



Francis Marion University

School of Health Sciences

Department of

Speech-Language Pathology

Student Clinical Handbook

2022-2023



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Accreditation

We, the faculty and staff of the Department of Speech-Language Pathology believe that freedom of thought; innovation and creativity are fundamental characteristics of a community of scholars. To promote such a learning environment, we have a special responsibility to seek cultural diversity, to instill a global perspective in our students and to nurture sensitivity, tolerance, and mutual respect. Discrimination against or harassment of individuals on the basis of ethnicity, sex, religion, race or disability is inconsistent with the purposes of Francis Marion University.

The Master of Speech-Language Pathology (MSLP) education program in speech-language pathology {residential} at Francis Marion University is a Candidate for Accreditation by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) of the American Speech-Language-Hearing Association, 2200 Research Boulevard, #310, Rockville, MD 20850, 800-498-2071 or 301-296-5700. Candidacy is a “pre-accreditation” status with the CAA, awarded to developing or emerging programs for a maximum period of 5 years.

For complaints, please click here: <https://caa.asha.org/programs/complaints/>

Honor Code

Upon becoming a member of the FMU Community, students are expected to behave with honor and integrity in a manner that reflects the values of the institution. Students must interact in a civil manner, both in and out of the classroom, treating all persons and property with respect. Upon enrollment at FMU, students pledge not to lie, cheat, or steal. They also pledge not to violate the FMU Honor Code or any civil/criminal laws. Inasmuch as honor and integrity serve to define one’s character, the university community expects that students will not tolerate the aforementioned behaviors in others and will exhibit reasonable judgment in reporting students who violate the FMU Honor Code.

Clinical Program Policies and Procedures

Note: All FMU clinical activities and policies are based on strict adherence to CAA guidelines.

This program strictly adheres to the American Speech-Language-Hearing Association (ASHA)'s Code of Ethics and all clinical educators and graduate student clinicians will provide services in accordance with their knowledge and skills as outlined by ASHA's Scope of Practice.

American Speech-Language-Hearing Association. (2016). *Code of ethics* [Ethics]. Available from www.asha.org/policy/.

American Speech-Language-Hearing Association. (2016). *Scope of practice in speech-language pathology* [Scope of Practice]. Available from www.asha.org/policy/.

Council for Clinical Certification in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association. (2018). *2020 Standards for the Certificate of Clinical Competence in Speech-Language Pathology*. Retrieved from www.asha.org/certification/2020-SLP-Certification-Standards.

**Department of Speech-Language Pathology
Supervision Requirements
and
Clinical Practicum Expectations**

Supervision Requirements

“To meet ASHA's Standards for the Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP), student clinicians must be supervised by an individual who 1) holds ASHA certification in the appropriate profession, 2) has completed a minimum of 9 months of clinical work (or the part-time equivalent) after earning the CCC-SLP, and 3) has completed a minimum of 2 hours of professional development in clinical instruction/supervision (see Standard VII-B). University programs also may require the supervisor to hold the necessary state credential to practice in their setting, i.e., license and/or teacher certification.” (ASHA, Student Supervision FAQs).

Annually and/or prior to a new Clinical Educator or Clinical Supervisor supervising a FMU MSLP graduate student clinician, the Coordinator for Clinical Education confirms that the individual meets these requirements.

Why do we supervise?

Requirements for the Certificate of Clinical Competence by ASHA include the completion of a minimum of 400 clock hours of supervised clinical experience with individuals who present a variety of communication and swallowing disorders across the lifespan. This includes the following breakdown (FAQs: Clinical Practicum for Certification in Speech-Language Pathology):

- A minimum of 25 structured observation hours before beginning graduate clinical practicums.
- Up to 50 hours of required clinical experience may be accrued in an undergraduate accredited program.
- 325 hours of clinical experience must be accrued in the graduate program you are attending.

How much of the practicum must be directly supervised?

“According to Standard V-E of both the 2014 and 2020 SLP certification standards, the amount of direct supervision must be commensurate with the student’s knowledge, skills, and experience; must not be less than 25% of the student's total contact with each client/patient; and must take place periodically throughout the practicum. Supervision must be sufficient to ensure the welfare of the individual receiving services.” (ASHA, Student Supervision FAQs).

Over the course of your clinical practicum experiences, it is typical for graduate student clinicians to require one-to-one supervision initial in all new settings and/or with a patient who has a new disorder. By the end of each term, it is expected that graduate student clinicians should be able to independently conduct their sessions. This progress is closely monitored within CALIPSO and documented within the “Student Evaluations.” A minimum score of 3 in all areas on the “Cumulative Student Evaluation” is required to successfully complete the program.

Who sets the standards?

The many outcomes of each clinical course and the associated practicums are intended to provide on-campus/off-campus clinical experiences to graduate student clinicians who have met the necessary qualifications to participate in the practicum(s) as defined by the American Speech-Language-Hearing Association, and the FMU Department of Speech-Language Pathology. Please see the link below for the current CAA/CFCC Standards:

<https://www.asha.org/certification/2020-slp-certification-standards/>

To move to the next clinical course and associated practicum, the graduate student clinician must demonstrate 80% proficiency in each student learning outcome (SLO) associated the clinical course and associated practicum that they are currently enrolled in.

Translating Theory to Practice

The program strives to teach our graduate student clinicians how to synthesize current evidenced-based practice materials that are taught in academic coursework into their clinical experiences. To meet this end, the following is used to support student clinicians as they translate theory to practice.

Standard Operating Practice – Translating Theory to Practice

1. When new practices are introduced to students in the classroom, they will first receive instruction in the basics of the practice.
 - a. Instruction could include:
 - i. Evidence-basis
 - ii. Steps to conduct the practice
 - iii. Fidelity measures to collect data on adherence to protocol
2. After knowledge has been provided, students will receive hands-on practice in a low-stakes environment out of the natural context (i.e., in the classroom).
 - a. Hands-on practice could include:
 - i. Reviewing video examples
 - ii. Case studies
 - iii. Role-play
 - b. All hands-on practice should include real-time feedback from the instructor and pre/post activity discussions led by the instructor to assist students in reaching a set level of competency.
3. Once a set level of competency has been reached, hands-on practice will be conducted in-context/in the natural environment.
 - a. The instructor or trained supervisor can demonstrate use of the practice first while the student observes. Discussions should occur during and/or after the observation.
 - b. The student will then use the practice in-context with the instructor/trained supervisor providing real-time feedback and support.
 - c. As competency increases, the instructor/trained supervisor can decrease support to providing periodic feedback during and/or after the session.

This tool will be invaluable in assisting graduate students' acquisition of the various SLOs that they are responsible for demonstrating proficiency in their clinical practicums.

On-Campus Clinical Expectations

Students will be assigned weekly patient(s) in the on-campus clinic. They are responsible for collaborating with their assigned clinical educator to complete a past medical history (PMH) review, and then it is the student's responsibility to select the appropriate evaluation materials, design and submit weekly lesson plans, compose, and submit into the electronic medical record (EMR) all necessary documentation, to include SOAP Notes, evaluations, plan of care (POC), and discharge summaries (d/c). Further, each On-Campus graduate student clinician is also responsible for weekly TORSH Self-Reflections to assess their growing clinical skills. The graduate student clinician and their assigned clinical educator will also engage in interprofessional practice via continuity of care with each patient's referring physician and various members of their allied health team, and/or team members with the local education agency (LEA), after written consent has been provided.

It is imperative that students embed current evidenced based practice into every lesson plan, even for comprehensive diagnostic sessions. To develop a competent plan of care (POC) and S.M.A.R.T. goals that transition into routines-based intervention, the graduate student must demonstrate that they are synthesizing the academic content into the clinic via the evidence provided in their lesson plans. Lesson plans that present insufficient or poor evidence will be returned to the graduate student clinician with recommendations for improvement.

Each clinical educator will have posted office hours. Should you need to meet with your assigned clinical educator for 1:1 mentorship, please do so during those times. Your clinical educator will instruct you on how to schedule an appointment.

Off-campus practicum site student responsibilities

- Comply with the applicable by-laws, regulations, policies and procedures of the site and its staff.
- Maintain professional liability insurance of at least \$1,000,000.00 per occurrence and not less than 3,000,000.00 per year.
- Wear clothing and identification which is usually and customarily worn in the relevant patient care or ancillary department by the professional staff at the site.
- Report contacts with potentially infected blood or body fluids, or needle sticks immediately to the designated staff off-campus and Coordinator of Clinical Education at FMU.
- Abide by the existing rules and regulations of the site, including, without limitation, its rules and regulations with respect to patients/client/student confidentiality.
- Agree that in the event they violate any of the rules and regulations of the site, they shall be subject to immediate dismissal from participation in the clinical learning experience at the discretion of the appropriate personnel at each site.

Off-Campus Clinical Expectations

Upon successful completion of on-campus practicums, graduate student clinicians will be assigned off-campus clinical practicums. In this setting, each student is responsible for collaborating with their assigned clinical educator to complete past medical history (PMH) reviews. It is the student's responsibility to select the appropriate evaluation materials, design and prepare therapy plans in

written form) and compose and submit all necessary documentation into the appropriate records system. Necessary documentation may include but is not limited to SOAP Notes, evaluations, plans of care (POC), and discharge summaries. The graduate student clinician and their assigned clinical educator will engage in interprofessional practice via continuity of care with each patient's referring physician and various members of their allied health team, and/or team members with the local education agency (LEA), after written consent has been provided.

In this setting, office hours to meet with your assigned clinical educator may not be feasible, so please seek their guidance on how they would like you to communicate or ask questions regarding evaluations, treatment plans, etc.

While the Coordinator of Clinical Education does consider the graduate student clinician's desires for external clinical practicum sites, the placement decision is made to ensure that each graduate student clinician meets the KASA standards of learning. A graduate student clinician deserves the right to refuse an external clinical practicum site, however, in so doing they may jeopardize their plan of study and it could result in delayed graduation.

Graduate student clinicians need to anticipate earning a minimum of 150 clinical clock hours each fall and spring semester of their second year, and 50 clinical clock hours in the summer in their off-campus clinical practicums. Students must track their hours and ensure that they meet the requirements of the state for which they desire licensure after graduation. The student and Coordinator of Clinical Education will discuss this information in advising sessions while planning for future practicums.

Practicum sites have different procedures, practices, and documentation systems. Students must prepare early for the fast pace and a steep learning curve. Graduate student clinicians will need to meet the requirements of their external practicum placements. They are required to meet documentation deadlines and learn new systems, such as various EMR platforms.

The Coordinator of Clinical Education will provide an introduction for the graduate student clinician to their assigned clinical educator upon confirming the placement. The student must then contact the supervisor to seek guidance on preparation for their unique setting. The faculty encourages students to seek the guidance of classmates who have previously completed a practicum at the same location.

Teaching/Learning Strategies

Various teaching and learning strategies utilized in the Off-Campus Clinic and within your Clinic Class include, but are not limited to:

- Observations
- Grand Rounds or IFSP/IEP Meetings
- Weekly Clinical Educators Small Group Meetings
- Assigned Readings
- Assigned Videos
- Assigned Podcasts
- Assigned Standardized Assessments Administration
- Assigned Clinical Writing Prompts
- Assigned Simucases with extensions
- Interactive Discussion Threads on Blackboard

- Resume Building during Clinic Midterm Clinic Advising
- ASHA Continuing Education Courses for Student Participation
- Audio Recordings of Mindfulness Strategies

Clinical Grades

The clinical practicum grade is partially determined by the level of commitment in, and performance of each graduate student’s clinical responsibility and performance within their clinical practicum experience. This is measured by clinical performance evaluation(s) in CALIPSO completed by your assigned clinical educator/supervisor. The remaining clinical practicum grade is determined by the successful completion of coursework, as outlined in the corresponding syllabus.

Clinical Practicum	Practicum Weight	Coursework Weight
SLP 550	40%	60%
SLP 580	60%	40%
SLP 601	70%	30%
SLP 620	75%	25%
SLP 621	80%	20%

Grading Scale for Final Course Grade:

The final grade will be based upon points earned for all course assignments.

- A = 90 -100
- B+ = 85 - 89
- B = 80 - 84
- C+ = 75 – 79
- C = 70 – 74
- F = 69 and below

CALIPSO Grades:

Clinical educators assign grades within CALIPSO as an evaluation of the student performance in the clinical practicum. The grading is based on a 1-5 scale for the competencies required by ASHA.

Course Evaluation

Students must earn 80% or higher to successfully complete each student learning outcome (SLO). Students performing below this level are responsible to increase their level of competency by meeting with the involved clinical educator/clinical supervisor, and/or the Coordinator of Clinical Education and/or Graduate Studies Coordinator to develop an intervention. Each clinical practicum builds upon its predecessor; therefore, each graduate student clinician must successfully complete their current practicum before they can move on to the next.

Student Performance--Midterm and Final Course Evaluation

Clinical Educators will discuss students’ performance with each student individually before submitting the midterm and final Performance Evaluation in CALIPSO. The student is responsible for scheduling a meeting with their clinical educator to discuss scores at both midterm and final. If the student disagrees with the score, they should review it closely with their supervisor and refer to the CALIPSO Performance Rating Scale to better understand the score. A clinical educator may make changes as necessary. The clinical educator will type the student's name on the electronic evaluation form as confirmation that the meeting occurred and the student is aware of the score,

regardless of student agreement with the score. If an agreement cannot be made regarding scores, the student may contact the Coordinator of Clinical Education for further follow-up.

Clinical Educator Feedback

At the conclusion of every semester, it is the graduate student clinician's responsibility to complete the "Supervisor Feedback Form" within CALIPSO. Please provide honest feedback as to the experiences garnered from that site, both with respect to growing your clinical skill set and therapeutic presence, how evidence-based practice was implemented, and your interprofessional practice experiences as well. The Coordinator for Clinical Education will review these documents, and when appropriate, share them with both your assigned clinical educator and/or your assigned clinical educator. Students are **not** allowed to submit comments or feedback regarding clinical experiences on public platforms (social media or websites). They must use the designated platform (CALIPSO) to submit feedback.

What to do in the event a concern arises

Occasionally, a graduate student clinician may encounter a situation, as simple as a communication breakdown, or more grievous such as intimidation, harassment, be subjected to unwanted/inappropriate advances, be subjected to passive aggressive behaviors, sexism, racism, microaggressions, ableism, and homophobia. If any of these occur, the student should complete the following steps:

1. If appropriate, speak with the assigned clinical educator/supervisor regarding the concern.
2. If it is not resolved, then speak with Coordinator for Clinical Education to work on a resolution to the situation.
3. If it is still not resolved, then the coordinator for clinical education will collaborate with the Coordinator for Graduate Studies to work on a resolution to the situation.
4. If it is still not resolved, then the Coordinator for Clinical Education will collaborate with the Department Chair for a resolution to the situation.

Please be advised, if a graduate student clinician feels fearful for their well-being, they must immediately contact the Coordinator of Clinical Education at (843) 661.1664

**Department of Speech-Language Pathology
Student Clinician Professionalism Policy**

Graduate Student Clinician:

A. Ethical Practices

- Conducts all clinical work in accordance with the FMU Student Code of Conduct and adheres to the Code of Ethics set forth by the American Speech-Language Hearing Association.

B. Professionalism

- Prepares for and conducts clinical services as assigned.
- Prepares for and conducts meetings/conferences/consultations (reviews appropriate files, develops questions and/or key points for discussion).
- Makes appropriate arrangements and notifies all concerned regarding any schedule/location change or cancellation.

C. Punctuality

- Attends all assigned clinical practicum days in their entirety, except for documented emergencies, and may not request time off from clinical practicum.
- On-Campus: Arrives a minimum of 30 minutes prior to the start of a patient's session to ensure accurate preparation of necessary materials and cleanliness of designated therapy room.
- Off-Campus: Arrives at the designated time per clinical educator's request. Tardiness is not accepted.
- Therapy sessions should begin promptly and end promptly to allow sufficient time for cleanup and preparation for the next session.
- In case of student clinician illness, it is the student clinician's responsibility to:
 - a. Notify clinical educator/supervisor in email correspondence with Coordinator of Clinical Education on copy (cc) of the email.
 - b. Discuss arrangements for make-up sessions, (if possible) with clinical educator/supervisor
- Adheres to deadlines for all written assignments and clinical documentation, as outlined in syllabus and by clinical educator/supervisor's site requirements. Late work is not accepted.
- Attends all sessions/meetings/conferences/consultations for their entirety.

D. Confidentiality

- Adheres to The Health Insurance Portability and Accountability Act of 1996 in all forms of communication and actions.
- Retains patient folders and electronic medical records in assigned locations within the FMU Center for Speech, Language, and Hearing.
- Utilizes discretion concerning patient information in written and oral communication with others.

E. Personal Appearance

- Wears a name badge when engaged in clinical activities.

- Wears FMU MSLP scrubs or adheres to external clinical practicum site uniform when engaged in clinical activities. Individual facilities may have additional or more stringent guidelines.
- Trims fingernails to an acceptable length for patient/clinician safety.
- Maintains and promotes a professional image.
- Wears no fragrances within the clinic for patient/clinician safety.

F. Communication

- Utilizes appropriate oral/written communication in all clinical activities, including, but not limited to:
 - Patients
 - Caregivers
 - Clinical Educators/Supervisors
 - Classmates/Peers
 - Faculty/Staff
 - Individuals responsible for patient care such as allied health members, case managers, teachers, etc.

G. Accountability

- A hard clinic folder is kept up to date each semester during which the patient receives services. It is the graduate student-clinician's responsibility to initial/date the day they reviewed the documentation at the start and conclusion of each term. It should include, but is not limited to:
 - Copy of a current prescription for Speech Therapy
 - Copy of a current insurance card
 - Copy of patient/caregiver photo identification
 - Signed copy of HIPAA consent
 - Signed copy of consent to treat
 - Hard copies of Diagnostic/Assessment Reports and POCs, Hard copies of assessments administered
 - Hard copies of all medical records provided
 - Hard copies of academic records provided
 - Hard copies of IFSP/IEP documents provided
- The electronic medical record (EMR) documentation is kept up to date each semester during which the patient receives services. It is the graduate student-clinician's responsibility to ensure that all documentation is correct/accurate. It should include, but is not limited to:
 - Evaluation
 - 90-day plan-of-care (POC)
 - Daily SOAP notes
 - Discharge summary
 - Medical insurance
 - List of medications
 - List of risk factors
 - List of ICD-10 codes
- A work folder with completed lesson plans that include clinical educator/supervisor feedback will be kept separately from the hard clinic file

- Uses universal safety precautions whenever necessary.
- Adheres to the current Francis Marion University COVID-19 Protocols.

H. Electronic Communication Devices:

- Cell phones, pagers, and other electronic communication devices should be turned off during class and clinical practicums.

I. Students with Disabilities:

- The purpose of this policy is to reaffirm FMU's commitment to comply with the laws regarding equal opportunity for all qualified students with disabilities who have identified themselves to the University in a timely manner as individuals with a disability in all aspects of campus life. Students should be aware of the University's policy on students with disabilities provided here and available [on the University's website](#).
- FMU fully supports students personally with a breadth of services to address any goals, needs, special concerns or questions they may have. Whether of an academic, emotional, physical, social, spiritual or financial nature, we offer compassionate staff, valuable resources and supportive advice and counseling. Any student requiring accommodations due to a diagnosed disability or illness should make an appointment with Disability Services to provide the required documentation.

<https://www.fmarion.edu/counselingandtesting/disability-services/>If a student has a disability that qualifies under the American with Disabilities Act (ADA) and requires accommodations, he/she should contact the Office of Counseling and Testing (OCT) for information on appropriate policies and procedures. Disabilities covered by ADA may include learning, psychiatric, physical disabilities, or chronic health disorders. Students can contact the OCT if they are not certain whether a medical condition/disability qualifies.

Address: Francis Marion University Office of Counseling and Testing
S. Evander Drive
Florence, SC 29506
Phone: (843) 661-1841

Individuals with hearing impairments can contact the OCT using the South Carolina Relay Service. The Relay Service may be reached by dialing 711.

J. Student Rights, Complaints, and Academic/Clinical Misconduct:

- The official policies of the University concerning student rights and complaints, honesty and academic misconduct can be found in the Francis Marion University Course Catalog. In general, a complaint(s) should be brought first to the Clinical Educator(s), then the Coordinator of Clinical Education, and then, if the complaint(s) cannot be resolved, to the Department Chair.

Department of Speech-Language Pathology Documentation Requirements for Practicum Participation

The following documents will be required to participate in clinical practicums. You will not begin your clinical practicums until they have been provided. It is your responsibility to ensure that the documents are uploaded into the “Compliance and Immunization” portion of CALIPSO and added to your hard clinic file. Additionally, some of these documents will need to be updated annually. These due dates will be built into your clinical practicum coursework, however, once again, it is your responsibility to ensure that they have been added to the “Compliance and Immunization” portion of CALIPSO, and your hard clinic file.

1. **Criminal Background Check:** All graduate students are required to complete and pass a national criminal background check. The program has partnered with Castlebranch to fulfill this requirement. An email from Castlebranch will be sent to you with a unique link. You will be required to pay the set fee to complete the background check. You will need to successfully complete and pass the criminal background check annually to participate in clinical practicums.

*****Background Checks for International Students:** International students are required to provide evidence of background checks conducted in their homecountry and in the United States. Fees and timelines associated with international background check processes may exceed those published for domestic students. Processes and timelines for international student completion of background checks will be handled on a case by-case basis.

2. **Drug Screen:** All graduate students are required to complete and pass a drug screen. The program has partnered with Castlebranch to fulfill this requirement. An email from Castlebranch will be sent to you with a unique link. You will be required to pay the set fee to complete the drug screen. Directions on where to find the test will be offered at the time of registration. You will need to successfully complete and pass the drug screen annually to participate in clinical practicums.
3. **Basic Life Support and CPR:** All graduate students are required to complete a Basic Life Support (BLS) and CPR (infant through adult) training, as well as maintain current certification for the duration of the program. Certification is valid for two years. Students will need to register for this course through the link provided by the program; however, the course will be completed together during clinic orientation.
4. **Tuberculosis Screening:** All graduate students are required to complete a tuberculosis screening (TB Test) annually. These can be completed at the FMU Student Health Center with an appointment. If it is necessary, a chest x-ray and/or a TB QuantiFERON test are also acceptable.
5. **Copy of your Current Driver’s License:** Over the course of your clinical practicum experiences, you will be responsible for providing your own transportation to practicums. Practicums are assigned within a 3-hour radius of Francis Marion University.

6. **Immunization Policy:** Documented evidence of delivery of immunization or blood titers for the following immunizations must be reported to the FMU Student Health Services and the Department of Speech Language Pathology during Student Orientation in the first semester. Students must sign a release of records form. This form's authorization is limited to verification of health screening and immunization records only and allows the Coordinator of Clinical Education to proceed with clinical experience placements for students in adherence with external sites's memorandums of agreements. Students should be aware that specific sites may have health clearance requirements beyond those required by the University; participation at those sites requires that students submit to additional health clearance requirements at their own expense.
7. All graduate students are responsible for providing medical records that indicate the specific dates the following immunizations were administered; this can be found on the "Francis Marion University Speech-Language Pathology Program Student Immunization Record":
 - **Tuberculosis Screening**
 - *Measles, Mumps, Rubella (MMR)*
 - *Hepatitis B virus (HBV)*
 - *Varicella (Chickenpox)*
 - *Tetanus-Diphtheria-Pertussis (Tdap)*
 - *Polio Vaccine*
 - *Meningococcal Vaccine ACWY*
 - *COVID-19* (if you participated)*

In addition, the *annual influenza (flu) vaccine* is required by the FMU Speech, Language, and Hearing Center unless there are religious or medical exceptions. Lastly, be advised, that the *COVID-19 vaccine* may be required by external clinical practicum sites.

8. **Liability Insurance:** All graduate students are responsible for securing their own liability insurance to practice as a student clinician. On-campus and off-campus clinical practicums will not begin until proof of coverage has been provided. Most insurance policies are issued on an annual basis.
9. **Occupational Safety and Health Act (OSHA) Safety Training:** All graduate students are required to complete Blood Borne/Airborne Pathogens Exposure, Infection Control Training, and general OSHA Safety Guidelines, etc., as part of the requirements for on-campus clinical practicum. This training occurs during clinic orientation. Students may be required by their external clinical site to complete additional on-site training. Instructions for completing these requirements will be given to students by the Coordinator of Clinical Education at their time of placement.
10. **HIPAA / Privacy Training:** Information that identifies patients or clients is held in confidence by clinical professionals and this assurance of confidentiality is an essential aspect of building trust between patients/clients and healthcare professionals. Identifiers include name, address, and date of birth, phone number, email address, record number, photographs, videos, clinic identification number/s, diagnoses, and other information that could allow someone to identify the client/patient. Exceptions to confidentiality include specific written authorization from the client to release information as well as communication between student clinicians, supervisors, and other professionals managing

that patient/client in secure locations, certain communications for treatment, payment, or healthcare operations, or when a patient/client is believed to be in danger (from self or from another individual). Student clinicians are expected to familiarize themselves with and abide by the FMU Center for Speech, Language, and Hearing requirements for the handling of information. Some external clinical practicum sites may require additional privacy or confidentiality before beginning clinical practicums. This training occurs during clinic orientation.

*****HIPAA Violations may result in dismissal from the MSLP program. *****

Confidentiality

1. Do not discuss your patient by name except with your clinical educator, clinic staff, or approved caregivers and professionals during communication for continuity of care.
2. Do not discuss the patient in public areas, for example: elevator, waiting room, restrooms, stores, etc.
3. Do not mention your patient's name in class presentations or discussions.
4. Ensure that an Authorization for Consent and/or Release of Protected Health Information form has been accurately filled out prior to releasing information or sharing protected health information with other professionals or caregivers
5. Do not leave patient reports, lesson plans, or other written information unattended.
6. Follow all the office rules regarding checking out and returning patient folders.
7. Patient folders are not to leave the Francis Marion University Speech, Language, and Hearing Center.
8. Remind any pre-requisite or graduate student clinical observers that they should respect patient confidentiality.

Department of Speech-Language Pathology
Additional Requirements for Practicum Participation

In addition to the aforementioned documents, all graduate students will be required to participate in and/or purchase the following items prior to their first day of on-campus clinical practicums:

1. **CALIPSO:** All graduate students are required to have CALIPSO (<https://www.calipsoclient.com/fmarion/sites>) An email from CALIPSO will be sent to you with a unique link. You will be required to pay the one-time fee of \$85.00 that is good for their duration of attendance within the program.
2. **Simucase:** Membership to Simucase (<https://www.simucase.com/speech-pathology>) is required as part of your clinical courses. An email from Simucase will be sent to you with a unique link. You will be required to pay the one-year student membership which costs \$99.00. You will earn clinical clock hours and relevant experiences through this program. Students must earn a score of 90% or above and meet the recommended times provided by Simucase to earn clinical clock hours.
3. **Scrubs:** All graduate students are required to purchase the designated scrubs through Palmetto Uniform for a preset fee. Palmetto Uniform will be onsite during clinical orientation and accepts payments in the form of **debit/ credit card, cash, however, they do not accept checks of any kind.** Please be advised, that if the graduate student is being sponsored, (WIOA, Eckered Connect, Vocational rehab, etc), then they will need to come in the store **two weeks prior** to orientation to ensure that their scrubs arrive in a timely manner.
4. **Name Badges:** All graduate students are required to purchase the “Francis Marion University-Student Clinician-Name Tag-Custom” through HC Brands. Please use this link: <https://www.hcbrands.com/francis-marion-university-student-clinician-name-tag-custom> You will be required to pay the cost for the name badge, approximately \$15.00, which includes shipping and handling.
5. **Consent to Disclose Student Information with Clinical Sites:** Students will be asked to allow Coordinator for Clinical Education to share information with external clinical practicum sites, such as background check, immunization records, HIPAA training certificates, BLS/CPR certification, resume, or other information. Authorizing the release of this information is voluntary. Students may revoke this consent at any time. Lack of consent may limit or delay external clinical placements. Refusal to authorize release of information may impact student's ability to participate in required clinical practicums and may limit the graduate student's ability to complete the coursework requirements for graduation in a timely manner. **This form will be signed during clinical orientation.**

CALIPSO Competencies

Evaluation

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 (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, 1c)
8. Makes appropriate recommendations for intervention (std V-B, 1c)
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)

Intervention

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 interventions 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. Modifies intervention plans, strategies, materials, or instrumentation to meet individual client/patient needs (std V-B, 2c)
6. Completes administrative and reporting functions necessary to support intervention (std V-B, 2f)
7. Identifies and refers patients for services as appropriate (std V-B, 2g)

Professional Practice, Interaction and Personal Qualities

1. Demonstrates knowledge of and interdependence of communication and swallowing processes (std IV-B, std 3.1.6B)
2. 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)
3. 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, IV-H, std 3.1.1B, 3.1.6B, 3.8B)
4. 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)
5. Establishes rapport and shows care, compassion, and appropriate empathy during interactions with clients/patients and relevant others (std 3.1.1B)
6. Uses appropriate rate, pitch, and volume when interacting with patients or others
7. Provides counseling regarding communication and swallowing disorders to clients/patients, family, caregivers, and relevant others (std V-B, 3c, std 3.1.6B)
8. Collaborates with other professionals in case management (std V-B, 3b, std 3.1.1B, 3.1.6B)
9. Displays effective oral communication with patient, family, or other professionals (std V-A, std

3.1.1B)

10. Adheres to the ASHA Code of Ethics and Scope of Practice documents and conducts him or herself in a professional, ethical manner (std IV-E, V-B, 3d, std 3.1.1B, 3.1.6B)

11. Demonstrates professionalism (std 3.1.1B, 3.1.6B)

12. Demonstrates openness and responsiveness to clinical supervision and suggestions

13. Displays organization and preparedness for all clinical sessions

14. Sequences tasks to meet objectives

15. Provides appropriate introduction/explanation of tasks

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

Clinical Excellence in Writing

1. Displays effective written communication for all professional correspondence (std V-A, std 3.1.1B)

2. Organizes information following correct format

3. Writes narratives in a logical/concise manner

4. Uses appropriate language/terminology

5. Uses supervisory suggestions and constructive criticism to modify reports/documentation as needed

Department of Speech-Language Pathology

Essential Functions

“In order to acquire the knowledge and skills requisite to the practice of speech-language pathology to function in a broad variety of clinical situations, and to render a wide spectrum of patient care, individuals must have skills and attributes in five areas: communication, motor, intellectual-cognitive, sensory-observational, and behavioral-social. These skills enable a student to meet graduate and professional requirements as measured by state licensure and national certification. Many of these skills can be learned and developed during the course of the graduate program through coursework and clinical experiences. However, there are skills that are most inherent and should be present when a student begins the program.”

(Council of Academic Programs in Communication Sciences and Disorders, 2007)

Admitted students are required to review and acknowledge their capacity to fulfill these essential functions. Failure to meet or maintain the essential functions may result in a recommendation for dismissal from the program

Nondiscrimination Statement: Students and Professionals Who Speak English With Non-mainstream Accents and Dialects

The Department of Speech-Language Pathology adheres to the American Speech-Language-Hearing Association’s non-discrimination policy on non-mainstream accents and dialects.

Statement of Non-Discrimination Policy

It is the policy of the University that no person shall be denied admission to any education program or activity on the basis of any legally prohibited discrimination involving, but not limited to, such factors as race, religion, sex, color, national or ethnic origin, creed, age, disability, sexual orientation, gender, pregnancy, veteran status or any other any status or condition protected by applicable federal, state, or local law. Under Title IX, any educational institution receiving federal financial assistance must notify the school community of its nondiscrimination policy and the name and contact information for its Title IX coordinator and adopt and publish grievance procedures providing for the prompt and equitable resolution of sexdiscrimination complaints.

Every member of the FMU community should also be aware that it is the policy of the University to prohibit all forms of sexual and gender-based discrimination and misconduct, that such behavior violates both law and this Policy, that the University shall respond promptly and effectively to reports of violations of this Policy and shall take appropriate action to prevent, to correct, and when necessary, to discipline behavior that violates this Policy.

ASHA Position Statement

It is the position of the American Speech-Language-Hearing Association (ASHA) that students and professionals in communication sciences and disorders who speak with accents and/or dialects can effectively provide speech, language, and audiological services to persons with communication disorders as long as they have the expected level of knowledge in normal and disordered communication, the expected level of diagnostic and clinical case management skills, and if modeling is necessary, are able to model the target phoneme, grammatical feature, or other aspect of speech and language that characterizes the client's particular problem. All individuals speak with an accent and/or dialect; thus, the nonacceptance of individuals into higher education programs or into the professions solely on the basis of the presence of an accent or dialect is discriminatory. Members of ASHA must not discriminate against persons who speak with an accent and/or dialect in educational programs, employment, or service delivery, and should encourage an understanding of linguistic differences among consumers and the general population.

American Speech-Language-Hearing Association. (1998). *Students and professionals who speak English with accents and nonstandard dialects: Issues and recommendations* [Position Statement]. Available from www.asha.org/policy.

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Department of Speech-Language Pathology Clinical Practicum Attendance Policy

Speech-Language Pathology graduate student clinicians enrolled in a clinical practicum course have an obligation to provide patients with regular and consistent therapy sessions. Consistent attendance in the assigned clinical practicum, (either on or off-campus) is required to ensure students gain appropriate skills across disorders. When graduate student clinicians anticipate that personal obligations will cause an extensive absence during a semester, they should consider not registering for clinic that term. This will require approval from the Department Chair. Graduate student clinicians may need to extend their program to accumulate the experiences and types of clinical hours required for graduation.

Clinic Class Attendance

- Class attendance is required. This includes meetings with clinical educators and any meetings regarding assigned patients. Unexcused absences will not be permitted and will result in a 5% decrease in the final grade. For excuses, doctor's notes/documents are required, which can be verified by the instructor.
- Students are expected to be present and prepared prior to the start time as indicated for all classes.
- Arriving 15 minutes late to class and the aforementioned activities counts as an unexcused absence.
- If a student is absent **more than twice** to the number of required classes, aforementioned activities, or on-campus/off-campus practicum evaluation/therapy sessions per week during regular semesters, or more than 15 percent of required sessions during accelerated semesters, then the student may be given a Clinical Warning and provided with an appropriate Clinical Intervention/Remediation Plan, or may be removed from the clinical practicum site, which could result in delay in expected graduation.
- Excused absences should be discussed with the instructor in advance (if possible) and verified with tangible evidence. It is the student's responsibility to make arrangements for missed work. It is the instructor's discretion to accept assignments and to make up examinations.
- The instructor will be available during posted office hours by appointment only. The best time to ask questions relevant to all students is during class and clinical educator meetings.

Clinical Practicum Attendance

The graduate student clinician is expected to attend all scheduled assigned clinical practicum days/sessions in full as is written and agreed upon in the Clinical Practicum Contract specific to their placement. Only personal illness, death of an immediate family member, or pre-approved extenuating circumstances will be considered an excusable absence and a reason for missing practicum. This extends to late arrivals and early dismissals as well. Graduate student clinicians must notify the Coordinator of Clinical Education and clinical educator immediately if they are unable to attend practicum, will be arriving late, or leaving early. This correspondence must occur in written form via e-mail. Be advised that you may be asked to supply tangible evidence for the absence, which could be added to your clinic file.

- If a student is absent **more than twice for** on-campus/off-campus practicum, the student may be given an Educational Warning and provided with an appropriate Clinical Intervention/Remediation Plan, or may be removed from the clinical practicum site, which could result in delay in expected graduation.

**Department of Speech-Language Pathology
FMU Center for Speech, Language, and Hearing**

Contact Information:

The FMU Center for Speech, Language, and Hearing is located in the Lower Level of the Leatherman Medical Education Complex
201 West Evans Street Florence, SC 29051
Phone: (843) 661.1486
Fax: (843) 665.5350
Email: SpeechLangTx@fmarion.edu

In addition to participating in ongoing research, the FMU Center for Speech, Language, and Hearing offers a variety of clinical experiences for graduate student clinicians including community-based screens, on-campus evaluations, as well as individual and group intervention for infants, toddlers, children, teens, and adults with communication and swallowing disorders. Services are available on campus, via teletherapy, or community-based visits too.

Type of Services Available

Pediatric Therapy (Birth to Teens)

- Articulation and Phonological Impairments
- Augmentative and Alternative Communication
- Receptive Language Disorder
- Expressive Language Disorder
- Mixed Language Disorder
- Pediatric Feeding and Swallowing Disorders
- Stuttering
- Voice

Adult Therapy (Teens to Geriatrics)

- Aphasias
- Apraxia and Dysarthria
- Augmentative and Alternative Communication
- Feeding and Swallowing Disorders
- Memory and Cognition
- Voice

Communication Bill of Rights

National Joint Committee for the Communication Needs of Persons with Severe Disabilities (NJC)

All people with a disability of any extent or severity have a basic right to affect, through communication, the conditions of their existence. Beyond this general right, a number of specific communication rights should be ensured in all daily interactions and interventions involving persons who have severe disabilities. To participate fully in communication interactions, each person has these fundamental communication rights:

1. The right to interact socially, maintain social closeness, and build relationships
2. The right to request desired objects, actions, events, and people
3. The right to refuse or reject undesired objects, actions, events, or choices
4. The right to express personal preferences and feelings
5. The right to make choices from meaningful alternatives
6. The right to make comments and share opinions
7. The right to ask for and give information, including information about changes in routine and environment
8. The right to be informed about people and events in one's life
9. The right to access interventions and supports that improve communication
10. The right to have communication acts acknowledged and responded to even when the desired outcome cannot be realized
11. The right to have access to functioning AAC (augmentative and alternative communication) and other AT (assistive technology) services and devices at all times
12. The right to access environmental contexts, interactions, and opportunities that promote participation as full communication partners with other people, including peers
13. The right to be treated with dignity and addressed with respect and courtesy
14. The right to be addressed directly and not be spoken for or talked about in the third person while present
15. The right to have clear, meaningful, and culturally and linguistically appropriate communications

Brady, N. C., Bruce, S., Goldman, A., Erickson, K., Mineo, B., Ogletree, B. T., Paul, D., Ronski, M., Sevcik, R., Siegel, E., Schoonover, J., Snell, M., Sylvester, L., & Wilkinson, K. (2016). Communication services and supports for individuals with severe disabilities: Guidance for assessment and intervention. *American Journal on Intellectual and Developmental Disabilities*, *121*(2), 121–138.

Department of Speech-Language Pathology Patient Referral Process

Initial Patient Appointment

The following documents are required prior to being scheduled for their initial evaluation:

1. Prescription for Speech Therapy
2. Recent Medical Records
3. Recent IFSP/IEP Documentation (if applicable)
4. List of Current Therapeutic Restrictions (if applicable)

It is the responsibility of the Assigned Clinical Educator to schedule the initial patient appointment within the EMR. It is inappropriate for the graduate student clinician to reach out and contact the patient/caregiver directly. If they are found to do so, it will result in a Clinical Warning.

Initial Appointment

During the initial evaluation, the patient and caregiver will need to provide and/or complete the following requirements with the Assigned Clinical Educator, graduate student clinician, and with the Clinic Administrative Assistant:

1. Copy of Current Insurance(s)
2. Copy of Picture ID
3. Comprehensive Consent Form
4. HIPAA Caregiver Consent
5. Patient Intake Form

After the conclusion of the initial evaluation, if the patient does warrant services, they will need to schedule with the Clinic Administrative Assistant, who will add them to the EMR.

Ongoing Patient Appointments

The Clinic Administrative Assistant will conduct weekly reminder phone calls to the patient and/or their caregiver regarding their standing appointment time. It is inappropriate for the graduate student clinician to reach out and contact the patient/caregiver directly. If they are found to do so, it will result in a Clinical Warning.

Patient Attendance Policy

If a patient must cancel a session, they are to notify the Clinical Educator and/or the Clinic Administrative Assistant at (843) 661.1486. Within the comprehensive consent form, it states “3 unscheduled absences over a 90-day plan of care may result in discharge from therapy service”. If a patient is found in violation of this policy alternatives may include, but are not limited to:

1. Placing the patient on cancellation list and scheduling as openings become available.
2. Transitioning to teletherapy.
3. Placing the patient on hold until resolution in personal/medical affairs can be reached.
4. Transitioning the patient to a local education agency (LEA) or a clinic closer to their home.
5. Discharging the patient.

Department of Speech-Language Pathology Patient Evaluation and Treatment Process

Evaluation Process

The program emphasizes the evidence behind a comprehensive dynamic assessment process for all patients that are evaluated within the clinic. Therefore, it is the graduate student clinician's responsibility to familiarize themselves with all of the standardized assessments, (both norm referenced and criterion based), within the FMU MSLP Materials Room. The graduate student clinician is responsible for selecting the appropriate materials that align with the patient's needs, based upon the referral documentation and interactions during the patient intake process. If the student designs one evaluation lesson plan based upon the referral information, to subsequently have the patient arrive and realize the evaluation needs are starkly different, then they are responsible for knowing the materials quickly to amend their evaluation lesson plan *immediately*.

An example of a comprehensive diagnostic approach for a 2-year-old with a complaint of language delay on the prescription could include:

1. Administration of a global assessment, (such as the DAY-C).
2. Administration of a language specific evaluation, (such as the TOLD P:5)
3. Administration of the Routines Based Intervention Evaluation, (RBI evaluation)

Upon successful completion of the comprehensive evaluation, it is the graduate student clinician's responsibility to independently compose the report in the EMR and to submit it for approval from their Assigned Clinical Educator. Examples will be provided during clinic orientation.

Selection of Appropriate ICD-10 and CPT Codes

The FMU Center for Speech, Language, and Hearing, while it is a teaching institute, also bills for the services rendered. Therefore, it is critical that the graduate student clinician is familiar with the ethics of selecting the appropriate ICD-10 Codes for diagnoses, as well as can appropriate select the CPT Codes for the services that are rendered. These codes will be added to both evaluation documentation, plans of care (POC), as well as to SOAP notes, and discharge summaries.

To learn more about ICD-10 Codes please visit

<https://www.asha.org/practice/reimbursement/coding/icd-10/>

To learn more about CPT Codes please visit

<https://www.asha.org/practice/reimbursement/coding/superbill-templates-for-audiologists-and-speech-language-pathologists/>

To learn more regarding billing/coding/documentation writing please visit

<https://www.asha.org/practice/reimbursement/medicaid/>

Plan of Cares

After completing the initial evaluation, it is the responsibility of the graduate student clinician to compose the initial 90-day plan of care (POC), which is sent, in conjunction with the

evaluation, to the referring physician for optimal continuity of care and interprofessional practice. POCs are due every 90 days (about 3 months) for ongoing patient care. These are typed into the EMR. It is the graduate student clinician's responsibility to independently compose the report in the EMR and to submit it for approval from their Assigned Clinical Educator. Examples will be provided during clinic orientation.

Treatment Process

Lesson Plans

Graduate student clinicians are required to complete a comprehensive lesson plan for every session, including the evaluation process. The purpose of this is to synthesize the information learned in your academic coursework into your clinical practice. View your lesson plans as a bridge to bring current evidenced-based practice into your clinical skills. These will be submitted to your Assigned Clinical Educator prior to your session, (as outlined in each term's syllabus). Your Assigned Clinical Educator will review the lesson and provide you feedback. During the session, they will utilize the lesson plan to provide written feedback on it to provide you after the session. It is advised that you use this feedback to help you in your TORSH rubric self-assessment. Please utilize APA citation when providing the evidence for your lesson plan. Please see the current FMU MSLP Lesson Plan at the end of this section for an example.

SOAP Notes

After the conclusion of every treatment session, a SOAP note is completed. It is the graduate student clinician's responsibility to independently compose the SOAP note, type it into the EMR, and to submit it for approval from their Assigned Clinical Educator. The graduate student clinician will need to ensure accuracy in selection of the CPT codes for each therapy session.

To learn more about S.M.A.R.T. SOAP Notes please visit
<https://www.asha.org/students/mentoring/step/goals/>

To learn more about RBI SOAP Notes please visit
<http://fgrbi.com/>

In addition, SOAP Note examples will be provided during clinic orientation.

Discharge Summaries

A discharge summary is indicated when:

1. Patient has successfully met all goals.
2. Patient relocates geographically.
3. Patient transitions to a different clinical setting due to medical or academic needs.
4. Patient requests a transfer to a different clinical setting.

It is the graduate student clinician's responsibility to independently compose the discharge summary, type it into the EMR, and to submit it for approval from their Assigned Clinical Educator. The Assigned Clinical Educator will work with the graduate student clinician to demonstrate interprofessional practice for continuity of care and communicate this document to the referring physician.

Patient Records

Graduate student clinicians, clinical educators, and the clinic administrative assistant are responsible for adhering to HIPAA standards at all times. Therefore, it is imperative that patient records, both in the EMR, as well as the hard copies, are to be kept secure at all times. As such, here are a few reminders for accessing/using patient records:

Hard Files

1. They are to be kept in a locked filing cabinet behind a locked door when not in use.
2. Clinical educators and graduate student clinicians must sign them out and the designated clipboard from the clinic administrative assistant, on the same day.
3. Files must be always kept in the clinic and may not leave the clinic.
4. Please be careful of prying eyes and ensure that the files are concealed from classmates, therefore do not open them in the student workroom in front of classmates who are not assigned to that specific patient.
5. Ensure that all papers are secure upon receipt and return to the clinic administrative assistant.
6. The graduate student clinician is responsible for completing the chart audit, found on the inside of the patient's hard file, at the beginning and end of the semester. The assigned Clinical Educator will review after the student has completed it.

EMR

1. Each user has a unique access code to log-in and a unique code to sign off on notes. **DO NOT SHARE YOUR CODES.**
2. Please be careful about prying eyes and ensure the privacy of your computer screen when accessing the EMR. The files must be concealed from classmates, therefore do not open the patient's records in the EMR when you are in the student workroom in front of classmates who are not assigned to that specific patient.
3. Ensure that you log out of the EMR after accessing it and lock your computer too.

Teletherapy

Some of our patients receive services via teletherapy. If a graduate student clinician is assigned a patient(s) who will be receiving services via teletherapy, it is their responsibility to adhere to the following guidelines:

1. Only use FMU MSLP electronics to conduct the sessions. Graduate student clinicians are ***not*** allowed to utilize their own personal electronic devices. This poses a HIPAA risk.
2. Services ***must*** be rendered in an FMU MSLP treatment room. Graduate student clinicians may ***not*** conduct speech therapy from an outside location, such as, but not limited to: student work room, apartment, home, library, vehicle, etc. This poses a HIPAA risk.



TORSH

Graduate student clinicians within the program utilize “Today’s One Room School House” (TORSH), for the purpose of self-assessment via a rubric through the aid of biofeedback. The multiple purposes of this tool include, but are not limited to:

1. Allow students to critically recognize where their strengths and weaknesses are and to make improvement plans accordingly.
2. Assist students in transcription of patient evaluations.
3. Allow students to chart patient progress and use it as a communication tool with caregivers.
4. Improve communication between graduate student clinicians and their clinical educators by having visual aids and rubrics to discuss student progress.

Current FMU MSLP TORSH Rubrics Available

1. Coach - Coaching Feedback Checklist
2. Coach - Session Summary
3. Provider - Self Assessment
4. Routines-Based Interview – Fidelity Coach RBI-FC Practice Check
5. Simulated Routines Intervention Checklist
6. More rubrics to follow, please check TORSH regularly

Steps for TORSH

1. Ensure the appropriate TORSH Rubric has been selected for the session. Please do so with your Assigned Clinical Educator and add it to your Lesson Plan.
2. After obtaining written consent on the “Comprehensive Consent Form”, in their On-Campus Clinical Practicums, each graduate student will record their assigned patient during each session. It is imperative that the student record on the designated FMU MSLP I-Pads only. ***Failure to do so and utilization of their personal belongings will result in a HIPAA violation and may result in expulsion from the graduate program.***
3. The graduate student clinician will then upload the video from the FMU MSLP I-Pad into the TORSH app.
4. After confirmation of upload, the video is deleted from the FMU MSLP I-Pad to ensure HIPAA confidentiality.
5. The graduate student will then grade themselves according to the predetermined rubric in live time on the uploaded video.

TORSH training will be given during clinic orientation. For further support, please see the TORSH manual in the clinic materials room.



Electronic Medical Record (EMR):

Graduate student clinicians, as well as clinical educators, and the clinical administrative assistant within the program utilize “Advanced MD” as the electronic medical record. The multiple purposes of this tool include, but are not limited to:

1. Ease of documentation for all evaluations, POCs, SOAP Notes, and discharge summaries.
2. Allows for quick feedback from Clinical Educators to Graduate Student Clinicians with respect to clinical documentation.
3. Ease of billing for both patients, their caregivers, and the program.

Patients are seen within one to two weeks of the start of every semester; therefore, it is imperative that each graduate student clinician familiarizes themselves with their assigned patient(s) within the EMR as soon as they are informed by their Clinical Educator. It is a HIPAA violation for a graduate student clinician to access a patient’s file that they are not *currently* assigned to.

It is critical that all parties involved in patient care, from the graduate student clinician, assigned clinical educator, and the clinic administrative assistant, due their due diligence and seek any changes in patient’s insurance regularly, as that can disrupt both billing and treatment sessions as some insurances require a prior authorization. If a patient, or a caregiver, informs you of an insurance change, please obtain copies of their new insurance card and provide them to the clinic administrative assistant immediately.

EMR training will be given during clinic orientation and will be ongoing with your assigned clinic educator, as well as addressed in your clinic course throughout your time here.

For further support, please see the Advanced MD manual in the clinic materials room.

**Department of Speech-Language Pathology
Clinical Intervention/Remediation and/or Educational Warnings**

Intervention/Remediation

An intervention is necessary when a student falls below the expected criteria established to determine if the competency of SLO has been met. Please note that an intervention is a type of remediation. It is expected that all FMU MSLP graduate students will achieve a level of competency for all SLOs of no less than 80%. Therefore, graduate students performing below the expected criteria are responsible to increase their level of competency by meeting with the involved faculty, Clinical Educator, Coordinator of Clinical Education, and/or the Graduate Studies Coordinator.

Important Points on Intervention/Remediation:

- Intervention/Remediation does not change the grade earned on an assignment, examination, or in a course.
- A plan shall be developed and followed until the desired level of competency is achieved. Remedial steps may include retesting, written chapter reviews, case scenarios, additional readings, additional clinical assignments, and/or further academic courses.
- The plan will be signed and dated by students and relevant faculty during initial meeting to show agreement, and again after the plan is successfully completed.

Intervention/Remediation for Clinical Practicums

- To move ahead to the next clinical practicum, a student must successfully complete the practicum that they are currently enrolled in. If for some reason a graduate student clinician is unable to do so, despite documented intervention/remediation attempts, they will be enrolled in SLP 645 a/b/c, which is an asynchronous clinical practicum course(s). Enrollment in this course could be a documented intervention/remediation for the graduate student clinician.

Occasionally, there will arise a situation that will warrant not only a Clinical Intervention/Remediation, but also a Professional Warning. It is imperative that the graduate student clinician understands that warnings, both academic and clinical, are cumulative. The FMU MSLP Program only allows a total three (3) warnings before the student is removed from the program.

Department of Speech-Language Pathology Materials Room

Materials Room

The FMU MSLP program materials room is on the lower level of the Leatherman Medical Complex in room 003. It holds an extensive variety of materials for graduate student clinicians to utilize for conducting comprehensive assessments as well as routines-based intervention for individuals across the lifespan. Included within these materials are the I-pads, to be utilized for TORSH, as well as copies of supplemental reading texts, amongst numerous other items. To accurately manage the FMU MSLP program materials a check-in and check-out system must be followed at all times. Please see the guidelines below for utilizing materials:

1. All materials must stay within the clinic and may not leave the lower level at any time. If they are found outside of the clinic, a clinical warning will be issued.
2. Graduate student clinicians must check the desired material(s) out with the designated graduate assistant in the materials room, (or with the coordinator for clinical education at a predetermined time).
3. To check the materials out, the graduate assistant must visually verify the contents of the box/material(s) to ensure accuracy.
4. Both graduate student clinician and graduate assistant initial for items being checked out.
5. Upon return, graduate assistant must visually verify the contents of the box/material(s) to ensure accuracy.
6. Both graduate student clinician and graduate assistant initial for items being checked in.
7. If items are found missing, then the last graduate student clinician and/or graduate assistant to check them in/out will be held fiscally responsible for their replacement.

Please note, graduate assistants are responsible for conducting an inventory at the start and end of each term to verify that all clinical materials have been returned. Again, if items are found missing, then the last graduate student clinician and/or graduate assistant to check them in/out will be held fiscally responsible for their replacement.

Graduate assistants are also tasked with keeping an inventory for assessment protocols. If the graduate student clinician notices that a standardized assessment is running low, they need to notify the graduate assistant immediately, such that new ones can be ordered in a timely manner.

In addition to the materials housed in room 003, there are more materials located in the clinic administrative assistant's office. If you desire to use these materials, you will need to check them in and out there. These materials include, but are not limited to:

1. Audiometers for hearing screens
2. Wipes
3. Facemasks
4. Gloves
5. Oral Mech Exam Materials

If you are interested in serving as a graduate assistant in the materials room, please speak with the Department Chair.

Department of Speech-Language Pathology Student Work Room

Student Work Room

The FMU MSLP student workroom is in room 021 on the lower level of the Leatherman Medical Complex. It is always open to currently enrolled FMU MSLP students.

Guidelines for utilization of this room:

1. No eating or drinking allowed in the student work room at any times. If a student is found in violation, a clinical warning will be administered.
2. Please use your FMU Student ID badge to access the copier in this room. The copier is only to be used for FMU MSLP purposes.
3. If you need to print materials specifically for a session in the clinic, these may be printed in the clinic administrative assistant's office. Please visit the office to pick up these materials.
4. The computers in the student work room are only to be used for FMU MSLP purposes.
5. A comment/feedback box is in the student workroom. Please provide written feedback for the program as you are able. These are reviewed regularly, and we want to hear your insight.

Words of Caution:

1. Do not open patient records, either hard copies or electronic, in front of classmates that are not currently assigned to that patient's care. This is a HIPAA violation.
2. Please adhere to the current FMU COVID-19 policy for the number of individuals allowed into this space at any given time. Students found in violation will be given a clinical warning.

If you have any additional questions regarding appropriate use of this space, please speak with either the Coordinator of Clinical Education, the Coordinator for Graduate Studies, or the Department Chair.

Department of Speech-Language Pathology Additional Clinical Practicum Experiences

Additional Clinical Practicum Experiences

The program offers a variety of clinical experiences for currently enrolled graduate student clinicians beyond their assigned clinical practicums each term. Additional clinical practicum experiences that contribute to earning clinical clock hours include, but are not limited to:

- Peer-to-Peer screens for hearing, voice, dysphagia, oral mechanism exams, etc
- Pediatric community-based screens such as “Child Find”. This is IDEA driven initiative where we collaborate with local education agencies and conduct hearing, voice, speech, and language screens at local early childhood centers through kindergarten facilities.
- FMU Community Screens, during which we collaborate with students and faculty throughout FMU to conduct hearing, voice, and cognitive screens.
- Group Support Sessions: For example, an AAC support group during which intervention strategies for functional communication are provided to both patients and caregivers.

To participate in these activities, students will need to sign the following document entitled “Peer-to-Peer Consent” and return to the Coordinator of Clinical Education to be added to their hard clinic file. If this is not on file, then the graduate student clinician may not participate. Some of these community screens will require the graduate student clinician to fill out additional paperwork. To participate, the graduate student clinician must sign up using the volunteer link provided. If they cancel their designated time, or they are running late, it is the graduate student clinician’s responsibility to notify the Coordinator of Clinical Education. Failure to do so will result in a clinical warning.

Additional opportunities that occur are conducted with the purpose of bridging academic content and current evidenced-based practice knowledge into skills within the clinic. In short, to grow and expand your clinical skill set using current evidenced-based interprofessional education and hands-on experiences. Examples of these activities include, but are not limited to:

- Guest speakers from allied health and community-based services: Occupational Therapists, Physicians, Social Workers, etc. (Please see the following document in the handbook).
- Live demonstrations: Flexible Endoscopic Evaluation (FEES), Augmentative and Alternative Communication devices from various representatives, etc.
- Community Event Attendance*: South Carolina Assistive Technology Expo, South Carolina Speech, Language, Hearing Association Convention and/or Fall Workshop (SCSHA), American Speech-Language-Hearing Association Convention (ASHA), National Black Association for Speech-Language and Hearing (NBASLH), etc.
***It is the responsibility of the graduate student clinician to pay all costs associated with attendance at these events. ***

Department of Speech-Language and Hearing Credentialing and Professional Organizations

Credentialing and Professional Organizations

1. Licensure and Certification:

- a. ASHA Certification: <https://www.asha.org/certification/>
- b. South Carolina Board of Speech-Language Pathology and Audiology: <https://llr.sc.gov/aud/>
- c. South Carolina Department of Education: <https://ed.sc.gov/educators/certification/portal/>

An individual who has successfully completed an ASHA-approved SLP program without an educator certification track but presents documentation of at least one year of employment as an SLP in a public-school setting will be issued a Professional certificate.

2. Professional Organizations

- a. American Speech-Language-Hearing Association (ASHA) : <https://www.asha.org/>
 - Multicultural Constituency Groups
- b. National Student Speech Language Hearing Association (NSSLHA): <https://www.nsslha.org/>
- c. South Carolina Speech Language Hearing Association (SCSHA): <https://www.scscha.net/>

Sources of Information

For information regarding the academic program, professional organizations, and licensure, refer to the following sources:

3. FMU Department of Speech-Language Pathology Website:

<https://www.fmarion.edu/healthsciences/speechlanguagepathology/>

- a. Program Admission
- b. Current Academic Curriculum
- c. Center for Speech, Language, and Hearing
- d. Faculty and Staff Members
- e. MSLP Academic Handbook

Department of Speech-Language Pathology Emergency Preparedness

FMU's Emergency Alert System

Francis Marion University's **SwampFox Alerts** system provides the University with a fast and efficient means for notifying the FMU community — students, faculty, and staff — when campus emergencies occur. The alert system can be used 24 hours a day, 7 days a week. It sends messages via text, email, social media, on campus message boards, and to University-owned computers (e.g., in the computer labs around campus). Depending upon the nature of an emergency, the system may send users multiple messages, adding updated information as it becomes available. SwampFox Alerts are used for public safety emergencies and for official weather-related information such as closings. It is only used in the case of emergency. (Swamp Fox Alerts)

Becoming a part of the system:

Students

All FMU students are enrolled in **SwampFox Alerts** based on their University email address. Students who provide the University with a working mobile phone number as part of their official student records will receive text messages on their phones as well. No additional action is necessary to become part of the system, but students who are unsure if they supplied an up-to-date mobile phone for their student record, or who have acquired a new phone and number, may check their record, or update a record in the Patriot Portal online, in person, at the FMU Registrar's Office in Suite 118 of the Stokes Administration Building during normal business hours (Monday-Friday, 8:30 a.m. to 5 p.m.)

For more information on updating records, contact the Registrar's Office at 843-661-1174. (Swamp Fox Alerts)

FMU's COVID-19 Response Office

The program cannot express enough the severity of the COVID-19 Pandemic. If you feel unwell, or have knowingly had a COVID-19 exposure, you must notify the coordinator for clinical education, the coordinator for graduate studies, the department chair, as well as the FMU COVID-19 Response Office. For the safety of classmates, faculty, supervisors, and our patients, you may not return to campus or clinical practicum until the FMU COVID-19 Response Office has provided clearance and you supply the FMU MLSP Program with a copy of a negative test.

Office: University Center, Suite 205

Hours: Mon-Fri, 8:30 am to 5 pm

Phone: 843-661-4665

Email: CovidResponse@fmarion.edu

Department of Speech-Language Pathology Risk Management

Risk Management

For the safety of the patients seen at the clinic, as well as that of graduate student clinicians, faculty, and staff, it is critical that all safety precautions are followed. If you see a spill, a hazard, or a risk for you or another's well-being, then either address the situation, (if you are safely able to), or report it immediately to the coordinator for clinical education. Graduate student clinicians will be responsible for knowing and adhering to the following precautions. Failure to do so may result in a clinical warning.

Policy on Students Infected with Bloodborne Pathogens

It is the policy of FMU to have standardized procedures for the management of students infected with blood borne pathogens because of the history of the potential risk of provider-to- patient transmission of bloodborne pathogens.

Purpose

To define the procedures for the management of students infected with bloodborne pathogens.

Definitions

Bloodborne pathogen: A microorganism in the blood that can cause illnesses in humans. For this policy, bloodborne pathogens are limited to human immunodeficiency virus (HIV-1), hepatitis C virus (HCV) and hepatitis B virus (HBV).

Standard Precautions: Infection prevention guidelines by the Centers for Disease Control and Prevention (CDC) based on the principle that all blood, body fluids, secretions (except sweat), excretions, non-intact skin and mucous membranes may contain transmissible infectious agents. Standard precautions define a set of practices for hand hygiene, safe injection practices and use of gloves, gown, mask, eye protection or face shield depending upon anticipated exposure.

Provider to patient transmission risk: The risk that an infection will be acquired by a patient due to transmission of a pathogen from a health care provider. For blood borne pathogens, this risk depends upon 3 conditions: (a) the health care provider must have sufficient virus circulating in their bloodstream, (b) the health care provider must have an injury (e.g. puncture wound) or condition (e.g. non intact skin) that allows exposure of his/her blood to other infectious body fluids, (c) the provider's blood or infectious body fluid must come in direct contact with a patient's wound, traumatized tissue, mucous membrane, or similar portal of entry during an exposure-prone procedure.

Exposure prone procedures: Procedures known or likely to pose an increased risk of percutaneous injury to a healthcare provider and thus pose a risk of blood borne virus transmission. Procedures have been classified as Category 1: minimal risk of blood-borne virus transmission; Category 2: procedures in which blood-borne virus transmission is theoretically possible but unlikely; Category 3: procedures in which there is a definite risk of blood-borne virus transmission.

Bloodborne Pathogens Guidelines: <https://www.cdc.gov/niosh/topics/bbp/genres.html>

Clinic Cleaning

Student Clinicians must disinfect surfaces, toys, treatment materials in the treatment rooms between each patient visit.

If clinic personnel have been notified that someone has tested positive for COVID-19, the clinical area must be disinfected by FMU University cleaning personnel.

Clinic Cleaning Guidelines:

https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html#anchor_1617551609730

<https://www.epa.gov/sites/default/files/2020-04/documents/disinfectants-onepager.pdf>

COVID-19

The SARS-CoV-2 virus is the infectious disease known as coronavirus disease (COVID-19). Being knowledgeable about the illness and the virus's propagation is the best strategy to stop or slow down transmission. By keeping a distance of at least one meter between people, donning a mask that fits properly, and often washing your hands or using an alcohol-based rub, you can prevent infection in both yourself and other people. When it's your turn, get your vaccination, and abide by any local advice.

When an infected person speaks, sneezes, sings, or coughs, the virus can spread from their lips or nose in minute liquid particles. From larger respiratory droplets to tiny aerosols, these particles are diverse. It's crucial to follow proper respiratory protocol, such as coughing into a bent elbow, and to maintain eye contact.

COVID-19 Precautions: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>

Handwashing

One of the most crucial actions we can take to prevent getting sick and infecting others is washing our hands. By not washing hands with soap and running water, many diseases and disorders can spread. To prevent getting sick and infecting others with germs, the CDC advises cleansing hands in a particular way. Based on the results of several research, recommendations for efficient handwashing and hand sanitizer use were produced.

1. Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.
2. Lather your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.
3. Scrub your hands for at least 20 seconds. Need a timer? Hum the “Happy Birthday” song from beginning to end twice.
4. Rinse your hands well under clean, running water.
5. Dry your hands using a clean towel or air dry them.

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

Standard Precautions: <https://www.cdc.gov/oralhealth/infectioncontrol/summary-infection-prevention-practices/standard-precautions.html>

These will be addressed in depth in the clinical orientation.



Student Consent for Peer-to-Peer Screens/Evaluations

I _____ understand that throughout my academic/clinical career here within the Francis Marion University's Master of Speech-Language Pathology Program, that I will engage in peer-to-peer screens and evaluations with fellow classmates. I give consent for participation in all screens and evaluations. Further, I understand that I am responsible for adhering to the FMU Student Code of Conduct, Family Educational Rights and Privacy Act (FERPA), Health Insurance Portability and Accountability Act (HIPAA), as well as to the American Speech-Language-Hearing Association (ASHA) Code of Ethics, regarding privacy of participation and outcomes of the peer-to-peer screens and evaluations. Violation of these terms will be addressed according to the severity of the situation, and may include academic/clinical warnings, remediation plans, and/or expulsion from the program.

Student Signature

Date

Coordinator for Clinical Education Signature

Date



Daily Lesson Plan

Client:
Clinical Educator:
Student Clinician:
Date of Session:

Plan of Care Goals Please Highlight Today's Targeted Goal	Procedures, Materials, and Techniques (Include evidence for rationale, and targeted strategies from TORSH Rubrics/EPIC 5-Q Visual Model)	Data Collection
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Clinical Educator Feedback

Client:
Clinical Educator:
Student Clinician:
Date of Session:

Lesson Plan Feedback	Session Feedback	Data Collection Feedback

Date: _____
Student Signature: _____
Clinical Educator Signature: _____

*Please place this in **Patient's Work File** when completed



Clinical Practicum Contract
SLP 620 Clinical Practicum IV

I student name understand that I have been assigned to an On-Campus Clinical Practicum Site at _

Location Name under the guidance of clinical educator name as my clinical educator for SLP 620

Clinical Practicum IV. My assigned days and times of the week are:

- Day of the week and hours of attendance (ie: Monday 8am-5pm)
- Day of the week and hours of attendance

Initial: _____

I understand that I am responsible for adhering to the clinical documentation requirements as outlined in the SLP 620 Clinical Practicum IV syllabus and failure to do so will result in an “F” for the practicum experience.

- I will submit complete diagnostic plans, treatment plans, SOAP notes, and any other required documentation within 24 hours or as directed by my clinical educator.

Initial: _____

Further, I understand that I am also responsible for adhering to the FMU Student Code of Conduct, as well as to the American Speech-Language-Hearing ASHA Code of Ethics as this is the profession that I have chosen to enter.

Initial: _____

I understand that I must attend all assigned clinical practicum days in their entirety, with the exception of documented emergencies, and may not request time off from clinical practicum. I must notify my clinical educator and Coordinator of Clinical Education of any absences or missed time at my practicum.

Initial: _____

Failure to meet these requirements may negatively impact the quality of care I give my patients, result in poor academic performance, and in grievous instances, result in a Clinical Warning or termination of my practicum experience.

Initial: _____

I will conduct all evaluations and interventions as prescribed by the treatment plan, including the time and frequency of the treatment.

Initial: _____

Ultimately, I am aware that it is my responsibility to earn the practicum hours as required by ASHA, such that I can successfully enter the profession as a Clinical Fellow upon graduation from the FMU MSLP program.

Initial: _____

I also understand that if at any time I have concerns with my clinical practicum, I need to speak first with my assigned Clinical educator and subsequently reach out to the Coordinator of Clinical Education. Further, I understand that I need to maintain mindfulness as a student clinician, and I am aware that FMU offers counseling services to currently enrolled students.

Initial: _____

I also understand that if at any time I have concerns with my clinical practicum, I need to speak first with my assigned clinical educator and subsequently reach out to the Coordinator of Clinical Education. Further, I understand that I need to maintain mindfulness as a student clinician, and I am aware that FMU offers counseling services to currently enrolled students.

Initial: _____

I have read the document in its entirety and any of my questions have been answered. I have received a copy of this document.

Student Signature

Date

Coordinator of Clinical Education Signature

Date



Clinical Practicum Contract
SLP 621 Clinical Practicum V

I **student name** understand that I have been assigned to an On-Campus Clinical Practicum Site at _

Location Name under the guidance of **clinical educator name** as my clinical educator for SLP 621

Clinical Practicum V. My assigned days and times of the week are:

- Day of the week and hours of attendance (ie: Monday 8am-5pm)
- Day of the week and hours of attendance

Initial: _____

I understand that I am responsible for adhering to the clinical documentation requirements as outlined in the SLP 621 Clinical Practicum V syllabus and failure to do so will result in an “F” for the practicum experience.

- I will submit complete diagnostic plans, treatment plans, SOAP notes, and any other required documentation within 24 hours or as directed by my clinical educator.

Initial: _____

Further, I understand that I am also responsible for adhering to the FMU Student Code of Conduct, as well as to the American Speech-Language-Hearing ASHA Code of Ethics as this is the profession that I have chosen to enter.

Initial: _____

I understand that I must attend all assigned clinical practicum days in their entirety, with the exception of documented emergencies, and may not request time off from clinical practicum. I must notify my clinical educator and Coordinator of Clinical Education of any absences or missed time at my practicum.

Initial: _____

Failure to meet these requirements may negatively impact the quality of care I give my patients, result

in poor academic performance, and in grievous instances, result in a Clinical Warning or termination of my practicum experience.

Initial: _____

I will conduct all evaluations and interventions as prescribed by the treatment plan, including the time and frequency of the treatment.

Initial: _____

Ultimately, I am aware that it is my responsibility to earn the practicum hours as required by ASHA, such that I can successfully enter the profession as a Clinical Fellow upon graduation from the FMU MSLP program.

Initial: _____

I also understand that if at any time I have concerns with my clinical practicum, I need to speak first with my assigned Clinical educator and subsequently reach out to the Coordinator of Clinical Education. Further, I understand that I need to maintain mindfulness as a student clinician, and I am aware that FMU offers counseling services to currently enrolled students.

Initial: _____

I also understand that if at any time I have concerns with my clinical practicum, I need to speak first with my assigned clinical educator and subsequently reach out to the Coordinator of Clinical Education. Further, I understand that I need to maintain mindfulness as a student clinician, and I am aware that FMU offers counseling services to currently enrolled students.

Initial: _____

I have read the document in its entirety and any of my questions have been answered. I have received a copy of this document.

Student Signature

Date

Coordinator of Clinical Education Signature

Date



Clinical Practicum Contract
SLP 580 Clinical Practicum II

I student name understand that I have been assigned to an On-Campus Clinical Practicum Site at _
Location Name under the guidance of clinical educator name as my clinical educator for SLP 580
Clinical Practicum II. My assigned days and times of the week are:

- Day of the week and hours of attendance (ie: Monday 8am-5pm)
- Day of the week and hours of attendance

Initial: _____

I understand that I am responsible for adhering to the clinical documentation requirements as outlined in the SLP 580 Clinical Practicum II syllabus and failure to do so will result in an “F” for the practicum experience.

- I will submit complete diagnostic plans, treatment plans, SOAP notes, and any other required documentation within 24 hours or as directed by my clinical educator.

Initial: _____

Further, I understand that I am also responsible for adhering to the FMU Student Code of Conduct, as well as to the American Speech-Language-Hearing ASHA Code of Ethics as this is the profession that I have chosen to enter.

Initial: _____

I understand that I must attend all assigned clinical practicum days in their entirety, with the exception of documented emergencies, and may not request time off from clinical practicum. I

must notify my clinical educator and Coordinator of Clinical Education of any absences or missed time at my practicum.

Initial: _____

Failure to meet these requirements may negatively impact the quality of care I give my patients, result in poor academic performance, and in grievous instances, result in a Clinical Warning or termination of my practicum experience.

Initial: _____

I will conduct all evaluations and interventions as prescribed by the treatment plan, including the time and frequency of the treatment.

Initial: _____

Ultimately, I am aware that it is my responsibility to earn the practicum hours as required by ASHA, such that I can successfully enter the profession as a Clinical Fellow upon graduation from the FMU MSLP program.

Initial: _____

I also understand that if at any time I have concerns with my clinical practicum, I need to speak first with my assigned Clinical educator and subsequently reach out to the Coordinator of Clinical Education. Further, I understand that I need to maintain mindfulness as a student clinician, and I am aware that FMU offers counseling services to currently enrolled students.

Initial: _____

I also understand that if at any time I have concerns with my clinical practicum, I need to speak first with my assigned clinical educator and subsequently reach out to the Coordinator of Clinical Education. Further, I understand that I need to maintain mindfulness as a student clinician, and I am aware that FMU offers counseling services to currently enrolled students.

Initial: _____

I have read the document in its entirety and any of my questions have been answered. I have received a copy of this document.

Student Signature

Date

Coordinator of Clinical Education Signature

Date



Clinical Practicum Contract
SLP 550 Clinical Practicum I

I student name understand that I have been assigned to an On-Campus Clinical Practicum Site at _

Location Name under the guidance of clinical educator name as my clinical educator for SLP 550

Clinical Practicum I. My assigned days and times of the week are:

- Day of the week and hours of attendance (ie: Monday 8am-5pm)
- Day of the week and hours of attendance

Initial: _____

I understand that I am responsible for adhering to the clinical documentation requirements as outlined in the SLP 550 Clinical Practicum I syllabus and failure to do so will result in an “F” for the practicum experience.

- I will submit complete diagnostic plans, treatment plans, SOAP notes, and any other required documentation within 24 hours or as directed by my clinical educator.

Initial: _____

Further, I understand that I am also responsible for adhering to the FMU Student Code of Conduct, as well as to the American Speech-Language-Hearing ASHA Code of Ethics as this is the profession that I have chosen to enter.

Initial: _____

I understand that I must attend all assigned clinical practicum days in their entirety, with the exception of documented emergencies, and may not request time off from clinical practicum. I must notify my clinical educator and Coordinator of Clinical Education of any absences or missed time at my practicum.

Initial: _____

Failure to meet these requirements may negatively impact the quality of care I give my patients, result in poor academic performance, and in grievous instances, result in a Clinical Warning or termination of my practicum experience.

Initial: _____

I will conduct all evaluations and interventions as prescribed by the treatment plan, including the time and frequency of the treatment.

Initial:

Ultimately, I am aware that it is my responsibility to earn the practicum hours as required by ASHA, such that I can successfully enter the profession as a Clinical Fellow upon graduation from the FMU MSLP program.

Initial: _____

I also understand that if at any time I have concerns with my clinical practicum, I need to speak first with my assigned Clinical educator and subsequently reach out to the Coordinator of Clinical Education. Further, I understand that I need to maintain mindfulness as a student clinician, and I am aware that FMU offers counseling services to currently enrolled students.

Initial: _____

I also understand that if at any time I have concerns with my clinical practicum, I need to speak first with my assigned clinical educator and subsequently reach out to the Coordinator of Clinical Education. Further, I understand that I need to maintain mindfulness as a student clinician, and I am aware that FMU offers counseling services to currently enrolled students.

Initial: _____

I have read the document in its entirety and any of my questions have been answered. I have received a copy of this document.

Student Signature

Date

Coordinator of Clinical Education Signature

Date

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