

# Clinic Handbook



## Kay Armstead Center for Communication Disorders

Department of Communicative Disorders & Sciences

Connie L. Lurie College of Education

San Jose State University

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Marcella McCollum, Clinic Director

## Table of Contents

<b>CLINIC ADMINISTRATION</b>	<b>3</b>
PRACTICUM COURSES	3
CLINIC PROCEDURES	4
<b>CLINIC POLICIES AND PROCEDURES</b>	<b>5</b>
CLINICAL MANAGEMENT	
CLINICIAN RESPONSIBILITIES	7
MID-SEMESTER AND END OF SEMESTER RESPONSIBILITIES	9
HOW TO APPLY TO UNDERGRADUATE CLINICAL PRACTICUM	10
HOW TO APPLY TO ON CAMPUS GRADUATE CLINICAL PRACTICUM	12
<b>OFF CAMPUS GRADUATE CLINICS (FINAL GRADUATE YEAR)</b>	<b>14</b>
APPLICATION PROCESS	
STUDENT TEACHING	19
EXTERNSHIP	22
<b>APPENDICES</b>	<b>29</b>
APPENDIX A: DRESS CODE	
APPENDIX B: CALLING GUIDE	
APPENDIX C: TREATMENT PLANS	
APPENDIX D: SOAP NOTES	
APPENDIX E: SELF-EVALUATION	
APPENDIX F: THERAPY REPORT GUIDELINES	
<i>THERAPY REPORT TEMPLATE</i>	
<i>DIAGNOSTIC REPORT TEMPLATE</i>	
APPENDIX G: INITIAL AND FINAL CLIENT CONFERENCE	
APPENDIX H: HOME PROGRAM	40
<i>HOME PROGRAM TEMPLATE</i>	41
APPENDIX I: CLINICIAN COMPETENCIES FORM – EVALUATION	42

## **The Kay Armstead Center for Communicative Disorders Clinic Administration**

The Kay Armstead Center for Communication Disorders is a non-profit community clinic that has been serving the needs of individuals of all ages, demonstrating a wide variety of speech, language and hearing difficulties, for over fifty years. The services are available to any person in the greater San Jose area at a discounted rate (compared to market value).

The CD&S Chair is responsible for the functioning and maintenance for the center and works in consultation with the Clinic Director and faculty.

Assessment and therapeutic services are provided by students in CD&S Department under the strict supervisory direction of the faculty. The supervisory faculty are experienced professionals who hold the national Certificate of Clinical Competence in Speech-Language Pathology and/or Audiology and are licensed by the State of California.

Graduate students are required to competently complete seven advanced clinical experiences. First year graduate students in speech-language pathology must competently complete a semester each of: a hearing screening course; advanced assessment; three therapeutic clinics. Second year graduate students in speech-language pathology must competently complete a full-time semester each of off campus practicum in a public school setting and a non public school setting.

## **The Kay Armstead Center for Communicative Disorders Practicum Courses**

Undergraduate Practicum Courses

- \*EDAU 177: Hearing Screening
- EDSP 177: Introductory Clinic Practicum

First Year Graduate Practicum Courses

- EDSP 277: Clinic I (Group or Child)
- EDSP 277: Clinic II (Adult, Group, or Child)
- EDSP 277: Clinic III (Adult, Group, or Child)

Or

- EDAU 277: Aural Rehabilitation (can count as one clinic I, II, or III Group)

AND

- EDSP 276: Advanced Assessment
- \* EDAU 177 if you didn't have hearing screenings in undergraduate curriculum

### **Second Year Graduate Practicum Courses**

- EDSP 269: Field Experience in the Public Schools
- EDSP 278: Externship Experience

# The Kay Armstead Center for Communication Disorders Clinic Procedures

## **Clinic Sequence**

Students enrolled in the regular MA program are expected to participate in clinic EACH semester of their 5 semester program. Most often, the first 3 semesters are on campus (with the exception of the Audiology and Aural Rehab clinics), and the last two semesters are off campus. 276 may be taken with a 277 clinic. Students must finish all on-campus and AU clinics before moving on to student teaching and externship.

## **Dropping Clinic**

If a student deems it necessary to officially drop a clinic from his or her academic load, the clinic supervisor, faculty advisor and clinic director must be notified in writing of the decision before permission is approved.

Dropping a clinic would be a rare occurrence based upon health problems or extremely unusual circumstances. Registering for a clinic requires a professional commitment on the part of the student. When a client is contacted, the Kay Armstead Center for Communicative Disorders has made a commitment to provide therapy for the client. If the commitment is broken, the clinic's reputation suffers. Therefore, it is assumed that when a student has registered for a clinic, he or she will, in fact, fulfill their responsibility.

## **Insurance**

All students interacting with clients must carry liability insurance. The department covers the cost of liability insurance for students through an umbrella policy through SJSU. This liability insurance is active for students registered in clinic courses. Students will not be allowed to engage in therapy, assessment, student teaching or externship if they are not officially enrolled in the appropriate course.

## **Diagnostic Center Fees**

Each student wishing to have access to the Diagnostic Center and its materials and online inventory system must pay a fee of \$30 per semester. Students participating in clinical or academic classes are required to pay this fee to allow access to the DC. Late and replacement fees are automatically assigned.

## **Dress Code**

Dress professionally at all times. Business casual dress is expected. Lab coats are optional, and recommended in lieu of more "casual" dress when clothes may become soiled during therapy activities. See Appendix A for specific guidelines.

## **Confidentiality**

All clinical personnel, including student clinicians, must maintain confidentiality of client information at all times. Clinicians and supervisors are privy to a huge amount of sensitive information regarding the clients they are treating as well as the clients their colleagues are treating. Students will be asked to sign a confidentiality agreement prior to their first clinic. Refusal to sign the agreement automatically disqualifies the student from clinical practice, and therefore, from the program.

- Clinicians are expected to respect and protect the confidentiality of our clients at all times.

- Do not fax documents with personal/confidential information about clients unless the recipient is waiting at the fax machine. Confirm via phone.
- Conversations regarding clients in public places are considered a breach of confidentiality.
- Information in your computer and portfolios should void of identifiers. Client files are to be viewed in three locations only:
  - The CSD main office
  - Clinic rooms
  - The Student Room
- Leaving client files or documents unattended is considered a breach of confidentiality.
- Nothing from the client file may be photocopied by students.
- Use common sense and the golden rule.

### **Client Files**

- Client files are available to be checked out for your review.
- Client files are not to leave the clinic under any circumstance.
- Client files should be filled out with the most current information. Obtain the current address and phone number during your planning meeting with your supervisor, as well as during your first and final therapy sessions.
- Information in the client file should be arranged in chronological order with the most recent information on top.
- Events are to be recorded on the sheet on the left inside cover of the file.
- Clinical agreement forms, consent forms, and record release forms must be signed for each client every semester.
- Student clinicians may not throw information out of client files.
- Refer to the Clinic Calendar for report deadline dates. The client file must contain the required signed record releases, protocols and reports before the final grade is issued.
- Documents in the client files are not to be photocopied by student clinicians. If information is required by another agency, let your clinical supervisor know.

### **Check Out Procedures for Client Files**

- All files **MUST** be signed out and signed in.
- Client files may never be removed from the clinic. They may be taken to the Student Room (SH 119) or therapy rooms to be reviewed. The information in the client files is confidential and therefore is not to be discussed with anyone unless that person is directly involved with the client.

### **Paperless Documentation**

Each student and supervisor is assigned a unique ID for paperless documentation through Egnyte, our web-based, paperless documentation system. Users are expected to keep their user id's and passwords confidential at all times, log off whenever the system is not in use, and safeguard client information. Printing from Egnyte should not be done without the explicit instruction or permission of the clinical faculty assigned to that client and student.

# The Kay Armstead Center for Communicative Disorders

## Clinical Management Policies and Procedures

1. General clinic information is communicated in the all-clinic meeting, as well as via email. Students are expected to keep their contact information up to date with the department administrator, so as not to miss important communications.
2. A secure website is available which has updates on clinic policies, documents, etc. This website is to be visited regularly so that you do not miss out on key information.
3. Diagnostic and therapy sessions are not to be conducted without a supervisor in the clinic.
4. A key to unlock the therapy rooms and the DC is available in the office and should be returned to the office immediately after use.
5. If a client misses two consecutive sessions without notification or good reason:
  - a. Notify your supervisor immediately
  - b. It may become necessary to drop the client. This is a decision made by your supervisor.
  - c. Make-up sessions are not required unless otherwise instructed by your supervisor.
6. Student Absences: If you are sick:
  - a. Immediately inform your supervisor, and follow their instructions.
  - b. For on-campus clinics, forward your plans to a clinician in your section who can fill in for you, or
  - c. Cancel the session with the client/caregiver AND schedule a make-up session.
7. Planned time off is not permitted. This applies to on-campus clinic AND off-campus placements. Aside from religious holidays, DO NOT PLAN absences for days when you are committed to be in clinic or at your off-campus placement.
  - a. **VIOLATION WILL RESULT IN TERMINATION OF THE CLINIC/EXTERNSHIP AND FAILURE OF THE COURSE BASED ON UNETHICAL BEHAVIOR.**
8. Rules for client behavior are as follows:
  - a. The parent must accompany the child to the waiting room. There is no exception to this rule.
  - b. Once a small child is turned over to the clinician, the child is that clinician's responsibility. The clinician should remain within a reasonable distance of the child and/or hold the child's hand on the way to the clinic room.
  - c. No child is allowed to run loose in the hallway.
  - d. Clinicians are not allowed to take any clients (adult or child) into SH 119 or into the DC for any reason.
  - e. Parents/Guardians must wait for the child in the waiting room while therapy is conducted.
  - f. Clients should not be left unattended in a therapy room.
  - g. Observation by parents and/or caregivers must be scheduled through the supervisor by the parent/caregiver or the clinician. This includes recordings of sessions.

- h. Parents may observe therapy by invitation only with the supervisor in attendance.
- i. Supervisors must approve any major evaluation or therapy decision before implementing or communicating the information to the client.
- j. Reports sent to outside agencies must be requested through your supervisor or the clinic director.
- k. Referrals to other agencies must be discussed with your supervisor prior to discussion with your client.

# The Kay Armstead Center for Communicative Disorders

## Clinician Responsibilities

### **Beginning of the Semester**

- A Pre-Practicum/All-Clinic meeting is held with the clinic coordinator, clinical supervisors and student clinicians per the date/times on the clinic calendar.
- Supervisors, student clinicians and dates/times of clinic are assigned for undergraduate and first year graduate clinics
- Off-campus sites and supervisors are assigned for second year graduate clinics
- General policies and procedures are reviewed
- Planning meetings between the supervisor and student clinician are arranged for undergraduate and first year graduate clinics
- Pay DC fees to the administrator as indicated.
  - If these fees are unpaid on the first day of clinic, a hold will be placed on your records, regardless of if you are meeting a client on that day.

### Planning Meeting with Supervisor

Planning meetings are held during the first week of classes. Meet at your regular clinic time. Clients and/or placement for off-campus clinic sites are assigned.

A clinic room for meeting with on-campus clients will be assigned or chosen. Maintain the same room for the entire semester. Exceptions can be made through your supervisor for therapeutic purposes. You may also be asked to change for clinic management purposes.

### General Guidelines

The student will meet with the clinical supervisor to prepare for the re-evaluation/evaluation sessions with their client during the initial week/s of the semester.

#### Procedure

Review the client file

- History
- Previous test results
- Most recent current status
- Most recent recommendations for therapy

Implement Evidence Based Practice

- Review previous rationale(s) for therapy
- Examine results
- Review the literature
- Refine or establish a rationale for this semester

Plan re-evaluation or evaluation sessions (if needed) or therapy sessions:

- Review potential formal tests and informal test measures to be administered
- Prepare evaluation sequence for two to four sessions
- Present the information to the supervisor concisely and articulately

Contact your client or the parents of your pediatric client by phone to confirm therapy days/times and introduce yourself. See Appendix B for a calling guide.

If the client is unable to attend during the designated days/times:

Ask if they would like to reschedule, letting them know that space is limited and their only guarantee for therapy is keeping the original time.

Make note of their availability.

Tell them that someone will call them back.

Report the information to your supervisor and the clinic director/student assistant.

You may be assigned another client.

### First Day of Therapy

- Clinician reviews client/caregiver packet (previously mailed or e-mailed) and client/caregiver signs all appropriate forms, which are then filed in the paper file.
- Caregiver/client obtains a parking permit from the clinic administrator.
- Caregiver/client pays fee for the semester or shows receipt of payment.
- SJSU students who are clients must add EDSP 060 for 1 unit in lieu of a fee; the course will be added by the student with a permission code give by the clinic administrator or clinic director.

### Weekly Responsibilities

- A therapy lesson plan must be written each week or according to your supervisor's instructions. Refer to Appendix C.
- Activities and materials should be prepared ahead of time, and therapy sessions should be well planned.
- SOAP notes are written upon completion of each session or according to your supervisor's instructions. All SOAP notes should be submitted through our paperless documentation system, Egnyte.

### Additional Responsibilities throughout the Semester

- Self-evaluations are completed prior to individual meetings with your supervisor or according to your supervisor's instructions. Refer to Appendix E.
- A Therapy Progress Report is written for each client. Initial drafts are due per the clinic calendar or per the date requested by your supervisor. Refer to Appendix F.
- Mid-term client conferences and final client conferences are completed with each client. See the clinic calendar or the date requested by your supervisor. Refer to Appendix G.
- Home programs are written for each client upon completion of the semester. See the clinic calendar or the date requested by your supervisor. Refer to Appendix H.
- Mid-term and final evaluations are completed for each clinic. See the clinic calendar or the date requested by your supervisor. Refer to Appendix I.
- Infection control should be practiced at all times.

# The Kay Armstead Center for Communicative Disorders

## Mid Semester and End of Semester Clinic Checklists

### Mid Semester Checklist:

At your mid-semester evaluation, the client file should include:

- Formal test protocols and informal observations, language samples, etc.
- Signed Clinical Agreement form
- Signed Consent form
- Signed Record Release and Release of Records form/s as needed

### End of Semester Checklist:

When your Therapy Progress Report is in final form and signed by you and your supervisor, the client file should include everything listed in the mid semester checklist and the following:

- Two signed Final Therapy Reports (one is to be mailed to the client)
- One signed Home Program

When you meet with your supervisor for your final performance evaluation, your student file should include:

- Signed Record of Supervised Clinical Experience form (keep a second signed copy for your records)
- Mid-term and final performance evaluations

# How to Apply to Undergraduate Clinical Practicum

EDAU 177 – Practicum in Audiology – Hearing Testing

EDSP 177 – Practicum in Speech – Beginning Cases

## Undergraduate Clinical Practicum

Undergraduate clinical practicum consists of two courses:

EDAU 177 – Practicum in Audiology (Hearing Testing)

EDSP 177 – Practicum in Speech (Simple Cases, Accent Modification)

## Application Process

To apply for EDAU 177 and/or EDSP 177, complete the following process:

Complete the prerequisite course EDAU 115 “Introduction to Hearing Science” prior to enrolling in clinical practicum EDAU 177.

The year prior to enrolling in EDAU 177 and/or EDSP 177, complete the online application (click on link provided in an e-mail sent out in mid-March)

Fill in all of the information requested on the application, by the deadline indicated on the application.

- If you have taken the prerequisite(s), are in good academic standing, have fully completed the form and have turned the form in on time, the clinic director may approve you for the following year. If you do not fully complete the form or turn the form in late, you may be placed on a waiting list
- The clinic director will indicate confirmation of clinic assignments prior to registration deadline for the upcoming semester.
- Upon approval, the department administrative coordinator will assign permission numbers for you to enroll in EDAU 177 and/or EDSP 177 for the semester approved. Permission numbers are not available until registration appointments begin.

## EDAU 177 and EDSP 177

- Placement decisions are based upon a variety of factors including:
- Number of students applying for the clinic
- Number of supervisors available to supervise the clinic(s)
- Semester/year of graduation (undergraduate students)
- Semester/year beginning graduate school (second baccalaureate students)

## Academic Standing

- To be approved for EDAU 177 and/or EDSP 177, you must be in good academic standing. Good academic standing is defined as:
- A 3.0 GPA or higher. There are a limited number of UG clinic slots available and we do not guarantee that all students will be able to participate. In the event you are not permitted to enroll in clinic you must see your UG advisor to identify alternative courses to substitute on your program.
- You must receive no less than a 2.0 (C) in each undergraduate course
- It is suggested that within the parameter of University policy on grade forgiveness that CDS courses with grades of C- or lower be repeated.

- All “Incompletes” must be cleared before practicum will be approved

#### All Clinic Meeting

The mandatory all clinic meeting is held the first week of class, before classes begin, usually on dead-day. The clinic director will explain the details of clinic. Refer to the clinic calendar for the specific day and time for this meeting. Attendance is mandatory.

#### First Week of Clinic

The first session of your clinic will meet during the regular class meeting with your clinical supervisor. During this time you will be assigned your clients and you will be given prep time for clinic. Generally, the first clinic day is one week after classes begin.

#### Grade Assignments

- A form entitled “Student Clinician Competencies” is completed by your clinical supervisor during the mid-term of the semester and upon completion of the clinical practicum. See Appendix I
- You will receive a grade of “credit or no credit” for EDAU 177 and EDSP 177
- The completed Student Clinician Competencies is placed in your student file

#### Clock Hours

A form entitled “Record of Supervised Clinical Experience” is filled out by the student, then signed by your clinical supervisor at the end of the practicum experience listing the total number of clock hours accumulated

Fill out the hours for each appropriate area

The signed original is placed in your student file

Maintain a separate signed copy for your records

# How to Apply to On Campus Graduate Clinical Practicum Graduate Clinical Practicum Courses

On Campus graduate clinics consist of three clinical practica and advanced assessment:

- EDSP 277 – Graduate Practicum in Speech-Language Pathology
  - Prerequisites - all undergraduate coursework completed to SJSU-CDS standards
- EDAU 277 – Graduate Practicum in Audiology, Aural Rehabilitation, may be substituted for Clinic I, II or III, and is mostly group work
  - Prerequisites - Aural Rehab and Audiometry
- EDSP 276 – Advanced Assessment
  - Prerequisites - Assessment academic coursework, and at least one semester of on-campus clinic at SJSU

## Application Process

To apply for clinical practica, complete the following process:

- Meet with your advisor to determine that you have met all the prerequisites to request a clinic.
- The year prior to requesting a clinical practicum, complete the online application (click on link provided in an e-mail sent out in mid-March)
- Fill in all of the information requested on the application, by the deadline indicated on the application.
- If you have taken the prerequisite(s), are in good academic standing, have fully completed the form and have turned the form in on time, the clinic director will approve you for the following semester.
- If you do not fully complete the form or turn the form in late, you may be placed on a waiting list.
- Upon approval and when registration begins for the semester, the department administrative coordinator will assign permission numbers in order for you to enroll in the appropriate clinic.

Clinical practicum placement decisions are based upon a variety of factors including:

- Number of students applying for the clinics
- Number of supervisors available to supervise the clinics
- Semester/year beginning graduate school (second baccalaureate students)
- Full-time versus part-time course load
- Outstanding academic coursework (coursework not yet taken or an unresolved incomplete)
- Semester/year of graduation

## Frequency of Clinical Practicum

Classified and Conditionally Classified graduate students in good academic standing will be in one clinical practicum every semester of their graduate program. Failure to do so

will affect your graduation date. EDSP 276 (diagnostic clinic) may be taken concurrently with other clinics. Audiology clinics are not generally offered in the summer. Therapeutic clinics are offered in the summer. Diagnostic clinics are offered in the summer, if the demand is high enough.

### Academic Standing

Good academic standing is defined as:

- You have received no less than a 3.0 (B) in each graduate course
- All grades of B and below at the graduate level must be repeated
- All “Incompletes” must be cleared before practicum will be approved
- Any exceptions must be approved by the faculty and the instructor

### Registration and All Clinic Meeting

There will be adequate space for every clinic assignment. If you are dropped for non-payment, you may lose your clinic slot. The mandatory All Clinic meeting will take place during the first week of the semester, before classes begin, usually on dead day. Refer to the clinic calendar for the specific day and time. Attendance is mandatory.

### Preparation for Clinic

Students are approved for clinic the semester prior to enrollment. The following is required prior to beginning the clinic experience:

- Apply for a Certificate of Clearance.
- Have a physician’s note indicating fitness to perform therapy
- Have a current Tuberculosis clearance
- Have a current Hep B Immunization

### Grade Assignments

A form entitled “Student Clinician Competencies” is completed by your clinical supervisor during the mid-term of the semester and upon completion of the clinical practicum. See Appendix I.

- You will receive a letter grade for each graduate practicum
- If you receive a grade of “B-” or below, you must repeat the course
- The completed Performance Evaluation Profile is placed in your student file

### Clock Hours

A form entitled “Record of Supervised Clinical Experience” is filled out by the student, then signed by your clinical supervisor at the end of the practicum experience listing the total number of clock hours accumulated

- Fill out the hours for each appropriate area
- The signed original is placed in your student file
- Maintain a separate signed copy for your records

### ASHA, State Licensing and CTC Clock Hours Requirements

ASHA, state licensing and CTC have varying requirements for Speech-Language Pathology and Audiology clinical clock hours needed to obtain a Master’s degree in Speech-Language Pathology. To comply with all requirements, the following must be completed:

- Total of 400 clock hours

- 25 hours of observation completed prior to clinical practicum
- Minimum of 375 clock hours of direct contact, of which at least 325 hours must be obtained at the graduate level
- Clinical competency in evaluation and treatment must be demonstrated in nine areas: articulation, voice/resonance, fluency, swallowing, receptive/expressive language, cognitive aspects of communication, social aspects of communication, communication modalities and hearing screening
- Clinical competency must be demonstrated as well rounded as to disorder, representative across the lifespan and with culturally and linguistically diverse populations

Students fulfill the minimal clock hour requirements in all areas through a combination of undergraduate, first year graduate and second year graduate clinical practicum

# Off Campus Graduate Clinics

EDSP 269 – Student Teaching

EDSP 278 – Externship

## Introduction

The Department of Communicative Disorders and Sciences is responsible for providing the courses and clinical practicum that allow students to meet the qualifications of the American Speech-Language Hearing Association, the California board of Medical Quality Assurance and the California Commission for Teaching Credentialing. To meet the clinical qualifications, students are required to complete two off campus year graduate clinics: EDSP 269 and EDSP 278

Student Teaching and Externship are the culminating experiences of your graduate education. You will have the opportunity to spend two semesters working as a professional in a public school and a hospital, private practice or rehabilitation center. You will be supervised by an ASHA certified Speech-Language pathologist who has demonstrated excellence in clinical service delivery and skill in supervision. EDSP 269 and EDSP 278 supervisors are unpaid clinical instructors of San José State University who have agreed to supervise you.

## Application Process

To apply for EDSP 269 and EDSP 278, complete the following application process: Complete the application disseminated online. Fill in all of the information requested on the form

If you have taken the prerequisites, fully completed the form, turned the form in on time and have not yet taken a second year graduate clinic, the clinic coordinator will approve you for either EDSP 269 or EDSP 278 for the following semester

If you have taken the prerequisites, fully completed the form, turned the form in on time and have successfully completed one of the second year graduate clinics, the clinic director will approve you for the course not yet taken for the following semester

If you do not fully complete the form or turn the form in late, you may be placed on a waiting list

Upon approval, and when registration begins for that semester, the department administrative coordinator will issue permission numbers in order for you to enroll in EDSP 269 or EDSP 278 for the following semester

Course placement decisions are based upon a variety of factors including:

- Outstanding academic courses

- Clinical practicum grades

- Number of students applying who have completed one of the second year clinic courses and, therefore, must be placed in the clinic course not yet taken

- Semester/year of graduation

## Site Placement

### Arranging New Site Placements

The clinic director is responsible for arranging contracts with new sites. If you want to be placed at a site that is not currently on the EDSP 269 or EDSP 278 list of sites, talk to the clinic director. The clinic director will follow-up with your request and will arrange a new

contract, if appropriate. The process for arranging a new contract is lengthy and must be initiated at least six months prior to beginning the placement.

### Matching Students with Sites

The clinic director matches students with sites. Do not attempt to make your own placement. Decisions for matching students with sites are made based upon a variety of criteria including:

- Clock hours needed
- Student strengths and limitations
- Supervision requirements
- The personality of the student and the supervisor.

The clinic coordinator tries not to place a student who is highly structured, for an example, with a supervisor who is relatively unstructured

### Geographical Issues

Geography is not generally a factor for site placement. Students are placed in the San José area (60 mile radius) unless there are no placements available. In the event there are no placements available in the San Jose area, placements are made as close to San Jose as possible

As an institution in San José, our practicum sites are located in the San José area because we are required by ASHA to select and monitor all facilities and students placed in those facilities. We are familiar with the people and the facilities and can make a successful match between students and supervisors. The sites we use are exemplary and meet ASHA standards. The supervisors and administrators have made a commitment to assist us in the education of our students. In distant location, we can neither monitor the setting nor observe students in person.

### Pre-practicum Meeting

Students are expected to immediately contact the site supervisor upon receiving their assignment. While the site supervisor has agreed to supervise a student clinician, in most instances, the site supervisor does not know that he/she has been assigned a student clinician or who the student clinician is.

Some sites require interviews to determine appropriateness, or to determine whether to take SJSU vs. other local university students. This will be facilitated according to the site schedule.

On occasion, sites request advance assignment of student clinicians and the student clinician may have begun working at the site prior to the pre-practicum meeting.

Attendance at the pre-practicum meeting is still required.

### Attendance

Attendance in both Student Teaching and Externship is expected to be 100%. Only serious illness or serious emergencies are acceptable excuses for absence. Excess absences may result in termination of the student teaching or externship experience or failure when competencies have not been met due to excessive absences. Planned absences are not acceptable.

When a student is in danger of failing student teaching or externship, a meeting is held at the mid-semester to inform the student of the deficiencies and a plan is created to correct the deficiencies. Failure to make satisfactory progress will result in failure of the course.

Please note that it may not be possible for a student to be warned of a potential failure at the mid-semester. There are situations when a student demonstrates satisfactory progress at mid-semester but fails to demonstrate sufficient additional progress during the final half of the semester. As soon as it is clear to the site supervisor that the student has reached a plateau, a plan is developed at that time. It is, therefore, possible for a student to learn after the mid-semester, that failure of the course is a possibility.

### Clock Hours

ASHA, state licensing and CTC have varying requirements for Speech-Language Pathology and Audiology clinical clock hours needed to obtain a Master's degree in Speech-Language Pathology. To comply with all requirements, the following must be completed:

Total of 400 clock hours

25 hours of observation completed prior to clinical practicum

Minimum of 375 clock hours of direct contact, of which at least 325 hours must be obtained at the graduate level

Clinical competency in evaluation and treatment must be demonstrated in nine areas: articulation, voice/resonance, fluency, swallowing, receptive/expressive language, cognitive aspects of communication, social aspects of communication, communication modalities and hearing screening

Clinical competency must be demonstrated as well rounded as to disorder, representative across the lifespan and with culturally and linguistically diverse populations

It is expected that students will fulfill the minimum clock hours requirement in all areas through a combination of their undergraduate, first year graduate and second year graduate clinical practicum.

Student teaching and externship experiences can and will be extended to obtain the necessary clock hours requirement. Requirements and agreements made with regard to time spent on-site at the externship or student teaching placements will NOT be cut short in the event that the student fulfills the minimum clock hour requirement. Students are expected to keep their responsibilities and complete their learning experience.

### Incomplete Grades

Withdrawal/Termination: In a situation of failure or extreme emergency, a student may be withdrawn or terminated from the placement. In this case, the student may be provided with another placement the following semester.

If the student does not successfully complete this second attempt, the student will be dismissed from the CD&S program.

### Handling Conflicts

Conflicts may arise for a variety of reasons including differing expectations between supervisor and student, lack of communication, misunderstanding of procedures, etc. The procedure for handling conflict is a multi-step process, which may be halted at any point the conflict is resolved. The steps are as follows:

1. Try to work out the conflict with the site supervisor.
2. If #1 is unsuccessful, notify the university supervisor (the site supervisor may also notify the university supervisor).
3. The university supervisor will attempt to negotiate by phone with the site supervisor and/or the student.

4. Both supervisors and the student will meet to develop a plan to modify the situation
5. The university supervisor will follow up to evaluate the progress towards meeting the goals of the plan.
6. A decision will be made by both supervisors regarding successful completion of the course.

#### General Guidelines

You are expected to:

- Be on time
- Be present, alert, curious, enthusiastic, etc.
- Be inquisitive and creative
- Be flexible
- Be congenial
- Be collegial
- Be healthy
- Complete assignments on time
- Provide your own transportation
- Attend professional meetings
- Conduct research about your client's disorder(s)
- Be respectful of your site supervisor; follow all directions; realize that this person is willing to give his/her time, expertise, knowledge, energy, etc. to assist you in becoming a competent professional

You are not expected to:

- Know everything
- Own all materials that you use
- Handle staffing on your own
- Make decisions about cases independently
- Create your own work time
- Know every assessment procedure and formal test

# EDSP 269

## Field Experience in the Public Schools (Student Teaching)

### Course Description

This course is designed to provide the student with the opportunity to experience the delivery of clinical service in a public school setting.

### Prerequisites

Prerequisites for EDSP 269 include:

Graduate standing

Successful completion of undergraduate and first year graduate clinics:

EDAU 177 – Hearing Testing clinic

EDSP 177 – Clinic Practicum – Simple Cases

EDSP 277 – Clinic Practicum – Adult/Child /Group/Specialty

EDAU 277 – Aural Rehabilitation clinic

EDSP 276 – Advanced Assessment clinic

Completion of the following academic courses:

All first and second semester Graduate coursework

EDSP 222 – Literacy

EDSP 251 – Phonology

EDSP 258 – Fluency

EDSP 259 – Language Disorders

EDSP 264 - Professional Issues

Completion or concurrent enrollment in the following academic courses

EDSP 222- Literacy

EDSP 250 - Voice Disorders

**EDSP 260- Dysphagia**

EDSP 262 - Bilingual

### Competencies

Competencies to be obtained during the student teaching experience include:

- The student will demonstrate appropriate personal and ethical professional conduct
- The student will demonstrate the ability to plan, conduct and evaluate diagnostic procedures for speech-language disorders
- The student will demonstrate the ability to plan, conduct and evaluate group and individual therapeutic procedures for speech-language disorders
- The student will demonstrate the ability to plan, conduct and evaluate family and teacher conferences
- The student will demonstrate knowledge and understanding of educational philosophy, structure, regulations, laws and responsibilities
- The student will demonstrate the ability to administer and manage a speech-language pathology program in a public school setting
- The student will develop skills in educational team participation through developing, presenting and managing Individualized Educational Programs (IEPs)

### Preparation for Student Teaching

Students are approved for Student Teaching the semester prior to enrollment. The following is required prior to beginning the student teaching experience:

Obtain a Certificate of Clearance.

Applications are available at the UPD. The forms must be submitted at least 8 weeks before the first day of instruction for the semester in which the student will be enrolled in Student Teaching

Obtain clinic liability insurance

Have a current Tuberculosis clearance

Have a current Hep B Immunization

Have a current tally of your clinical clock hours

### Summer Student Teaching

Student Teaching is not offered during the summer semester

### Course Requirements

EDSP 269 is a 10 unit course. Course requirements are as follows:

200 hours of direct contact time. Direct contact time consists of time working with pupils and their family members

100 hours of management time. Management time consists of lesson planning, report writing, observing other professionals, meeting with your site supervisor and all other activities that do not involve direct contact time with a pupil or their family member

While the student clinician is expected to begin placement shortly after the pre-practicum meeting and continue until the end of the semester, there may be situations when the practicum will be extended beyond the end of the semester. Reasons for extension may include:

- The student clinician has not completed sufficient hours to meet the course requirements
- The student clinician has not obtained the necessary clock hours to meet ASHA, State, or CTC requirements
- The student clinician has not satisfactorily obtained the competencies required to pass the course

### Logistics

#### Calendar

The calendar for SJSU and school districts will differ. Students must observe the school district calendar for student teaching and the SJSU calendar for academic courses. As such:

- Students enrolled in EDSP 269 must attend seminars at SJSU regardless of whether the school district has the day off
- Students should not schedule vacations during the semester of student teaching unless both the school district and SJSU have a scheduled holiday at the same time

### Duration

Student teaching is a full-time placement only, five days per week. The student is enrolled for 10 semester units or credit and there is no variation of the unit value of the course. The student teacher is expected to begin shortly after placement at the pre-practicum meeting and end on the last day of final examinations unless otherwise arranged by the site supervisor in consultation with the university supervisor and the clinic coordinator.

#### Length of Day

The length of the student teacher's workday will coincide with that of the site supervisor's. As such, the student teacher is expected to attend after-school meeting, open house and other events that the speech-language pathologist is expected to attend. However, if the student teacher is enrolled in a university course during the semester that interferes with the regular workday, arrangements should be made for the student teacher to leave for the course.

#### Dress

The student teacher is expected to dress professionally, but appropriately for the school site. SJSU CDS students are expected to abide by our own dress code until instructed differently by their site supervisor.

#### Professionalism

Student teachers are expected to conduct themselves professionally at all time, following accepted procedures regarding decorum, confidentiality, staff interaction, courtesy, punctuality and consistent attendance. Student teachers must comply with all rules of conduct in the schools. Failure to do so may result in termination.

#### University Supervisor Site Visits

Visits from the university supervisor will generally be scheduled in advance, but the supervisor has the right to appear unannounced. The student teacher must give a written lesson plan for the session(s) to be observed upon the arrival of the university supervisor. During the visit, the university supervisor will observe the student teacher conducting therapy or evaluation, speak with the site supervisor and speak with the student. The visit will last from one to two hours. If the supervisor and/or student teacher can not be available to talk because of schedule conflicts, a telephone conference will be held after the visit.

# EDSP 278

## Field Experience in Clinic Management and Practicum (Extern)

### Course Description

This course is designed to provide supervised clinical experience with children and adults with complex speech-language disorders in a non-public school setting. This clinical experience includes, but is not limited to, providing diagnostic and treatment services, completing appropriate paperwork to the setting (charts, reports, etc) and participating in all other duties required in a setting such as attending meetings, counseling patients and/or families, preparing sessions, conducting in-service, communicating with appropriate personnel regarding cases, scheduling, etc. This course is meant to be a challenging and exciting capstone experience during which you have the opportunity to integrate and apply all previously presented material, both academic and clinical.

### Prerequisites

Prerequisites for EDSP 278 include:

Graduate standing

Successful completion of undergraduate and first year graduate clinics:

- EDAU 177 – Hearing Testing clinic
- EDSP 177 – Clinic Practicum – Simple Cases
- EDSP 277 – Clinic Practicum – Adult/Child/Group/Specialty

or

- EDAU 277 – Aural Rehabilitation clinic
- EDSP 276 – Advanced Assessment clinic

Successful completion of following academic courses:

- EDSP 222 – Literacy
- EDSP 251 – Phonology
- EDSP 254 – Neurological Disorders
- EDSP 255 – Motor Speech Disorders/Dysphagia
- EDSP 258 – Fluency
- EDSP 259 – Language Disorders

Completion or concurrent enrollment in the following academic courses:

- EDSP 222- Literacy
- EDSP 250 - Voice Disorders
- EDSP 260- Dysphagia
- EDSP 262 - Bilingual

### Competencies

Competencies to be obtained during the externship experience include:

- To demonstrate competence in evaluation and assessment of speech, language, and swallowing disordered clients
- To demonstrate competence in planning and implementing treatment programs for clients in assigned settings
- To interact professionally with staff in the facility

- To interact professionally with clients in the facility
- To demonstrate competence in counseling clients and their families

### Preparation for External Practicum

Students are approved for Externship the semester prior to enrollment. The following is required prior to beginning the externship experience:

- Completed Certificate of Clearance (this serves as your background check)
- CPR Certification
- Have a current Tuberculosis clearance
- Have a current Hep B Immunization
- Have a current tally of your clinical clock hours
- Many sites have additional requirements

### Summer Extern

On occasion, extern is offered in the summer. Students complete a 10-week session for ten semester units. There is however, no guarantee that extern will be offered in any particular summer. Typically, more students apply for summer extern than can be accommodated. Also, many sites do not accept students in the summer, as staffing is not stable due to summer vacations. The factors of many applicants, fewer sites available and that extern may not be offered in the summer, imply that summer extern cannot be guaranteed to any particular student. It is also not always possible to prioritize based on graduation dates. In many cases, the staff member at the sites interview several students and make selections based on their own criteria. When planning your graduate school program, do not rely on taking extern during the summer.

### Course Requirements

EDSP 278 is a 10 unit course. Course requirements are as follows:

- 150 hours of direct contact time. Direct contact time consists of time working with clients and/or family members/caretakers
- While the student clinician is expected to begin placement shortly after the pre-practicum meeting and continue until the end of the semester, there may be situations when the practicum will be extended beyond the end of the semester. Reasons for extension may include:
  - The student clinician has not completed sufficient hours to meet the course requirements
  - The student clinician has not obtained the necessary clock hours to meet ASHA, State, or CTC requirements
  - The student clinician has not satisfactorily obtained the competencies required to pass the course

### Logistics

#### Calendar

Students in Extern do not follow the university calendar of holidays. They must observe the schedule of the facility in which they are assigned. This means that students are expected to work whenever the clients and master clinician are present. In practice, this means that if the supervisor works the day after Thanksgiving, so will the student. Typically, Extern facilities do not offer spring breaks. It is, therefore, important for

students engaged in extern to avoid conflicts with supervisors by deferring plans for vacations until the extern is completed.

#### Duration

The student is expected to begin on the first day of classes for that semester and end on the last day of final examinations unless otherwise arranged by the on-site supervisor. Any variation of this schedule must be approved by the clinic director and the university supervisor prior to any discussion with the on-site supervisor.

#### Length of Day

The length of the extern's workday will coincide with that of the site supervisor's. However, if the student is enrolled in university course that semester, he/she may be excused early one day per week for class.

#### Dress

The extern is expected to dress professionally, but appropriately for the school site. SJSU CDS students are expected to abide by our own dress code until instructed differently by their site supervisor.

#### Professionalism

Externs are expected to conduct themselves professionally at all time, following accepted procedures regarding decorum, confidentiality, staff interaction, courtesy, punctuality and consistent attendance. Student must comply with all rules of conduct at the extern site. Failure to do so may result in termination.

#### University Supervisor Site Visits

Visits from the university supervisor will generally be scheduled in advance, but the supervisor has the right to appear unannounced. The student must give a written lesson plan for the session(s) to be observed upon the arrival of the university supervisor. During the visit, the university supervisor will observe the extern conducting therapy or evaluation, speak with the site supervisor and speak with the student. The visit will last from one to two hours. If the supervisor and/or student can not be available to talk because of schedule conflicts, a telephone conference will be held after the visit.

# The Kay Armstead Center for Communication Disorders Diagnostic Center (DC) Policies

Here at SJSU, the Kay Armstead Clinic for Communication Disorders has an extensive library of testing materials, therapy materials and supplies for our student clinicians' use. There are not many universities that can boast about such a collection. We expect our student clinicians to treat the DC as such. We have stringent policies to ensure the protection of the materials for student use and for the benefit of the clients we serve.

## DC ACCESS

- Student clinicians pay \$30 per semester to access the DC. Your DC fee is due prior to the first day of your clinic class. This can be paid online via PayPal.
- Training will be provided on how to check materials out. All students enrolled in clinic must attend a training session.
- Protocols: You have access to protocols for class and clinic. If you need to use a protocol for a CLASS ONLY, please make a copy of the protocol and return the original, unused protocol to the DC. Please reserve our protocols for client use, in order to reduce the operating costs of the clinic.

## HOURS

The DC is open during clinic hours and staffed by student clinicians. If the DC is not open during clinic hours, see the department administrative coordinator (SH 115).

## CHECKOUT

Standard allotted time for materials to be checked out is 24 hours.

Students in EdSP 276 have an exception to this rule.

Items may not be returned and immediately re-checked out by the same person. At least one day must pass between loans, unless approved by your supervisor.

**DO NOT check out partial materials. Even if you will not use the whole thing, keep it together when checking it out and return it together when checking it in.**

## DC POLICIES

- **DO NOT CROSS THE THRESHOLD OF THE DC DOOR WITH MATERIALS UNLESS YOU HAVE CHECKED THEM OUT.**
- You may look at materials IN THE DC room itself for as long as you like. Please be courteous and replace items to their appropriate place.

## DC FINES

- When an item is NOT returned at the end of the designated time, a fee of \$10.00 per day, per item will be assessed. This fee goes into effect at the expected TIME of return (not at the end of the expected day of return). If not paid, a hold will be put on your university account.
- The student who checks out the material will be responsible for its condition and the on-time return of that material.
- Loss or damage of any material is the responsibility of the student who used that material. You will be charged for replacement of the material that is lost or damaged beyond use. If you do not pay for the replacement, a hold will be put on your university account until you do.

# Universal Precautions

## Purpose of Universal Precautions:

Used by health care facilities across the country to prevent transmission of blood-borne pathogens.

Assumes all body fluids, especially blood or fluids containing blood, are infectious, and should be treated as such.

Precautions must be applied to all interactions that involve potential for mucous membrane or skin contact with blood, bodily fluids or tissues containing blood or potential spills or splashes from them.

## On-Campus Clinic Universal Precautions

### 1. Hand Washing

- Wash hands immediately and thoroughly if they are potentially contaminated with blood and/or bodily fluids
- Wash hands between clients
- Wash hands after removing disposable gloves
- Wash hands before and after evaluations
- Wash hands before and after physical contact with a client
- Wash hands before and after performing any personal bodily functions
- Wash hands when obviously soiled
- Wash hands before leaving the clinic setting

### 2. Hand Washing Technique

- Vigorous mechanical action
- Use antiseptic or soap under running water
- 30-second duration if not grossly contaminated
- 60-second duration if grossly contaminated
- Dry hands thoroughly
- Turn off water and open door with paper towel

### 3. Disposable Gloves

- Use when touching blood, bodily fluids, mucous membranes, and/or non-intact skin
- Use when performing invasive procedures such as an Oral Motor Exam, using laryngeal mirrors, tympanometry, managing tracheostomy tubes, etc.
- Use if client has non-intact skin, open cuts, sores, scratches
- Use if changing diapers
- Change gloves if torn; replace promptly
- Change gloves after each contact with the client
- Discard gloves in therapy room
- Wash hands after removing gloves

### 4. Laundering Clothes

- Immediately launder contaminated clothing
- Wear lab coats as needed and launder frequently

### 5. Disinfecting Equipment and Materials

- Disinfect equipment and materials that have been contaminated with blood and bodily fluids
- Clean with Anti-bacterial wipes located in each therapy room
- Clean all contaminated areas (areas that were touched by your client) including therapy materials, work surfaces, seating surfaces, door handles, and/or floor surfaces

### Diseases of Concern

#### 1. HIV

- HIV is the virus that causes AIDS, a fatal disease for which there is neither a cure nor a vaccine
- ASHA has resolved that HIV patients are entitled to civil rights protection and refusal to treat, without just cause, is a violation of the code of ethics and violates state licensing laws

#### 2. Hepatitis B

- Hep B is a condition of the liver that can be fatal
- There is a vaccine for Hep B that you may choose to get. The vaccine may be obtained at Student Health Services for a fee or through personal insurance.
- If you decide not to get the vaccine, you must sign the Hep B Refusal form although you may change your mind at any time  
Hep B form must be signed by the first day of clinic

#### 3. Tuberculosis

- There is currently an epidemic of TB in this country

### In-House Observation System

#### Policies and Procedures

There is a main server in the observation suite. Students are encouraged to observe their peers during evaluation and therapy while a supervisor is present. It is up to each of us to safeguard this system so it can be maximized for student education and client service.

Please adhere to the following policies and procedures.

Access:

- Only Faculty has access to the observation system.
- Observation stations are not for general use when not used for viewing sessions.
- Students are to use the observation system under direct faculty supervision **ONLY**.
- Students may observe diagnostics and therapy alone, only if a faculty member sets up the observation session for the student.

Students may not make adjustments to the system, or observe sessions other than the one that they were given permission to observe.

If an adjustment needs to be made, the student may go to a faculty member and ask for the adjustment to be made.

Faculty are ultimately responsible for the observation system left in student's care.

#### Confidentiality

- Confidentiality is to be observed at all times.
- See previous section on confidentiality.
- Additional observers coming in later in a session must be cleared by the supervisor.

## Appendix A: Professional Attire in the Kay Armstead Clinic for Communication Disorders

The KACCD serves individuals from the campus and greater San José community. When our clients come for our services, they expect and deserve to feel that they are walking into an environment in which they will be treated respectfully, competently and professionally. Your appearance is your first, and perhaps your best, opportunity to project a professional impression to your clients, their families and your supervisors. If your appearance does not give the impression that you are taking your responsibility seriously, then your clients will not be inclined to take you seriously either. Therefore, while you are present in the KACCD during clinic hours, you are required to maintain a professional dress code at all times. This includes attendance at meetings, participation in labs, or while conducting research.

The dress code is the minimum required and is not inclusive. This applies to on campus clinics, observation appointments, and external placements. External placements may have more stringent requirements. The following guidelines provide the student clinician assistance in determining what is appropriate dress and appearance for the KACCD. These are not exhaustive or all-inclusive; faculty and the Clinic Coordinator will make final decisions regarding appropriate dress. Faculty may suspend your clinic or send you home if you refuse to abide by these guidelines.

- Clothing/accessories/general appearance should be neat, clean, tidy, and wrinkle-free. Shoes should be appropriate for a work setting, clean and in good repair. Open-toed shoes and athletic shoes are not acceptable. You are not going to a party or on a picnic. Strong cologne and/or perfume should be avoided.
- Any pant/skirt/shirt combination must cover the midriff including when arms are raised and when bending over. All shirt/blouse/dress shoulder straps should be at least 2-3 inches wide. Sleeves are encouraged.
- No excessively baggy pants or ones that ride low on the hips. Shirts for men must be collared. Skirts should be of reasonable length. Remember you are going to be active and may be up and down off the floor. Earrings are to be stud type only.

The following are not considered professional attire:

- Tight clothing
- Tank tops or halters, clothing showing bare shoulders
- Revealing shirts, including see-through, and plunging necklines
- Shorts, jeans or miniskirts
- Any visible or potentially visible body art needs to be removed or covered. Oral or facial piercings (tongue, lip, eyebrow, nose) must be removed. Any tattoos must be covered. Using Band-Aids to cover tattoos is unacceptable.
- T-shirts with writing
- Caps or hats of any kind, male or female clinicians
- Visible undergarments, including bra straps.
- Dangle or hoop earrings during clinic. These could be distracting and unsafe.
- Excessively long nails, or nails that are highly distracting.

## Appendix B: CALLING GUIDE (a general guide)

### INTRODUCE YOURSELF

- *Hello, my name is \_\_\_\_\_. I'm calling from San Jose State University Speech and Hearing center.*

### ASK FOR YOUR CLIENT/CAREGIVER

- *Is [client's name] available?*
- *Is [caregiver's name] available?*
- *Is one of the parents of [client's name] available?*
- *Is this the person who handles [client's name]'s schedule?*
- *If the client or caregiver is not available, leave a message*
- *For a machine: Hello, this is [your name]. I'm calling from San Jose State University Speech and Hearing center, for/regarding [client's name]. My personal number is [your number here], and I would appreciate a call back at your earliest convenience. Again, my name is [your name] and my number is [your number]. I'm looking forward to hearing from you.*

For a person taking a message:

- Remember, confidentiality... this person may not be someone who is privy to information regarding your client. Housekeepers and visitors answer phones more often than you would expect.
- Follow the spirit of what is listed above for the machine message, omitting the client's name. They will know who you are calling for when they get the message
- If the caregiver or client is available, and you are speaking directly with them:
- Re-introduce yourself, especially if the phone was handed to someone else: *Hi! Again, my name is [name] and I'm calling from San Jose State University Speech and Hearing Center.*
- Reference previous contact: *I understand that you scheduled an appointment for [a speech/language evaluation, speech therapy] with our clinic assistants.*
- Let them know who you are to them: *My name is [name] and I will be [your/client's name] clinician for [your/his/her evaluation/speech therapy this semester]. I'm calling for two reasons. First, to confirm your appointment time(s) and second to review some information with you that will be important for me to plan your first therapy session. Is this a good time for us to chat? (If no, ask when you can call back AND DO SO!)*
- Confirm appointment time: *I've been told that you have [an appointment/therapy] scheduled for [evaluation appointment/therapy schedule]. Is that right? Do you have any questions about how to get here or parking? Do you have any other questions?*
- Converse with client/caregiver on PREPARED history questions.
- Close the conversation. *[Client/Caregiver], thanks so much for talking to me today. I'm really looking forward to working with you/client's name. Again, my name is [your name], my number is [#] and I'll be waiting for you in the clinic on [scheduled day] at [time]. See you soon! Bye.*
- REMEMBER: be polite, be courteous, be prepared, be professional!

# Appendix C: Treatment Plans

## General Guidelines for DAILY Treatment Plans

One treatment plan will be written for each week of therapy per client. The format to be used for the lesson plan should include four sections:

Goal  
Objective  
Procedure

Identifying information:

Identifying information is listed at the top of the Treatment Plan and consists of:

Date  
Client's First Name  
Clinician  
Supervisor  
Disorder  
Client's Age  
Days of clinic  
Time of clinic

### Objectives

- Should be a natural outgrowth of the goals on the Therapy Report
- Write in the form of behavioral objectives
- Assessment goals, client conferences and homework assignment should be included in this section of the lesson plan
- Three to four therapy goals should be addressed during each therapy session
- Better to overplan and have too much, than to underplan and not have enough.

### Procedure

Procedures refer to the activities and materials to be used to meet each of the goals and objectives stated in the treatment plan.

### Results

Present SOAP notes here.

### Supervisor Review

The supervisor will review the Lesson Plan and provide feedback when the plan has been turned in.

### General Guidelines for WEEKLY Treatment Plans

The Weekly Treatment Plan has been developed as an alternative for the daily plan for those clinicians who have demonstrated mastery of the daily plan.

### Column One: Objectives

Clearly state your objectives here. Remember that all objectives should be addressed within the week. Your rationale and procedure can be included, as in the following format:

“In order to [goal/rationale], the client will [objective], given [procedures/materials],” or a variation thereof.

The supervisor will give final approval to written objectives.

Column Two: Space for SOAPs:

Write your SOAP notes for the first treatment day here. Clearly state the date and time of treatment. Sign and timestamp your signature by putting the date signed and the time signed.

Column Three: Space for SOAPs:

See above.

Alternative Treatment Plans

Your supervisor may have a different format that he/she would like you to follow for treatment planning. Follow your semester supervisor’s direction and remember that it may not apply to how other supervisors teach.

## Appendix D: SOAP Notes

### General Guidelines:

The student will write a daily progress note upon the completion of each diagnostic or therapy session.

The daily progress note is due no later than before the beginning of the next diagnostic or therapy session, OR when the supervisor assigns.

The SOAP format is used for daily progress notes, which is a commonly used format for clients seen in a variety of settings across disciplines including SLP's, physicians, nurses, PT's and OT's.

### Procedure

Background information is listed at the top of the note and consists of:

- Client's first name
- Clinician
- Supervisor
- Disorder
- Date and time of session

“S” refers to Subjective Information – information that does not require data collection. These are often times observations of the client's motivation and demeanor during the session. All information refers to the client and not the clinician.

“O” refers to Objective Information – the goals and the objectives stated in the lesson plan and the results of the activities/procedures that were completed to meet the goals and objectives.

State the goal, e.g. “Receptive Language”, “Speech Production”, “Expressive Language”

Write the results of the objectives to meet the goal using behavioral statements

Results of data collection are stated in this section

All information refers to the client and not the clinician

“A” refers to Assessment Information – current status and progress demonstrated towards achieving the goals and objectives addressed during the session

Write one to two sentences describing the overall severity level of the client in regards to the goals/objectives addressed during the session

All information refers to the client and not the clinician

“P” refers to Plan – the plan of treatment to be completed during the next session.

Write one to two sentences describing the goals and objectives to be addressed during the next session

### Supervisor Review

The supervisor will review the SOAP note and provide feedback during the session the note has been handed in.

## Appendix E: Self Evaluation General Guidelines:

The student will write a self evaluation about her/his performance during the therapy session completed nearest to the day of the individual conference with the supervisor. The self evaluation refers to student performance, not client performance.

Procedure:

Background information is listed at the top of the Self Evaluation and consists of:

- Clinician name
- Date of Self Evaluation
- Client name

Write examples for each of the following sections:

- Three things I did well during the session
- Three things I did not do well during the session
- Changes for next session

Supervisor Review

The supervisor will begin the individual student conference session with a discussion of the student's self evaluation.

### SELF EVALUATION TEMPLATE

Clinician Name: \_\_\_\_\_

Date: \_\_\_\_\_

Client: \_\_\_\_\_

Three Things I Did Well During the Session:

1.

2.

3.

Three Things I Did Not Do Well During the Session:

1.

2.

3.

Changes for Next Session:

1.

2.

3.

# Appendix F-1: Therapy Progress Report

## General Guidelines

Include informal and formal test results and protocols with drafts  
Include previous drafts with revised drafts  
Proofread all reports; pay particular attention to client name/birth date/age; date of report and type of report

### Procedures

#### 1. Identifying Information:

Client name/address/telephone number/date of birth/chronological age/gender  
Referral source  
Presenting problems  
Student clinician name  
Clinical supervisor's name  
Date of report

#### 2. History:

Relevant background information

#### 3. Summary of Test Results:

Previous test results: most recent semester of testing at clinic; results from diagnostic report (if relevant); most recent results from outside agency (if relevant)  
Current test results – modalities assessed; severity levels; formal test scores and informal test results; strengths and weaknesses based upon formal and informal test results in each modality

#### 4. Present Communicative Status: (Brief summary of the two previous sections of the report)

Overall diagnosis  
Severity levels for each modality assessed based upon severity levels listed in the Summary of Test Results section  
Narrative description of client strengths and weaknesses based upon information from the Summary of Test Results section  
Relevant background information  
No new information in the section; all information should have been stated in the Summary of Test Results and Background Information

#### 5. Proposed Behavioral Goals:

Three to five goals for the semester  
Goals are written in the format of a behavioral objective  
Rationale: Include a reference from an article, a test manual, a therapy material, a textbook or class notes. Rationale state why the goal is chosen, based upon a client's weaknesses stated in the Present communicative Status section  
Objectives: Three to five objectives proposed to meet the goal. Objectives should be written as a behavioral objective. The initial objective addresses a skill level just above the client's present status. The final objective addresses a skill level just below the goal for the semester

#### 6. Signatures on the report:

Clinical Supervisor  
Student Clinician

**KAY ARMSTEAD  
CENTER FOR COMMUNICATION DISORDERS  
SAN JOSE STATE UNIVERSITY  
SAN JOSE, CA 95192-0079**

**THERAPY PROGRESS REPORT  
SEMESTER, YYYY**

<b>Client:</b>		<b>Clinician:</b>	
<b>Address:</b>		<b>Supervisor:</b>	
<b>Phone:</b>		<b>Date of birth:</b>	
<b>Date of Report:</b>		<b>Caregiver:</b>	
<b>Age:</b>		<b>Email:</b>	

**Referral Source:**  
**Presenting problem:**

**HISTORY**

Include a short history (developmental or since injury), and any recent and relevant historical information. All history information should be confirmed with caregivers before including in your report. Summarize information relevant to your report. No plagiarism will be tolerated. Cite previous reports appropriately.

Please remember to make a statement about the information requested from the client/caregiver, and the information provided by the client/caregiver. Note the number of semesters that they have attended this clinic – also, when they started receiving services.

**PREVIOUS RESULTS**

Cite, concisely, previous testing and/or results that are RELEVANT to what you are reporting in this document. Previous results include any testing that was conducted by another clinician, inside or outside this department, as well as testing that occurred in a previous semester.

**CURRENT LEVELS AND PROPOSED GOALS (This title changes to PROGRESS TOWARD SEMESTER GOALS in the final report)**

Note frequency and duration of therapy, as well as absence history.

This section is reserved for testing that YOU have completed.

Insert proposed goals, including baselines, & rationales. For final draft, include outcomes as well.

Goal #1: (three to five goals should be proposed)

Rationale:

Objectives: (three to five objectives should be proposed to meet the goal)

**IMPRESSIONS**

Make a note of the number of consecutive semesters the client has been seen at our center.

Synthesize results here. Give a diagnostic and prognostic statement.

Example of diagnostic statement: “Client presents with [disorder] characterized by [signs, symptoms].” Remember to note the severity of the disorder.

Example of a prognostic statement: “Prognosis for [continued improvement/improvement] in [deficit areas] is [poor/guarded/fair/good/excellent], given [factors contributing to said prognosis].” Remember that if you are citing a poor prognosis, continued therapy is not recommended. You may build a case for a discharge with this report, and change the heading to “discharge report.”

### **RECOMMENDATIONS**

***\*Ignore this in your first draft – this should only be in your final draft.***

You can either write suggested goals for next semester, or give narrative recommendations for next semester, IF APPROPRIATE. If you are discharging your client, the recommendation for discharge and rationale goes here.

Rationales may include, but are not limited to: lack of progress towards goals, lack of appropriateness of setting, moving on to another therapy center or therapist, lack of adherence to the policies and procedures of the center, etc.

REMEMBER TO CLEARLY STATE YOUR RECOMMENDATION TO CONTINUE/NOT CONTINUE AND/OR CHANGE THE SCHEDULE, AND A RATIONALE FOR SUCH.

Include family recommendations in this section.

For both, NEVER recommend a particular facility, especially including our own. You should NEVER write, “It is recommended that John Smith continue receiving therapy at Kay Armstead Center for Communication Disorders...” You are recommending THERAPY, not PLACEMENT.

---

First Last, credentials  
Clinical Supervisor

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First Last, credentials  
Student Clinician

Be sure to have your supervisor look carefully at your documentation and you MUST have an exit meeting with the client or caregiver upon discharge with all appropriate paperwork hand delivered to them on



## Appendix G: Initial and Final Client Conference

### General Guidelines:

1. Clinicians may complete two client conferences with each client during the semester
2. The duration of the conference will vary but is generally 20 minutes in length
3. The supervisor may either be present in the therapy room or observe from the observation room

### Initial Client Conference:

1. Complete an Initial Client Conference with each client following completion of semester goals
2. A suggested date for completion of the Initial Client Conference is listed in the Clinic Calendar
3. The clinician reviews:
  - Relevant client background information
  - Test results from the evaluation or re-evaluation
  - Present communicative status
  - Goals for the semester and objectives to meet those goals
4. Answer any questions the client may have
  - If the clinician is unable to answer a question, it should be discussed with the supervisor and answered during the following session

### Final Client Conference:

1. Complete a Final Client Conference with each client during the final day of clinic
2. The clinician reviews:
  - Communicative status at the beginning of the semester
  - Progress towards meeting the goals and objectives during the semester
  - Communicative status at the end of the semester
  - Recommendations for services
    - At the clinic
    - Outside of clinic
    - The Home Program
3. Answer any questions the client may have
  - The supervisor will answer any questions the client is unable to answer
4. Give the client a copy of the Therapy Report
5. Obtain the following information from the client if clinic is recommended for the following semester:
  - Is the client interested in returning for additional therapy?
  - Is the client able to attend clinic during the scheduled time for next semester?
6. If the client plans to return for additional therapy the following semester, inform the client:
  - A scheduling letter will be mailed to the client approximately two weeks before the beginning of the next semester
  - The center cannot guarantee placement the next semester but will do its best if the client has not yet completed four semesters of therapy at the center.

## Appendix H: Home Program

### General Guidelines

An individual Home Program is provided and reviewed with each client during the final client conference on the final day of clinic. The Home Program consists of instructions, activities and materials to carryover goals and objectives addressed during the course of treatment. The due date for the Home Program is listed on the clinic calendar, or set by the individual supervisors.

### Procedure:

#### 1. Handout for the client

Identifying information is listed at the top of the Home Program and consists of:

- Client's name
- Date of the final client conference
- Student clinician's name
- Supervisor's name

#### 2. Introductory paragraph:

The initial paragraph describes the general goals and objectives of therapy during the semester and the progress demonstrated, using lay person terminology

#### 3. Therapy Goals:

The Home Program addresses approximately three therapy goals

- State each goal and objective using lay person terminology
- State the materials to be used to complete the activity
- State the activity to be completed for each goal/objective
- Write simple instructions for completing each activity

#### 4. Concluding Paragraph:

Write a closing statement thanking the client for attending therapy at the center

Materials for the Home Program

Photocopy, create or purchase all of the necessary materials that the client will use to complete the Home Program

Packaging the Home Program

Package the handout and materials attractively in a folder, binder or festive bag

### Supervisor Review:

The supervisor reviews the Home Program and returns the program to the student with feedback generally during the subsequent therapy session

Appendix H-2:

THE KAY ARMSTEAD CENTER FOR COMMUNICATION DISORDERS  
SAN JOSE STATE UNIVERSITY  
SAN JOSE, CA 95192-0079  
408-924-3659  
HOME PROGRAM  
\_\_\_\_\_SEMESTER 20\_\_\_\_\_

Client:  
Student Clinician:  
Date:  
Clinical Supervisor:

Introductory Paragraph

Therapy Goal 1  
Materials:  
Activity:  
Instructions:

Therapy Goal 2  
Materials:  
Activity:  
Instructions:

Concluding Paragraph

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

\_\_\_\_\_  
Student Clinician

# Appendix I: Mid-Term and Final Student Evaluations Grading

## Grading Guidelines

- Final grade will be based solely upon the Performance Evaluation Profile from the Final Evaluation
- Students must receive a 6 or above on the grading rubric, and a grade of 2 or above on the basic clinical competencies, with an average of 2.8 in order to pass clinic.
- Students will receive a grade of “A”, “B”, “C” or "D"
- Students receiving a grade of “B-“ or below will be required to repeat the clinic.

<b>Student:</b>		<b>Semester:</b>		<b>Pre-Graduate Clinic</b>		<b>Supervisor:</b>	
SCORE: #DIV/0!		STUDENT GRADE: #DIV/0!		Midterm/Final		Practicum:	
Basic Clinical Competencies		#DIV/0!					
BASIC CLINICAL COMPETENCIES							
Score as: 3= met 2= area of concern 1= not met							
		student focus	demonstrates respect for fellow students as valued and unique individuals				
		commitment to diversity	respects clients/families of varied cultural backgrounds, ethnicities, religions, sexual orientation, social classes, abilities, political beliefs and disabilities				
		time management	completes clinic assignments and duties relating to client by assigned due date				
		emotional maturity	responds to frustration and stress appropriately				
		professional responsibility	demonstrates promptness, is not unnecessarily absent, notifies appropriate individuals, etc.				
		confidentiality	maintains patient confidentiality at all times, both written and verbal				
		administrative	follows all clinic procedures as outlined in all clinic meeting/handbook				
		case management	maintains records, makes client contacts as necessary, interacts with others as needed				
		professional format	follows format according to report type and per supervisor suggestions				
		writing style	uses a writing style that reflects the professional nature of the field				
#DIV/0!	Score	* students must achieve a 2 or above in all areas, 2.8 average in order to pass the course					
Competency	Value	Rubric					
Exceptional	10.00	Performance exceeds expectations. Independent and consistent in identifying & problem-solving clinical issues. Clinician initiates discussion.					
Exceptional	9.00	Performance usually above required standards. Often identifies & problem-solves clinical issues. Minimal supervisory guidance required, at the request of the clinician.					
Met	8.00	Discretionary					
Met	7.00	Discretionary					
Met	6.00	Performance meets general required standards. Independently identifies and problem-solves clinical issues. Moderate supervisory guidance required.					
Emerging	5.00	Discretionary					
Emerging	4.00	Discretionary					
Emerging	3.00	Certain gaps/inconsistencies in performance. Maximum supervisory guidance required to identify and solve clinical issues. Clinician responds to specific directions, practice, and/or role play.					
Not Met	2.00	Clinical skills are inadequate even with maximum supervisory guidance. The clinician does not recognize the need for and/or follow through with supervisor's suggestions.					
Not Met	1.00	Clinical skills are inadequate and clinician has shown incompetence that is not able to be remediated despite many attempts.					
Competency	Value	PROFESSIONALISM					
Not Met		communication	conveys spoken information clearly & concisely using appropriate grammar, language, and vocabulary with other professionals, staff, family, and co-clinicians				
Not Met		listening	demonstrates active listening when communicating with others				
Not Met		collaboration	demonstrates skills in working with other team members and supervisors, contributing equally, providing input, asking questions, not limited to a specific client assignment				
Not Met		counseling	uses basic counseling strategies to meet client's needs and or family's emotional needs; recognizes SLP's scope of practice and makes appropriate referrals when warranted				
Not Met		professional behavior	displays professional conduct and appearance during interactions with professionals, family, and clients				
Not Met		professional demeanor	accepts feedback and constructive criticism graciously and acts on suggestions; demonstrates effective and positive problem solving strategies with faculty, supervisors and peers.				
Not Met		ethical judgment & behavior	demonstrates adherence to the ASHA Code of Ethics and all additional standards of professional behavior per departmental and clinic policies.				
ASSESSMENT & INTERVENTION * not all areas are appropriate in all clinics.							
Not Met		screening	selects & administers appropriate screening tools				
Not Met		interviewing	conducts interviews to gather case history information				
Not Met		planning	selects appropriate materials, sets up room appropriately, etc.				
Not Met		behavioral observations	integrates behavioral observations with results of formal/informal assessment				
Not Met		instrumentation	administers non-standardized and standardized testing instruments appropriately				
Not Met		data interpretation	interprets results of diagnostic info accurately				
Not Met		data analysis	analyzes diagnostic tests accurately				
Not Met		diagnostic decisions	uses all information gathered to make appropriate diagnostic decisions				
Not Met		flexibility	devises or adapts testing methods as appropriate according to client needs, diagnosis, etc.				
Not Met		goals/objectives	develops appropriate measurable goals and objectives based on info derived from formal tests, behavioral observations, etc.				
Not Met		lesson plans	selects age & ability appropriate tasks which incorporate the client outcomes (goals & objectives)				
Not Met		materials	selects creative materials at age and ability appropriate levels to maintain client motivation				
Not Met		instrumentation use	calibrates and uses technology appropriately				
Not Met		strategy use	identifies and implements a variety of appropriate strategies to meet needs of client				
Not Met		time management	structures treatment sessions for maximum client participation				
Not Met		data collection	collects and analyzes data efficiently; recognizes opportunities for data collection				
Not Met		behavior management	uses appropriate prevention and intervention strategies to manage client behavior				
Not Met		treatment	modifies treatment plan based on client need				
Not Met		recommendations	uses data collected formally and informally to make appropriate recommendations				
WRITING CONVENTIONS							
Not Met		adequate info	includes info that clearly describes client				
Not Met		appropriate info	includes info that is accurate and pertinent				
Not Met		professional vocab	uses language and technical terms common to the field and appropriate for reader				
Not Met		punctuation & syntax	uses grammar and sentence structure as defined by rules of English, uses punctuation correctly to relate or separate thoughts				
Not Met		organization	presents info in a sequential sense-making format				
Not Met		integration	conjoins and relates ideas within a paragraph				
Not Met		clarity/conciseness	presents info with a minimum of redundancy and ambiguity				
COMMENTS							
Strengths							
Areas to watch							
Areas that require remediation							
* Areas in section 3 indicate that a student is not passing the course. You are responsible for working with your supervisor to develop a remediation plan in order to pass this clinic.							

Date

Supervisor Signature

Student Clinician Signature