive semesters or
  - d. The student has been determined to have failed to meet Technical Standards.
- F. If a graduate student receives a grade of C+ or lower in one required academic course, the student will be prohibited from participating in any clinical rotation that requires mastery of the clinical practice area or special disorder population covered by the course.
  - a. In this instance, the student is to complete the form **Status of Course/Knowledge Competencies** (see [Appendix A](#)). A copy of this form is submitted to the student’s academic advisor, clinical advisor, and OSU SLHC Placement Coordinator within 3 days of the grade’s posting and before the first day of classes for the subsequent semester.
  - b. The student will be given an opportunity to repeat the course with a C+ or poorer grade the next time the course is offered.
  - c. Until the student achieves a grade of B- or better, the course is not considered completed. Ongoing participation in the clinic program will be specific to disorder types with which the student has



achieved B- or better. Participation in clinic with disorder types addressed by the course(s) that do not have B- or better will be restricted.

- G. Receiving a grade of C+ or lower in two or more required academic courses in the same semester will result in prohibition from enrollment in all Speech-Language Pathology Practicum courses (**6844/7844** and/or **6189**).
  - a. The student may re-enroll in Speech-Language Pathology Practicum and Clinic Seminars after retaking the required courses and achieving a grade of B- or better.
- H. An unsatisfactory grade in **7844 Clinical Practicum** during the final semester will delay graduation, as the graduate clinician will need to repeat the clinical practicum.
- I. Graduate clinicians are advised to review the student evaluation procedures listed in the Graduate Handbook, Volume I as well as Section 5 of The Ohio State University Graduate School Handbook.

#### **8.4 – Guidelines for Withdrawal from Speech-Language Pathology Practicum and Clinic Seminars**

- A. Given the highly unique nature of Speech-Language Pathology Practicum and Clinic Seminars, dropping or withdrawing from these courses is only recommended in circumstances dictated by personal need, illness, or other extenuating circumstance. Dropping or withdrawing from these courses will delay progress to graduation.
- B. If a graduate clinician wishes to drop or withdraw for any reason, they should schedule an appointment with their academic and clinical advisor to discuss their intent.
- C. The reason for withdrawal (i.e., a health concern, the untimely death of an immediate family member, change in desired career path, etc.) must be documented appropriately.
  - a. If the graduate clinician is requesting to drop or withdraw for medical reasons, they must provide a letter from their healthcare provider documenting the need for leave from the program and the anticipated length of leave required. They will also be required to collaborate with the Office of Student Life Disability Services to ensure all appropriate accommodations are in place to withdraw with the appropriate grade and/or develop a plan to return to the program.
- D. After a plan is developed with the Clinic Director and clinic advisor, the student should adhere to the following guidelines:
  - a. Notify clinical preceptor(s) of the intent to withdraw so that clients can be promptly reassigned.
  - b. Provide updated documentation regarding the status of the assigned client(s) to ensure that client(s) will continue to receive quality care.
- E. Any written evaluation from the graduate clinician's preceptor(s) for the drop/withdraw academic term will be retained in the student's academic file and/or in **CALIPSO**.

## **8.5 – Guidelines for Re-Enrolling in Speech-Language Pathology Practicum and Clinic Seminars**

- A. If a graduate clinician wishes to re-enroll in the clinical program following a leave of absence or withdrawal, they must successfully complete agreed-upon and required competency assignments. The content of these assignments is determined by the OSU SLHC Placement Coordinators/Clinical Advisor and shared with the graduate clinician with specific timelines for completion provided.
  - B. If the withdrawal constituted a medical leave of absence, the graduate clinician must provide a letter from a healthcare provider documenting that the student is again able to participate in the rigors of a full-time clinical schedule including number of hours per day and week the graduate clinician can be expected to participate in clinical activities. If the graduate clinician requires accommodations, we strongly recommend they register with the Office of Student Life Disability Services to ensure they can meet the Technical Standards of the program with accommodations.
  - C. The clinical assignment for the subsequent academic term will be based upon the graduate clinician's clinical competencies at the time of drop/withdrawal from clinic, as well as performance on formative and summative assessments.
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## **Section 9: Additional OSU SLHC Policies and Procedures**

### **9.1 – Guidelines for Observing Sessions**

- A. Only individuals who have a formal affiliation with OSU SLHC (students, faculty, staff; clients' spouses, parents, and/or legal guardians) may observe clinical sessions.
- B. Before observing a session, it is necessary to obtain permission from the client's clinical preceptor. Clients and/or legal guardians must be informed that the observation is taking place. Furthermore, the client may request that observations be restricted to specific people.
- C. Observation rooms are Pressey 142, 146, and 148. Select the room in which to observe on the basis of availability and need for parent observation. If you are to be observing in audiology, report to the 147 suites to obtain a room number.
- D. One-way mirror observation in 124b, 126b, 128, 140b, and 140e are restricted to clinical staff. Members of the client's family may use these rooms only with specific approval.
- E. Anyone participating as a clinical observer must adhere to the following guidelines:
  - a. Priority for using the video monitoring system is given to the clinical preceptor.
  - b. Earphones should be used if there is only one observer watching a specific session. Groups of observers may observe without earphones.
  - c. Only one group is permitted to observe the same clinical session per hour.
  - d. Observation rooms are not to be used for study, casual reading, eating, or drinking.

- e. When observing, keep talking to a minimum and keep the doors closed. No comments should be made about either person (client or clinician) outside observation rooms, class instructors' offices, or preceptors' offices.
- f. HIPAA guidelines apply to observations. This means that clients should be referred to only by their initials in written notes and reports.

## 9.2 – Clinic Forms

Fewer paper forms are needed in the OSU SLHC; however, there are some that are still needed.

- A. Preceptors will inform graduate clinicians which forms must be completed over the course of client care.
- B. Clinic forms are kept in a file cabinet directly adjacent to the preceptor mailboxes in the Clinic Office. Graduate clinicians should report to the Clinic Office Manager when only a few forms remain. **Do not take the last form.**
  - a. In case you need to print fresh copies, the majority of these forms can be found in the “MA SLP Program Guide” Box (or other current OSU preferred storage option) folder on your computer.

## 9.3 – Treatment Materials, Tests, Test Protocols, and Equipment

- A. A variety of resources are available for students, faculty, and staff at the OSU SLHC:
  - a. Suite 147 contains hearing equipment and materials, including audiometers and immittance screener.
  - b. Rooms 128 and 129 contain treatment equipment and materials.
  - c. Room 143 contains assessment materials, including standardized tests and test booklets.
  - d. Room 129 contains a clinical reference library.
- B. Clients and their siblings are **not** permitted in the materials room (i.e., Room 129), either accompanied or unaccompanied. The only exception is if the clinician is in the middle of a session, has responsibility for a pediatric client, and has forgotten a material. The clinician and client may then enter 129 to obtain what is needed. Graduate clinicians are expected to obtain needed materials prior to the start of their session.
  - a. Clients' siblings may not use therapy materials. Parents are responsible for bringing toys/activities from home to occupy siblings during a client's therapy session.
  - b. It should be noted that during the COVID-19 global pandemic, protocols for the number of people in the materials room and other clinic areas may change.
- C. All materials are to be signed out before they are removed from the premises. The sign out sheet is located on the file cabinet.
  - a. Overnight loan is from 4:30pm to 8:00am the following day. It is essential that all materials are returned prior to 8:00am so they are available for diagnostic and/or therapy sessions. If materials are not returned promptly, graduate clinicians may lose overnight loan privileges.
  - b. Permission to check out equipment (e.g., audiometers) must be obtained from the Clinic Director.
- D. Treatment materials, tests, test protocols, and other equipment are **not** permitted to be taken to outside sites.

- E. Prior to using an audiometer for a hearing screening, graduate clinicians must remember to check the following:
  - a. Thresholds for all pure tones through earphones
  - b. Attenuator linearity
  - c. Electronic crosstalk
  - d. Bone vibrator output
  - e. The integrity of cords
  - f. Speaker function
- F. Any missing or damaged materials and malfunctioning equipment should be reported immediately to the Clinic Director.

#### **9.4 – Clinical Research Guidelines**

- A. Faculty, staff, and students who are conducting research at the OSU SLHC or outside sites are to coordinate their needs and plans with the Clinic Director and primary investigator of the research project.
- B. After a satisfactory schedule is approved, the investigator is to submit a written outline of facility, equipment and material needs along with dates and times of planned usage. Expendable materials are to be purchased by the researcher.

#### **9.5 – Emergency Procedures**

- A. Graduate clinicians are responsible for their clients during emergency situations.
- B. In the case of a medical emergency (e.g., fainting, falling, chest pain, profuse bleeding):
  - a. Do not leave the person alone.
  - b. Ask the Clinic Office Manager or clinical preceptor to call 9-1-1.
  - c. Request a First Aid kit and/or assistance with CPR.
    - i. First Aid kits are located in the clinic office (in the cabinet above the graduate administrative assistant's desk), in room 129, and in 147e (audiology area).
  - d. Initiate CPR as appropriate until professional help arrives.
  - e. Automatic defibrillators are located on the first floor of Pressey Hall (cabinet next to the women's restroom near the Department office) and in the basement in a cabinet across from room 99. Obtain the defibrillator and follow the verbal instructions given when the device is opened. This is an easy device to use and can support/take the place of manual CPR.
- C. In the case of an emergent situation (e.g., patient trips in the parking lot, cannot get up from a chair without assistance, seems disoriented but declines offers of assistance):
  - a. Provide assistance requested by the patient/client (e.g., help them get up if they have tripped) as deemed safe.
    - i. "Good Samaritan" laws provide protection in this situation, particularly when the patient/client is able to express their wishes.

- b. Provide basic first aid (e.g. band aid for a cut, etc.) from first aid kits located in the clinic office (in the cabinet above the graduate administrative assistant's desk), or in room 129, and in 147e (audiology area).
- c. Ask about current or chronic health conditions (i.e. diabetes, seizure disorder, etc.) to help assess the situation and to report to healthcare providers, family, and/or Public Safety, as necessary.
- d. If there is concern about releasing the patient/client from the clinic (e.g., the person seems disoriented but does not want to call 9-1-1), ask the Clinic Office manager or clinical preceptor to contact OSU Department of Public Safety (614-292-2121).
  - i. The Department of Public Safety will assess the situation, either by phone or by sending Public Service personnel, and provide a "safety check."
  - ii. The "safety check" will determine the person's ability to leave campus safely and of their own accord.

D. In the case of a fire alarm or drill:

- a. All clinicians and clients on the first floor of Pressey Hall should proceed to the north lobby and exit the building. Once outside, they should reunite clients with family members as quickly as possible.
- b. All clinicians and clients on the lower level must avoid using the elevator. They should instead proceed to the north staircase and access the emergency exit on the north side of the building.
  - i. Non-ambulatory clients on the lower level of the OSU SLHC should be escorted to the north stairwell outside the fire doors. The accompanying clinician should then exit the building and inform firemen and/or policemen of the client's location.
- c. Fire extinguishers and hoses can be found in multiple locations.
  - i. First floor:
    - 1. Southeast corner between rooms 110 and 110a
    - 2. Hallway between suites 126 and 130
    - 3. Northwest wall across from 139 (waiting room)
  - ii. Lower level:
    - 1. North stairwell
    - 2. North wall across from room 23
    - 3. Southeast corner
    - 4. Southwest corner around the corner from room 1
    - 5. South stairwell
- d. Preceptors are responsible for verifying that specific rooms have been cleared.
  - i. The preceptor/staff member in Room 115 is responsible for checking and assisting those in Room 120 and the 124 suites.
  - ii. The preceptor/staff member in Room 119 is responsible for checking and assisting those in the 126 and 130 suites.
  - iii. The preceptor/staff member in Room 123 is responsible for checking and assisting those in Room 129 and the 140 suite and providing a backup for those leaving the parent observation rooms and clinic waiting area.
  - iv. The preceptor/staff member in Room 145 is responsible for assuring that the parents/accompanying adults in the observation rooms and clinic waiting areas are escorted to the north exit of the building, where they must remain until their loved ones arrive. This

step is vital to the smooth, calm evacuation of the clinic. Any graduate clinicians and all staff in the clinic office area should assist with this task.

- v. The preceptor/staff member in Room 147b is responsible for checking and assisting those in the Audiology Suites (147 suite) and also providing a backup for those leaving the parent observation rooms and clinic waiting area.
- E. In the case of a tornado warning:
- a. Clinicians should quickly accompany clients to the waiting room and, if possible, reunite clients with caregivers before moving to the lower level of Pressey Hall by way of the north staircase.
  - b. It is recommended that the client, client's parents, and clinician remain in the lower level hall until the danger period has passed.
- F. If a graduate clinician discovers a fire, gas leak, bomb, etc., they should activate one of Pressey Hall's two fire alarms to initiate evacuation procedures.
- a. The first-floor fire alarm can be found at the southeast corner of the building, between Rooms 110 and 110a.
  - b. The lower level fire alarm can be found at the southeast corner of the building in the east hallway.
  - c. If time allows, the person who discovered the emergency should also call 9-1-1. If unable to call prior to evacuation, proceed out of the building and place the call from a cell phone.

## 9.6 – Infection Control Procedures

*\* Working as a healthcare professional requires adherence to infection control procedures. Those listed here apply to a business-as-usual situation. Additional infection control procedures to protect faculty, staff, students, and patients have been put in place during the COVID-19 global pandemic and will evolve as the science about COVID-19 continues to evolve. These additional procedures are provided as a separate document as an addendum to this handbook.*

- A. The OSU SLHC is committed to maintaining a safe and healthy environment for its staff, graduate clinicians, and clients. This involves:
- a. Ensuring compliance with OSHA's standard on occupational exposure to bloodborne pathogens (29 CFR 1910.1030).
  - b. Minimizing or eliminating workplace exposure to Hepatitis B, Human Immunodeficiency Virus (HIV), and other diseases.
  - c. Enforcing general sanitation guidelines and infection control procedures as appropriate.
- B. Handwashing is the single most important means of preventing the spread of infection. During handwashing, graduate clinicians must:
- a. Obtain an adequate supply of paper towels for drying hands prior to washing them.
  - b. Turn on the water and adjust the flow so that it does not splash the surrounding area.
  - c. Apply soap to wrists, backs of hands, palms, and fingers.
  - d. Rub all surfaces of hands together vigorously for at least 20 seconds, including the areas between fingers. Clean under each nail using the nails of the other hand.
  - e. Rinse hands thoroughly under a stream of water.
  - f. Leave the water running while patting the hands dry with a paper towel.
  - g. Turn off the water using the paper towel.

- C. Handwashing is required before and after each client contact, particularly:
  - a. Before preparing, serving, or eating foods;
  - b. After a patient sneezes, coughs, or wipes nose;
  - c. After using the toilet or helping a child with toileting or diapering;
  - d. After handling soiled items such as used tissues or dirty toys;
  - e. After coming into contact with blood or body fluids;
  - f. After removing gloves or other personal protective equipment; and
  - g. Before and after smoking.
- D. Antibacterial hand sanitizer should be utilized in cases when thorough handwashing is not possible. This can be found in each treatment room.
- E. Graduate clinicians should wear synthetic vinyl examination gloves while performing procedures that may involve exposure to blood or body fluids (i.e., oral peripheral examinations, fitting vocal/oral prostheses, spirometer examination, conducting VLS, swallowing retraining, a facilitation of gag reflex, etc.). They must:
  - a. Change gloves between clients and when the gloves become soiled to minimize the potential for spreading infection.
  - b. Dispose of gloves in the trash can in the service delivery room. Do not wash or disinfect sterile examination gloves for reuse.
  - c. Wash hands or use antibacterial hand sanitizer immediately after disposing of gloves.
- F. Graduate clinicians must disinfect all soiled or mouthed toys, dishes, and surfaces using Clorox Anywhere spray or wipes.
  - a. Wash objects or surfaces with soap and water first before applying disinfectant. The disinfectant will not work as well on items/surfaces that have not been properly washed.
- G. When cleaning up environmental spills of blood or other bodily fluids (e.g., nosebleeds, vomit, urine, feces), graduate clinicians should:
  - a. Wear synthetic vinyl examination gloves.
  - b. Wipe up the mess with a disposable towel.
  - c. Wash and disinfect all objects coming in contact with the fluid.
  - d. Dispose of gloves in the trash can in the service delivery room.
- H. Staff members and students will only eat and drink in the appropriate areas (e.g., the graduate lounge) to prevent migration of contamination.
  - a. Food and drink should not be kept in or on refrigerators, freezers, shelves, or countertops where blood or other potentially infectious materials are present.
- I. Staff members and students should only apply make-up, handle contact lenses, or perform other grooming in appropriate restrooms to prevent contamination beyond the work area.
- J. Other sanitation guidelines:
  - a. Used tongue depressors and swabs should be placed in the treatment room's trash can.
  - b. Earphones, earbuds, headsets, and probe tubes, etc. are to be cleaned with Clorox Anywhere spray or wipes following each use.

- c. Reusable items such as otoscopic specula (both handheld and video otoscope), immittance tips, earlight tips, and stock earmolds are to be cleaned with bleach solution mixed each day.
  - i. Consult with the supervising audiologist with questions.

## 9.7 – Management of Communicable Diseases

- A. The “Ohio Department of Human Services Communicable Disease Chart” can be found in Room 129 in a notebook labeled “Communicable Diseases”.
- B. Each client should be monitored daily for symptoms of a communicable disease.
  - a. Any patient, or caregiver of a minor child, is expected to notify the OSU SLHC if they contract a communicable disease. The preceptor(s) will then notify the appropriate personnel that others may have been exposed.
  - b. Should suspected symptoms be observed, the client’s preceptor should be informed immediately.
  - c. A client with a rash, a sore throat, an elevated temperature, vomiting, or evidence of lice, scabies, or a parasitic infestation should be isolated from other clients immediately. The client will be asked to leave the facility as quickly as possible to minimize the spread of the disease.
  - d. When signs of the communicable disease are gone, the patient may be readmitted to the program.
- C. In the rare event that a staff member or student is exposed to blood, blood products, or other potentially infectious body fluids, the following protocol applies:
  - a. The exposed staff member or student should self-administer First Aid, including washing the affected area with soap and water and/or flushing the mucous membranes or eye. Eyes must be flushed for a minimum of 15 minutes.
  - b. The exposed person will then immediately report the incident to their preceptor.
  - c. The staff member or student will then be referred for medical treatment (e.g., gamma globulin and/or Hepatitis B vaccine).
  - d. The medical facility will receive all known information about the exposure incident, including the type and site of the exposure route; HBV and HIV antibody status of the source person (if known); Hepatitis B vaccination status of the exposed person; and any other information that might influence treatment.
  - e. The exposed person will provide signed authorization/consent to have their blood tested for HBV and HIV.
    - i. Results of the laboratory test of HBV and HIV status must be kept confidential and shared only on a strict “need to know” basis.
    - ii. The exposed person has 90 days to decide if they wish to have HIV serological testing done, which means that the medical provider must hold the exposed person’s blood sample for a minimum of 90 days.
  - f. The exposed person is then responsible for submitting the **Accident Report** form to Employee Health Services University Hospital Clinics (456 West 10th Avenue, Suite 2A, 614-293-8146) within 4 days of the exposure.
    - i. The exposed person will complete the first portion of an **Accident Report** form in detail and submit it to the relevant clinical preceptor. Accident Report forms can be found here: [www.biosci.ohio-state.edu/safety/Accident.html](http://www.biosci.ohio-state.edu/safety/Accident.html).



- ii. The preceptor who has been notified of the exposure will then complete the second portion of the Accident Report form.
  - g. Typically, treatment must be initiated prior to the seventh day following exposure in order to be viable.
  - h. If the source person is identified, then that individual should also provide signed authorization/consent to have their blood tested for HBV and HIV.
    - i. Results of the laboratory test of HBV and HIV status must be kept confidential and shared only on a strict “need to know” basis.
    - ii. Costs of testing for the source individual will typically be borne by the source individual.
    - iii. If consent is not obtained, this fact must be documented in writing, with the date and time noted and signed by the individual preceptor seeking the consent. An explanation must be documented as well.
    - iv. If the source individual’s consent is not required by law, the source individual’s blood will be tested and the results documented. Results of the source individual’s testing will be made available to the exposed person, who will be informed of applicable laws and regulations concerning disclosure and confidentiality of the identity and infectious status of the source individual.
  - i. The OSU SLHC will ensure that legal protections and standards of confidentiality are applied to both the source and the exposed person. Costs of follow-up testing and treatment will be the responsibility of The Ohio State University.
  - j. If the exposed person is a student, the OSU SLHC must document that medical services have been rendered. Due to confidentiality of medical records, the OSU SLHC cannot maintain records of any treatment or follow-up care for exposed students. It is therefore the responsibility of the student and their medical provider to ensure that appropriate procedures are followed and records kept.
    - i. If the student is currently enrolled as a student at OSU, the Wilce Student Health Center will cover the cost of the initial examination. The student is responsible for all other costs.
- D. Contact offices at The Ohio State University:
- a. Employee Health Services, 456 West 10th Avenue, Suite 2A, (614) 293-8146
  - b. Wilce Student Health Center, 1875 Millikin Road, (614) 292-0150
  - c. Department of Environmental and Occupational Health and Safety, 1314 Kinnear Road, (614) 292-1284

## 9.8 – Personal Safety

- A. If a graduate clinician remains in the OSU SLHC after 5:00 p.m., they should let someone know where they are and what time they will be leaving.
- B. Relock doors upon entry into a clinical area. Do not let others in the building through locked doors when exiting the building.
- C. Do not walk alone at night. Call a friend or the campus escort service (2- 2101) instead. Avoid shortcuts and dimly lit areas. Keep a good grip on your belongings and walk purposefully. Be ready to run and scream if necessary.

- D. Cars should always be locked with windows closed. Do not leave valuable items in view. If at all possible, park in a well-lit area. Have keys ready to unlock and relock the doors. They can also be used as a weapon, if needed.
- E. If in need of emergency help, use an Emergency Help Phone, located around campus, or call 9-1-1 on any other phone (for city-wide emergency services).

## 9.9 – Crime Prevention

- A. Theft is the greatest security problem on campus. Graduate clinicians should follow these guidelines to help prevent and/or respond to theft:
  - a. Never leave personal belongings (books, purses, jackets, electronics) unattended. Either ask a friend to watch them or take them with you.
  - b. Remember to always close the door to the grad lounge, even if you will only be gone for a few minutes. It is often unoccupied, and anyone can walk in.
  - c. Be alert to unfamiliar persons loitering or wandering in the Speech and Hearing area. Greet them and ask them if you can be of help.
    - i. If they are clients, direct them to the clinic office.
    - ii. If not, you have indicated that you are aware of their presence. Get in the habit of noticing appearance and dress of unfamiliar persons in the event a report needs to be filed.
  - d. If a theft does occur, report it to a faculty or staff member and call Campus Police (2-2121) immediately.
- B. If you wish to remove clinic equipment, tests, and materials from the clinic, be sure to sign them out first and return them to their proper places after use. Report missing items to a preceptor or the Clinic Office Manager immediately. (See [Section 9.3](#) for more information.)

## 9.10 – Reporting Child Abuse

- A. Any professional working with children is required by law to document and report all incidences of suspected child abuse. It is punishable by law not to report a suspected case.
- B. If a clinician suspects any form of child abuse, they are to notify their preceptor immediately. The preceptor and the clinician will document the allegation together.
  - a. The preceptor will then contact the clinical director and department chairperson to notify them of the report.
  - b. A call will be made to Franklin County Board of Children’s Service or the Ohio Child Abuse Hotline (if the child resides outside of Franklin County). The call can be placed anonymously or identifying information may be given.
  - c. It is not the responsibility of the clinician or the preceptor to investigate further.
- C. Documentation of evidence and comments should continue on an ongoing basis. This information will remain under lock in the chairperson’s or director’s office for a period of 5 years.

### **9.11 – Sexual Harassment Policy**

- A. Sexual harassment encompasses any sexual attention that is unwanted, including verbal and/or physical conduct, assault, direct propositions of a sexual nature, and/or behavior that causes discomfort or embarrassment. Such behavior is prohibited by OSU’s Sexual Harassment Policy.
- B. Any complaint alleging a violation of this policy should be brought to the attention of the Director of Clinical Instruction and Research. Further details are available in the Policy and Procedure Manual provided by the Office of Human Resources (number 1.15, revised 11/5/93). A copy of the manual is available in the Department Office (110 Pressey Hall).

### **9.12 – Service Animal Policy**

- A. The only animals permitted in the OSU SLHC facility (halls, offices, and service delivery rooms) are service animals acting in an official capacity.

## Appendix A: Status of Course/Knowledge Competencies

**To:** Academic Advisor: \_\_\_\_\_

Clinical Advisor: \_\_\_\_\_

SLP/Au.D. Coordinator: \_\_\_\_\_

**Re:** Notification of failed (C+ or poorer) course grade

Student's Name:

\_\_\_\_\_

Course Information:

Course Number: \_\_\_\_\_

Course Title: \_\_\_\_\_

Course Instructor: \_\_\_\_\_

Semester Enrolled: \_\_\_\_\_

Course Grade: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Submit notification of a failing grade to the SHS personnel listed above by placing a copy of the form in each of their mailboxes. The form is to be submitted within 3 days of the grade's posting.

## Appendix B: CALIPSO Evaluation and Performance Rating Scale

### B.1 – Rating Scale for Student Performance in Clinic

#### **1: Failing Expected Performance: Skills are present <25% of the time**

Student needs specific direction from supervisor. Student does not alter unsatisfactory performance and does not make changes. Student does not execute protocol correctly. Student has poor understanding of testing and intervention. Supervisor provides numerous instructions and frequent modeling. Maximum supervision required.

#### **2: Emerging: Skills are present 26-50% of the time**

Student shows awareness of need to change behavior with supervisor input. Student needs specific direction and/or maximum demonstration from supervisor to perform effectively. Supervisor frequently provides instructions and support for all aspects of case management and services. Moderate to maximum supervision required.

#### **3: Present: Skills are present 51-75% of the time**

Skills need further refinement and development for consistency across settings. Supervisor provides ongoing monitoring and feedback focusing mostly on increasing the student's critical thinking on how/when to improve the skills. Student is aware of need to modify behavior, but does not do this independently. Moderate supervision is required.

#### **4: Consistent: Skills are present 76-90% of the time**

Skills are developed/implemented most of the time as appropriate at the graduate student level. Demonstrates ability to understand, apply, and analyze most aspects of testing and intervention. Student is aware and can modify behavior in-session and can self-evaluate. Student needs general direction from supervisor to perform effectively. Student readily adjusts performance and is beginning to generalize knowledge to other clients and settings. Moderate to minimal supervision required.

#### **5: Excelling: Skills are present more than 90% of the time**

Student can modify own behavior as needed and is an independent problem solver. Student can maintain skills with other clients and in other settings as appropriate for a graduate level student moving toward independence. Student demonstrates independent and creative problem solving. Student shows excellent knowledge of various aspects of testing and intervention. Supervisor acts as a collaborator to plan and suggest possible alternatives. Minimal supervision required.

## B.2 – Clinical Evaluation Skills

Rating Scale: 1 = Failing 2 = Emerging 3 = Present 4 = Consistent 5 = Excelling

	Speech Sound	Fluency	Voice	Language	Hearing	Swallowing	Cognition	Social Aspects	AAC
1. Conducts screening and prevention procedures (std IV-D, std V-B, 1a)									
2. Collects case history information and integrates information from clients/patients and/or relevant others (std V-B, 1b)									
3. Selects appropriate evaluation instruments/procedures – this includes behavioral observations, nonstandardized and standardized tests, and instrumental procedures (std. V-B, 1c)									
4. Administers and scores diagnostic tests correctly (std V-B, 1c)									
5. Adapts evaluation procedures to meet client/patient needs (std V-B, 1d)									
6. Possesses knowledge of etiologies and characteristics for each communication and swallowing disorder (std IV-C)									
7. Interprets, integrates, and synthesizes test results, history, and other behavioral observations to develop diagnoses (std V-B, 1e)									
8. Makes appropriate recommendations for intervention (std V-B, 1e)									
9. Completes administrative and reporting functions necessary to support evaluation (std V-B, 1f)									
10. Refers clients/patients for appropriate services (std V-B, 1g)									

### B.3 – Clinical Intervention Skills

Rating Scale: 1 = Failing 2 = Emerging 3 = Present 4 = Consistent 5 = Excelling

	Speech Sound	Fluency	Voice	Language	Hearing	Swallowing	Cognition	Social Aspects	AAC
1. Develops setting-appropriate intervention plans with measurable and achievable goals. Collaborates with clients/patients and relevant others in the planning process (std V-B, 2a, std 3.1.1B)									
2. Implements intervention plans (involves clients/patients and relevant others in the intervention process) (std V-B, 2b, std 3.1.1B)									
3. Selects or develops and uses appropriate materials/instrumentation (std V-B, 2c)									
4. Measures and evaluates clients'/patients' performance and progress (std. V-B, 2d)									
5. Collects data and uses related instrumentation during intervention sessions									
6. Uses appropriate models, prompts or cues and allows time for patient response									
7. Modifies intervention plans, strategies, materials, or instrumentation to meet individual client/patient needs (std V-B, 2e)									
8. Completes administrative and reporting functions necessary to support intervention (std V-B, 2f)									
9. Identifies and refers patients for services as appropriate (std V-B, 2g)									
10. Develops appropriate recommendations for next intervention period									

#### B.4 – Professional Practice, Interaction, and Personal Qualities

Rating Scale: 1 = Failing 2 = Emerging 3 = Present 4 = Consistent 5 = Excelling

Standard	Rating
Demonstrates knowledge of and interdependence of communication and swallowing processes (std IV-B, std 3.1.6B)	
Uses clinical reasoning and demonstrates knowledge of and ability to integrate research principles into evidence-based clinical practice (std IV-F, std 3.1.1B)	
Adheres to federal, state, and institutional regulations and demonstrates knowledge of contemporary professional issues and advocacy (includes trends in best professional practices, privacy policies, models of delivery, and reimbursement procedures/fiduciary responsibilities) (std IV-G, std 3.1.1B, 3.1.6B, 3.8B)	
Communicates effectively, recognizing the needs, values, preferred mode of communication, and cultural/linguistic background of the patient, family, caregiver, and relevant others (std V-B, 3a, std 3.1.1B)	
Establishes rapport and shows care, compassion, and appropriate empathy during interactions with clients/patients, family, caregivers, and relevant others (std. V-B, std 3.1B)	
Provides counseling regarding communication and swallowing disorders to clients/patients, family, caregivers, and relevant others (std V-B, 3c, std 3.1.6B)	
Collaborates with other professionals in case management (std V-B, 3b, std 3.1.1B, 3.1.6B)	
Displays effective oral communication with patient, family, or other professionals (std V-A, std 3.1.1B)	
Displays effective written communication for all professional correspondence (std V-A, std 3.1.1B)	
Adheres to the ASHA Code of Ethics and conducts him or herself in a professional, ethical manner (std IV-E, std V-B, 3d std 3.1.1B, 3.1.6B)	
Demonstrates professionalism (std. 3.1.1B, 3.1.6B)	



### B.5 – Minimum Objectives Met/Not Met

*All objectives must be met during each clinical rotation. Unmet objectives may result in remediation, a failing grade, or removal from the program.*

	<b>Met</b>	<b>Not Met</b>
Uses appropriate rate, pitch, and volume when interacting with clients/patients or others		
Demonstrates openness and responsiveness to clinical supervision and suggestions		
Personal appearance is professional and appropriate for the clinical setting		
Integrates theory and information for courses with the clinical process		
Demonstrates flexibility when implementing sessions and attempts a variety of therapeutic techniques		
Plans and provides appropriate home programming materials based on performance during the session		
Recognizes the ethical implication of one's clinical behavior, makes modifications and remains within the boundaries of education / experience		
Met timeline expectations for submissions of documentation, for meetings, and for clinical sessions, with no more than 2 late instances		

## Appendix C: Clinic Intervention Plan (CF-69)

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Clinic Advisor: \_\_\_\_\_ Academic Advisor: \_\_\_\_\_

Clinical Supervisor: \_\_\_\_\_

**General expectations of SLP student performance for clinical tasks and clients are listed in CALIPSO.**

**As a reminder:** Each semester the student must meet the “Minimum Performance Score for Satisfactory Grade” to pass the 6844/7844 class. **PLEASE NOTE:** Students must *also* be showing forward progression toward the minimum overall competency rating of 3 to be eligible for graduation on the cumulative evaluation in CALIPSO.

**You are being placed on an Intervention Plan for Autumn / Spring / Summer Semester 20\_\_\_\_. This Intervention Plan is based on the following** (circle applicable items):

- Student is not meeting *Technical Standards* consistently.
- Student received a “U” grade in 6/7844.
- Student did not meet the “Minimum Performance Score for Satisfactory Grade” during the Autumn / Spring / Summer Semester 20\_\_\_\_.
- On the Performance Evaluation’s “Met/Not Met” section in CALIPSO, one or more items was/were not met.
- Student needs improvement in clinical skill areas (clinical performance and/or documentation); see additional information.
- Not adhering to clinic deadlines – including, but not limited to, submission of required scheduling documents, lesson plans, SOAP notes, requested meetings with supervisor, etc.
- Consistent concerns from outside site supervisor about clinic performance; see additional information.
- Other; see additional information.

**Additional Information (attach additional documentation as necessary):**

**You are being placed on Clinic Probation for Autumn / Spring / Summer Semester 20\_\_\_\_. This probation (see [Section 8.2](#) and [Section 8.5](#) of the Graduate Handbook, Volume II) is based on the following** (circle applicable items):

- Student is not meeting *Technical Standards* consistently.
- Student received a “U” grade in 6/7844.

- Student did not meet the “Minimum Performance Score for Satisfactory Grade” during the Autumn / Spring / Summer Semester 20\_\_\_\_.
- On the Performance Evaluation’s “Met/Not Met” section in CALIPSO, one or more items was not met.
- Student needs improvement in clinical skill areas (clinical performance and/or documentation); see additional information.
- Not adhering to clinic deadlines – including, but not limited to, submission of required scheduling documents, lesson plans, SOAP notes, requested meetings with supervisor, etc.
- Consistent concerns from outside site supervisor about clinic performance; see additional information.
- Other; see additional information.

**Additional Information (attach additional documentation as necessary):**

**As a result of the above notation(s)** (circle applicable bullets):

Student must demonstrate improvement that shows successful forward progress over the course of the next semester. This progress must include (circle appropriate action items):

- A plan of action written by the student and approved by the Clinical Advisor and Clinical Supervisor for the semester to foster acquisition of identified skills outcomes.
  - Improvement in the above areas will be evidenced by:
    - Evidence of improvement noted in OSU SLHC Session Feedback form from Clinical Supervisor.
    - Scores of \_\_\_\_ at the midterm performance evaluation.
    - Scores of \_\_\_\_ at the final performance evaluation.
    - Other:
- Student is placed with additional supervisors in your next clinical assignment for supplemental input.
- Student received a “U” grade in \_\_\_ semester SHS 6/7844 and is placed on academic probation. Student must follow up with Academic Advisor for next steps.
- Student is dismissed from the SHS MA SLP Clinical Program.

Cc: Student: yes / no

Clinical Advisor: yes / no

Academic Advisor: yes / no

Graduate Studies Chairperson: yes / no

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Student Signature & Date