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INTRODUCTION

This manual has been prepared to assist the students of the Communicative Sciences and Disorders (CSD) Program in their professional education development. The manual has been designed to outline the various clinical requirements that must be met in order to satisfactorily complete the degree programs and to meet the Master’s level requirements of the Council on Academic Accreditation (CAA) of the American Speech-Language-Hearing Association (ASHA).

The student is strongly encouraged to become familiar with the contents of this manual as well as the Undergraduate Bulletin or Graduate Catalog under which the student was admitted. There may be points that are unclear due to brevity or to actual lack of policy, and the students should obtain clarification of these points. Nevertheless, the student WILL be held responsible for the material enclosed herein. The student is also responsible for verifying the record of his/her clinical hours, as well as courses, and seeing to it that these conform to university, departmental, and ASHA requirements. This can best be accomplished by consulting with the Clinic Director, clinical supervisor and academic advisor at least once per term in order to verify these records.

Students and staff are encouraged to make recommendations which they feel may make this manual more useful to the members of our department. (The contents herein are subject to change without notification.) A separate document, the Program Manual, outlines the coursework requirements for the CSD program.

OVERVIEW OF THE COMMUNICATIVE SCIENCES AND DISORDERS PROGRAM AND THE SPEECH-LANGUAGE-HEARING CLINICS

The CSD Program and Clinic are housed in Carver Complex North, room 104

**Academic Organization:**
- Student
- Faculty Advisor
- CSD Program Director/Coordinator
- Chair of Department of CEHBS

**Clinical Organization**
- Clinician
- Assigned AAMU Supervisor/
- Externship Supervisor
- Director of Clinical Services (CSD)

**The Practicum Director**
AAMU CSD Program has appointed a faculty member, Esther Phillips-Ross, serving as Director of Clinical Services. It is her job to help plan students’ practicum sequence, clarify practicum processes and requirements, and secure practicum placements and schedules. Mrs. Phillips-Ross may be reached:

Esther Phillips-Ross, MA, CCC-SLP/L
Communicative Sciences and Disorders Program
Alabama A&M University
PO Box 357
Normal, Alabama 35762
256-372-4044
esther.ross@aamu.edu
The Program/Clinic Secretary, Ms. Nelka (Nicky) Ortega Cotto and the graduate assistant/student worker(s), support the faculty. All faculty, staff, and students are required to adhere to clinic policies regarding professionalism, confidentiality, dress code, computer/typewriter and telephone use, materials and equipment, etc.

PRACTICUM REQUIREMENTS

Students must be continuously enrolled in CSD 516, Advanced Clinical Practicum, each semester of graduate enrollment until the required number of clock hours is obtained (exceptions include individuals, classified as 'non-traditional', who typically enroll in CSD 516 to obtain observation hours while fulfilling undergraduate coursework requirements). Each student enrolled in CSD 516 will be required to have available of a minimum of 2 clients in the AAMU Speech-Language-Hearing Clinic in addition to any externship placement when warranted. Exceptions to this policy are considered on a case by case basis.

The student must obtain the minimum number of clock hours required by ASHA to obtain certification prior to graduation. Clinical clock hours obtained in practicum courses in which the student receives a final grade of “D”/“F” or “W”, may not be counted toward the required hours needed for graduation or ASHA certification.

Graduate students accepted into the Communicative Sciences and Disorders (CSD) Program must take and pass a speech-language-hearing screening examination during the first semester of enrollment. The purpose of this screening is to identify any speech, language or hearing problem that may interfere with a students' clinical progression in the Program and ability to remediate clients with communicative issues. Students must demonstrate the ability to speak Standard American English intelligibly, including modeling of all English phonemes. Students will be enrolled in the AAMU Speech and Hearing Clinic free of charge if test results deem that further assistance is needed in this area.

Undergraduate students declaring a major in Communicative Sciences and Disorders (CSD) must take and pass a speech-language-hearing screening examination during the first year in the program (class requirement in CSD 202/500 – Survey of Communication Disorders). The purpose of this screening is to identify any speech, language or hearing problem that may interfere with a students’ ability to be an effective communicative model for patients/clients in the clinic. Students must demonstrate the ability to speak Standard American English intelligibly including modeling of all English phonemes. Students will be enrolled in the AAMU Speech and Hearing Clinic free of charge if test results deem that further assistance is needed in this area.

ACADEMIC/CLINICAL PROBATION AND DISMISSAL

The AAMU CSD Program is two-fold in nature. There is an academic component, (where a select number of theory classes are required for knowledge in the field of speech pathology at entry levels) and a clinical/practicum component (two tiered), that evaluates the ability to utilize knowledge and skill AND evaluates student disposition. Although academic and clinical components are separate, they work together as a whole to aid the graduate candidate in acquiring skills needed to be competent service professionals in the field. Both components are also essential and necessary for successful completion of the AAMU CSD Program.
**Essential Functions and Skills of a Graduate CSD Student:**

In order to acquire the knowledge and skills necessary to practice in the field of speech-language pathology and to adequately and professionally function in a broad variety of clinical situations—including a wide spectrum of patient care, individuals must have skills and attributes in the following 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 experience. However, students need to have the ability to acquire them. The starred items (*) are skills that are more inherent and should be present when a student begins the program.

**COMMUNICATION**

A student must possess adequate communication skills to:

- Communicate proficiently in both oral and written English language to achieve effective academic, clinical and professional interactions with faculty, staff, patients/clients, and peers.*

- Demonstrate reading and writing skills sufficient to meet curricular and clinical demands.*

- Demonstrate appropriate non-verbal communication for culture and context.*

- Assess and effectively communicate all relevant information, including the significance of non-verbal responses.

- Modify communication style to meet the communication needs of patients/clients, caregivers, and other persons served. *

- Communicate professionally and intelligibly with patients/clients, colleagues, other healthcare professionals, and community or professional groups.

- Communicate professionally and effectively on patient/client documentation, reports, and scholarly papers required as part of coursework and professional practice.

- Convey information that is accurate, relevant and culturally sensitive.

**MOTOR**

A student most possess adequate motor skills to:

- Sustain necessary physical activity level in required classroom and clinical activities (i.e. class presentations, projects, 50-minute clinical sessions, clinic room management, etc).*

- Access transportation to clinical and academic placements.*

- Participate in classroom and clinical activities for the defined workday.*

- Efficiently manipulate testing and treatment environment and materials without violation of testing protocol and with best therapeutic practice.

- Manipulate patient-utilized equipment (e.g. durable medical equipment to include AAC devices, hearing aids, etc) in a safe manner.
• Be able to assist clinical clients/patients in case of fire or other emergencies.

• Access technology for clinical management (i.e. billing, charting, therapy programs, etc.).

INTELLECTUAL / COGNITIVE
A student must possess adequate intellectual and cognitive skills to:
• Comprehend, retain, integrate, synthesize, infer, evaluate and apply written and verbal information sufficient to meet curricular and clinical demands.*

• Solve critical problems through critical analysis.

• Identify significant findings from history, evaluation, and data to formulate a diagnosis and develop a treatment plan.

• Solve problems, reason, and make sound clinical judgments in patient assessment, diagnostic and therapeutic plan and implementation.

• Self evaluate, identify, and communicate limits of one's own knowledge and skill to appropriate professional level and be able to identify and utilize resources in order to increase knowledge.

• Utilize detailed written and verbal instruction in order to make unique and dependent decisions.

SENSORY/OBSERVATIONAL
A student must possess adequate sensory skills of vision, hearing, tactile, and smell to:
• Identify normal and disordered (fluency, articulation, voice, resonance, respiration characteristics, oral and written language in the areas of semantics, pragmatics, syntax, morphology and phonology, hearing and balance disorders, swallowing cognition, social interaction related to communication).

• Identify the need for alternative modalities of communication. • Visualize and identify anatomic structures.

• Identify anatomic structures.

• Identify and discriminate findings on imaging studies.

• Discriminate text, numbers, tables, and graphs associated with diagnostic instruments and tests.

• Recognize when a patient/client’s family does or does not understand the clinician’s written and or verbal communication.

BEHAVIORAL/ SOCIAL
A student must possess adequate behavioral and social attributes to:
• Display mature empathetic and effective professional relationships by exhibiting compassion, integrity, and concern for others.*

• Recognize and show respect for individuals with disabilities and for individuals of different ages, genders, race, religions, sexual orientation, and cultural and socioeconomic backgrounds.*
• Conduct oneself in an ethical and legal manner, upholding the ASHA Code of Ethics and university and federal privacy policies.*

• Maintain sufficient physical, emotional and mental health and self-care in order not to jeopardize the health and safety of self and others in the academic and clinical setting and to uphold the ASHA Code of Ethics.*

• Adapt to changing and demanding environments which includes maintaining a mature and professional demeanor while participating in a variety of settings (includes maintaining emotional health).

• Manage the use of time effectively and be able to systematize actions in order to complete professional and technical tasks with realistic constraints.

• Evaluate his/her own performance, be forthright about errors, accept constructive criticism, and look for ways to improve academic and clinical performance.*

• Exhibit professional behavior by conforming to appropriate standards of dress, appearance, language, and public behavior as outlined in the Program’s clinic and academic handbooks.*

• Display mature, empathic and effective relationships with patients/clients, faculty and staff while maintaining professional boundaries.*

(“Eligibility Requirements and Essential Functions adapted by Council of Academic Programs in Communication Sciences and Disorders, 2007; Essential Skills Communication Disorders by Murry State University)

**Academics:**
A graduate student who does not maintain an overall GPA of 3.0 or to make satisfactory progress in a degree program will be dismissed from graduate study at the University. Prior to dismissal, a period of academic probation (normally one term of full-time graduate study or its equivalent) will be granted in which to demonstrate an ability to meet degree requirements and to complete a degree within an approved time limit. Students on academic probation are not eligible for appointment to assistantships or fellowships.

When a student’s overall GPA falls below 3.0, the student runs the risk of probation and is subject to dismissal if GPA remains below standard. NOTE: a graduate student is allowed one “C” grade on his/her transcript for successful completion of the graduate program. It is required of each student to set appointments with his/her advisor, per semester, to discuss future courses and current academic performance.

**Practicum (onsite and offsite placements)**
Two Tiered—Clinical/Essential Functional Skills and Disposition
A graduate student may qualify for dismissal from clinic or may be asked to withdraw from the AAMU CSD clinical program if unethical practices (see below) are noted in practicum experiences (i.e. unprofessional behavior, misconduct, false documentation of hour accrual, criminal behavior/actions, violation of confidentiality, violation of the “spirit” of the ASHA Code of Ethics (2010r/2016), etc.) The field of speech pathology is a service profession. A cleared background check is required to successfully complete practicum. If during the course of pursuing the graduate degree in CSD, criminal charges are acquired, the student will be asked to withdraw from CSD 516, until charges are cleared.
As noted in this document (p.27), there are three levels of practicum experiences. Each level will be evaluated according to experience and knowledge that the graduate candidate has gained. The AAMU CSD Program will provide support to clinicians who present with difficulty in practicum—given that the integrity of the program and profession is not effected.

If a student is dismissed from Advanced Practicum, the following guidelines are to be followed:

a. The student must provide all updated documentation regarding the status of the assigned client(s) to assure that the client(s) will continue to receive quality care. This documentation is to be prepared and submitted in a format that is required by the clinical site where the student has been assigned.

b. Prior to re-enrolling in Advanced Practicum, the student must successfully complete the agreed upon and required competency remediation plan/assignments (CRP) and clear civil record. The content of the CRP will be determined by the AAMU CSD program clinical supervisors and shared with the student with specific timelines for completion provided.

c. The student is required to successfully satisfy the requirements of the CRP before re-enrolling in CSD 516 for the following semester.

d. Upon re-enrollment in Advanced Practicum, the student must adhere to the requirements and objectives that have been established by the clinical supervisors. The semester of re-enrollment will be considered a probationary semester and the student will be permitted re-enrollment only if the enrollment procedures outlined above have been followed. Abandonment of clients or clinical responsibilities from the semester in which the student withdrew or was dismissed will result in permanent removal from the clinical training program in the AAMU CSD program. If the student receives a failing grade (D or F) during the probationary semester, the student will be permanently removed from the clinical experience through the CSD program at Alabama A&M University.

**QUALITY OF WORK**

The student must do work of high quality and must earn a cumulative average of “B” or above in courses for which credit is given towards the Master’s degree. No grade below “C” will be acceptable for graduate credit. The maximum number of “C”s that will be accepted for graduate credit is ONE (1). A CSD graduate candidate who earns transcript grades of lower than one “C” (in spite of GPA) will be subject to suspension from the graduate program.

**ETHICAL PRACTICES**

It is expected that all assignments and documented practicum hours submitted by students as part of academic coursework and practicum are the result of the student’s own effort. Failure to comply with the principles of academic/clinical honesty is a serious offense and will result in dismissal from the University. Academic and clinical dishonesty may include, but is not limited to:

1. Cheating (e.g., use of crib notes).
2. Plagiarism (e.g., copying any portion of someone else’s original work without appropriate credit given to the author).
3. Fabrication (e.g., creating data).
4. Aiding and abetting dishonesty (e.g., writing a term paper for another student).
5. Falsification of records (e.g., keeping inaccurate records of supervised practicum hours, falsifying physician’s excuses, forging supervisor’s name).
6. Other violations to professional integrity
A faculty member or practicum educational partner (i.e. offsite preceptor) who believes an instance of academic and/or practicum dishonesty has occurred is responsible for documenting the occurrence and acting accordingly. A student accused of academic/practicum dishonesty is required to meet with the CSD faculty and/or the CSD Clinic Director, along with the departmental coordinator/chairperson, who will review the matter with the student and provide a written summary of the actions to be taken. Students may appeal to the Dean of Education.

STATUTE OF LIMITATIONS

Students enrolled in programs that require more than 36 credit hours, such as the Master of Science in Communicative Sciences and Disorders, will have 7 years to complete all requirements.

FEDERAL REGULATIONS

Alabama A&M University as an educational institution and as an employer, does not discriminate on the basis of race, color, religion, ethnicity, national origin, age, sex, marital, or handicapped status. This commitment is made by the University and required by federal, state, and local laws and regulations, including Title IX, 86.9.

Each student at the University has the right to inspect his/her student records, Federal Register, Vol. 40 Number 3, Part III, Privacy Right of Parents and Students.

REQUISITES PRIOR TO ENTERING CLINIC

UNDERGRADUATE PREREQUISITES

Prior to entering undergraduate clinic: CSD 321, 406 for the first time, a student MUST:

1. Complete and maintain a 3.0 average in the selected 23 hours of speech, language, hearing course work (CSD 202, 203, 204, 215, 207, 205, 307, 308) AND earn no less than a “B” in CSD 310 - Clinical Procedures. Moreover, the student's combined GPA for these nine courses must be at least a 3.0 or higher.
2. Complete a minimum of 10 of the 25 ASHA required observation hours. The 25 hours of direct observation required at AAMU is in accordance with ASHA accreditation requirements. This requirement became effective August 1, 1988, for undergraduate students and for graduate students transferring from other programs and has been updated in the most recent standards. At least one-half of the observation hours MUST be completed at the AAMU Clinic. To help meet this requirement, several courses will require observations to be made by students enrolled. Some of the observation hours MAY be obtained from AAMU approved, off campus, CCC/L supervisors. However, permission to obtain off campus observation hours is required from the Director of Clinical Services PRIOR to visiting any off campus sites.
3. Make application to the Director of Clinical Services by mid semester prior to the semester that the student plans to enter CSD 321, 406, or 516. However, applications to enroll in clinic for the fall semester must be completed during the spring semester. Please find a copy of the application in this manual in Appendix E. An application may also be obtained from the Director of Clinical Services.
4. Complete and obtain a cleared fingerprint background check with Cogent. Fingerprinting will be conducted via an independent agency, Cogent
Systems (see p. 23). Those students who have not cleared the fingerprinting process will be prohibited to participate in CSD 321/406. After acceptance to enter clinic has been granted, students must maintain a cleared background check in order to successfully complete practicum.

The student must submit a class schedule for the upcoming semester to the Director of Clinical Services so that client assignments will not conflict with class or other obligations of the student clinician. Once the schedule has been submitted, please do not change the schedule. It is very difficult to coordinate student, supervisor, and client schedules, and nearly impossible with changes after the schedule has been completed. If a student’s schedule does change, the student may forfeit being placed in practicum. The schedule is based on all persons involved.

**GRADUATE REQUISITES:**

In order to enter Advanced Practicum: CSD 516 a graduate student **MUST**:

1. **Complete the undergraduate courses required to enroll in CSD 516 (for non-traditional graduate students).** Furthermore, enrollment in CSD 516 is restricted to those non-traditional CSD students with a grade of B or above in CSD 310 (see p. 26-27)

2. **Complete the College of Education Humanities and Behavioral Sciences (COEHBS) Communication Screening** (to be completed during the student’s first semester on site).

3. **Complete a minimum of 20 of the 25 ASHA required observation hours.** The 25 hours of direct observation required at AAMU is in accordance with ASHA accreditation requirements. At least 20 of the 25 hours of observation MUST be completed before entering the AAMU CSD Clinic. **For incoming non-traditional graduate students of CSD 516, 15 of the 25 hours required for ASHA certification must be obtained before seeing clients in the clinic:**
   - Obtaining observation hours in the clinic and approved AAMU off site locations: For each hour of direct observation, a student must complete an observation form/report. This form may be obtained from the clinic secretary. After completion of a written report and supervisory approval, these forms are maintained in the student’s clinical file along with a master log of the hours as a permanent record of the student’s observation hours. While it is not necessary for students to complete the total 25 hours of observation (as required by ASHA) before earning hours for direct client contact, students must demonstrated adequate knowledge base before beginning direct practicum experience in the AAMU CSD Clinic.

4. **Complete/obtain a cleared fingerprint background check with Cogent.** Fingerprinting will be conducted via an independent agency, Cogent Systems (see page 15 for deadline dates for background clearance). Those students who have not cleared the fingerprinting process will be prohibited to participate in CSD 516. A cleared background check must be acquired and maintained to be permitted to enroll and/or re-enroll in practicum.

5. **Reserve funds for clinical expenses (see p. 23).**

6. **Complete a Clinical Schedule Form** indicating availability for practicum. This form is typically completed before the semester of intended practicum. Timelines indicating the clinical process will indicate specific dates as to when this form is due to the Director of Clinical Services.

7. **Complete AAMU CSD Confidentiality/ HIPAA Training- This is addressed within the first semester of practicum.**

8. **OFFSITE GENERAL: AAMU places all practicum students with ASHA certified and/or ABESPA license offsite supervisors. It is the student’s**
responsibility during the first week of placement to obtain and submit to the director of clinical services, the Supervisor Verification Form/Card. Submit required supervisor information indicating current ASHA and ABESPA credentials during the **FIRST week of offsite practicum**: Note: In order to obtain practicum hours, the supervisor must be certified by ASHA and or licensed by ABESPA. **If a student is supervised by an individual who does not hold proper credentials (i.e. ASHA certification “CCCs”; ABESPA licensure; Alabama Board Teaching Certificate) the student forfeits counting the hours obtained from the supervisor.**

9. **OFFSITE NEURO**: Complete drug screening and TB testing before initiating site placement.

**AAMU CSD CLINIC POLICIES AND PROCEDURES**

**Observation Procedures**

Applicants for certification under current ASHA standards are required to complete a minimum of 400 clock hours of supervised clinical experience. At least 25 hours must have been spent in clinical observation and at least 375 clock hours must have been spent in direct client/patient contact (asha.org). At Alabama A&M University (AAMU), the Program of Communicative Sciences and Disorders requires undergraduate students to complete and document 20 of the 25 ASHA required observation hours before graduation. **Post-baccalaureate students** (non-traditional graduate students) are **required to complete and document at least 15 observation experiences before participating in direct client/clinician practices**. The 25 hours of direct observation required at AAMU is in accordance with ASHA accreditation requirements. This requirement became effective August 1, 1988, for undergraduate students and for graduate students transferring from other programs and has been updated in the most recent standards. At least one-half of the observation hours MUST be completed at the AAMU Clinic. To help meet this requirement, several courses will require observations to be completed by students enrolled. Some of the observation hours will be obtained from AAMU approved, off campus, CCC/L supervisors. Permission to obtain off campus observation hours is required from the Director of Clinical Services PRIOR to visiting any off-campus sites.

Observation hours generally precede direct contact with clients/patients. However, completion of all 25 observation hours is not a prerequisite to begin direct client/patient contact. For certification purposes, the observation and direct client/patient contact hours must be within the scope of practice of speech-language pathology. For certification purposes, observation experiences must be under the direction of a qualified clinical supervisor who holds current ASHA Documenting certification in the appropriate practice area. Such direction may occur simultaneously with the student’s observation or may be through review and approval of written reports or summaries submitted by the student. Students may use videotapes of the provision of client services for observation purposes. (Standard IV-C. http://www.asha.org/certification/slp_standards.htm).

**Documenting Observation Hours**

The Director of Clinical Services will inform students of observation opportunities. Each student is responsible for tracking their own observations in the onsite Speech and Hearing Clinic and in the community. AAMU CSD students will record observation hours obtained in minutes on department-provided observation log sheets and practicum reports. Students must obtain signatures from the ASHA certified SLP directing the clinical service in order for the hours to be valid (i.e. the clinician/supervisor must sign the forms and provide his/her ASHA number). Hours will not be tracked by the clinic or the department; it is each student’s responsibility to maintain the practicum report and to submit said documents to the Director of Clinical Services by the dates provided on the
semester Clinic Timeline. The student must maintain a copy of completed practicum documents for personal record.

**Mailboxes and Email/Clinic Website**

Clinician mailboxes are located in the AAMU CSD clinic (Carver Complex North). Please check mailboxes and email regularly. There are also faculty/supervisor mailboxes in the clinic. Students are encouraged to leave correspondence to faculty, via the mailboxes. Each student is required to obtain an AAMU email account (ex. jphillips@bulldogs.aamu.edu) and to use this account for clinic correspondence while enrolled in CSD 516. Check email on a consistent basis (daily). The CSD Clinic has created its own website for students enrolled in CSD 516, Advanced Practicum. Announcements re: the clinical process will be documented on the CSD 516 google website: [https://sites.google.com/site/csd516](https://sites.google.com/site/csd516). This website also has examples of reports used in the onsite clinic. It is encouraged that this site be checked regularly. In addition, the AAMU CSD Clinic webpage has a number of important forms and documents for success in clinic: [http://www.aamu.edu/Academics/EHBS/HSHPCD/csd/Pages/Student-Forms-and-Manuals.aspx](http://www.aamu.edu/Academics/EHBS/HSHPCD/csd/Pages/Student-Forms-and-Manuals.aspx).

**Clinical Report Writing Submission Timeline**

All students who are enrolled in CSD 516 are required to have strong computer skills, as each student is expected to use computers extensively in the clinical setting for report writing and treatment purposes.

**Operating System Requirements:**

In order to be effective in the paperwork submission process in the AAMU CSD Program’s Clinic, the student clinician must own or have access to a functioning computer and operating system/word processing program (Office 365; Windows 7/8/10; macOS (X) series) that can support electronic paperwork submittal. **Open Office is not compatible with the AAMU CSD Clinic templates and therefore is not an acceptable word processing program for paperwork submission.** Documents should be submitted in Word and must be editable. PDF files of clinical paperwork will not be accepted. The student clinician must also own an encrypted flash drive (at least 4GB) and have access to internet service, as paperwork must be delivered electronically. **NOTE:** Client paperwork/files should be saved on an encrypted flash drive and NOT as a temporary file on a general University (or any public) computer. Computers are readily available to CSD clinicians in the CSD computer Lab (CCN room 101). **During the paperwork editing process, the supervisor may use comment boxes to add necessary input re: submitted paperwork. This being the case, it is not recommended that students view corrected paperwork files through Google Documents, as supervisor comment boxes are often not detected via this program.**

The following is a chart depicting submission timelines for clinical report writing:

<table>
<thead>
<tr>
<th>REPORT/Document</th>
<th>DUE TO SUPERVISOR VIA EMAIL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnostic Report (first draft)</td>
<td>Within <strong>ONE WEEK</strong> of completing testing</td>
</tr>
<tr>
<td>Diagnostic Report (final draft)</td>
<td><strong>THREE DAYS</strong> after final revisions</td>
</tr>
<tr>
<td>Initial Therapy Plan (first draft)</td>
<td><strong>FRIDAY</strong> after completion of diagnostic testing</td>
</tr>
<tr>
<td>Initial Therapy Plan (final draft)</td>
<td><strong>THREE DAYS</strong> after final revisions</td>
</tr>
<tr>
<td>Lesson Plans</td>
<td><strong>EACH FRIDAY</strong> by 12:00 PM for the following week</td>
</tr>
</tbody>
</table>
SOAP Notes

**EACH FRIDAY** by 12:00 PM for the prior week

Clinic Hour Forms

**BI-TRI-WEEKLY** to clinic secretary (Specific dates will be noted on Semester Clinical Schedule issued the beginning of each semester by clinic director). Hours are to be *initialized weekly* by clinic supervisors.

Semester Summary Report (first draft)

**MONDAY** of the last week of therapy

Semester Summary Report (final draft)

**FRIDAY** before finals

***REVISIONS TO ALL PAPERWORK ARE DUE THREE DAYS AFTER SUPERVISOR’S REVIEW. ALL REVISIONS MADE ARE TO BE HIGHLIGHTED.***

**Reports**

All clinic reports (Diagnostic, Initial Therapy Plan, Semester Summary Report, etc.) must be turned in by the times and days listed on the Clinical Report Writing Submission Timeline. Late reports are not tolerated. **NOTE:** *Revisions to all paperwork are due three days after supervisor’s review.* Paperwork is not considered “approved” and/or complete, until the supervisor has signed or initialed the necessary document(s). When submitting revised clinical documents to clinical supervisor, the student is required to highlight the areas of change in the amended document for supervisor to review.

**Diagnostic Reports/Reporting (See page 9).**

**Lesson Plans and SOAP Notes/ Semester Summary**

Lesson plans will be evaluated by the supervisor at the time designated on the report time-line sheet (typically one each week). Clinicians should provide an extra copy of the lesson plan to the supervisor prior to the session. A copy of the lesson plan can be found in the “Clinic Forms” section on the CSD Clinic Website. These records are reviewed by professionals, so please take pride in each submitted document. Lesson plans and SOAP notes should be written in behavioral terminology. Procedures should include goals, approach used, targets, number of trials, criterion required for each goal, etc. Procedures/activities should vary from session to session even though the objectives should remain the same. **Always use the client’s initials for confidentiality.** (See HIPAA Compliance p. 35-36, Appendix M on AAMU CSD webpage). The semester summary requires that the whole name of the client be documented on the report as this report goes to the client or his/her caregiver at the end of semester. During the editing process, initials are to be used, until completed.

**Filing Clinical Paperwork WEEKLY**

All paperwork should be filed in the client’s chart each week following approval from the supervisor. Other students may have a need to review a chart for class or observation and the information should be readily available.

If the student clinician has not received approved documents in his/her clinic mailbox within ONE week, check with the attending supervisor to evaluate the status of the documents in question. Punctuality in submitting clinical reports to the supervisor is considered an important aspect of the student’s demonstration of professionalism. Therefore, lateness in completion of clinical reports will be reflected in the student’s final clinical grade for each day a report is late. The overall grade will be dropped at
least one letter grade for excessive tardiness of paperwork at the supervisor’s and Clinic Director’s discretion. Documentation will also be placed in the student’s permanent clinic file regarding failure to adhere to submission guidelines. In addition, clients may be reassigned until the required paperwork has been received and approved. Supervisors will evaluate student’s reports and discuss with the student any necessary changes, if indicated. The first page of all final diagnostic reports must be copied to AAMU Clinic letterhead, which can be obtained from the Clinic Secretary. Once the final report has been completed, a copy is returned to the student to be placed in the client’s chart.

Clinical Paperwork – Sample Reports
There are sample Observation Reports, Diagnostic Reports, Initial Therapy Plans, Lesson Plans, SOAP notes, Semester Summary Reports, and Discharge Records located on the AAMU CSD Clinic website and CSD Clinic google website. These may be used as a guide for writing clinical reports.

DIAGNOSTICS

Clinicians will be assigned diagnostics throughout the fall, and possibly the spring and summer semesters in addition to the clients assigned for weekly management. Summer semester diagnostic hours are generally obtained during pre and post testing of the clients assigned for management. Clinicians will review the schedule for diagnostic evaluations at the beginning of each month throughout the fall, spring, and summer semesters.

Pre-Evaluation Procedures

1. Client, or someone representing the client, contacts the Clinic and speaks with the Director of Clinical Services.
2. Student clinician is assigned the client, a supervisor, and a time to see the client.
3. Student clinician calls the client to verify the scheduled appointment time and notifies the clinical supervisor.
4. Student and supervisor discuss the upcoming evaluation.
5. Student clinician obtains a client folder from the Clinic Secretary and all necessary forms (i.e., Case history, protocols, etc.) for the evaluation.
6. Student clinician contacts the client 24 hours prior to the evaluation to remind him/her of the appointment. Client contact information is found in the client file. If the client is new to the clinic, the student clinician will acquire the client contact information from the attending supervisor.

Admitting on the Day of Evaluation

1. Student signs in on the sign-in sheet at the front entrance at least 10 minutes prior to the scheduled evaluation time.
2. Student prepares the diagnostic room and selects appropriate materials BEFORE the evaluation.
3. Client signs in on the sign-in sheet at the front entrance (verified by student clinician).
4. Supervisor and student clinician meet client and/or parents in lobby, and then take them to the testing room.
5. If not completed prior, the case history is completed by the client and/or caregiver while the diagnostic session is progress.
6. Diagnostic evaluation is completed by the student with supervisory input as necessary. (Should include articulation, language, oral peripheral, and hearing screening with a minimum of subjective measures for voice and fluency.)

7. Client is returned to the lobby.

8. Student completes attendance receipt and gives to caregiver or client.

9. Student scores all tests and analyzes clinical data, with supervisory input as needed.

10. Both student and clinical supervisor complete a preliminary report for client to take with them the date of the evaluation. A copy of this report is reserved for the clients file. Formal diagnostic report is to be mailed to client in two weeks.

11. Student completes diagnostic report (typed and double-spaced) and returns it to the supervisor within one week of testing.

12. Student discusses resulting diagnostic impressions and recommendations with supervisor and plans caregiver or client conference.

13. Student is responsible for straightening up the room before the informing conference.

14. Student and/or supervisor conduct(s) the caregiver or client conference.

15. Universal precautions are followed.

**Diagnostic Reporting**

1. After the evaluation is completed, the student copies needed client information from permanent clinic folder. Permanent clinic folders are never to leave the Alabama A&M Speech and Hearing Clinic.

2. Student returns a computerized draft report and protocols **within one week of the diagnostic session to the supervisor.** (NOTE: Given that the diagnostic process can be several weeks, a diagnostic SOAP note is due each week during the diagnostic process until testing is completed. It is not unusual for a client to have 2 or more diagnostic SOAP notes along with a diagnostic report for a given semester).

3. Supervisor evaluates draft reports and returns them to the student. The student has three days to make corrections and return the reports to the supervisor with revisions highlighted.

The guidelines for writing reports are determined by the supervisor. The final copy of diagnostic reports will be completed by the student clinician. All previously graded drafts and test protocols must be maintained in a “working folder” and must be turned in to the supervisor with each draft of the diagnostic report. **Remember that personal identifying information may not leave the clinic.** Student clinicians are expected to use client initials on all draft copies of clinical reports. Client’s full name is to be used on final and approved diagnostic reports (See HIPAA Compliance p. 35-36; Appendix M).

All reports containing personal identifying information for clients will be kept only on CSD computers in the Writing Lab, CCN 101. These reports may be printed, but must stay in the clinic, either in the supervisor’s box, the clinician’s box, or the client’s chart. **A copy of the approved diagnostic report is to be given (via mail or in person) to the client or his/her caregiver.**

**THERAPY PROCEDURES**

Client assignments to student clinicians are assigned by the Director of Clinical Services and may be based on the coursework the student has had, the experience of the clinician, and schedules of the supervisor, clinician, and client. Assignments are disseminated in the beginning of each semester.
**Scheduling**

1. A schedule is obtained from each student clinician enrolled in any practicum during the first week of classes each semester. Each student will find a schedule in his/her box and should return it as soon as possible to the Director of Clinical Services. Work schedules and other obligations that the student may have MUST be on the schedule. A schedule will NOT be changed after it is assigned unless deemed necessary by the Clinic Director.

2. After clients have been assigned to the student clinician, the schedule including clients assigned, disorder, times, date to begin therapy, supervisor, and location will be returned to the student clinician.

3. The student clinician must verify appointment days and times with the client within 2 days of receiving the schedule and document on the bottom of the “Request for Therapy” form the date and time the client was contacted.

4. The student clinician must notify the supervisor when the days and times are verified. If there is a conflict with the client, notify the supervisor to look for alternate times.

5. **DO NOT** schedule a client without verifying a time with the supervisor.

6. Give a reminder call to the client 24 hours before their first appointment in the clinic.

**Room Assignment**

Room assignments will be posted on the magnetic bulletin board in CCN 104 on the wall adjacent to the library/materials room (04). Room assignments will also be posted on the clinic schedules posted on the cork boards by the observation suites. Room changes may be made with the permission of an attending supervisor and/or Clinic Director.

**AAMU CDL Procedures**

A number of the clients served in the onsite clinic are participants at the Alabama A&M Child Development Lab. The Child Development Lab (CDL) is located in Carver Complex East, Room 117. The following protocol is to be used if assigned a client in the AAMU CDL:

- a. Sign out CDL key card from the CSD Program Secretary
- b. Walk to the AAMU CDL, greet the CDL secretary and scan card by the CDL door. Place key card in lab coat pocket.
- c. Sign out the client with the CDL Lab
- d. Sign in the client, taken from the CDL.
- e. Complete therapy receipt (p.19)
- f. Complete therapeutic services with the client
- g. Return student to the CDL
- h. Sign in key card to Program Secretary

The speech and language screener that is used for the students of the AAMU CDL is the Fluharty-2. Copies of this test may be checked out from the CSD Clinic for review. The tests must be signed in and out on the same day via the Program Secretary.

**CEHBS/CSD Screening Procedures:**

1. **Description:** The CEHBS/CSD is a communication screen that is required for all candidates desiring to enter into the College of Education and the CSD Program. The CEHBS/CSD screening includes a pure-tone audiology, oral reading of single words and a paragraph, a mock interview, and a writing sample (for vocabulary and written discourse).

The actual CEHBS/CSD screening protocol is comprised of three (3) pages:

**Page 1:** The Speech and Hearing Screening Summary (page one) contains identifying information about the student, scores obtained utilizing a five-point
scale (scores of 4 and 5 are considered passing scores), a Pass/Fail rating in each of five areas, comments, and the signature of the one administering the screening.

This page will be given to the clinician by Nicky, before the screening process begins.

After testing is completed and scores are rendered, The Speech and Hearing Screening Summary is copied for the student and for the CSD Clinic, and the original is sent to the AAMU Teacher Service Center. Nicky or the graduate assistant will aid with this process.

Page 2 of the screener is for internal use only, as an instruction page for the clinician administering the screen; a worksheet for noting errors and responses during the screening; and a grading rubric which describes the types of errors allowed. Remember, scores of 4 and 5 are considered passing scores.

Page 2 of the screener is located in a yellow folder in drawer 2 of the file drawers in Rm. 12.

Page 3 of the screener is simply a blank page onto which the candidate completes a writing sample (including vocabulary and paragraph) that is kept in the CSD Clinic general CEHBS file. In conjunction with the second page, this provides guidance in selecting individualized goals for those needing remediation if warranted.

Page 3 of the screener is located in a blue folder in drawer 3 of the file drawers in Rm. 12. The vocabulary list is also located in drawer 3.

Other paged documents/forms:

Audiological Screening Forms: The clinician is to utilize the AAMU audiological screening form to chart the client’s performance on the hearing screening. This form is to be filed with the CEHBS Screen and is found in drawer 2 of the file drawers in Rm.12. If the client does not meet the criteria for the hearing screening, then a referral to the clinic audiologist, Dr. Bush, is required.

Grand Father Passage and Word list: Copies of My Grandfather passage and word list are located in draw 1 of the file drawers in Rm. 12.

Vocabulary List: Copies of the vocabulary list are located in drawer 3 of the file drawers in Rm. 12.

II. Clinician Procedure: Clinicians are to meet and greet the client in the lobby by introduction. The Clinician is to walk the client into the screening room RM 12/24 (whichever is indicated on the Clinic Schedule posted in the clinic). It is important for the clinician to describe the screening process to the client. This will aid in decreasing anxiety associated with taking the screen. The clinician is to explain to the client that the test has three components—(1) a hearing screening (2) oral language/speech screening—in reading a word list and then reading a paragraph; then interview; and (3) a written language screen, where the client will be asked to define three words and then write a 10-12 sentence paragraph as to why they chose the profession of education.

Make sure that all directives are clear. Follow the written instructions on Page 2 of the screener.

When it is time for the client to define the three selected vocabulary words (FYI: the clinician selects the words and positions herself/himself in such a way so that the client does not see the word list) and to comprise the written paragraph, the
The clinician is to inform the client that she/he will be leaving the room so that they may take time to concentrate on the written task. Note: the client will also be evaluated on how well he/she spells the selected vocabulary words.

Check on your client after 15 min. of leaving the room. The client should be near completion of the task. Give another check in 5 min. time.

When the client is completed with the writing task, read over the three vocabulary words to check for spelling and definition integrity, then read over the client’s paragraph. Use a pencil to correct any errors noted. Bring the pencil corrected copy to your attending supervisor for review.

III. Supervisor Procedure: Your supervisor will review the client’s written work; the clinician’s corrections of the client’s work and will give instruction to either have the client to “self-correct” the errors noted or to reconstruct the paragraph (or redefine the words given).

When a client does not pass: When a client does not pass, it is important for the clinician to be gracious in informing the client that he/she has not passed the CEHBS Screen. The clinician should begin telling the client the positive notes of the screening process. If the client has passed the hearing screening or has done well on one of the components of speech or language screened, let the client be aware of their performance. The clinician is then to explain to the client his/her communication weaknesses found during the screening process.

Have the client complete a Request for Services Form for that given semester, and let him/her know that the services in the Clinic are free of charge. Also let the client know that AAMU wants them to be effective communicators and that the therapy or “tutoring” process is a step to aid in the quest for professional communication. Re-screenings will occur at the discretion of the clinical supervisor and clinic director. Re-screenings typically occur after the client has fulfilled one semester of intervention services in the clinic.

Simucase Procedures:
Up to 20% (i.e., 75 hours) of direct contact hours may be obtained through clinical simulation methods (https://www.asha.org/certification/2014-speech-language-pathology-certification-standards/). The AAMU CSD Clinic provides opportunities for students to learn via simulation methods via the Simucase program. Simucase may be accessed in CCN 104 room 7. Student clinicians can acquire practicum hours via the simulated program by completing each case with 90% competency. The clinician must show proof of hours acquired and competency by printing documents supporting time spent/competency on Simucase. Each case in Simucase has a projected, pre-determined amount of time it takes to complete a case. The clinician may not acquire more than the projected amount of time designated for a ‘pre-set’ case. All Simucase activity must be supervised for the time to count for practicum credit. Student codes for Simucase can be acquired by asking the clinic director, Mrs. Phillips-Ross.

Working Folders
The working folder is maintained by the student for the purpose of recording daily plans, procedures, and progress, as well as clinician clock hour information. Information contained in the folder is considered confidential information from the master client file. If the working folder leaves the clinic, it must not contain any personal identifying information. (See HIPAA Compliance, p. 35-36.) Materials to include in the folder:
a. Lesson/Therapy plans
b. SOAP notes  
c. Practicum hours form ("Clinical Practicum Report"), to be completed immediately after each session. Should be kept in duplicate (one in clinic and one in personal filing system at home) once the supervisor has signed the bottom. The supervisor will provide a copy to the student.  
d. Attendance sheet  
e. Test protocols and previous drafts from pre- and post-testing  
f. Any other information required by the supervisor

Once paperwork has been approved/initialed by the supervisor, it should then be placed in the permanent file. The student clinician should put paperwork in the permanent file weekly.

**Client Charts**

Each client has a separate permanent chart which is kept in a locked file room, behind the Program/Clinic Secretary’s office. Any request for confidential information (reports, test results, etc.), from whatever source, is handled by the Program/Clinic Secretary. All information in the folders adheres to HIPPA guidelines to maintain confidentiality (See p.35-36). Client’s information should never be discussed with anyone not directly involved with the client. All clinical reports placed in the chart should be signed by the appropriate clinician and supervisor. Client charts are NEVER to leave the clinic. These charts, when checked out to student clinicians, must always be in the student clinicians’ mailbox when they are not actively working on them. They must be returned to the Clinic Secretary by the end of the day.

The order in which client paperwork is to be filed is noted on the *Chart Audit Checklist*, located on the AAMU CSD Website or in the brown file boxes in the clinic. Each chart will contain the following information and will be organized from front to back in the manner listed below, with the most recent information on top:

**Opening 1, Left**

1. **Chart Audit/Review Checklist**
2. **Documentation of Attempts to Contact Client:** The clinician documents communication with the client or documents client’s status.  
   Sample:
   
   **8-12-17:** This clinician attempted to contact PJ today to inform her about therapy start dates for this semester. There was no answer, so a message was left informing her that therapy will begin September 18th at 10:00am. This clinician left contact name and number. *Susie Speech BS  
   EPross MA, CCC/SLP/L*
   
   Documentation should be dated and clinician is to write in complete sentences with correct spelling. The clinician is to sign at the end of each documentation entry and is to leave a space for his/her supervisor to sign.

3. **Client Attendance Record:** To be kept on a weekly basis. A copy of this record is given to the Program/Clinic Secretary during midterm and final week of each semester.  
4. **Case History Form** – Child or adult forms.  
5. **Other Agency Reports** – All reports and correspondence from agencies other than the Alabama A&M University Speech and Hearing Clinic should be included.  
6. **Authorization for Observation/Video/Audiotaping/Photographs for Educational Purposes** – Release Form  
7. **Release(s) of Information:** (as needed)  
8. **Fee Payment:** (renewed yearly)
**Opening 1, Right**

9. **Diagnostic Reports** (most recent on top)
10. **Score Forms** (under Dx Report/Dx SOAP)

**Opening 2, Left**

11. **Initial Therapy Report** – Short- and long-term objectives for the semester.

**Opening 2, Right**

12. **Semester Summaries** (most recent on top)

**Opening 3, Left**

13. **SOAP Notes** – weekly progress notes (no longer required to complete SOAP note following each session).

**Opening 3, Right**

14. **Lesson Plans** – including objectives, procedures, and tallies.

**CLIENTS CHARTS/FILES SHOULD NEVER BE REMOVED FROM THE AAMU CLINIC/LAB.**

**Therapy Time Management**

1. **Meeting the client:** The student is responsible for meeting the client on time in the lobby and accompanying him/her to the therapy room. If the client is not in the lobby at the designated therapy time, the student will wait for up to 20 minutes. After that time, the student is free to leave, and the session will be marked “No Show” on the Client Attendance Record. During the next session, the student is responsible for informing parents/family members or client of policy regarding excessive tardiness or absences.

2. **Ending the session:** Therapy sessions are terminated after 50 minutes. The remaining ten minutes are to be used to counsel with parents, review with adult clients the home assignments to be completed, or to clean therapy room (see section called Universal Precautions p. 35; Appendix L on AAMU CSD webpage).

**Student/Supervisory Conferences**

Supervisory conferences occur each semester as a means to prepare the graduate clinician for his/her client. Each student is required to sign up for conference times on the door of the given attending supervisor.

1. **Initial student/supervisory conference:** The student is responsible for reviewing all information pertinent to planning a therapy program prior to the conference. The student and supervisor will discuss the client’s current status and prognosis and will plan the initial treatment session.

2. **Weekly student/supervisory conferences:** Weekly conferences will be scheduled as needed at the request of the student or supervisor. No sign-up is necessary.

3. **Midterm student/supervisory conference:** A scheduled conference will be completed during the midterm portion of the semester to verify the client’s permanent chart has been completed correctly, discuss grade, discuss client(s), turn in client attendance form, turn in practicum hours to be calculated, and any other topic the student or supervisor deems necessary. Midterm conferences are scheduled during Fall and Spring semesters only.

4. **Final student/supervisory conference:** A scheduled conference will be completed at the conclusion of the semester to verify the client’s permanent chart has been completed correctly, discuss grade, discuss client(s), turn in client attendance form, turn in
practicum hours to be calculated, and any other topic the student or supervisor deems necessary.

**Parent Conference**
Each clinician will be required to schedule two conferences per client during the semester with at least once scheduled supervised caregiver/client conference during each semester in the clinic. The purpose will be to inform the caregiver/client of his/her program progress.

**Client Attendance:**
Most clients are seen twice per week for 50-minute sessions. Therapy is most effective when attendance is regular. It is important that every effort be made to be present for ALL scheduled therapy sessions and to arrive on time. THREE absences in a semester or TWO consecutive absences could result in dismissal from therapy for the remainder of the semester. Extenuating circumstances may allow for exceptions at the discretion of the supervisor. The Clinic Director must be notified (via email/writing) if the client has three absences and has not taken action for make-up sessions.

**Conditions for Client Dismissal**
1. **Maximal Rehabilitation** - Clients are dismissed when, in the judgment of the supervising clinician in charge of the case, maximal habilitation or rehabilitation for the present time has been reached. Follow-up arrangements (i.e., maintenance therapy, speech-language recheck, and/or referral to another agency, etc.) will be recommended to meet the needs of the client. Dismissal decisions are discussed with parents, family members, or the client as determined by legal responsibility. If the parent, family member, or client does not agree with dismissal, an additional period of treatment, not to exceed 12 weeks, may be agreed to in order to help persons understand and accept the dismissal decision per Clinical Director's discretion.

2. **Unexcused Absences** – Three absences in a semester or two consecutive absences may result in the client being released from therapy. Each student should make his/her client aware of this policy.

3. **Disciplinary Problems** – Disciplinary problems are first discussed with parent or client. If such problems persist, therapy may be terminated at the discretion of the supervisor.

**Recording Sessions**
Each clinician will be required to digitally record two sessions per client per semester. One session is to be recorded toward the beginning of the semester and one toward the end of the semester. The clinician will be required to inform the supervisor of the date to record, set up the recording equipment, and after watching the data, provide a written critique of the session within 1 week of the session to the supervisor. The critique must be completed on a “Therapy Session Evaluation Form” and include strengths and weaknesses observed on the tape.

**Materials and Equipment Check Out/In**
The materials room is located in room 06. Therapy materials ONLY are housed there. ALL diagnostic tests and therapy materials must be checked out AND in through the program’s secretary. Additional equipment including tape recorders, portable audiometers, and computer software are available and may be checked out through the secretary or your clinical supervisor. Disposable supplies such as tongue depressors, gloves, and alcohol prep pads are located in the Library/Materials Room (06). Students may check them out 1 hour prior to diagnostic or therapy sessions. The materials must be checked in and returned to their location immediately following the session for the next clinician to have access to.
them. During the hours clinic is open for clients, student clinicians serving clients have first priority over the use of materials.

Test protocols are filed alphabetically in the drawers of the filing cabinet in the program secretary’s offices. Please ask clinical secretary for these. Since protocols are expensive, clinicians are allowed to take only what is necessary to appropriately serve their client(s).

Student clinicians are responsible for ensuring that materials are returned to the specified location or shelf. Additionally, the toy room must be kept organized and neat. Should a clinician notice broken or missing materials, report these findings to the Director of Clinical Services. Responsibility and cooperation on the part of all students using materials will result in quickly locating what is needed.

**Record-Keeping Concerning Services Rendered**

Clinicians are responsible for ensuring that the clients sign in for each visit and for completing a receipt of services rendered in the clinic offices. The clinician will check the service performed and return a copy to the client or client’s caregiver at the end of each session. Clinicians are also responsible for completing the “Client Attendance Form” (AAMU CSD Clinic Webpage) after each visit, which is to be turned into the secretary or supervisor at midterm and at the conclusion of the semester.

**Clinician Attendance and Promptness**

Consistent attendance is a requirement to successfully pass practicum. Clinicians must meet with clients for the ENTIRE session (50 minutes unless otherwise scheduled for onsite clinic) and or rotation as outlined by the assigned off site supervisor. Although the clinician may miss a session due to an excused absence (University excuse, illness with MD documentation, bereavement, etc.), a student clinician’s final grade will be lowered by one letter grade with each unexcused absence from any scheduled clinic/practicum activity (including diagnostics, treatment, any scheduled conferences with client or supervisor, etc.).

The following will lower clinic grade by one letter if noted in on or off site practicum experiences:

1. Failure to make up a clinician’s absence within two weeks as designated by the supervisor.
2. Two tardies (more than 5 minutes late) for therapy sessions, diagnostic sessions, conferences, and/or any other scheduled activity.
3. Not contacting the attending supervisor prior to absence and before contacting client. If the clinician is unable to attend his/her session, the attending supervisor is to be contacted immediately. If the attending supervisor cannot be contacted or is unavailable, contact the Director of the Clinic. The client is then to be contacted. If the client cannot be reached or contacted, the student is expected to (a) ask a fellow clinician to fill in—per supervisor’s approval—, or (b) meet with the scheduled client. If the clinician is not contagious (i.e., mild headache, sinus infection, etc.), he/she MUST meet clinical obligations. In the event of a contagious illness, a doctor’s excuse MUST be presented to the clinician’s supervisor upon his/her return.
4. Unexcused Absences: any absences that are not considered excused by the University.

**Note:** Clinicians are required to submit a *Request for Absence from Clinical Practicum and/or Clinical Practicum Class Form* for each absence (excused or unexcused). Foreseen absences are to be documented at least 7 days prior to the requested date. In case of emergency, a request for *Absence from Clinical Practicum/Clinical Practicum Class* should be made within 24 hours of the absence. This form can be found on the CSD Website on AAMU’s Webpage or on the CSD Clinic google website-
In addition, allowances will be granted on an individual basis for the attendance of professional workshops associated with relative employment and professional conventions (i.e. ASHA, SHAA, NBASLA, etc.).

**Reporting of Clinical Clock Hours**
Students must document at least 400 direct practicum clock hours (25 observation hours and 375 hours of direct client contact) for successful completion of the practicum component of the degree as outlined by ASHA. Students are required to obtain 50 hours in three different settings (Clinic, Schools, Medical Rehab, respectively) and a minimum of 20 hours each in child language diagnostics/treatment; child speech diagnostics/treatment; adult language diagnostics/treatment; and adult speech diagnostics/treatment. In addition, the graduate clinician must obtain 20 hour of audiological screening hours (10 with an audiologist), see page 32-33. There may be instances where the accrual of 50 hours in the onsite clinic may not be attained. In these cases, Individuals who have obtained over 150 clock hours in a school setting may use “overage” hours toward the required 50 clinic onsite hours. Other hours that may be used toward the onsite clinic hours include hours obtained at the undergraduate level in an onsite clinic, and hours obtained from UCP and similar clinic-based entities. Students needing less than five hours in the CSD Clinic to fulfill the 50 hour placement requirement must contact clinic director to set up a time to complete the required time in the CSD Clinic, if not already scheduled with a client.

**NOTE: All clinicians must begin in the onsite clinic during the first semester of practicum. It is the discretion of the Clinic Director to place student clinicians in an off-site practicum when appropriate. School placements, follow onsite clinic assignments. Medical assignments are assigned (typically) when the student clinician has acquired over a total 250/400 clinic clock hours and has met the child based practicum requirements. It usually takes 4 semesters to complete the hours needed for practicum (including summers).**

**Practicum Report Documentation**
Student clinicians are to specifically document scope(s) of practice either observed or rendered via diagnostic/treatment events, on the practicum report/hour sheet (i.e. scopes of practice to include, but not limited to--articulation, phonology, language, voice, etc.) Avoid using general terms such as “speech” when describing communication events, as this term could be used to mean more than one communication scope. Each area addressed during the diagnostic process and during treatment is to be documented on a separate line with dedicated minutes for each addressed area.

“Direct practicum clock hours” refer to actual clinician-client contact time during the evaluation and remediation processes. For example, designated time scheduled to meet with an assigned client for specific diagnostic and or intervention/counseling procedures will be considered “direct client time”. “Direct time/hours” do not refer to time spent for comprising client reports (i.e. SOAPs, lesson plans, diagnostic reports, semester summaries, etc.), scoring test batteries, consulting with clinic supervisors, or time that is spent in the absence of the client. Direct contact with the client (if not a minor) or client’s family in assessment, management, and/or counseling will be considered toward the accrual of practicum clock hours.

Clinical practicum clock hours can only be granted to students who provide direct service to a client or family member. If more than one student participates in a session, each student will earn clock hours only for the amount of time spent in direct service provision. If there are two clinicians servicing a client in a given session, the minutes obtained will be divided in half.
NOTE: It is typical to receive about 5-6 hours per day at a given site if scheduled for the entire day. Any hours received for a given day that exceeds 6.5 hours will need to be accompanied by documentation from the supervisor. The clinical director holds the right to question, amend or refuse any hours that are received if premise is warranted.

Students must record hours on a **weekly** basis. Hours are placed in the working folders and submitted to the assigned clinical supervisor by 12:00 PM Friday. They will be initialed by the supervisor and returned with the working folder until the form is full. When the form is completed or requested to be submitted, the supervisor will sign the bottom of the form and return the document to the student. It will be the student’s responsibility to make a copy of his/her hour sheet and submit the original hour document to the Clinic Secretary. It is suggested that a copy of the hour sheet be made for the student’s record. It is the student’s responsibility to maintain personal records of all practicum hours. All practicum hours are to be submitted by the dates documented on the Clinic Timeline, compiled by the Clinic Director. **Practicum hours submitted 30 days after being acquired will not be accepted.**

In addition, if unable to hand deliver original hour sheets to Nicky by the given deadlines, the clinician is permitted to fax copies of hour sheets to 256-372-4055. **All hours must be submitted by the Clinic Timeline deadlines dates.** Only completed practicum reports will be accepted. If submitted practicum forms do not have supervisor signature, initials and complete tallied results, the forms will not be accepted for practicum credit.

**INSTRUCTIONS FOR FAXING/SCANNING HOURS:** When faxing/scanning clinic hours, follow up immediately, with a call or email to Mrs. Ross or Nicky to ensure to that hours have been received. Only fax/scanned supervised signed, completed forms. **Original hour sheets are to follow within seven days of received faxed documentation, if they are to be counted toward the 400 hours needed for certification. If a longer period is needed, contact Mrs. Ross to make such arrangements.**

**Audiology Practicum**

When a student clinician is assigned audiology practicum, s/he may receive hours on campus or at an alternate off-campus site. If on-campus, there will be two students assigned for designated hours each week. The students are responsible for checking the schedule and/or with the Clinic Secretary to determine if any audiological evaluations have been scheduled for their scheduled times. If not, the students are not required to be on campus. The students MUST check the schedule and/or with the Clinic Secretary Monday morning each week. There will be no clients added to the audiology schedule after Friday at 5:00 each week.

If a student is assigned an off-campus audiology site, the student will be assigned an audiologist who will supervise. It is the student’s responsibility to contact that audiologist and designate a schedule for a portion of the semester or the entire semester to obtain audiology hours. All students must complete 10 hours of audiology practicum with an ASHA certified audiologist.

Audiology hours may be obtained through screenings, evaluations, and/or treatment of audiological disorders (aural rehabilitation). Students must obtain at least ½ of the required twenty hours under the supervision of a licensed, certified audiologist. The remainder of the hours may be obtained under the supervision of a licensed, certified speech-language pathologist.
Miscellaneous Therapy Information

1. Student absences: Students (both clinicians and assistants) are expected to meet ALL therapy sessions and scheduled conferences. If extenuating circumstances occur, the student must personally contact the supervisor in sufficient time to make the necessary adjustments. Messages will not be acceptable. In the case of therapy appointments, it will then be the student’s responsibility to notify the client of cancellation or time change as determined by the supervisor. If the student must cancel a therapy session for ANY reason, it is the student’s responsibility to provide a therapy session to make up for the missed one at the client’s and supervisor’s convenience. (See also “Clinician Attendance and Promptness” on p.19).

2. Head start and Preschool screenings: Students will be required to participate in head start/ preschool screenings while enrolled in CSD 516, Advanced Practicum. Students who have elected to participate on a given day are expected to attend and fulfill the requirements expected for that day. If a student is unable to meet their elected obligation to screen, s/he is required to contact the clinical supervisor and to supply her/him with a replacement for that given day.

3. Therapy materials: The student is responsible for preparation of therapy materials and organization of the therapy room prior to and following each therapy session. Each student will be given an assigned area in the materials cabinets and/or the toy room that must be organized at least weekly (by Friday at noon). If the student’s assigned area is not kept maintained, it will be reflected in the final grade. Please help fellow students by putting all materials back in the appropriate places.

4. Black ink: All paperwork submitted in writing must be completed in black ink. No pencils, blue ink, or other ink colors will be accepted.

5. No white-out: Do not use white-out on ANY clinical form. If a mistake is made, draw a single line through the error and initial the change.

6. Cancellations: If a client cancels a future session, please notify the supervisor in writing. Also, the clinician must write a brief SOAP note stating that the client cancelled and why, if known. Put a note on the schedule board in the clinic to notify any student observers of the cancellation as well.

CLINICIAN REQUIREMENTS AND PROFESSIONAL CONDUCT

All students enrolled in Advanced Practicum are required to purchase the following equipment by midterm of the first semester in clinic:

A. Digital Recorder: The digital recorder purchased should have an eternal output plug, so headphones can be used and (preferably) an external microphone plug (to allow high quality recording). Price range for recorders should range from $75.00 and up.

B. Stop Watch: Either an electronic or mechanical stopwatch should be purchased. Electronic stop watches cost about $15.00 and may be purchased at Best Buy, Radio Shack or online. Mechanical stopwatches may also be used.

C. Nametags: Obtained from the Director of Clinical Services. Cost of name tags are covered in the semester practicum fees. Nametags are to be worn at all times in the clinic.

D. Penlight: Penlights can be purchased at Parkway Scrubs 2006 Memorial Parkway Southwest Huntsville, AL 35801; (256) 536-5367.
E. **Lab coats:** Lab coats are required for Advanced Practicum. Cost of lab coats are covered in the semester practicum fees. Lab coats must be ordered by Parkway Scrubs 2006 Memorial Parkway Southwest Huntsville, AL 35801; (256) 536-5367.

**Clinical Fees:**
The graduate practicum student newly enrolled in CSD 516 must have funds to cover lab coat ($40); AAMU monogramming ($8.50) and name tag fees ($10)—Parkway Scrubs. If a student clinicians desire to have her/his name monogrammed on a lab coat, the additional cost will be $4.50. Lab coats and name tags will be the property of the student clinician upon graduation. *Graduate observers are not required to acquire lab coats or name tags.* The practicum student may be required to pay for additional items which will be documented in the practicum syllabus.

In addition, the clinician must have funds to cover finger printing cost for the required background check process. All students must have a cleared background analysis through the Alabama Department of Education in order to be placed in practicum. Cost for the background check process is approximately $46.90.

**Background Checks**
An **clear background (BG) Check** is a requirement for all individuals in the School of Education including CSD students. CSD practicum students must maintain a cleared background status for the successful completion of practicum. **Cogent Systems** is the company that has been selected by the University to conduct the necessary fingerprint background checks. Evidence of cleared background checks must be submitted to the Director of Clinical Services by the due dates listed below. Practicum students are responsible for the cost and completion of the background checks. All practicum students must first apply online with Cogent, pay the fee and obtain a registration identification number. Keep this registration number in a safe place, as it will be needed to be presented at the designated fingerprinting center indicated on line. Cost of the process is about $55. Cogent/Gelman System’s website is [https://www.aps.gemalto.com/index.htm](https://www.aps.gemalto.com/index.htm). Please indicate “Admission into a Teacher Education Program/Internship” when completing the online paperwork. Practicum students may learn more about the fingerprinting process and identify fingerprint location in their area via the web site (under “Registration”).

**Background Clearance Due Dates:**

<table>
<thead>
<tr>
<th>Semester</th>
<th>Background Check Clearance Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall 2018</td>
<td>Due September 10, 2018 (Monday)**</td>
</tr>
<tr>
<td>Spring 2019</td>
<td>Initiated by January 14th, 2019 (Monday) and completed by February 1st (Friday)**</td>
</tr>
<tr>
<td>Summer 2019</td>
<td>Due May 28, 2019 (Tuesday)**</td>
</tr>
<tr>
<td>Fall 2019</td>
<td>Due August 30th, 2019 (Friday)**</td>
</tr>
</tbody>
</table>

If a graduate student has already been cleared through the Alabama Board of Education and the FBI for job related purposes, the student’s background check will be accepted if performed after 2016.

**If for any reason the background check applicant is not cleared via the state of Alabama, he/she will not be permitted to begin practicum until state clearance is received by the Director of Clinical Services.**

**Professionalism and Confidentiality**
Clinicians must maintain a professional attitude in and around the clinic and anywhere clinical activities are discussed. Clinicians must be careful to address faculty and personnel by their respected titles (Dr., Mrs., Ms., Mr., etc.), in conversation (i.e. face to face, on the
phone or in email communications). Proper salutations/greetings are expected. In addition, please avoid discussing non-professional topics in the CLINIC SETTING or in the HALLWAYS near the clinic. Do not discuss client details or anything relating to clients, outside of the clinic. Respect the client’s right to privacy. Always use the client’s initials to protect confidentiality on anything written or saved to a computer flash drive or hard drive. Always shred paperwork that documents client’s information. DOCUMENTS WITH CLIENT INFORMATION ARE NOT ALLOWED TO LEAVE PRACTICUM SITES UNDER ANY CIRCUMSTANCE. There is a paper shredder in the clinic office. Do not throw any papers away that contain client’s names without first shredding them.

**Consequences of Unprofessional Behavior**

Unprofessional behavior will not be tolerated. A verbal warning will be given when unprofessional behavior is identified. If the undesired, unprofessional behavior continues, the student will be given a detailed written citation, indicating the unprofessional behavior, which will remain in his or her clinic record. Suggestions of alternative professional behavior will be given. The student at that time may be recommended to discontinue clinic or practicum experiences with discussion of possible re-enrollment the subsequent semester.

**Personal Appearance Standards/Dress Code/ Conduct**

The dress code will be in effect during the semester when clinic sessions are being held. When the clinic is closed, the dress code will not be in effect. These standards apply to all students (including clinicians and student observers), graduate assistants, secretaries, and student workers who enter the clinic for personal or professional reasons. Graduate clinicians acquiring hours in the clinic are required to wear the approved AAMU CSD picture ID AND a lab coat over acceptable attire when conducting duties in the clinic. This list will be updated as

_The following attire is acceptable:_

1. No more than 1” (inch) above the knee length dresses/skirts.
   a. Above the knee length attire should not expose thighs when sitting.
   b. The supervisor will be the judge of the length.
   c. No above-the-knee lengths that extend 1” are acceptable.
2. Appropriate neckline that does not reveal ANY cleavage or hair.
3. Sleeveless shirts/dresses if undergarment straps are not seen.
4. Dress and casual-appropriately-fitting pants—if undergarment lines can be detected through pants worn, then the pants are too tight for clinic attire
5. Shirts are to be dress shirts; oxfords/sweaters/vests/pull-over/turtlenecks for men.
7. Ties are preferred for men.
8. Socks (for men) must be worn. Hose (if desired) for ladies.
9. (Spring and Summer Semesters) Dress sandal with a heel (strap) for ladies. Please be sure that toes are pedicured and clean when wearing an open toe dress sandal with strap.
10. Scrubs may be worn when working with children, with prior approval from the supervisor.

_The following attire is unacceptable:_

1. Shirts, sundresses or dress with low back or neckline.
2. Oversized shirts.
3. Undershirts or cameos that expose any portion of breasts (for women), even when worn under a dress shirt—if exposed.
4. Miniskirts or any skirt more than 1 inch above the knee.
5. Tight fitting clothes (i.e. shirts, skirts, pants, etc.)
6. Shirts/dresses that are transparent or “see through” without proper under garment.
7. Hats of any type (females may wear appropriate fashion head wraps).
8. Sunglasses worn on the head while engaging with clients and caregivers.
9. No excessive jewelry (i.e. large hooped, dangling ear rings). No tongue rings, nose rings, cheek rings, etc.
10. Shorts.
11. Halter tops, low-cut blouses or tank shirts. This includes shirts that expose the midriff area (either front or back) when standing or bending.
12. Tennis shoes if scrubs not worn.
13. Hiking boots.
15. Tight-Stretch knit pants or leggings without shirt to cover buttock (will need to extend at least 5 inches below buttock area).
17. Sweatshirt material shirts and slacks.
19. T-shirt pant outfits.
20. Any other attire deemed inappropriate by the clinical supervisor.

Other notable items: No undergarment or ‘bra’ straps or bra-lets are to be observed while in professional dress. Hair and nails are to be well groomed and appropriate for a professional clinical environment. Fingernails tips should be kept to ¼ inch in length (Guideline for Hand Hygiene in Health-care Settings. MMWR 2002; vol.51). Artificial nails are discouraged. Facial hair is to be well groomed (Men primarily). In addition, tattoos are not be exposed or observable during clinical placements. Tattoos must be covered. In addition, student clinicians are not to bring drinks or snacks for personal use in the therapy room while servicing clients.

SUPERVISION PROCESS

Supervision
Supervision will be provided at a minimum quantity of 25% for those students graduating under the current ASHA standards for both treatment and diagnostic sessions. Each supervisor will maintain a record of supervision percentages for both diagnostic and therapy sessions. This information will be given to the student at the time of midterm and final supervisory conferences. Upon student request, additional supervision will be provided by the supervisor in the form of hands-on treatment, written communication, verbal communication, and/or weekly conferences as needed.

Evaluation of Supervisors
Each student will be required to complete an evaluation of each supervisor under whom clinical clock hours were accumulated. These evaluations are compiled by the secretary and distributed to the individual supervisor, Director of Clinical Services, and Program Director/Coordinator. The secretary will type all comments and concerns and will shred the original evaluation form as to not reveal students’ identity. Please be honest, as the supervisors need this information to become better supervisors and to meet the needs of each student clinician.
Clinical Practicum Grade

Diagnostic Session Evaluation Forms, Treatment Session Evaluation Forms, and Written Communication Evaluation Forms will be used to provide feedback to the student. Students may receive individual session formative assessments. The original feedback forms will be placed in the student’s clinic file, and a copy will be given to the student within 24-48 hours of the session. Copies of these forms can be located on the CSD Clinic webpage—Student Forms & Manuals (http://www.aamu.edu/Academics/EHBS/HSHPCD/csd/Pages/Student-Forms-and-Manuals.aspx)

The Practicum Evaluation Form is a competency-based system designed to facilitate the development of clinical skills while taking into consideration the student clinician’s academic and clinical experience. The student’s midterm and final grade will be obtained from calculations on the Practicum Evaluation Form. This form is to make supervisors’ expectations known, and to help direct students’ clinical development. The grade will be determined from numerical data that have been assigned to the student in the goal-setting conference at the beginning of the semester in which expectations for the semester will be discussed. (See page 6 of the Practicum Evaluation Form, as well as the Supervision Rating Scale).

The grades are based on a 5-point scale. A number score for each applicable area on the grading form will be given for each student. When the applicable areas on the grading form have been completed, the points received will be totaled and divided by the total number of scores given.

Mid-semester and end of semester evaluation of a student’s clinical performance will be completed during the times indicated on the clinic calendar. The mid-semester assessment of competency will be discussed with the student in a conference with the supervisor(s) and Director of Clinical Services. The student will be responsible for scheduling an appointment with his/her supervisor(s) during the designated time. The grade will be totaled on page 6 of the Practicum Evaluation Form, unless other circumstances arise (i.e., excessive absences, tardiness, late paperwork, etc.). The student will be given a grade, percentage of supervised diagnostic and therapy sessions, and recommendations for further clinical skill development at midterm and at the end of the semester by each supervisor.

Clinic grade of “I” will be given if assigned client charts/files are incomplete by final supervisory conferences. Client files should continually be kept up to date. If a student receives an "incomplete," then it shall be necessary to complete all requirements within one year, or a grade of “F” will be recorded and all clock hours will be forfeited. In addition, students will not be scheduled for subsequent practicum placements until they have completed the requirements of the prior semester.

Any undergraduate or graduate student earning a final grade other than “A”, “B”, or “C” in either on- or off-campus sites shall forfeit all clock hours obtained during the clinical practicum. The faculty, clinical supervisors, and the major advisor shall meet with the student to discuss strategies/actions concerning future clinical practicum(s). Any student receiving a midterm rating which is less than a “B” will have a conference scheduled with the Director of Clinical Services and/or the supervisor(s) who gave the evaluation.

Competency ratings will be reviewed by the supervisor(s) and the Director of Clinical Services to determine an overall grade. Externship grades will be equally weighted with the on-campus grade. Each semester after final grades have been computed, supervisors meet to review each student’s level of competency and to make recommendations concerning those areas of performance needing further development. If needed, a Competency Remediation Plan will be developed and discussed with the student.
Clinical Evaluation System
The AAMU student clinician evaluation forms (Diagnostic Session Evaluation Forms, Treatment Session Evaluation Forms, and Written Communication Evaluation Forms) are a competency-based system designed to facilitate the development of clinical skills while taking into consideration the student clinician’s academic and clinical experience.

Students are categorized into four clinical ability levels (assistant, primary, intermediate and advanced); each of which examines clinical competencies in the areas of interpersonal, technical, and writing skills. A student’s evaluation level is assigned based on a review of academic training and clinical contact hours previously earned. The student’s clinical level is assigned by the Clinic Director at the beginning of each semester for all clinicians enrolled in practicum (CSD 321, 406, 516). The following chart reflects the criteria for level assignment.

<table>
<thead>
<tr>
<th>Evaluation Level</th>
<th>Academic Training</th>
<th>Clinical Hours (estimation)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assistant</td>
<td><strong>Undergraduate</strong>: Student has completed the following CSD courses: CSD 202, 203, 204, 205, 207, 215, 307, 308 and enrolled in CSD 310. <strong>Non-traditional Graduate</strong>: Student has completed the following CSD courses: CSD 500, 203, 204, 514, 205, 215, 307, and enrolled in CSD 310.</td>
<td>&lt; 25 Observation</td>
</tr>
<tr>
<td>Primary (Level 1)</td>
<td>Graduate student has completed 15 of 25 observation hours and be concurrently enrolled in the following “normal process” CSD courses: CSD 515, 538 and or CSD 504, 534, 544. (Includes: Individuals, beginning CSD course of study in the spring, that are required to take CSD 534, 539, 520 the first semester).</td>
<td>0 – 140</td>
</tr>
<tr>
<td>Intermediate (Level 2)</td>
<td>Graduate student has completed 25 observation hours and has completed or be concurrently enrolled in the following CSD courses: CSD 504, 534, 544, 510, 513, 539, 522, 598, 545.</td>
<td>141 – 250</td>
</tr>
<tr>
<td>Advanced (Level 3)</td>
<td>Graduate student who is concurrently enrolled in the following CSD courses: CSD 520, 525, 550.</td>
<td>251-400+</td>
</tr>
</tbody>
</table>

The student clinician’s performance will be graded at mid and final semesters using the criteria stated above during a conference between the supervisor(s) and or the director of clinical services, and the clinician.

If a student obtains a final grade lower than a “C”, or a “W”, in a clinical practicum course, then all practicum hours accumulated during that period will be forfeited.
**Students without an Undergraduate Degree in CSD**
These students will be required to complete the 20 of the 25 observation hours and prerequisite coursework, including CSD 310, Clinical Procedures. These students will be assigned to clinical activity as an assistant and will be paired with an advanced graduate student. The non-traditional CSD graduate student will be given responsibilities such as case study analysis, analysis of therapeutic processes, data keeping, description of behavior and patterning of behavior as an assistant. The advanced graduate student will be responsible for clinical documentation and therapeutic planning for the first portion of the semester.

After sufficient observation, the non-traditional CSD student may be scheduled to participate in some part of the client contact at the discretion of the supervisor. These students will be assigned no more than 8 hours per week of the above-defined clinical activity. A detailed outline concerning the assistant’s duties can be located on the AAMU CSD Clinic webpage under Appendix K “AAMU Clinical Assistant Guidelines”.

**Students with Undergraduate Clinical Experience and Undergraduate Degree in CSD**
These students may be assigned to a minimum of 1-2 hours per week of client contact unless the student needs or requests additional hours to complete requirements. The 25% of clinical practicum experience must be supervised by a certified clinical supervisor who is a member of the program’s professional staff.

Each student will receive no less than 25% supervision of total contact time in clinical treatment with each client and at least 25-50% of each diagnostic evaluation will be directly supervised.

**Clean up**
Clinicians should clean therapy room used after EACH session. Clinicians should sanitize tables and mirrors (if indicated) and disinfect all toys handled and mouthed by children. Lysol/Clorox wipes (or equivalent) are kept in each clinic for this purpose. In addition, Weekly clean-up groups will be assigned. Each clinician will be responsible for an area in the clinic (cabinets, toy rooms, forms, etc.). Each clinician is required to sign-up for weekly clean-up duty in the clinic.

**NO EATING OR DRINKING IS ALLOWED IN THE CLINIC**

**Trips Outside of Therapy Room/CSD Clinic**
No field trips will be made without prior approval of supervisor. This includes ANY trips out of the therapy room (other than to bathrooms). Clinicians must not take clients or their parents with transportation to any location. Clinicians are not allowed to take clients to the movies or any other place as a reward for achievement or management goals. It is HIGHLY recommended that clinicians not meet with clients outside of scheduled therapy hours (i.e., dinner, home visit, etc.).

**Clients: Child verses Adult**
All clients with a chronological age of 18 years, 0 months will be considered as an adult. Clients younger than 18 years will be regarded as children. Always record “child” or “adult” on your practicum hour’s sheets as ASHA requires minimum experiences with both age categories.

**CLINICIAN OF THE SEMESTER**
There will be a graduate clinician(s) selected each semester as “Clinician of the Semester” by clinical supervisors from Alabama A&M Speech and Hearing Clinic. This award will go to clinicians treating clients on-campus only. The clinicians who are chosen will receive prizes and a certificate (and will have a valuable award to list on their résumé).
END OF SEMESTER PROCEDURES
Near the end of each semester, the clinician is to help each of his/her clients to fill out the following forms: (1) Request for Services Form (for the next semester—obtain from mailboxes or program secretary); and (2) Clinic Evaluation forms. These forms are to be given to the clients within the final two weeks of clinic. The clinician is then required to register for a final supervisory conference with his/her attending supervisor for the purposes of closing out assigned client’s charts for the semester and acquiring final grades.

EMERGENCY PROCEDURES
Alabama A&M has an Emergency Action Procedures Handbook (2013 Edition) that addresses various procedures in an event of an emergency. This document can be found on the CSD Google Webpage. A select number of emergency procedures, that may directly affect the CSD Clinic, are outlined below:

Building Evacuations:
When to evacuate
The following will result in the evacuation of a University building:
- Fire Alarm
- Long term power failure
- Natural disaster
- Man-made disaster
- Mechanical problems that are deemed a danger to the occupants
- Hazardous Chemical spill or gas leak
- Order of University Police or other Public Safety Official

For the protection of all residents, obey all fire regulations. Failure to evacuate a building when an alarm sounds represents grounds for disciplinary action. University officials and emergency responders reserve the right to enter areas to locate the source of any potential fire or smoke hazard, and to ensure that everyone has evacuated the building

Fire alarm or drill (pg. 18 of Emergency Action Procedure Handbook)
The following plan should be executed in case of an emergency situation in the AAMU CSD Clinic.----Stay Calm…….

a. All occupants in clinical rooms in the first bay should proceed to the south lobby and exit the building by way of clinical double doors. Head west out of the building and south through the glass double doors. **General Rule: Evacuate “away from the affected area.”** Once outside, the Bulldog Transit Hub will be in view. Head southwest to the quad area and there, wait for further instructions. All clinicians and clients in the second bay of CCN 104 should proceed to the south lobby (clinic suite one). Then, follow the emergency exit procedures listed above.

b. The person discovering the emergency or the reason to evacuate the building should activate the fire alarm located on the outside of CCN Rm 104. At the sound of the alarm, the above plan will immediately go into action, whereby the building will be evacuated as quickly and orderly as possible. The person discovering the emergency should, if time allows, call the Emergency Number, 911, and quickly and clearly explain the emergency. If unable to call due to a serious emergency, proceed out of the building and place the call from the nearest available telephone.

c. Graduate Clinicians are responsible for their clients during an emergency situation. The graduate clinician should accompany their client calmly and quickly to the southwest exit of the building. They are to meet the parent and/or the person who accompanied the client outside the building directly out the door of the southwest
exit, then proceed to the quad for further instructions. Supervisors (faculty) are responsible for verifying that specific rooms have been cleared as follows:

The supervisor/staff member in Rooms 03/05 are responsible for checking and assisting those in Clinic Suite 1—Rooms 8, 10, 11, and 12.; as well as materials room and library.

The supervisor/faculty member in Rooms 13/16 are responsible for checking and assisting those in Clinic Suite 2—Rooms 24, 26, 27, and 28, as well as Room 25 and the swallowing/CSL Lab.

d. A fire extinguisher is located directly across the hall from the clinic’s main entrance (CCN RM 104).

Fire Extinguisher Use Guidelines-- Employees and students are not expected to fight fires. In the event of a fire, you should alert others and immediately evacuate the building. Students, Faculty and Staff are not expected to utilize these devices to fight fires because of the potential danger to their personal safety, which could result from attempting to extinguish a fire, the hazards associated with the products of combustion and the threat of a spreading fire. However, a fire extinguisher may be utilized to clear a safe path to an exit or to "shoot your way out" of a building if you are trapped. Before using a fire extinguisher, you should know how to properly select and operate one. It is important to use the right kind (Class) of extinguisher for the fire. The following letters identify the classes of fire extinguishers:

<table>
<thead>
<tr>
<th>Class</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class A</td>
<td>For ordinary combustible solids including paper, wood, coal, rubber, and textiles such</td>
</tr>
<tr>
<td>Class B</td>
<td>For flammable and combustible liquids, including gasoline, diesel fuel, alcohol, motor oil, grease, and flammable solvents. Typically, a dry chemical fire extinguisher and can be used on all three Classes if it is rated as an ABC fire extinguisher.</td>
</tr>
<tr>
<td>Class C</td>
<td>Electrical equipment. A carbon dioxide fire extinguisher.</td>
</tr>
</tbody>
</table>

If you find yourself trapped and required to "shoot your way out" or to clear a safe path to an exit, the following are guidelines on how to use the extinguisher:

P.A.S.S - Use of a Fire Extinguisher

<table>
<thead>
<tr>
<th>Process</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>PULL</td>
<td>Holding extinguisher upright, twist the pin to break the plastic safety seal. Pull the pin.</td>
</tr>
<tr>
<td>AIM</td>
<td>Aim low. Point the extinguisher nozzle (or its horn or hose) at the base of the fire not the flames. This is important – in order to put out the fire, you must extinguish the fuel.</td>
</tr>
<tr>
<td>SQUEEZE</td>
<td>Squeeze the handle. This releases the extinguishing agent.</td>
</tr>
<tr>
<td>SWEEP</td>
<td>Using a sweeping motion, move the fire extinguisher back and forth until the fire is completely out. Watch the fire area. Back away if fire breaks out again repeat the process.</td>
</tr>
</tbody>
</table>

If possible, do not attempt to extinguish any fire without first calling for help and pulling the fire alarm.

- Operate the extinguisher from a safe distance, several feet away, and then move towards the fire once it starts to diminish.
- Be sure to read the instructions on your fire extinguisher - different fire extinguishers recommend operating them from different distances.
- Remember: Aim at the base of the fire, not at the flames!
Don’t turn your back on it! Back away from the fire, watching it to make sure that it does not reignite.

**Tornado Warning**
Clinicians are responsible for their clients during this emergency situation. The clinician should quickly accompany the client to the clinic waiting room, finding the parents and or person who may have accompanied the client if possible, and then take appropriate action of moving to the designated tornado shelter—CCN 113--The College of Education, Humanities and Behavioral Sciences Conference Room and hall. Clinicians should make sure to position clients away from exits to the outside. It is suggested that the client, client’s parents and clinician remain in the designated safety areas until the danger period has passed and an “all-clear” message has been issued by the University. The University will not issue an all-clear until the approaching threat has passed (*Emergency Action Procedure Handbook*, p. 15).

**Medical Emergency**
If a client, member of client’s family, or clinician, requires emergency medical care,

a. Ask the Clinic/Program Secretary or Director to call 911 immediately (inform of type of problem)
b. Ask the clinical supervisor/ Director to help you locate someone certified in First Aid and /or CPR.
c. The clinic first aid kits are located in the Clinic/Program Secretary’s office, in the file room.

**Crime Prevention**
Preventing Theft: Never leave personal belongings (books, purses, jackets, recorders, phones, etc.) unattended. Remember that the CSD Clinic is unlocked during business hours and anyone can walk in. In addition, keep the doors of the Clinic Computer Lab closed, particularly if unoccupied.

Be alert to unfamiliar persons loitering or wandering in the CSD Clinic area. Ask if you can be of help. If they are clients, you can direct them to the clinic office (CCN 104). If not, it is a good way to let them know you are aware of their presence. Get in the habit of noticing appearances and dress of unfamiliar persons.

Clinic equipment, tests, and materials are expensive. Be sure to return them to their proper places after use. Report missing objects to your supervisor or the Clinic/Program Secretary.

If a theft does occur, report it to a faculty or staff member and call Campus Police (5555) immediately.

**OVERVIEW OF GRADUATE EXTERNSHIP IN CSD**

**Introduction**
We offer opportunities for CSD graduate students to complete off-campus externships at various externship sites. An externship is defined as a specified period of time that a graduate student spends while obtaining CSD clinical practicum experiences in an externship site under the direct supervision of an extern field supervisor. Hours required at each externship will be completely determined by the extern field supervisor and AAMU Director of Clinical Services. Students must be prepared to spend a large portion of each
day at an externship. Mentioned rules and regulations that pertain to “practicum/CSD clinic” also pertain to graduate externships.

Off-campus extern sites are defined as satellite settings with the following characteristics: physically separated from the AAMU campus, under contract, and utilizing university approved, non-AAMU employed clinic supervisors, to be considered extern field supervisors, who hold the appropriate CCC from ASHA. Off-campus sites utilizing AAMU employed CSD supervisors can be used a “second” clinical setting, but are not considered as off-campus extern sites.

Currently, ASHA mandates that each graduate student obtain a minimum of 400 supervised clock hours with at least 325 clinical clock hours acquired at the graduate level. Supervised clinical experience at AAMU must include a minimum of 50 supervised clock hours in each of three type settings. These clinical settings may be extern sites or within the organizational structure of the institution, such as on campus clinic and second-sites.

Liaison between the University and the extern site is maintained through the Director of Clinical Services. Practicum grades for student externs will be reported to the Director of Clinical Services by the extern field supervisor on a form provided in the Extern Supervisor Packet provided at the beginning of the semester. It is the student’s primary responsibility to assure that grades are given to the Director of Clinical Services at midterms and finals. Externship grades will be equally weighted with the on-campus grade.

It is also the student’s responsibility to turn in practicum hours to be calculated at midterms and finals (minimal). Students are required to have a minimum of 2 clients on campus in addition to externship requirements.

**Clinical Practicum Sites**

Alabama A&M University CSD Program requires of each graduate student to obtain a minimum of 50 clock hours in three different types of practicum sites, to extend exposure to the various scopes of practice in Speech-language Pathology, to the AAMU graduate clinician.

**Site I** – Transfer students or graduate students from another undergraduate program in speech-language pathology must accumulate a minimum of one semester or 20 of the required 50 clock hours in the AAMU Speech and Hearing Clinic **prior** to being placed in an externship site fulltime (with the exception of summer semester where designated students are placed in external sites for a six week period to gain extended experiences and when students are placed in practicum for “guided therapy” practices). Graduate students who have an undergraduate degree from AAMU and have accumulated 50 clock hours in the AAMU Speech and Hearing Clinic as an undergraduate must still complete at least one (1) semester in the onsite clinic, at the graduate level, before obtaining clock hours from another site.

**Site II** – With the faculty approval, a student is assigned to a second practicum site. The student is typically assigned to a school base setting after the onsite clinic is completed. The student must accumulate a minimum of 50 clock hours within a school facility or private agency. Whatever location is assigned for Site II must not be selected as Site III. Any hours acquired over 150 hours in a school setting or private clinic may be counted toward the onsite requirement, if below 50 hours.

**Site III** – Student placement is dependent upon faculty approval. Students must accumulate a minimum of 50 clock hours in a facility that is distinctly different from Sites I and II—typically a medical site. Practicum placements may vary depending upon needs of the
students and requirements of a particular facility. Students are to be placed following a meeting with the Director of Clinical Services.

**Objectives and Benefits**

Externships provide opportunities to specialize and expand academic, clinical, and administrative skills. Diversity of management approaches allows for additional professional growth and critical analysis. A primary purpose of an externship is to gain knowledge of and experience in the treatment of communication disorders while under the supervision of licensed, certified, and experienced Speech-Language Pathologists. During the externship, the student will:

1. Further develop a commitment of quality speech, language, and hearing services.
2. Integrate and apply theoretical knowledge gained in academic training.
3. With help of supervisor(s), evaluate individual client/patient’s strengths and limitations.
4. Define clinical skills.
5. Develop a commitment to continuing education and professional growth.

Ancillary benefits from doing an externship are equally important and are as follows: professional work experience can be included on student clinician’s resume/vita; externs are often given future employment priority at the extern site. Graduate CSD students are meeting the communication and caregiving challenges of today, while preparing for the integration of tomorrow’s technological advances with everyday care and respect for the client.

**Guidelines and Requirements**

To be eligible for an externship, one must be an AAMU student actively enrolled in the Master’s degree program in Communicative Sciences and Disorders, have completed a minimum of one semester or 20 of 50 hours of on-campus and/or second-site supervised graduate practicum.

Decisions regarding approval of the externship placements will be made after educational contracts are completed and are in place. STUDENTS ARE NOT TO CONTACT EXTERNSHIP SITES PRIOR TO CONFIRMING PLACEMENT WITH THE DIRECTOR OF CLINICAL SERVICES. The length of the externship is dependent upon the guidelines established by the extern site, Director of Clinical Services, and student needs. Students should expect most externships to last a minimum of 10 weeks. The final decision for length of the externship is made by the extern field supervisor(s) and the Director of Clinical Services. Students wishing to withdraw from the externship must notify the Director of Clinical Services in writing at least 2 weeks in advance of terminating the practicum. Clinical clock hours will be counted only for those hours that have been properly supervised while providing diagnosis, treatment, and counseling services to or for a patient or family member.

**Requirements**: The student on externship may be required to have the following:

- (a) A maintained cleared Background Check
- (b) Negative TB Reading (less than one year old). TB tests may be acquired at the assigned site or at the Huntsville Health Department located on Max Luther Rd, free of charge
- (c) CPR training: CPR training may be done online with the American Red Cross at [www.redcrossonlinetraining.org](http://www.redcrossonlinetraining.org)
(d) **Negative drug test**—Restore Inc. and Champion Rehab offer this service free of charge to extern CSD students.

(e) **Completed HIPPA training and paperwork**: This is usually site specific.

(f) **MMR clearance**

(g) **Liability Insurance**—this is supplied by the University

(h) **Transportation**: Students are responsible for providing their own transportation to and from assigned practicum sites. Alabama A&M University assumes no liability for travel. The CSD Program advises each student enrolled in CSD 516 to obtain liability insurance for any travel required as part of the clinic assignment.

**Supervisor Signature Verification Forms**

1. Each person participating in an externship must obtain a signature verification form for each supervisor who will be supervising them for that semester. They must contain a minimum of the following: name, address, ASHA number, Alabama license number (if applicable), and signature of the supervisor. These forms may be obtained from the Director of Clinical Services prior to beginning the externship and returned to the Director of Clinical Services within one week of beginning the externship (Check Clinic Timeline for specific dates). **AAMU places all practicum students with ASHA certified and/or ABESPA license offsite supervisors.** It is the student's responsibility during the first week of placement to obtain and submit to the director of clinical services, the Supervisor Verification Form/Card. If a student is supervised by an individual who does not holds proper credentials (i.e. ASHA certification “CCCs”; ABESPA licensure; Alabama Board Teaching Certificate) the student forfeits counting the hours obtained from the supervisor.

**Insurance**

Please see the Director of Clinical Services upon entering the Clinic and each fall semester to submit dues for student liability insurance. Dues will be $35.00 per year, paid in cash (or cash equivalent) to the Director of Clinical Services or the Clinic Secretary. Proof of student liability insurance will be available to the student for externship sites.

**Contracts**

Contracts between AAMU and the externship site or the individual speech-language pathologist must be in place prior to hours being accumulated. Each individual supervisor must hold current certification through ASHA for students to be able to count hours obtained.

**Conduct of the Extern Student**

By the time student clinicians enroll in the Graduate Externship Program, they have acquired a sense of what is considered appropriate and professional behavior. The general rules of professionalism include, but are not limited to: having no unexcused absences, being punctual to clinical sessions, working cooperatively with staff, supervisors, and other disciplines, being responsible for equipment and materials, preparing for each clinical session, and wearing appropriate attire, including the approved AAMU CSD picture ID while off site, presenting with professional integrity. If a practicum student is dismissed from an off-site practicum for valid reasons, the student may receive a failing grade or “W”, and will not be allowed to count any hours obtained for that given semester.

Graduate extern students are representatives of the Communicative Sciences and Disorders Program at Alabama A&M University. Your conduct will determine if a practicum site will continue to provide valuable clinical experiences to future student clinicians. The AAMU CSD Program encourages the clinicians to write a thank you note to each supervisor after the placement is completed. This note may be handwritten and mailed or emailed. It should express personal appreciation as well as appreciation for the continued
educational support that the supervisor is offering to the CSD program. It is always cordial to extend best wishes to them as the note is concluded.

**UNIVERSAL PRECAUTIONS**

As professional care providers, student clinicians must follow precautionary procedures (universal precautions) to prevent the spread of contagious diseases to clients as well as ourselves. Although the risk of transmission of blood-borne pathogens (such as AIDS/HIV or Hepatitis B) is extremely low, being aware of how to anticipate and respond to situations where blood or body fluids containing visible blood are encountered, is necessary.

With this in mind, clinicians are advised that gloves must be worn when performing clinical tasks such as oral peripheral examinations or performing any invasive treatment procedures. Gloves are located in the materials room (14). Gloves and tongue depressors should be discarded after each use. Tongue depressors must be broken prior to placing them in the trash. Clinicians are also required to wash hands before and after each treatment session. Antibacterial, no-water hand sanitizer is available in each clinic.

Toys or other objects used in therapy must be disinfected when they have been handled or mouthed by clients. These items should be treated as though they are infectious. Following a session, used toys should be disinfected with a provided solution of water and bleach. The water/bleach solution is also located in each clinic. Once the toys have been disinfected, they should be returned to their proper place in the toy room.

Tables or other surfaces in the therapy room which may have been contaminated should be wiped with a disinfectant following each session. Student clinicians wipe surfaces using the disinfectant and disposable towels located in each clinic. For more specific precautions as they relate to speech-language pathologists and audiologists, students should refer to the article prepared by the ASHA Committee on Quality Assurance which was published in ASHA, 2010 and read the bulletin board in the Speech and Hearing Clinic entitled “INFECTION CONTROL PROCEDURES.”

**HIPAA**

Health Insurance Portability and Accountability Act of 1996 (HIPAA)

The AAMU CSD Clinic, being a health care organization, uses the “Privacy Rule”, a provision of the Health Insurance Portability & Accountability Act of 1996 (HIPAA), that went into effect on April 14, 2003. The purposes of the regulations are to:

a. Protect and enhance the rights of consumers regarding their health information and control the inappropriate use of information;

b. Improve the quality of health care in the US by restoring trust in the US health care system; and

c. Improve the efficiency and effectiveness of health care delivery by creating a national framework for health privacy protection that builds on efforts by state, health systems, individual organizations and individuals.

Confidentiality and trust have always been an integral part of providing care for patients. HIPAA formalizes expectations for all health professionals to follow regarding patient rights and for safeguarding identifiable health information. Graduate clinicians performing clinical practicum in the AAMU CSD Clinic must be trained in HIPAA Privacy regulations, pass an evaluation of information given, and must uphold the privacy guidelines. Training will take place prior to beginning clinical practicum in the AAMU CSD Clinic. Offsite placements or
Externship sites may also require additional training or site-specific training prior to the practicum placement, which may be a requirement for placement at that facility. All students must take and pass the AAMU CSD HIPPA Test, prior to entering practicum experiences onsite. To abide by HIPAA regulations, all clinicians must store client data and information used for clinical reports on an ENCRYPTED flash drive and must submit reports to supervisors via the encrypted AAMU Bulldog email system. Client reports will not be accepted using other email domains as they may not be protected. In addition, DOCUMENTS WITH CLIENT IDENTIFYING INFORMATION ARE NOT ALLOWED TO LEAVE ANY PRACTICUM SITE.

**TELEPHONES**

The clinic telephone is used by the Clinic Secretary and by the faculty members. At the discretion of the secretary, clients, parents, and others are allowed to use the clinic telephone. Clinicians may answer the telephone only if they are student/graduate assistants and/or when asked by the faculty or secretary to do so. To telephone out-of-town clients, clinicians may use the supervisor’s telephone or the Clinic Secretary’s telephone after requesting permission. Students cannot be reimbursed by the University for telephoning out-of-town clients from personal telephones.

**COMPUTERS**

Students are not allowed to use computers in faculty or the secretary’s offices for any reason unless otherwise granted permission. There are computers specifically available for student use in the CSD Writing lab, CCN 101. (See Appendix N, CSD Writing Lab Policies on AAMU CSD Clinic Webpage).

**PARKING**

All students must purchase a parking decal. There is student parking (undergraduate and graduate) available in west Patton Hall Parking Lot (across from the post office). The Transit System of AAMU has made available, buses for the student’s convenience. There is reserved parking in Carver Complex North, West and East lots for faculty and staff with a reserved decal. THESE PARKING SPACES ARE NOT FOR STUDENTS. Students are encouraged to use the Bulldog Transit system or to park in designated student parking areas. **If Students park in the reserved faculty/staff numbered lots, they will be ticketed and possibly towed at the student’s expense. Patient’s parking is located in CCE parking lot. These parking spaces are clearly marked for CSD Clients.**

**CLINICAL CERTIFICATION BOARD INTERPRETATIONS ON CLINICAL PRACTICUM**

Persons holding CCC in Speech-Language Pathology may supervise:

1. all speech-language pathology evaluation and treatment services,
2. non-diagnostic audiologic screenings (i.e., pure-tone, air-conduction screening and threshold testing, screening tympanometry, and acoustic reflex testing) for the purpose of performing a speech and/or language evaluation or for the purpose of initial identification of individuals with other communicative disorders,
3. aural habilitative and rehabilitative services
Persons holding CCC in Audiology may supervise:
1. audiological evaluation,
2. amplification (hearing aid selection and management),
3. speech and/or language screenings for the purpose of initial identification of individuals with other communicative disorders,
4. aural habilitative and rehabilitative services.

Only direct client contact time may be counted as clinical practicum hours. Time spent in writing lesson plans, scoring tests, transcribing language samples, preparing activities, and writing reports may not be counted.

Evaluation refers to those hours in screening, assessment, and diagnosis which are accomplished prior to the initiation of a treatment program. Hours to be counted in the evaluation category may also include reevaluation (another formal assessment). Periodic assessments during treatment are to be considered treatment.

Time spent with either the client or a family member engaging in information seeking, information giving, counseling, or training for a home program may be counted as clinical clock hours (provided the activity is directly related to evaluation and/or treatment).

Time spent in a multidisciplinary staffing, educational appraisal and review, or in meeting with professional persons regarding diagnosis and treatment of a given client may not be counted. Conference time with clinical supervisors may not be counted.

If a client presents communication disorders in two or more of the disorder categories, accumulated clock hours should be distributed among these categories according to the amount of treatment time spent on each. For example, if a client with both language and articulation disorders received twenty hours of treatment and approximately three quarters of each treatment session were spent on language and one quarter was spent on articulation, the clinician should record credit for 15 hours of language treatment and 5 hours of articulation treatment.
INSTRUCTIONS FOR COMPLETING PRACTICUM HOURS FORM
(Example attached)

Use a black pen except in areas noted on this instruction sheet. Please print neatly when recording information on form. DO NOT USE WHITE OUT.

1. FOR TERM BEGINNING: write the semester and the year. Example: Summer 2006.
2. NAME: write your name in this space.
3. GRADUATE (G) or UNDERGRADUATE (UG): write (G) or (UG) as appropriate.
4. NAME: Client’s name(s) – initials may be used, or “Group one”, etc.
5. DATE: List the exact month, day and year you worked with or observed a client.
6. TYPE OF PROBLEM: disorder the client exhibits. Example: Language. If the client has language and articulation problems, divide the time per problem on separate lines. NOTE: only use language, articulation, voice, fluency, dysphagia, or aural rehab (audiology) in this column. DO NOT put aphasia, foreign accent, dysarthria, etc.
7. AGE: This column should have “C” for child or “A” for adult. Actual age of client is not necessary.
8. GROUP: If you have more than one client at the time of therapy. Record time in MINUTES. Example: 75 minutes.
9. DIAGNOSTIC: This column is to record the times when evaluating and testing the client. Record time in MINUTES.
10. OTHER: This column is for parent/client conference, hearing screenings, and observations. Record time in MINUTES.
11. LOCATION: The location that therapy, etc. is taking place. Use a separate sheet for each location and a separate sheet for each supervisor, even if the supervisors are at the same location.
12. SUPERVISOR INITIALS: The supervisor MUST initial all the filled in rows in order to verify the information.
13. THERAPY: Put the total per problem and per adult or child in the appropriate places. Use a PENCIL for these totals for easier error correction.
14. TOTAL MINUTES: Total number of minutes on the page. Use a PENCIL for these totals for easier error correction.
15. TOTAL HOURS: Total number of hours on the page. Divide the total minutes by 60. Example: 615 minutes divided by 60 = 10.25 hours. Use a PENCIL for these totals for easier error correction.
16. SUPERVISOR’S SIGNATURE: Supervisor must sign his/her own name.
17. CCC: List the supervisor’s certification area. Example: SLP, SLP/A, or A.
18. ASHA #: ASHA number assigned to supervisor is required for the hours to be tabulated.
19. DATE: The date the supervisor signed the form (date must agree with last session documented).

In order to make it easier to track practicum hours, students should put only ONE LOCATION per page and ONE SUPERVISOR per page.

IT IS THE STUDENT’S RESPONSIBILITY TO MAKE SURE ALL PAPERWORK IS CORRECT, NEAT, AND COMPLETE.
SPEECH AND HEARING ASSOCIATION OF ALABAMA (SHAA)

Students are encouraged to become (student) members of SHAA of Alabama. The Association sponsors a three-day convention each Spring which features outstanding speakers. In addition, the State Association publishes a journal, which provides an excellent outlet for student-conducted research articles. Dues are $15 per year (subject to change). Additional information about this organization may be obtained from Dr. Jennifer Vinson, 256-372-4035.
Alabama A&M University (AAMU) first became a chapter affiliate of the National Student Speech-Language-Hearing Association (NSSLHA) in 1972. NSSLHA is the national organization for students pursuing the Master’s degree as well as undergraduate students interested in the study of normal and disordered human communication behavior. NSSLHA is the only student association recognized by the American Speech-Language-Hearing Association (ASHA).

AAMU undergraduate and graduate students (not yet eligible for ASHA membership) are encouraged to join NSSLHA. Membership at both the national and local levels is recommended, but not required. The benefits of joining NSSLHA at the national level are extensive:

- Become part of a growing number of students who are finding that involvement in NSSLHA leads to a fuller appreciation of the professions and greater awareness of the issues affecting speech-language pathology and audiology.
- Receive the annual Journal of the National Student Speech-Language-Hearing Association, and one issue of the biennial Clinical Series, published by NSSLHA, if distributed during a year you are a NSSLHA member.
- Receive the ASHA Leader.
- Subscribe to additional journals at special low rates. Subscription information can be obtained by calling the national office, extension 294.
- Register at a reduced fee for the annual ASHA/NSSLHA Convention, as well as for ASHA-sponsored workshops and conferences.
- Establish credit with a NSSLHA MasterCard with special benefits including no annual card fee for the first year.
- Order ASHA publications such as the Guide to Graduate Education at special student rates.
- Use ACTIONLINE – A 1-800 number for address changes, graduation date changes, or other general information. The 1-800 numbers are 1-800-498-2071 (members) and 1-800-836-8255 (non-members). The non-toll free number is (301) 897-5700.
- Receive assistance from the Graduate Information Center at the Convention.
- Qualify for ASHA’s Student-to-Certified Member Conversion Program and save significantly (approximately $100) in ASHA dues/fees in your first year of ASHA membership. You must hold NSSLHA membership for at least 1 year, be a NSSLHA member at the time of graduation, and must apply prior to September 1 of the calendar year following graduation.

Presently, national yearly membership dues for NSSLHA are $45 with local membership dues set at $10 per year. Once a student receives the Master’s degree and enters the profession of speech-language pathology, a transition to ASHA is the logical step. Previous membership in NSSLHA makes that transition smoother and less expensive. An application for local NSSLHA has been included in Appendix E of this manual.
COMPLAINT PROCESS FOR CONSUMERS:
Complaints pertaining to the accreditation of the AAMU Communicative Sciences and Disorders program may be addressed to the:

Council on Academic Accreditation
American Speech-Language-Hearing Association
2200 Research Blvd.,
Suite 310
Rockville, MD 20850
1-800-638-8255/301-296-5700

UNIVERSITY ACADEMIC APPEALS PROCESS:
The Academic Appeals Process developed for students at Alabama A&M University is detailed in the Student Handbook on pages 31-33. The URL needed to access the Handbook is:


Quoting from the text, “The academic appeal is a formal procedure designed to provide students with an optional avenue for review. Students and faculty members are encouraged to handle issues of academic concern through informal discussion with the appropriate individual (student, faculty, advisor, department chairperson, and/or dean). If informal procedures fail to resolve the issue(s), students may pursue a formal appeal. The following steps describe the appeal process:

A. Appeals must originate from the student in written form and must be processed through the department chair, dean of the School, and to the Office of Academic Affairs, in that order.

B. The appeal may be handled as final at any level, with the consent of the applicant student, with a copy of the decision forwarded to the Office of Academic Affairs.

C. If the appeal reaches the Office of Academic Affairs without resolution, the request may be handled within the Office of Academic Affairs or it may be sent to the Academic Appeals Committee.

D. The Academic Appeals Committee shall complete an assessment of the issue(s) through a hearing, (2) individual interviews, (3) acquisitions and review of pertinent data, or other means as deemed appropriate by the Committee.

E. The Academic Appeals Committee shall formulate recommendations based on the results of the assessment. The recommendations shall be forwarded to the Vice President for Academic Affairs for final disposition.

PROGRAM ACADEMIC APPEALS PROCESS:
The Communicative Sciences and Disorders Program follows the appeals process outlined in the Student Handbook, but adds the following formal procedures which can be found in the AAMU CSD Policies and Procedures Handbook and on the CSD website:

1. Student is asked to write a statement of the grievance and submit the statement to the faculty member involved and/or to the CSD Faculty Coordinator for review. The faculty member and/or Coordinator will respond to the statement in letter from within a reasonable amount of time.
2. If the issue is not resolved to the student’s satisfaction, the student may submit the statement to the Chair of the Department of Counseling/Psychology, Special Education and Communicative Sciences and Disorders. The Chair will respond to the statement of grievance within a reasonable amount of time.

3. The student may submit a formal complaint to the Dean of the School of Education if he/she is still dissatisfied with the outcome of the aforementioned procedures. The Dean will review the grievance and the proceedings, meet with the student and the faculty/coordinator and Chair, and make a decision about the matter.
Communicative Sciences and Disorders
Receipt and Agreement to abide by

I acknowledge that I have received, read and agree to abide by all the rules, regulations and updates as stated in the AAMU CSD Clinic Manual: Policy and Procedures Handbook.

Furthermore, I certify that I have read and understood the Eligibility Requirements and Essential Functions Policy (p. 3-5) and I believe to the best of my knowledge that I am able to meet each of these standards

☐ without accommodations.

☐ with reasonable accommodation for a disability. *

I understand that if I am unable to meet these standards with or without reasonable accommodations, I will be denied permission to enroll or continue in the program.

Practicum Student’s Signature: ______________________________ Date: ___________

Printed Student’s Name: _______________________________________

*RESOURCES FOR STUDENTS WITH DISABILITIES: Students needing disability-related accommodation to satisfy the requirements of this program must contact Dr. Carol Deakin, Program Coordinator (carol.deakin@aamu.edu). In addition, the University provides environmental and programmatic access for persons with documented disabilities as defined in Section 504 of the Rehabilitation Act of 1973 and the Americans with Disability Act of 1990. Any student who desires information or assistance in arranging needed services for a disabling condition should contact the Director of Special Students Services, Student Center, Room 203, (256) 372-4263.
These important documents are available online on the AAMU CSD Website

- ASHA Code of Ethics and Scope of Practice (Appendix-A)
- Clinical Forms
- Sample Reports
- Applications (Appendix E)
- Externship Contracts (Appendix F)
- Clinical Fellowship Requirements and Procedures (Appendix G)
- Standards and Implementation Procedures for the Certificate of Clinical Competence (Appendix H)
- Instructions for Obtaining and Maintaining Certification, 2005
  (See http://professional.asha.org/certification/slp_sptandards_new.cfm)
- AAMU Clinical Assistant Guidelines (Appendix K)
- Universal Precautions (Appendix L)
- HIPPA (Appendix M)
- CSD Writing Lab Policies (Appendix N)

Other resources:
CSD Clinic google website: https://sites.google.com/site/csd516/home