



Communicative Sciences
and Deaf Studies

Student Clinician Manual

CSDS 230, 257 & 267

Fresno State-Scottish Rite Speech and Language Clinic &
Communicative Sciences and Deaf Studies (CSDS) Research Clinic
CALIFORNIA STATE UNIVERSITY, FRESNO | 5310 N. CAMPUS DR, M/S PH 80, FRESNO, CA 93740-8019

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INTRODUCTION

Clinical practicum is part of the requirements for a master's degree in speech-language pathology. The American Speech Language Hearing Association (ASHA) also requires students in speech-language pathology and audiology to complete clinical practicum to be eligible for the Certificate of Clinical Competence (CCC).

This student clinician manual is designed to provide guidelines for students planning to enroll, or who are already enrolled, in clinical practicum. In addition to following these guidelines, you should be familiar with ASHA's Code of Ethics, ASHA's position on various areas of clinical practice, and ASHA's requirements for the CCC. ASHA's position statements and guidelines are published periodically in the *ASHA* journal and all information (Code of Ethics, etc.) are accessible on ASHA's official website (www.asha.org) and at the end of this manual. Students joining the National Student Speech Language Hearing Association (NSSLHA) will receive *ASHA* and other journals. Students majoring in speech-language pathology or audiology are strongly encouraged to join NSSLHA.

All students are encouraged to see their advisor each semester. You should discuss your questions about clinical practicum with your graduate coordinator, the clinic director, or clinical educator (CE).

BREAKDOWN OF REQUIRED HOURS

You will earn required hours at the Fresno State-Scottish Rite Speech and Language Clinic & Communicative Sciences and Deaf Studies (CSDS) Research Clinic as well as at various off-campus sites. Supervised clinical practicum can also be earned in conjunction with assignments related to coursework or labs in certain classes.

A minimum of 400 clinical hours are required prior to receiving the M.A. degree in speech-language pathology. Students must complete a minimum of 25 observation hours, and 375 clinical hours. The following is the breakdown of required hours:

25 hours undergraduate guided observation hours via live or recorded sessions. All sessions (live or recorded) must be provided while a licensed SLP with CCCs is available for discussion and guidance.

100-130 (approx.) hours minimum Student Teaching (CSDS 257)

255 hours split between On-Campus Clinic or Off-Campus Collaborations (CSDS 230/232) and Externship (CSDS 267)

NOTE:

- **75 graduate treatment and assessment hours may be earned in simulation when supervised by a licensed SLP and provided 15 minutes per simulation hours in debrief sessions.**
 - **This opportunity will be offered during a student's first summer in the program. SIMUCASE will focus on low incidence disorders.**
- **50 hours of direct client treatment earned as an undergraduate may be counted toward the 400 required hours.**

GOALS

The goals of the Fresno State-Scottish Rite Speech and Language Clinic and the Communicative Sciences and Deaf Studies (CSDS) Research Clinics are:

- To provide high quality services for children and adults with disorders of speech, language, or hearing.
- To provide training, education, and research opportunities for students in the Department of Communicative Sciences and Deaf Studies.
- To serve as a community resource and advocate for individuals of all ages with communicative disorders.

QUALITY IMPROVEMENT AND PROGRAM EVALUATION

Delivery of quality service is a continual process in the Fresno State-Scottish Rite Speech and Language Clinic and Communicative Sciences and Deaf Studies (CSDS) Research Clinic. You will be involved in regular meetings with your clinical educator to ensure a consistent and timely review of services. Client and clinician performance is evaluated regularly throughout the semester.

Measurable treatment objectives are determined at the beginning of each semester for clients receiving speech-language services. These objectives are based on formal and informal assessment of a client's communicative status. Treatment modifications are made as needed. Treatment objectives and procedures, progress, and recommendations are reported in a written treatment summary report at the end of the semester. The clinical educator reviews the results of all evaluations. Recommendations are shared with clients in the form of verbal and written reports. Informative feedback is provided throughout the semester.

Consumer satisfaction is also measured at the end of each semester or service period. The clients will receive a survey to complete. Responses are tallied by the clinic office and reviewed by the clinic director. Areas sampled include supervisor knowledge and responsiveness, clinic facilities, and overall satisfaction of client progress. A copy of all surveys is stored on Google Drive and may be obtained from the clinic office.

Evaluations of clinical educators are made each semester by student clinicians. The students complete a supervisor evaluation in CALIPSO at the end of each semester. The clinic director reviews each of the evaluations and addresses issues noted. Clinic educators gain access to the evaluations at the start of the next semester.

Additional information related to clinic administration may be reviewed in the clinic policy and procedure manual located in the back of this manual.

CLINIC SERVICES

Speech-language pathology services are provided by student clinicians under the direct supervision of a licensed and certified professional. All clinical educators are licensed by the State of California Board of Consumer Affairs and are certified by the American Speech-Language-Hearing Association (ASHA) in the area they serve as a clinical educator (CE).

No fees are charged for services at the Fresno State-Scottish Rite Speech and Language Clinic or the Communicative Sciences and Deaf Studies (CSDS) Research Clinic; however, donations are welcomed. Donations are not required for client participation. Students should not discuss donations with clients. Questions regarding donations should be referred to the clinic director or the clinic assistant.

Certain clients may be invited to enroll in the Communicative Sciences and Deaf Studies (CSDS) Research Clinic by faculty, if appropriate. These clients, if they agree and meet the requirements, will be asked to sign the Consent Form to participate in the appropriate research project/clinic. These clients will not be charged for services rendered in these clinics.

CLINIC ENROLLMENT AND MEDICAL CLEARANCE

Prior to beginning the clinical component of the speech-language pathology program, a CALIPSO account is established by each student scheduled for clinic enrollment. CALIPSO becomes a part of the student's records and is maintained for reference of such information as verification of clinical hours and review of student performance (evaluations). These accounts are maintained for seven years following graduation.

Each student's CALIPSO accounts will contain the following:

- Proof of 25 undergraduate guided observation hours
- Compliance and Immunizations
 - TB (annually)
 - Hep B
 - MMR
 - Tdap (booster every 10 years)
 - COVID vaccines
- Student Clinical Practicum Evaluations
- Remediation plans or incident reports
- KASA forms
- Clinical Clockhour Forms
- Cumulative Evaluations
- Clinical Performance Summary
- Contact Information

PREREQUISITES TO CLINIC ENROLLMENT

CLINICAL PRACTICUM COURSES

The following clinical practicum courses must be completed prior to graduation: CSDS 230, 257, and 267.

Students must complete specific coursework as an undergraduate student before they are eligible to enroll in clinical practicum. Check regularly with your graduate coordinator to make sure you are following the correct sequence of classes.

Students earning clinical practicum hours must comply with the requirements for participation in clinic-completion of observation hours, immunizations, and health clearance prior to working with clients.

To avoid delay in enrolling in clinical practicum, students should see their graduate coordinator regularly. Any changes in requirements will be discussed with students at that time.

Transfer students should discuss pre-clinic requirements with their graduate coordinator when they plan their academic program. Practicum hours earned at another university may be accepted at California State University, Fresno as long as the hours were supervised by someone with the CCC and appropriately signed records are available directly from the other university. Transfer students should discuss transfer of clock hours with their advisor and the clinic director, **especially the 25 undergraduate guided observation hours. All students MUST have 25 documented guided observation hours prior to their first clinical experience.**

Students enrolling in an Externship (CSDS 267) must have completed the following: A minimum of three (3) semesters of CSDS 230 clinic experience, CSDS 207, CSDS 213, and CSDS 220. Students will be able to accumulate additional hours in adult assessment and treatment in their externship of supplementary clinics such CSDS 232 LOUD Crowd Research Clinic or CSDS 232 summer Simucase Clinic. Students will be required to complete a full semester five (5) days a week to the last day of instruction in their externship unless given explicit permission by the clinic director otherwise.

Students enrolling in Student Teaching (CSDS 257) must have completed the following: A minimum of three (3) semesters of CSDS 230 clinic experience, CSDS 204, 214, and 215 or concurrent. Students need approximately 100-130 clinical contact hours in the school setting, and will be required to complete, at five (5) full days to the last day of instruction in their student teaching unless given explicit permission by the clinic director otherwise. Students enrolled in CSDS 257 must be concurrently enrolled in CSDS 209.

OBSERVATION GUIDELINES

ASHA and California Licensure require students to obtain a minimum of 25 clock hours of supervised guided observation prior to beginning their clinical practicum in speech-language pathology or audiology. Observation hours may be obtained for treatment and evaluation of children or adults with communicative disorders. These 25 hours must be in speech-language pathology observation and within the scope of practice. **Guided observation hours can be completed at off-campus sites, if the SLP being observed has a current state license and CCCs. All observations MUST be within the Speech-Language Pathology scope of practice.**

ONLINE SCHEDULE REQUEST SURVEY

An online survey will be sent to all graduate students at the start of advising week each semester. A link to the survey will be sent to each student via email and will allow each student to make specific requests for on and off campus placements for the upcoming semester. This includes students scheduled to take CSDS 230 (On-Campus or collaborative off-campus clinic), CSDS 257 (Student Teaching) and CSDS 267 (Externship). Specific types of settings as well as specific districts, clinical educators and facilities will be accepted. Please note: Every effort will be made to honor each request, but **NO PLACEMENT IS GUARANTEED**. Students will be placed based on availability and the clinic director's discretion.

HEALTH CLEARANCE

Health regulations are enforced for students' and clients' protection against certain communicable diseases. Before beginning on-campus practicum, students must present evidence of MMR vaccination (one time only), Tdap (booster 10 years), Hepatitis B, COVID vaccines, and testing for tuberculosis (TB). A TB clearance is required annually. The health clearance must be obtained prior to beginning clinic each semester. Students will not be assigned clients until they have met the health clearance requirements. You must follow all medical clearance requirements off campus sites may require prior to your placement in CSDS 257 student teaching and CSDS 267 externship.

Completion of an American Heart Association Approved cardiopulmonary resuscitation (CPR) class is not required to enroll in on-campus clinic but may be required for placement in medical facilities for CSDS 267.

INSURANCE

All students providing clinical services are required to be enrolled both the university, as well as the corresponding clinical practicum. Students enrolled in clinical practicum (on or off campus) are covered by the University's blanket professional liability insurance policy. Students are not required to carry their own private liability insurance policy while enrolled in the appropriate clinical practicum at the University.

REGISTRATION FOR CLINICAL PRACTICUM

After all necessary documents have been received by the clinic director and uploaded to CALIPSO, the student is accepted into clinical practicum. Remember that students who fail to complete and submit/upload their required documentation by the due date may be denied enrollment in clinical practicum. Students continuing in clinical practicum (CSDS 230, 257, and 267) must respond to the

online schedule request survey to be placed in the clinic of their choice.

LAB FEE

Student clinicians must pay a lab fee at the beginning of each semester (accounting office will bill you automatically). The fee is used to defray costs of replacing consumable items, worn out tests, and so forth. A fee is paid for each section of registered clinical practicum. Students enrolled in CSDS 257/CSDS 267 practicums are not required to pay lab fees.

STEPS FOR ENROLLING IN CLINIC

Initial enrollment in clinic requires completion and CALIPSO upload of the following:

- Requisite coursework
- 25-hours guided observation record
- MMR vaccination
- Tdap/Dtap (booster every 10 years)
- TB test (annually)
- Hepatitis B vaccination
- COVID vaccines

After the first semester in clinic, the student must do the following:

- Verify health requirements are valid. Update TB test if necessary.
- Completed Online Schedule Request Survey (to ensure desired placement)

If you need assistance, please ask the clinic office or clinic director.

DROPPING CLINIC

Registering for clinical practicum is considered a professional commitment. If a student withdraws from clinic before the clinic practicum begins (prior to first clinic meeting), the student is expected to notify the clinic director in writing, stating the reasons for withdrawal.

CLINIC FACILITIES

CLINIC ROOMS

Eight individual clinic rooms and two preschool clinic rooms are available for assessment, treatment, and consultation. These rooms are located on the second floor of the Professional Human Services (PHS) Building in room 222. The rooms are equipped with observation windows and receivers/headphones.

The clinic rooms are sound treated, but not soundproof. To avoid disturbing other clinicians and to maintain confidentiality, student clinicians should discuss information with their clients and clinical educators in the treatment room-not in the hallways or observation areas.

WAITING ROOM

The waiting room is located in PHS 220 and is equipped with a sitting area and bathroom. After the initial meeting with clients, clinicians should instruct their clients to meet them in the waiting room for subsequent sessions.

MAINTENANCE

No scotch tape is to be placed on the clinic walls. Tacks are permitted on the wallboard. At the end of sessions, student clinicians will turn off room lights, turn off air purifiers, pick up and return materials found in their rooms, and wipe down tables with Seventh Generations cleaning wipes or provided disinfecting spray.

Report broken equipment immediately. Clinicians must notify the clinic office of any malfunctions of equipment.

Use of the white board requires whiteboard pens. These pens may be obtained from the clinic office. Use of any other pens may cause permanent damage to the whiteboard.

MEDIA CENTER

The media center is in PHS 244 and is open Monday through Friday from 8:00am to 5:00pm. Student clinicians are responsible for returning items to the correct locations and leaving the room in order.

Assessment Materials

A comprehensive list of assessment materials is found in the media center next to the reservation book and in GOOGLE DRIVE. Every assessment available in our clinic is on the list along with the label used, the number of copies available, and the cabinet number where they can be located.

Reservation Book

If you want to reserve tests you **must** do so by using the reservation book. The book is kept in the media center. Students enrolled in clinic or instructors reserving items will have priority in using them. Assessments may not be checked out overnight for the first 3 weeks of clinic.

Photocopy Machine

There is a small photocopy machine available for student clinician use in the Grad Research Lab/Lounge. Student clinicians may make photocopies for clinic use only. Students are not permitted to use the photocopy machine for other course materials without permission from either the clinic director or office staff. Please let the department office staff know if the paper is running low so it can be replaced.

Telephone

There is no longer a landline in the Media Center. The best and safest way to communicate via phone with your client is by using the GOOGLE VOICE app <https://voice.google.com/u/0/about>

Test Protocols

Test protocols are available in the media center. Please advise the clinic office if a protocol is running low (fewer than 10 copies). Please do not use the last protocol. Alert the office so a copy can be used temporarily until more can be ordered. If a copy must be used, please be sure to transfer all data to the formal protocol once they are delivered and shred the copy.

CLINIC OFFICE

The clinic office is located in PHS 252. The office is open Monday through Friday from 8:00am to 5:00pm, unless otherwise posted.

The clinic office maintains the following:

- Clinical equipment and replacement test protocols
- Parking permits for clients
- Velcro strips and laminating sheets- free for students

CLIENT FILES

Client files are located in the HIPAA compliant ClinicNote electronic record system. Client files are maintained for 5 years.

Client files are identified by the client's name and will be attached to the appropriate student clinician and clinical educator in ClinicNote. If you have trouble locating a file in ClinicNote, ask for help. There are detailed instructions in the file ClinicNote in GOOGLE DRIVE.

CLINICNOTE CLIENT FILE CONTENTS

Each client file in ClinicNote contains the following:

Client File Contents

Once the client's name is located and selected, the client's file will expand, and basic demographic information can be viewed. Additionally, a set of blue tabs will become available for selection and include the following:

- Notes- Includes all daily/SOAP note information.
- Reports- Early SOAP notes, Assessment Reports/Treatment Plans, Treatment Summaries
- Forms
- Files- Uploaded items such as the following:
 - Case History Form
 - Consent and Release Forms
 - Old Reports
 - Pre and Post Videos
 - DATA
 - Assessment Information
 - Discharge Information
 - Treatment Information
- Contact Notes/Messages-Includes all calls, email, or other communication related to scheduling, attendance, or other.
- Portal-Allows you to communicate with the client directly through the portal, such as sharing reports or obtaining consent forms.
- Clinic Policies and Procedures- This policy/procedure will be initialed and signed by the client and placed in their ClinicNote file. A renewal policy will be signed at the start of each semester.

CLINICAL PRACTICUM

ASSIGNMENT OF CLINICAL EDUCATORS

A mandatory clinic meeting is held at the beginning of each semester to review clinic policies/procedures and discuss clinic assignments. This meeting must be attended by speech-language pathology students who are enrolled in clinical practicum.

Clinic assignments are based on supervisor availability, client availability and needs, and students' class schedules. Off-campus assignments are based on the clinical educator's availability and students' experiences, qualifications, and areas of interest.

SCHEDULING SPEECH CLIENTS

Each student enrolled in the speech-language pathology practicum will receive their clients' names and access to ClinicNote files following the mandatory clinic meeting. Students will be assigned a minimum of two and maximum of three clients per semester (maximum of four during the summer) and will meet with their clients twice a week for 35-50 minutes per session.

After students have received their clinical assignment, they should do the following:

- Review clients' files in ClinicNote.
- Confirm clients' appointments in ClinicNote.
- Prepare for and create a comprehensive assessment plan to present to your clinical educator.
- Meet with your clinical educator approximately one week prior to the first day of clinic to present the assessment plan for approval.
- Call clients to confirm clinic appointments. Please use GOOGLE VOICE app for phone communication. You may also conduct most of the parent interviews if your client is a child.
- Note client contact and the results of the contact under the CONTACT NOTES in ClinicNote (e.g., called client-no longer interested in services: called client-confirmed appointment).
- Prepare for your first clinical sessions.
- Reserve your intended assessment materials in the reservation binder. Take note of the number of copies available and coordinate with other students, if needed.
- Follow all guidelines provided by your clinical educator. When you contact your clients and they are unable to attend at the proposed time, do the following:
 - Tell them their names will be put back on the waiting list and that we will try to reschedule them at a more convenient time. Inform them that we cannot guarantee that they can be scheduled at any other time.
 - Immediately tell the clinic office and the clinic director which clients cannot attend at the proposed time and what times they are available for scheduling.
 - Note client contact and results of the contact in CONTACT NOTES.

CANCELLATION OF CLINIC SESSION BY A CLIENT

A note will be entered into CONTACT NOTES in ClinicNote if a client calls to cancel a clinic session. It is the student's responsibility to check CONTACT NOTES daily for any messages. Students are NOT required to make-up this type of cancellation.

CANCELLATION OF CLINIC SESSION BY A CLINICIAN

If students are ill or unable to attend a clinic session due to a documented medical or legal emergency,

they must notify their clients, clinic office, and clinical educator prior to their session. It is the student's responsibility to have the phone numbers of their clients. It is good practice to also send them a message in their ClinicNote portal if you can't reach them by phone. Students must make up this type of cancellation unless otherwise instructed by their clinical educator. Proper documentation of the illness is required and should be sent to the clinic director for her records.

ASSESSMENT, TREATMENT PLANS, AND TREATMENT SUMMARY REPORTS

Students must discuss the assessment and treatment plans with their clinical educator. There are sample templates in GOGGLE DRIVE but they are only samples. Your clinical educator will help you develop the reports that are appropriate for your clients. Your clinical educator will provide you with specific information regarding developing and writing evaluation and treatment plans. All clients receiving treatment in the clinic must have written measurable objectives in the form of a written assessment report/treatment plan and treatment summary. Also, before implementing any major changes in your plan, you must first discuss the proposed changes with your clinical educator.

REFERRALS

Clients may need services that are not available in our clinic or may request referral to another agency. Before making a referral, discuss it with your clinic supervisor. Note any referrals in the client's CONTACT NOTES in ClinicNote. Include copies of any referral letters in the client's file.

RECORD KEEPING

Students are expected to maintain comprehensive and accurate records. Students enrolled in speech-language pathology practicum must: maintain a record of each clinical session via recording on progress notes/SOAP Notes and maintain a record of client attendance.

At the end of semester, the student submits the Daily Clockhours on CALIPSO for your clinical educator's approval. The clinical educator verifies these hours in CALIPSO and they appear on the permanent Clockhour Experience Record.

WRITTEN ASSIGNMENTS

Written assignments vary. Clinical educators will provide specific information concerning their requirements. The following is always required:

- Assessment Report
- Treatment Plan
 - The Assessment Report and Treatment Plan may be combined at the clinical educator's discretion.
- Written treatment objectives/goals entered directly into ClinicNote
- Treatment Summary Report (client continuing) or Discharge Report (client dismissed)
- All reports must be electronically signed by the student clinician and the clinical educator in ClinicNote. Once signed, a copy must be given to the client or sent through the portal in ClinicNote.

EMERGENCY PROCEDURES

ACCIDENT OR SUDDEN ILLNESS

Dial 911. Stay on the line to give necessary information. Apply any urgently needed first aid you are qualified to give. Report accidents and illnesses to the clinic office and clinic director. The clinic director will send a report to the Office of Environmental Health & Safety and Risk Management on campus.

CAMPUS FIRE

Leave the fire danger area. Locate a telephone. Dial 911. Stay on the line and give them necessary information. A telephone is in the individual clinic space, and in each classroom. The telephone report should include details as to building, location in the building, and nature of the fire. The person reporting the fire should remain at the fire alarm to direct firefighters to the location of the fire.

SAFETY PRECAUTIONS

To avoid accidents, adhere to the following guidelines:

- Never leave a child unattended in the clinic.
- Do not allow children to stand on tables or chairs.
- Do not let children run in the clinic area.
- Unless used as a part of treatment, avoid giving clients food. Before using food in clinic, check with the client (or client's parent) to ensure that he or she is not allergic to the food or otherwise restricted from eating it.
- If clients in wheelchairs do not automatically lock their brakes when they are in clinic, advise them to do so. If clients are unable to independently operate their chairs, clinicians should lock their brakes.
- No smoking or vaping is permitted on campus at any time.
- Use common sense.

HEALTH PRECAUTIONS

- Wash your hands before and after each client.
- Use gloves when performing an oral peripheral examination, when there is a possibility of encountering the client's saliva or blood, or during any other type of invasive procedure.
- Avoid touching your face while wearing gloves.
- Use disposable equipment for examinations or in treatment whenever possible (e.g., tongue depressors, swabs, gauze etc.).
- Wipe off the clinic table after each use with designated spray bottles or disinfecting wipes.
- Toys and other items handled by clients should be wiped down with 7th Generation Wipes.
- Air purification should be on for every session.
- See the Infection Control Policy in the Appendix for specific details.

PROFESSIONAL APPEARANCE-Dress Code

All student clinicians and undergraduate student observers are expected to be well groomed and dressed professionally.

Hair must be clean, well maintained, have a natural appearance, and should not be an unnatural/unconventional color. Facial hair must be well maintained.

Clothing should be practical, yet professional, allowing students to perform activities such as sitting on the floor, bending, leaning over, and reaching overhead without revealing skin or undergarments.

Jewelry must be minimal and should not present a hazard to clients or students.

Excessive perfumes, colognes, or strong scented lotions should be avoided due to sensory issues or allergies.

***Students must follow the dress code of their specific off-campus site.**

ACCEPTABLE	UNACCEPTABLE
Nondistressed jeans and pants free of holes and frays	Torn or frayed pants/jeans
Plain T shirts- no large logos/pictures/words	Flip-Flops
Comfortable and well-maintained shoes, sneakers, and sandals	Dresses or skirts above the knee
Blouses and sweaters	Leggings or shorts
Knee length (or longer) dresses and skirts	Sweatshirts, sweatpants, or flannel
Cardigans and jackets	Midriff or tight-fitting tops
	Spaghetti straps, off the shoulder, low cut, or open back tops
	Plugs, body piercings in the eyebrows, tongue, nose, or lip

IDENTIFICATION BADGES

Students are given identification badges. Students must wear their badges when providing clinical services. Off-campus sites may provide different/additional identification badges.

CONFIDENTIALITY

The client files are maintained in the HIPAA Compliant ClinicNote program. All client information is confidential. Students gain access to their client files and assignments in ClinicNote the first day of the semester and permissions/access is removed the last day of the semester.

Any documentation worked on at home should only have initials with the full name added to the documents prior to entering them in ClinicNote. Clinicians may work on client reports on their personal laptop in the following areas:

1. Media Center

2. Graduate study/research room/Lounge
3. Home
4. Private room in the library

A computer/printer/copier is available in the grad lounge for student clinicians to print/copy reports only.

Student Clinicians MAY NOT work on client reports on their personal laptops in the following areas due to confidentiality issues:

1. The library common areas
2. Coffee shops/restaurants
3. ANY OTHER PUBLIC PLACE

OFF-CAMPUS CLINICAL PRACTICUM

Students participating in off-campus clinical practicum must follow the practicum site's policies and procedures concerning attendance, professional appearance, recording keeping, and so forth. Students will follow the holiday schedule of the practicum site (not of Fresno State) unless other arrangements are approved by the off-campus clinical educator.

GRADES

Ongoing evaluation of the student clinician's performance will be made by the clinical educator throughout the semester. Evaluations may be in the form of verbal feedback, written notes, and formal meetings between the student clinician and clinical supervisor, or any combination of these.

At midterm and at the end of the semester, clinical educator will complete Student Performance Evaluation on CALIPSO for each student. The Performance Evaluation will be discussed with the student in person and approved on CALIPSO.

Students enrolled in CSDS 230, 257 and 267 are awarded grades of CR (Credit) or NC (No Credit); consistent with the grading policy outlined on page 53.

EVALUATION OF CLINICAL EDUCATORS

Each semester student clinicians complete a clinical educator evaluation on CALIPSO or the University mandated instructor/supervisor evaluation tool (on-campus supervisors only) as part of their end-of-semester requirements. Precautions are taken to ensure the student's confidentiality. Results of the rating scale and written comments are viewed by the clinic director and stored until after the grades have been posted, or longer. If issues are noted on the clinical educator's evaluation, the concern is brought to the Department Chairperson's attention for discussion and plan.

END OF SEMESTER CHECK-OUT

All students enrolled in clinical practicum must complete the "End of Semester Checkout" with their clinical educator. All students should ensure that their clinical educators have completed and finalized

their Final Student Performance Evaluations and approved Clinical Clockhours on CALIPSO. Students must also complete the Supervisor Evaluation on CALIPSO, as well. On campus clinic students must also complete the Client Information and Client Progress Forms in QUALTRICS. Students must comply with the following:

On-Campus Students

- Ensure all client notes are complete and in the proper client subfile.
- A copy of the Treatment Summary Report was given directly to client or sent in their portal.
- Complete the Client Information and Client Progress Forms in QUALTRICS. A link for this will be sent to you prior to the end of the semester.
- Indicate whether each client goal has been met/not met and archive them in ClinicNote.
- Complete your Supervisor Evaluation on CALIPSO before the final meeting with your clinical educator. The clinical educator does not see these or receive results until after all grades are submitted.
- Submit your Daily Clockhours in CALIPSO and obtain clinical educator's approval.
- Ensure your Final Student Performance Evaluation is completed and finalized by your clinical educator.

Off-Campus Students

- Complete the Supervisor Evaluation in CALIPSO prior to your last meeting with your clinical educator. Your clinical educator does not see the results of these evaluations until after your grades are submitted.
- Submit your Daily Clock Hours earned in CALIPSO and obtain clinical educator's approval.
- Ensure your Final Student Performance Evaluation is completed and finalized by your clinical educator.

Appendix 1

OBSERVATION GUIDELINES

Student observers are expected to demonstrate ethical and responsible behavior. Students observing at both on-campus and off-campus sites will comply with the following:

1. Be currently enrolled as a Communicative Sciences & Deaf Studies undergraduate or graduate student or with permission from the clinic director.
2. Read, sign and date the Health Insurance Portability and Accountability Act (HIPAA form). You should have received and signed the form in class if an observation was required by your professor. HIPAA forms must be signed and submitted to the clinic assistant.
3. Respect the client's right to confidentiality. Do not discuss any client with individuals outside the clinic. Do not discuss any client in public places. Do not reveal clients' names. Do not discuss any information you observe or hear with others, especially when you are observing (as family members are often sitting right next to you).
4. Professional dress is required in clinic. All student clinicians, as well as student observers, are expected to dress in a professional manner. The dress code should be followed at all times.

Students observing at the Fresno State-Scottish Rite Speech and Language Clinic and The CSDS Research Clinic must also comply with the following procedures:

1. Introduce yourself to the clinical educator and request permission to observe. Arriving late for a scheduled observation may result in your not being allowed to observe that session.
2. Turn off your cell phone, use appropriate professional behavior, and maintain confidentiality of all client information.
3. Completely fill out the *observation hours log sheet* (blank copies are available in the Media Center) each time you observe a clinic session and obtain the supervisor's signature and ASHA # once the session is completed. Supervisor signatures must be obtained at the time that the student completes his/her observation.
4. Speak quietly in the clinic area. The clinic rooms are not soundproof. Also, remember parents and other family members are often in the clinic area.
5. Use the headphones if they are available otherwise try to bring earbuds or headphones of your own.
6. Clinic schedules may be obtained from the instructor or CSDS 107.
7. Ask the clinical educator to initial your Observation Hours immediately after the session is complete. Do not come back later or the next day, as supervisors will not sign off on your hours for a previous day/session.

Off-campus sites may have additional rules and procedures. It is the observer's responsibility to know each site's guidelines for observers. Observers must verbally confirm that the SLP they are observing has a current SLP license as well as CCC's. Observers must have the SLP they observed sign off their hours after each observation is complete.

Appendix 2

OBSERVATION HOURS LOG - Speech Pathology and Audiology

CALIFORNIA STATE UNIVERSITY, FRESNO
Fresno State-Scottish Rite Speech and Language Clinic and CSDS Research Clinics
5310 N. Campus Drive M/S PH80
Fresno, CA 93740-8019
(559) 278-2422

Name: _____ Student ID# _____

Date	SP	AUD	Code	Age	Observation Site	Supervisor's Signature	Supervisor ASHA #	# Min.

SUMMARY INFORMATION:

_____ Total Hours
 _____ Total Number of Different Observation Sites
 _____ Total Number of Different Supervisors

ACTIVITY CODE: Check either (SP) for Speech Pathology or (A) for Audiology for each Observation. Identify the specific type of Observation using one of the following:

SPEECH PATHOLOGY

- (A) Articulation
- (L) Language
- (AP) Aphasia
- (V) Voice
- (F) Fluency
- (D) Diagnostic
- (S) Screening

AUDIOLOGY

- (HA) Hearing Aid
- (AR) Aural Rehabilitation
- (ENG) Electronystagmography
- (BSER) Brainstem Evoked Response
- (CAT) Central Auditory Testing
- (SL) Site of Lesion Testing
- (S) Screening

- (O) Otolaryngological
- (IV) Initial Evaluation

Appendix 3

MATERIALS AND EQUIPMENT CHECK-OUT PROCEDURES

The following are procedures for all items being checked out, including tests, clinic equipment, audiometers, and other items.

1. Get the items you wish to use or check out.
2. Materials may not be checked out overnight for the first three (3) weeks of clinic.
3. When returning an item, first check back in at the check-out binder. Second, replace the items in the proper cabinets. It is your responsibility to make sure that your name is checked off. We will not be responsible for items left lying around. Please make sure your name is checked off the list so that you will not be held responsible if the item is missing.
4. If you are a clinician in clinic after office hours and you have items checked out, have your supervisor open the office for you and follow the same procedure as described in number 3.
5. If you reserve an item, be sure to indicate when you need it.
6. Notify the clinic office if the equipment you checked out is defective or parts are missing. The clinic office maintains equipment and test materials. If equipment is in need of minor repair, the clinic office may be able to fix it.
7. Before checking an item out, see if it has already been reserved for that time and day.

Appendix 4

SAMPLE CASE HISTORY

Adult Case History Form- This is found on WAITLIST PLUS and is uploaded to ClinicNote for student use.

General Information

Patient's First Name

Patient's Last Name

DOB:

Gender

- Male
- Female
- Non-binary
- Other

Race

- American Indian/Alaska Native
- Asian
- Black or African American
- Native Hawaiian/Other Pacific Islander
- White
- Other

National Origin

Address

Phone Number

Email

Name of Person completing this Form

What language do you speak at home?

Emergency Contact

First Name

Last Name

Relationship to Patient

Phone Number

Email

Medical Contacts

Name of Physician

Name of Specialist

What are your current concerns regarding your speech, language, swallowing, or motor skills?

When did you first notice these concerns?

Has the problem changed (gotten worse/better) since it was first noticed? Describe.

Is there a family history of speech, language, learning, hearing, medical or mental health issues? Describe.

Have you ever seen a specialist regarding these difficulties?

Yes

No

Not Applicable

When was the last time you saw the specialist?

What were their conclusions/recommendations?

Do you have copies of any reports from this specialist?

Yes

No

Unsure

Please check any applicable medical diagnosis:

Allergies

Dizziness

Asthma

Osteoporosis

Ear Infections

Pneumonia

Pacemaker

Meningitis

Stroke

Diabetes

Developmental Delay

High Blood Pressure

- Neurological problems
- Headaches
- Cancer
- Colds
- Head Injury
- Encephalitis
- Heart Problems
- Seizures
- Lung Problems

Please describe any of the diagnoses selected in the previous question.

Please list any additional current medical diagnoses not described above.

Have you ever had surgery or been hospitalized for any reason?

Yes

No

Please state the reason for hospitalization and when it occurred.

Are you currently taking any medications?

Yes

No

Please list your medications.

Has your hearing been evaluated?

Yes

No

I don't remember

When was the hearing test and what were the results?

Do you wear glasses?

Yes

No

Do you have dentures?

Yes

No

Select current marital status:

- Single
- Widowed
- Divorced
- Married
- Other

Partner's name if applicable

What is your current or past occupation?

Please list highest grade, diploma, or degree earned.

Do you have children?

- Yes
- No
- Do not wish to disclose

Please the names and ages of your children.

List hobbies or interests:

What are the ways you prefer to learn new things?

- Written instruction
- Demonstration
- Verbal instruction
- Hands-on learning
- Videos
- None of the above

Have you ever received any type of therapy?

- Yes
- No
- Unsure

Please types of therapy and how long you participated in that therapy.

What were/are the goals you are working on?

Do you have difficulty with any of the following:

- Expressing your wants and needs
- Understanding others
- Hearing in a loud room
- Memory
- Word finding (being able to say the names of people or objects when you want to)
- Problem solving and making decisions
- Reading
- Writing

Do you require assistance with any of the following?

- Dressing
- Toileting
- Money management/paying bills
- Cooking
- Transportation/driving
- Keeping track of appointments
- Eating
- Showering/personal hygiene
- Moving/walking from one place to another
- Telling time
- Making phone calls
- Grocery shopping
- Housekeeping
- None of the above

What goals do you want to work on in therapy?

Are there any special considerations that should be considered when planning therapy? (examples may be religious beliefs, food restrictions, etc)

body

E-Sign...

Add Signature

Appendix 5

RELEASE OF INFORMATION

**CALIFORNIA STATE UNIVERSITY, FRESNO
Fresno State-Scottish Rite Speech and Language Clinic
and CSDS Research Clinics
5310 N. Campus Drive M/S PH80
Fresno, CA 93740-8019
(559) 278-2422**

Release of Information to Speech and Hearing Clinic

To: _____ Date: _____

Re: _____ Birthdate: _____

You have permission to provide the Fresno State-Scottish Rite Speech and Language Clinic and the CSDS Research Clinic copies of all records pertaining to medical history, and diagnostic services rendered, or treatment given to the above named person. Released information regarding the above-named person is for the purpose of determining the most appropriate treatment or services for him or her.

Parent/Guardian/Self (18 or older)

Date

Appendix 6

RELEASE OF LIABILITY

Activity: Participation in evaluation and/or treatment in the Fresno State-Scottish Rite Speech and Language Clinic and the CSDS Research Clinics

Activity Date(s) and Time(s): _____

Activity Location(s): PHS 101, 220, 222, 225, 248

In consideration for being allowed to participate in this Activity, on behalf of myself and my next of kin, heirs and representatives, **I release from all liability and promise not to sue** the State of California; the Trustees of The California State University; California State University, Fresno; The California State University Association, Inc.; California State University, Fresno Foundation, Inc.; California State University Athletic Corporation; and all of said entities' employees, officers, directors, volunteers and agents (collectively "University) from any and all claims, **including claims of the University's negligence**, resulting in any physical or psychological injury (including paralysis and death), illness, damages, or economic or emotional loss I may suffer because of my participation in this Activity, including travel to, from and during the Activity.

I am voluntarily participating in the Activity. I am aware of the risks associated with traveling to/from and participating in this Activity, which include but are not limited to physical or psychological injury, pain suffering, illness, disfigurement, temporary or permanent disability (including paralysis), economic or emotional loss, and/or death. I understand that these injuries or outcomes may arise from my own or other's actions, inaction, or negligence; conditions related to travel; or the condition of the Activity location(s). **Nonetheless, I assume all related risks, both known or unknown to me, of my participation in this Activity, including travel to, from and during the Activity.**

I agree to **hold** the University **harmless** from any and all claims, including attorney's fees or damage to my personal property, that may occur as a result of my participation in this Activity, including travel to, from and during the Activity. If the University incurs any of these types of expenses, I agree to reimburse the University. If I need medical treatment, I agree to be financially responsible for any cost incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

I am 18 years or older. **I understand the legal consequences of signing this document, including**

(a) releasing the University from all liability, (b) promising not to sue the University, (c) and assuming all risks of participating in this Activity, including travel to, from and during the Activity.

I understand that this document is written to be as broad and inclusive as legally permitted by the

State of California. I agree that if any portion is held invalid or unenforceable, I will continue to be bound by the remaining terms.

I have read this document, and I am signing it freely. No other representations concerning the legal effect of this document have been made to me.

Participant Signature: _____

Participant Name (print): _____

Date: _____

Appendix 7

DIAGNOSTIC REPORT -first page sample

**CALIFORNIA STATE UNIVERSITY, FRESNO
FRESNO STATE-SCOTTISH RITE SPEECH AND LANGUAGE CLINIC
AND CSDS RESEARCH CLINICS
5310 North Campus Drive M/S PH80
Fresno, CA 93740-8019**

ASSESSMENT REPORT AND TREATMENT PLAN

CLIENT:	BIRTHDATE:
ADDRESS:	CLINIC FILE #:
CITY:	DIAGNOSIS:
TELEPHONE:	REFERRED BY:
CLINICAL EDUCATOR:	CLINICIAN:

BACKGROUND INFORMATION AND PRESENTING COMPLAINT

(client's name), a (x)-year, (x)-month-old (male/female), was seen for a speech and language evaluation on (date), at the California State University, Fresno Speech, Language, and Hearing Clinic. (client's name) was accompanied to the clinic by _____, who served as the primary informant. He was referred to the clinic by due to concerns regarding _____. _____ is currently receiving speech therapy services at _____ for _____ weekly. This will be _____'s first semester in the Fresno State Speech, Language, and Hearing Clinic.

HISTORY

ALL AREAS BELOW NEED TO BE IN NARRATIVE FORMAT. THE BULLETS ARE MEANT TO ENSURE YOU HAVE ALL REQUIRED INFORMATION IN THE PARAGRAPH.

Pregnancy, Birth, and Developmental History

- Pregnancy and birth information (birthweight included)
- Developmental milestones (physical and speech/language development)
- Report feeding and/or eating issues too.

Medical History

- Client's general health
- Accidents, surgeries, hospitalizations
- Medical diagnoses
- Medications
- Nutrition and sleep

Appendix 8

TREATMENT PLAN-first page sample

TREATMENT PLAN**LONG TERM GOALS AND PROCEDURES**

Long-term goal #1: *A broad, general statement of the hoped-for eventual outcome (e.g., “Increased intelligibility of speech”; “Increased expressive language skills” etc.)*

Objective #1: *A very specific statement relevant to the long-term goal containing the five elements of a good target behavior*

Procedures:

State that baselines will be conducted before treatment begins. Describe in detail how you will baseline the target behavior.

State the level at which treatment will begin. Discuss the antecedent-based treatment methods that will be utilized (e.g., modeling, prompting, etc.). State specifically when and how antecedents will be initiated, faded, reinstated, etc.

Describe the consequence-based treatment methods that will be utilized. Discuss the schedule of reinforcement that will be used in the initial stages and how that reinforcement schedule will be faded. Discuss what type of punishment (i.e., corrective feedback) will be provided.

Discuss when and how probes will be administered. Discuss how your probe results will guide moving to the next level of treatment and/or the introduction of a new target behavior. Review what happens if the probe criterion is or is not met.

****Repeat this process for the remaining objectives*

MAINTENANCE PROGRAM

Describe the steps you will take to be sure the target behavior is maintained. Will you be instructing parents or other significant others in the client’s background? Will you be assigning homework? Will you be accompanying the client on extra-clinical outings? How will you promote self-monitoring in the client? When will you be conducting follow-up sessions?

Submitted by: _____
Student Clinician

Approved by: _____
Clinical Educator

I have read and understand this Treatment Plan: _____
(Name of Client or Caregiver)

MAINTENANCE PROGRAM

Describe the steps you will take to be sure the target behavior is maintained. Will you be instructing parents or other significant others in the client's background? Will you be assigning homework? Will you be accompanying the client on extra-clinical outings? How will you promote self-monitoring in the client? When will you be conducting follow-up sessions?

Submitted by: _____
Student Clinician

Approved by: _____
Clinical Educator

I have read and understand this Treatment Plan: _____
(Name of Client or Caregiver)

Appendix 9

WRITTEN TREATMENT OBJECTIVES

You may find information about writing treatment objectives in *A Coursebook on Scientific and Professional Writing in Speech-Language Pathology – 3rd Edition* (Hegde, 2003) and in *Clinical Methods and Practicum in Speech-Language Pathology – 4th Edition* (Hegde & Davis, 2005). Remember that objectives must be measurable and must relate to information noted in your diagnostic report or your re-assessment report.

Following are a few sample objectives:

- (Client's name) will correctly produce // at the conversational speech level in response to the clinician's questions and pictured stimuli with 90% accuracy across two consecutive sessions in the clinic setting.
- (Client's name) will correctly produce / / in the final position of words at the phrase level in response to pictured stimuli and the clinician's verbal prompt (e.g. sentence completion) with 90% accuracy across two consecutive sessions in the clinic setting.
- (Client's name) will correctly identify an item's semantic category out of a field of 5 categories (e.g. food, clothing, tools, animals, and electronics) while speaking in a complete sentence, in response to a black and white stimulus card presented by the clinician with 90% accuracy, over 3 sessions in the clinic setting. (Client's name) will produce less than 20 dysfluencies in a 10 minute interval during the session in response to topics generated by the client and clinician at the conversational level across 3 treatment sessions in the clinic setting

Appendix 10

TREATMENT SUMMARY- first page sample

**CALIFORNIA STATE UNIVERSITY, FRESNO
FRESNO STATE-SCOTTISH RITE SPEECH AND LANGUAGE CLINIC
AND CSDS RESEARCH CLINIC
5310 North Campus Drive M/S PH80
Fresno, CA 93740-8019**

TREATMENT SUMMARY REPORT

**CLIENT:
ADDRESS:
TELEPHONE:
CLINICAL EDUCATOR:
DATE OF REPORT**

**BIRTHDATE:
CLINIC FILE NUMBER:
DIAGNOSIS:
CLINICIAN:**

**CLINIC SCHEDULE:
Period covered: From to
Sessions per week:
Length of sessions:
Number of clinic sessions:
Total clock hours of therapy:**

BACKGROUND INFORMATION

(client's name), a (x)-year, (x)-month-old (male/female), was seen for a speech and language evaluation on (date), at the California State University, Fresno Speech, Language, and Hearing Clinic. (client's name) was accompanied to the clinic by _____, who served as the primary informant. He was referred to the clinic by _____ due to concerns regarding _____. The results of the assessment indicated a _____ characterized by _____. Treatment for _____ was conducted from (date) to (date). This was (client's name, length of time in therapy □ e.g., Sally's third semester participating in speech-language sessions to address articulation of speech sounds and expressive language skills).

OBJECTIVES AND TREATMENT

Long-term goal #1: *Copy from treatment plan*
Objective #1: *Copy from treatment plan*

Procedures: *Summarized from treatment plan. Also, if any modifications to the treatment plan were made during the semester, those modifications should be described here (e.g., were the stimuli changed in any way; did reinforcers need to be changed; did the schedule of reinforcement change, etc.)*

Appendix 11

CALIPSO INSTRUCTIONS

Step 1: Register as a Student User on CALIPSO

- Before registering, have available the PIN provided by your Clinical Coordinator via e-mail.
- Go to <https://www.calipsoclient.com/fresnostate>
- Click on the “Student” registration link located below the login button.
- Complete the requested information, being sure to enter your “school” e-mail address, and record your password in a secure location. Click “Register Account.”
- Please note: **PIN numbers are valid for 40 days.** Contact your Clinical Coordinator for a new PIN if 40 days has lapsed since receiving the registration e-mail.

Step 2: Login to CALIPSO

- To login, go to <https://www.calipsoclient.com/fresnostate> and login to CALIPSO using your school e-mail and **password that you created for yourself during the registration process .**
- **Use of CALIPSO is FREE to students and is paid for by the clinic on behalf of the students. Contact the clinic director if prompted to pay so the issue can be corrected.**

Step 3: Enter Contact Information

- Click on “Student Information”
- Click on “Contact Info” and then “Edit” for each corresponding address.
- Enter your local, permanent, and emergency contact info. Enter “rotation” contact info when on externships. Return to this link to update as necessary.
- Click “Home” located within the blue stripe to return to the home page.

Step 4: View Immunization and Compliance Records

- Before each semester, click on “Student Information” and then “Compliance/Immunizations” to view a record of compliance and immunization records.
- Missing or expired records are highlighted in red.

- To create a document to save and/or print, click “PDF” located within the blue stripe.
- Documentation of immunizations and verifications can be uploaded by clicking “Files” located within the blue stripe and then clicking “Upload file.”
- Click “Home” located within the blue stripe to return to the home page.

Step 5: View Site Information Forms

- The “Site Information Forms” link located on the lobby page displays pertinent information on the sites/facilities that your school affiliates with for clinical placements.
- To view available information, identify the desired site and click “View” located in the fifth column under submitted.
- Please note: “In progress” forms are not accessible to students; only “submitted” forms are accessible to students.

Step 6: View/Upload Clinical Placement Files

- The file management feature allows you to upload any type of file (e.g. Word, PDF, JPEG, audio/video) to share with your clinical supervisor or clinical administrator.
- From the Lobby, click on “Student Information” and then “Clinical Placement” to upload your own file and/or view a file uploaded by your supervisor or clinical administrator.
- **First, select a folder by clicking on the folder name or create a new folder or subfolder.** To create a new folder or subfolder, type in desired folder name in the "Add folder" field and press "create."
- **Upload a file** by pressing the “Browse” button, selecting a file, completing the requested fields, and clicking "upload." The upload fields will display if you have selected an unrestricted folder. **Set the file permission** by choosing “public” for supervisor and clinical administrator access or “private” for clinical administrator access only.
- **Move files** by dragging and dropping from one folder to another.
- **Rename folders** by clicking the "rename" link to the right of the folder name.
- **Delete files** by clicking the “delete” button next to the file name. **Delete folders** by deleting all files from the folder. Once all the files within the folder have been deleted, a “delete” link will appear to the right of the folder name.

Step 7a: Enter Daily Clock Hours

- Click on the “Clockhours” link located on the lobby page or the “Student Information” link then “Clockhours.”

- Click on the “Daily clockhours” link located within the blue stripe.
- Click on the “Add new daily clockhour” link.
- Complete the requested information and click “save.”
- Record clock hours and click “save” located at the bottom of the screen. You will receive a “Clockhour saved” message.

To add clock hours for a ***different*** supervisor, clinical setting, or semester:

- Repeat above steps to enter additional clock hours gained under a different supervisor, clinical setting, or semester.

To add additional clock hours to the ***same*** record:

- Click on the “Daily clockhours” link located within the blue stripe.
 - Select the record you wish to view (posted by supervisor, semester, course, and setting) from the drop-down menu and click “Show.”
 - Click the “Copy” button located next to the date of a previous entry.
 - Record the new clock hours (changing the date if necessary) and click “save” located at the bottom of the screen. You will receive a “Clockhour saved” message.
- To **view/edit** daily clock hours, click on the “Daily clockhours” link located within the blue stripe.
 - Select the record you wish to view (posted by supervisor, semester, course, and setting) from the drop-down menu and click “Show.”
 - Select the desired entry by clicking on the link displaying the entry date located along the top of the chart. Make desired changes and click save.
 - Please note: Supervisors are not notified and are not required to approve daily clock hour submissions.

Step 7b: Submit Clock Hours for Supervisor Approval

- Click on the “Daily clockhours” link located within the blue stripe.
- Select the record you wish to view (posted by supervisor, semester, and course) from the drop-down menu and click “Show.”
- Check the box (located beside the entry date) for all dates you wish to submit for approval then click “Submit selected clockhours for supervisor approval.” Clock hours logged for the dates selected will be consolidated into one record for supervisor approval. The designated supervisor will receive an automatically generated e-mail requesting approval of the clock hour record.
- Please note: Daily entries cannot be edited once approved. However, if you delete the entry from the “Clockhour list” link prior to approval, daily hours may be resubmitted.
-

Step 8: View Clinical Performance Evaluations

- Click on “Student Information” and then “Evaluations.”
- As clinical performance evaluations are completed on you by your supervisors, the evaluations will automatically post to this link.
- View a desired evaluation by clicking on the “current evaluation” link highlighted in blue.

Step 9: View Cumulative Evaluation

- Click on “Student Information” and then “Cumulative evaluation” to view a summary of your clinical competency across the 9 disorder areas.
- Upon graduation, you must demonstrate competency for all clinical competencies listed on the form.
- Please make note of any areas of deficiency which are highlighted in orange.

Step 10: View KASA

- Click on “Student Information” and then “KASA” to view your progress in meeting the academic and clinical requirements for graduation. KASA stands for Knowledge and Skills Acquisition, which is a “roadmap” of academic and clinical standards toward certification requirements.
- Upon graduation, all requirements should have been met, represented with a green check mark.

Step 11: View Performance Summary

- Click on “Student Information” and then “Performance summary” to view a summary of your clinical performance across all clinical courses to date.

Step 12: View My Checklist

- Click on “Student Information” and then “My Checklist” to view your progress in meeting the clinical requirements for graduation.
- Upon graduation, all requirements should have been met, represented with a green check mark.

Step 13: Complete Self-Evaluation

- At the completion of each clinical course or as directed by your Clinical Coordinator, complete a self-evaluation.
- From the lobby page, click on the “Self-evaluations” link.
- Click on “New self-evaluation.”
- Complete required fields designated with an asterisk and press “save.”
- Continue completing self-evaluation by scoring all applicable skills across the Big 9 using the provided scoring method and saving frequently to avoid loss of data.
- Once the evaluation is complete, check the “final submission” box and click “save.”
- Receive message stating “evaluation recorded.”
- Please note: you may edit and save the evaluation as often as you wish until the final submission box is checked. Once the final submission box is checked and the evaluation saved, the status will change from “in progress” to “final”.
- To view the evaluation, click “Evaluations list” located within the blue stripe.

Step 14: Complete Supervisor Feedback Form

- At the completion of each clinical course or as directed by your Clinical Coordinator, complete feedback for each clinical supervisor.
- From the lobby page, click “Supervisor feedback forms.”
- Click “New supervisor feedback.”
- Complete form and click “Submit feedback.”
- Your completed feedback form will be posted for Clinical Coordinator approval. Once approved, feedback will be posted for the clinical supervisor to view. Until approved, the feedback may be edited by clicking on “View/edit.”

Step 15: Complete Evaluation of Off Campus Placement

- At the completion of each clinical course or as directed by your Clinical Coordinator, complete feedback for each off-campus placement.
- From the lobby page, click “Student Evaluation of Off Campus Placement.”
- Click “New off campus placement evaluation.”
- Complete form and click “Save.”

Appendix 12

SUPPLEMENTAL CALIPSO INSTRUCTIONS- For First Semester Students

FIRST SEMESTER GRADS SUPPLEMENTARY INSTRUCTIONS FOR CALIPSO

Welcome 1st semester Grads! In the Communicative Sciences and Deaf Studies Department, we are using a program called CALIPSO to track all clinical hours, competencies and evaluations. Please see the comprehensive CALIPSO instructions for info on how to register for CALIPSO and how to use all the tracking pages. If I have not done so already, I will be sending you a code that will allow you to register. These are supplemental instructions for uploading and **adding medical clearance and undergrad observation hours which needs to be done ASAP so you can start our clinics.** See the full instructions provided to you for CALIPSO and please follow these steps:

1. Register as a student user on CALIPSO using the code I provide you.
2. **Login to CALIPSO. The fee is paid by the clinic and is FREE of charge for students.**
3. Enter your contact info
4. Go to the “Compliance/Immunization” page and enter the dates for your vaccinations, especially the following as they are required:
 - a. TB (must be within a year old and must be maintained)
 - b. HEP B
 - c. MMR
 - d. Dtap
 - e. COVID Vaccine
5. Go to the “CLOCKOURS” page then:
 - a. “Daily Clockhours”
 - b. “add new daily clockhour”
 - c. Choose the following in the yellow drop down boxes
 - i. Supervisor- Undergraduate supervisor
 - ii. Site- Undergraduate University
 - iii. Semester- UG semester
 - iv. Clinical Setting- wherever you did the 25 hours
 - v. Completion month-whatever month you finished the last hour
 - vi. Date- Today’s date
 - vii. Course Number- undergraduate observation and clock hours
 - viii. Training Level- undergraduate
 - d. Click “SAVE”
 - e. Enter the 25 hours under the appropriate treatment/evaluation on the top of the log labeled OBSERVATION
 - f. Click “SAVE”
 - g. Go to “Daily Clockhours” and click the tiny box next to the date and “submit hours for supervisor approval”
6. Go back to the “Compliance/Immunization” page, click “files” and scan/upload the following:
 - a. All vaccinations (enter the dates in CALIPSO AND upload the documents).
 - b. 25 undergrad observation hour log
 - c. REMEMBER to click “Private” and not “global”
7. To view “global” documents for the following information on CALIPSO, go to the “Clinical Placement” Page:
 - a. CALIPSO STUDENT INSTRUCTIONS
 - b. GRADUATE HANDBOOK

- c. STUDENT CLINICIAN MANUAL
- d. END OF SEMESTER DOCUMENTS
- e. SAMPLE CLINIC REPORTS

YOUR DAILY CLOCK HOURS

Once you start your clinic, remember to add your daily clock hours within 24 hours of EACH session. Follow these steps to ensure correct clockhours:

1. After you log in to CALIPSO, to Clockhours Page
2. Click “Daily Clockhours” at the top in blue
3. Click “Add new daily clockhour
4. Complete all yellow drop down items
 - a. Supervisor- this is your current supervisor in the clinic section you are enrolled in
 - b. Site- Fresno State On-Campus Clinics
 - c. Semester- current semester
 - d. Clinical Setting- university clinic
 - e. Completion month-**Always choose the month that clinic for the current semester will end!!!! Fall semester will be December, Spring will be May, and summer will be July!**
 - f. Year- current year
 - g. Date of the actual day you had clinic
 - h. Course number- **C1 CLINIC- 1st experience**. Next semester will be 2nd experience and so forth
 - i. NOTE: the Parkinson’s Clinic, Aphasia Clinic and so forth ARE ONLY FOR THE 1 unit supplemental clinics that meet once weekly. NOT THE REGULAR twice weekly section. Ask me if you aren’t sure!
 - i. Training level- Graduate
5. Click “SAVE”
6. Add your hours for that day paying close attention to adult/child/eval/treatment areas.
7. AFTER YOU DO THIS ONCE, you can use the copy feature on the daily clockhours page to copy all the basic info to reduce error for the next clinical session. You just need to click “COPY” on the previous day and a new day pops up. Change the date and add the hours for that day... easy peasy
8. Ask your supervisor when to submit hours. Some say weekly and some say semesterly, whenever they want them, do them.

Appendix 13

CHECK-OUT CHECK-LIST FOR CSDS 230

Before you check-out, review the ClinicNote file of every client seen during the semester for the following items:

- _____ All pertinent information (e.g., phone calls to other professionals, etc.) is noted on the Client Contact Notes.
- _____ Correct phone number, address, etc., is noted on file.
- _____ All reports are electronically signed and are in the proper file.
- _____ SOAP notes are completed for ***EACH*** session.
- _____ All goals have been marked met/not met and archived in ClinicNote
- _____ Your Final Student Performance Evaluation is finalized by your clinical educator in CALIPSO.
- _____ Your Daily Clockhours are submitted and approved by your clinical educator CALIPSO
- _____ Completed Clinical Educator/Supervisor Evaluation on CALIPSO and University mandated evaluation tool.
- _____ Complete the Client Progress and Recommendation Forms on QUALTRICS.

CHECK-OUT CHECK-LIST FOR CSDS 257/267

The following items must be completed or you will receive a grade of “incomplete” and will not receive credit for your clinical practicum hours:

_____ Your Final Student Performance Evaluation is finalized by your clinical educator on CALIPSO.

_____ Your Daily Clockhours are submitted and approved by your clinical educator on CALIPSO

_____ Completed Supervisor/clinical educator Evaluation on CALIPSO.

APPENDIX 14

Student Performance Evaluation- page one



Fresno State University
CALIPSO
 Performance Evaluation
 Printed for
 Admin, CALIPSO

Performance Evaluation

Evaluation has been finalized and cannot be edited. (Except by an admin.)

Supervisor:

*Student:

*Site:

*Evaluation Type:

*Semester:

*Course number:

*Patient population:

- Young Child (0-5)
- Child (6-17)
- Adult (18-64)
- Older adult (65+)

Severity of Disorders (check all that apply):

- Within Normal Limits
- Mild
- Moderate
- Severe

Interprofessional (or collaborative) practice (IPP) includes (check all that apply): [\[?\]](#)

- Audiologist
- Dentist
- Dietitian
- Family Member
- Nurse/Nurse Practitioner
- Occupational Therapist
- Pharmacist
- Physical Therapist
- Physician
- Physician Assistant
- Psychologist/School Psychologist
- Recreational Therapist
- Respiratory Therapist
- Social Worker
- Special Educator
- Teacher (classroom, ESL, resource, etc.)
- Vocational Rehabilitation Counselor
- Other

Client(s)/Patient(s) Multicultural Aspects (check all that apply): [\[?\]](#)

- Ethnicity
- Race
- Culture
- National origin
- Socioeconomic status
- Gender identity
- Sexual orientation
- Religion
- Exceptionality
- Other

Client(s)/Patient(s) Linguistic Diversity (check all that apply): [\[?\]](#)

- English
- English Language Learner
- Primary English dialect
- Secondary English dialect
- Bilingual
- Polyglot
- Gender identity
- Sign Language (ASL or SEE)
- Cognitive / Physical Ability
- Other

Save

PERFORMANCE RATING SCALE
[Click to see Rating Scale](#)

Please refer to the Performance Rating Scale for grading criteria. Use a score between 1 and 5, in 0.25 increments (1.25, 1.5 etc.)

- 1 - Early Emerging 4 - Developing Mastery
- 2 - Emerging 5 - Independent
- 3 - Present

APPENDIX 15

Assessment List

Current list located in the Media Center and in the CSDS 230 GOOGLE DRIVE	Fresno State-Scottish Rite Speech and Language Clinic & CSDS Research Clinic			Updated
SAMPLE- updated list is found in the Media Center and GOOGLE DRIVE	Clinic Assessment Inventory			
Assesment Name	Abbreviation	Copies on-hand	Cabinet Number	Comments
<u>Aphasia and Related Neurogenic Language Scales</u>				
Access Cued Word Recall	ACCESS	1	5	
Assessment of Communication Skills for Adults	ACDA	1	5	Textbook
Boston Assessment of Severe Aphasia	BASA	1	5	
Boston Diagnostic Aphasia Examination - 3rd ed.	BDAE-3	3	5	
Boston Naming Test	BNT	1	5	
Cognitive/Linguistic Quick Test	CLQT	1	5	
Cognitive/Linguistic Quick Test + (language)	CLQT +	1	5	
Communicative Abilities of Daily Living	CADL	1	5	
Examining for Aphasia - 3rd ed.	EFA-3	1	5	
Porch Index Comm. Ability	PICA	1	5	
Test of Adolescent/Adult Word Finding	TAWF	2	5	
Western Aphasia Battery	WAB	2	5	
<u>Motor Speech</u>				
Apraxia Battery for Adults	ABA	1	5	
Assessment of Intelligibility of Dysarthric Speech	AIDS	2	5	
Dworkin-Culatta Oral Mechanism Examination	DWORKIN	1	6	
Kaufman Speech Praxis Test	KSPT	2	5	All things Kaufman on bottom shelf
Oral Speech Mechanism Screening Exam	OSMSE-3	1	6	
Screening Test for Developmental Apraxia of Speech	STDAS	3	6	
Verbal Motor Production Assessment for Children (3-12 years)	VMPAC	1	6	
<u>Articulation/Phonology</u>				

Arizona Articulation and Phonology Scale-4	AAPS-4	3	6	
Bankson-Berthal Test of Phonology	BBTOP	1	6	
Clinical Assessment of Articulation and Phonology 2nd ed.	CAAP-2	1	6	
Comprehensive Test for Phonological Processing	CTOPP	1	6	
Contextual Test of Articulation	CTA	2	6	
Diagnostic Evaluation of Articulation and Phonology	DEAP	1	6	
Entire Word of R	EWO-/r/	1	6	
Fisher-Logemann Test of Articulation Competence	Fisher-Logemann	4	6	
Goldman-Fristoe Test of Articulation - 3rd ed.	GFTA-3	6	6	
Hear Builder- Phonological Awareness Test	HBPAT	1	6	
Hodson Assessment of Phonological Processes -3rd ed. (ages 3-0 to 8-0)	HAPP-3	2	6	
Khan-Lewis Phonological Analysis - 3rd ed.	KLPA-3	3	6	
Lingui-Systems Articulation Test	LAT	4	6	
Lingui-Systems Articulation Test- Normative Update	LAT- NU	1	6	
Phonological Awareness Test - 2nd ed.	PAT-2	2	6	
Photo Articulation Test - 3rd ed.	PAT-3	2	6	
Secord Contextual Articulation Test (Contextual Probes S-CAT Storytelling Probes)	S-CAT	2	6	
Structured Photo Articulation Test III- Dudsberry	SPAT-D-III	3	6	
Test of Artic in Context	TAC	1	6	
Test of Phonological Awareness	TOPA	1	6	
<u>Auditory Discrimination/Perception</u>				
Auditory Skills Assessment	ASA	1	6	
Lindamood Auditory Conceptualization Test - Revised Edition	LAC-3	1	6	
The LiPS Program	LiPS	2	6	
<u>Auditory Processing</u>				
Attention Processing Training Test	APT	1	5	
Auditory Processing Abilities Test	APAT	1	7	

STUDENT CLINICIAN MANUAL

Differential Screening Test for Processing	DSTP	1	7	
Oral Passage Understanding Scale	OPUS	1	8	Companion to CASL-2
Revised Token Test	RTT	1	7	
Test for Auditory Comprehension of Language - 4th ed.	TACL-4	2	7	
Test for Auditory Processing Disorder for Adolescents and Adults	SCAN-3:A	1	7	
Test for Auditory Processing Disorder for Adolescents and Adults	SCAN-3:C	1	7	
Test of Auditory Perceptual Skills	TAPS-R	1	7	
Test of Auditory Processing Skills - 3rd ed. (ages 4-0 to 18-11)	TAPS-3	4	7	
The Listening Comprehension Test - 2nd ed.	LCT-2	1	7	
The Listening Comprehension Test - Adolescent	LCT-A	1	7	
Token Test for Children (ages 3-0 to 12-5)	TTFC	3	7	
Autism and Pragmatics				
Childhood Autism Rating Scale - 2nd ed.	CARS-2	1	Manual in Protocol Cabinet	
Clinical Assessment of Pragmatics	CAPs	1	Manual in Protocol Cabinet	
Pragmatic Language Skills Inventory	PLSI	1	7	
Social Emotional Evaluation	SEE	1	7	
Social Language Development Test - Adolescent	SLDT-A	2	7	
Social Language Development Test - Elementary	SLDT-E	2	7	
Test of Pragmatic Language - 2nd ed.	TOPL-2	3	7	
Verbal Behavior Milestones Assessment and Placement Program	VB-MAPP	1	7	
Language				
Assessing Sematic Skills through Everyday Themes	ASSET	1	7	Bottom Shelf
Assessment of Communicative Disorders in Children	ACDC	1	7	Textbook
Birth to Three Assessment and Intervention	BTAIS	1	7	Bottom Shelf
Boehm Test of Basic Concepts - 3rd ed.	BOEHM-3	2	7	Bottom Shelf

Bracken Basic Concept Scale - 3rd ed. (Expressive)	BBCS-3:E	1	7	Bottom Shelf
Bracken Basic Concept Scale - 3rd ed. (Receptive)	BBCS-3:R	1	7	Bottom Shelf
Clinical Evaluation of Language Fundamentals - 5th ed.	CELF-5	4	8	
Clinical Evaluation of Language Fundamentals - Preschool 2nd ed.	CELF-P:2	1	8	Phasing out
Clinical Evaluation of Language Fundamentals - Preschool 3rd ed.	CELF-P:3 Screener	1	8	In CELF-P:3 Bag
Clinical Evaluation of Language Fundamentals - Preschool 3rd ed.	CELF-P:3	2	8	1 SCREENER IN BAG
Comprehensive Assessment of Spoken Language- 2nd ed.	CASL-2	1	8	OPUS Companion Available
Comprehensive Receptive and Expressive Vocabulary Test - 2nd ed.	CREVT	1	8	
Detroit Test of Learning Aptitude - 4th ed.	DTLA -4 / DTLA-P	1	8	
Expressive Language Test - 2nd ed.	ELT-2	2	8	
Expressive One-Word Picture Vocabulary Test - 4th ed.	EOWPVT-4	4	8	
Expressive Vocabulary Test - 3rd ed.	EVT-3	2 Form A 2 Form B	8	
FirstSTEp™: Screening Test for Evaluating Preschoolers	FirstSTEP	1	8	
Fluharty Preschool Speech and Language Screening Test - 2nd ed.	FLUHARTY-2	1	8	
Hawaii Early Learning Profile - Revised	HELP	2	8	
Hear Builder Story Retell Test	H-SRT	1	8	
Kaufman Speech to Language Protocol	K-SLP	1	5	ALL KAUFMAN TX and AX on bottom shelf
Language Processing Test -3rd ed.	LPT-3	1	8	Missing Stimulus Book
Oral and Written Language Scales - 2nd ed.	OWLS II	1	8	
Oral Passage Understanding Scale	OPUS	1	8	Accompanies the CASL-2
Peabody Picture Vocabulary Test - 5th ed.	PPVT-5 - Form A and B	1 each A & B	8	
Preschool Language Assessment Instrument - 2nd ed.	PLAI-2	1	8	
Preschool Language Scale - 5th ed.	PLS-5	3	8	
Receptive Expressive Emergent Language Test - 3rd ed.	REEL-3	1	8	

Receptive One-Word Picture Vocabulary Test - 4th ed.	ROWPVT-4	4	8	
Receptive, Expressive & Social Communication Assessment	RESCA-E	4	8	
Rice Wexler Test of Early Grammatical Impairment	RICE-WEXLER	1	8	
Rossetti Infant Toddler Language Scale	ROSSETTI	7	8	
Structured Photographic Expressive Language Test - 3rd ed.	SPELT-3	1	8	
Structured Photographic Expressive Language Test - Preschool	SPELT-P	1	8	
Test for Examining Expressive Morphology	TEEM	8	8	
Test of Adolescent and Adult Language - 4th ed.	TOAL	2	8	
Test of Aided Communication Symbol Performance	TASP	1	9	
Test of Early Communication and Emerging Language	TECEL	1	8	
Test of Early Language Development- 4th ed.	TELD-4	1	8	
Test of Early Language Development- 3rd ed.	TELD-3	1	8	Phasing Out
Test of Expressive Vocabulary and Semantics	Word Test 2- Adolescent	1	8	
Test of Expressive Vocabulary and Semantics	Word test 2- Elementary	1	8	
Test of Language Competence	TLC	1	8	
Test of Language Development - I:4	TOLD-I:4	3	8	
Test of Language Development - P:4	TOLD-P:4	4	9	
Test of Problem Solving - 3rd ed. Elementary	TOPS-3: Elementary	1	9	Tx kit x 2
Test of Problem Solving- 3rd ed. Adolescent	TOPS-2: Adolescent	1	9	
Test of Semantic Skills - Intermediate	TOSS-I	1	9	
Test of Semantic Skills - Primary	TOSS-P	2	9	
Test of Word Finding-3	TWF-3	1	9	
The MacArthur Communicative Development Inventory: (CDI Words and Gestures)- 2nd Ed	CDI Word/Gesture		In Protocol 1 Cabinet	
The MacArthur Communicative Development Inventory: (CDI Words and Sentences)- 2nd Ed	CDI Word/Sent		In Protocol 1 Cabinet	
Wiig Assessment of Basic Concepts	WABC	1	9	
Woodcock Language Proficiency Battery - Revised	WLPB-R	1	9	

Bilingual				
Bilingual English-Spanish Assessment	BESA	1	7	
Clinical Evaluation of Language Fundamentals Spanish Test - Preschool 2nd ed.	CELF-P2: Spanish	2	7	
Contextual Probes of Articulation Competence - Spanish	CPAC-S	1	7	
Diagnostic Evaluation of Language Variation-Criterion and Norm Referenced Test	DELV	1	7	
Expressive One-Word Picture Vocabulary Test - Bilingual	EOWPVT: Spanish	2	7	
Goldman Fristoe Test of Articulation-3 Spanish	GFTA-3 Spanish	1	7	
Preschool Language Scale-5 Spanish	PLS-5 Spanish	1	7	
Prueba de Desarrollo Inicial del Lenguaje	PDIL	2	7	
Receptive One Word Picture Vocabulary Test - Bilingual	ROWPVT: Spanish	2	7	
Spanish Articulation Measures - 2nd ed	SAM-2	1	7	
Spanish Language Assessment Procedures	SLAP	1	7	
Test de Vocabulario en Imagenes Peabody	TVIP	1	7	
Test of Early Language Development 3 - Spanish	TELD 3: Spanish	2	7	
Cognitive-Linguistic Impairment				
Arizona Battery for Communication Disorders of Dementia	ABCD	1	5	
Brief Test of Head Injury - Normed Edition	BTHI	1	5	
Burns Complex Neuropathology Inventory	Set 1-3	1	5	
Cognitive Linguistic Quick Test +	CLQT+	1	5	
Cognitive Linguistic Quick Test	CLQT	1	5	
Functional Communication Profile	FCP	1	Protocol Cabinet	
Mini Inventory of Right Brain Injury	MIRBI	1	5	
Ross Information Processing Assessment - 2nd ed.	RIPA-2	1	5	
Ross Information Processing Assessment-Geriatric	RIPA G	1	5	
Scales of Cognitive Ability for Traumatic Brain Injury, Normed Edition	SCATBI	4	5	

Scales of Cognitive and Communication Ability	SCCAN	1	5	
Test of Everyday Attention	TEA	1	5	
Western Neuro Sensory Stimulation Profile	WESTERN NEURO	1	5	
<u>Behavioral, Developmental and Other</u>				
Brigance Inventory of Essential Skills	BRIGANCE-SKILLS	1	3	
BRIGANCE™ Diagnostic Inventory of Early Development Including Developmental Record Book	BRIGANCE-Dx Inventory	1	3	
Comprehensive Test of Nonverbal Intelligence - 2nd ed.	CTONI	1	3	
Denver Developmental Screening Test	DENVER	2	3	
Illinois Test of Psychological Language Ability-3	ITPA-3	1	3	
Kaufman Brief Intelligence Test- 2nd ed.	KBTI-2	1	3	
Test of Memory and Learning	TMAL	1	3	
<u>Reading/Literacy, Math</u>				
Brigance Diagnostic Comprehensive Inventory of Basic Skills - Revised	CIBS-R	1	3	
KeyMath Revised - A Diagnostic of Essential Mathematics	KEYMATH	1	3	
Phonological and Print Awareness Scale AND Treatment Activities	PPA-Scale	1	3	
Test of Early Mathematical Abilities - 3rd ed.	TEMA-3	1	3	
Test of Early Reading Ability - 3rd ed.	TERA-3	1	3	
Test of Early Written Language- 2nd ed.	TEWL-2	1	3	
<u>Voice</u>				
Systematic Assessment of Voice, Methods, and Procedures for Evaluating Voice Disorders	Tanner S-AVMPEVD	1	5	
<u>Fluency</u>				
Behavioral Assessment Battery for School-Age Children who Stutter	BAB	1	5	
Fluency Development for Young Children	FDYFC	1	5	
Focus on Fluency	FOF	1	5	
Kiddycat Communication Attitude Test for Preschool and Kindergarten Children Who Stutter	Kiddycat	1	5	

Personalized Fluency Control Therapy	PFCT	1	5	
School Age Stuttering TX Practical Guide	SASTPG	3	5	
Stuttering Severity Instrument - 4th ed.	SSI-4	2	5	
Systematic Fluency Training for Young Children	SFTFYC	1	5	
Test of Childhood Stuttering	TOCS	1	5	
<u>Accent Reduction</u>				
Compton Phono. Assessment of Foreign Accent	COMPTON-ACCENT	2	7	
Accent Modification Program	AMP	1	7	
Sound Like Business	SLB	1	7	

APPENDIX 16

ClinicNote Guidance

ClinicNote Guidance

- **BEFORE CLINIC STARTS-PREP TIME (1-2 weeks prior to the clients arriving)**
 - Getting Started (14 min)- ClinicNote Training Module
 - Using the Dashboard (12 min)- ClinicNote Training Module
 - Clients are connected to -clinical educators and students.
 - Students view all previous reports/notes/case histories to ensure all information about the client is familiar.
 - Prepare client/parent interview.
 - Prepare an assessment plan to present to the clinical educator.
 - Meet with the clinical educator to present treatment plan (template in DRIVE).
 - Once the plan is approved, call the client/parent using the GOOGLE VOICE App
<https://voice.google.com/u/0/about>:
 - Interview parent if appropriate.
 - Confirm time/location of clinic session.
 - Answer any questions.
 - Notify Pakou if the client informs you they are not coming or missing many sessions.
 - Record client contact in CONTACT NOTE in ClinicNote.
- **FIRST DAY OF CLINIC**
 - Documentation Overview (13 min)-ClinicNote Module
 - Reports (12 Minutes)- ClinicNote Module
 - Conduct interview and assessment as planned.
 - Go to **GENERATE REPORT and open INITIAL NOTE.**
 - This will allow you to do a SOAP note without having GOALS since they haven't been determined yet.
 - Submit the INITIAL NOTE to your supervisor.
- **ASSESSMENT REPORT/TREATMENT PLAN**
 - Goal Manager (9 min)-ClinicNote Module
 - Notes (13 min)-ClinicNote Module
 - Go to **GENERATE REPORT** and use the pull-down menu to choose **ASSESSMENT AND TREATMENT PLAN REPORT.**
 - Create a report and SUBMIT back and forth with your supervisor until approved and finalized with an Esignature.
 - **Enter GOALS in the GOAL MANAGER.**
 - Print a copy of the report and present the report to the client/parent. The client/parent can take the report home.
- **DAILY**
 - **Complete an INITIAL NOTE for your SOAP notes until you have entered approved GOALS.**
 - **Once GOALS have been established and entered in MANAGE CLIENT GOALS, start your daily SOAP notes under NEW NOTE green tab at the top of your DASHBOARD. The goals you entered in the GOAL MANAGER will auto populate in your NEW NOTE/SOAP NOTE.**
- **END OF SEMESTER**
 - Progress Reports (4 min)-ClinicNote Module
 - **GENERATE REPORT**
 - Enter dates for the semester START and END in the top.
 - **Choose TREATMENT SUMMARY REPORT** in the drop down menu and GENERATE.

- Complete the SUMMARY report.
- Obtain approval from your supervisor and Esign the document.
- Print a copy of the report and send the copy home with the client/parent on the last day after you have reviewed the report with them.
- **REMEMBER:**
 - Chart in **CONTACT NOTES in green tab at top every time you communicate with the client/parent via phone or email whether it be for absences, concerns, or COVID. This is to keep lines of communication open.**
 - Once GOALS have been established and entered under MANAGE CLIENT GOALS, you will start a daily SOAP note under NEW NOTE, the green tab at the top.
 - Look in the Clinical Forms, templates, and Policies DRIVE FILE for information.

POLICIES AND PROCEDURES MANUAL

Fresno State University

Fresno State-Scottish Rite Speech and Language Clinic and Deaf Studies (CSDS) Research Clinics

INTRODUCTION

GOALS

The goals of our clinics are:

- To provide high quality services for children and adults with disorders of speech, language, or hearing.
- To provide training, education, and research opportunities for students in the Department of Communicative Sciences and Deaf Studies.
- To serve as a community resource and advocate for individuals of all ages with communicative disorders.

ETHICAL STANDARDS

All individuals providing services in the Fresno State-Scottish Rite Speech and Language clinic, the (CSDS) Research Clinics, or at affiliated off-campus clinical sites are expected to abide by the highest ethical standards. All student clinicians and clinical educators are expected to adhere to the American Speech-Language-Hearing Association's (ASHA) Code of Ethics. A copy of the current Code of Ethics may be obtained from the clinic office or located in the end of this manual.

EQUITABLE TREATMENT POLICY

The Fresno State Speech-Language-Hearing & Communicative Sciences and Deaf Studies (CSDS) Research Clinics, including the faculty, staff, and student clinicians, adheres to a policy of nondiscrimination. The Clinic does not discriminate against clients, student clinicians, or staff on the basis of race, religion, national origin, gender, age, sexual orientation, marital status, or disability.

CSDS 257/267 Policies and procedures

This Department Policy and Procedure is regarding the placement of Communicative Sciences and Deaf Studies (CSDS) graduate student clinicians in their off campus CSDS 257 (Student Teaching) and CSDS 267 (Externship) clinical placements.

Departmental Policy

It is anticipated that the student clinicians will begin their off-campus placement during their 4th and 5th semester as graduate students in the CSDS program. This will be anticipated and confirmed by the clinic director based on the Graduate Student Practicum Master List.

The CSDS student clinicians will be placed with a Speech-Language Pathologist (state licensed and with CCC's) in a school district for CSDS 257. The student clinicians will be required to register for a semester placement AND earn a suggested 100-120 hours in the school setting during the semester. The student will attend the placement for five (5) days a week until the last day of instruction unless given permission by the clinic director otherwise.

The CSDS student clinicians will be placed with a Speech-Language Pathologist (state licensed and with CCC's) in an acute care facility, skilled nursing facility, private practice, inpatient rehabilitation, outpatient rehabilitation facility, early intervention or county program for CSDS 267. The student clinicians will register for a full semester placement. No minimum hour requirement for CSDS 267 needs to be met. The student will attend the placement for five (5) days a week until the last day of instruction unless given permission by the clinic director otherwise.

The student clinicians are required to inform the clinic director if he/she is employed by the school district, private practice or medical facility in ANY capacity. In this case, the student's supervisory requirements must be closely monitored supervision/required clinical experience does not decrease or change in the event of employment. The student may only earn hours in accordance with the requirements outlined in Standard V in ASHA's 2020 standards <https://www.asha.org/certification/2020-slp-certification-standards/>. This requirement will be clearly stated to the district, manager, clinical educator, and graduate student clinicians and will be closely monitored by the clinic director.

Departmental Procedures

Clinical Placements

The following steps will be followed to place the graduate student clinicians in CSDS 257/267:

1. The clinic director will anticipate the student clinicians that are scheduled to take CSDS 257 or 267 based on the Graduate Student Practicum Master List.
2. A survey will be sent to all student clinicians via Qualtrics to determine specific placement/clinical educator preferences and employment status that may conflict with their placement during the semester prior to the anticipated off-campus placement.
 - a. The Clinic Director will make every attempt to honor the student clinicians request but NO placement is guaranteed. Judgment based on space/supervisors available, student clinician strengths, available contracts etc. Placements are ultimately made at the discretions of the clinic director.
3. The clinic director will reach out to the various placements available and requested by the student clinicians to secure placements.
4. The clinic director will confirm that affiliation agreements/MOUs are valid for all planned placements and initiate the process for renewal, if necessary.

5. Once a clinical educator has been located, the clinic director will share all contact information with the clinical educator and the graduate student clinician. At this time, an informational sheet regarding start/end dates, basic requirements as well as grading criteria will be shared with both parties via email.
6. Vaccination information will be completed by the clinic director and the consortium process will be initiated for students entering CSDS 267. Students entering CSDS 257 will be provided with the credentialing packet for completion prior to the start of their placement. Also, the CSDS students will be informed of any district orientation or medical clearance requirements that may be needed.
7. Prior to the start of the semester, the student clinicians will attend a mandatory meeting with the instructor of record to discuss all requirements for the placement, behavior expectations, standards and grading. A packet with all forms, instructions as well as the Student Practicum Evaluation Forms will be emailed. A pre clinic meeting will also be held with all on and off-campus clinical educators.
8. Following the start of the semester, the instructor of record will schedule site visits with some of the students/clinical educators. More than one visit may be required and will be assessed on a case-by-case basis. If scheduling/time constraints and/or distance inhibits direct site visits, telephone, email and/or ZOOM visits may be conducted.
9. Following the conclusion of the semester, the graduate student clinician will submit all clockhours to their clinical educator for approval, and complete the supervisor evaluation on CALIPSO. The clinical educator will approve hours and submit the Student Performance Evaluation on CALIPSO by the designated date.

Grading

The clinical educator will complete a three-week evaluation (at the clinical educator's discretion), a midterm evaluation and a final evaluation on the Performance Evaluation on CALIPSO during the semester. The student/clinical educator must have the Performance Evaluation and the Hours approved on CALIPSO by the last day of instruction.

The graduate student clinician and/or the clinical educator must inform the instructor of record of any issues/deficiencies related to the graduate student clinician's performance. If the student clinician is in danger of failing or does not appear to have the skills required to pass the CSDS 257/CSDS 267 course as indicated on the Performance Evaluation, a Clinical Remediation Plan (CRP) plan will be initiated. The instructor of record will outline a basic plan for the clinical educator to complete. The clinical educator, graduate student clinician and the instructor of record will meet to discuss and initiate the plan. All will sign the form and it will be placed in the graduate student clinician's file. See below for parameters:

Student clinicians receive a grade of credit or no-credit as a result of their performance in their practicum assignment(s). The clinical educator and university supervisor/instructor of record jointly confer with the student clinician as needed. A mid-term and final evaluation are completed and presented to the student clinician by the on-site clinical educator. Requirements include:

- CSDS 257- Student Teaching or CSDS 267 Externship:
 - MUST earn a 4.0 average out of 5.0 by final
 - MUST earn a 3.0 or HIGHER on every item assessed by final
 - May not receive a "FAIL" in any of the Professional Practice, Interaction, and Personal Qualities section of the assessment

Overall Grading Policy for CSDS 230, 257, & 267

Student clinicians receive a grade of credit or no-credit as a result of their performance on their FINAL Student Practicum Evaluation. The clinical educator and university supervisor/instructor of record jointly confer with the student clinician as needed. A mid-term and final evaluation are completed and presented to the student clinician by the on-site clinical educator. Requirements include:

- 1st semester grads; CSDS CLINIC C1-First Experience:
 - MUST earn a 3.0 average out of 5.0 by final
 - MUST earn a 2.0 or HIGHER on every item assessed by final
 - May not receive a “FAIL” in any of the Professional Practice, Interaction, and Personal Qualities section of the assessment
- 2nd -3rd semester grads; CSDS CLINIC C2-Second and CSDS CLINIC C3-Third Experiences:
 - MUST earn a 3.5 average out of 5.0 by final
 - MUST earn a 3.0 or HIGHER on every item assessed by final
 - May not receive a “FAIL” in any of the Professional Practice, Interaction, and Personal Qualities section of the assessment
- CSDS 257- Student Teaching or CSDS 267 Externship:
 - MUST earn a 4.0 average out of 5.0 by final
 - MUST earn a 3.0 or HIGHER on every item assessed by final
 - May not receive a “FAIL” in any of the Professional Practice, Interaction, and Personal Qualities section of the assessment

When students are not successfully completing all practicum requirements, the steps listed below in the Clinical Remediation Plan (CRP) will be followed and completed within a three (3) week period:

Clinical Remediation Plan (CRP) INSTRUCTIONS

FRESNO STATE-SCOTTISH RITE SPEECH AND LANGUAGE CLINIC

AND RESEARCH CLINICS

Department of Communicative Sciences and Deaf Studies

CLINICAL REMEDIATION PLAN (CRP) POLICY & PROCEDURE

I. Purpose of the Clinical Remediation Plan (CRP)

The purpose of a **Clinical Remediation Plan (CRP)** is to identify clinical concerns beyond the typical development of skills, offer concrete feedback and recommendations, and set clearly defined goals for student success.

II. Concern beyond typical development of clinical skills arises

1. Email the student and instructor of record (**CC the clinic director**) with the following information:
 - a. Indicate the exact clinical concern and the situation that brought the issue to light.
 - b. Offer specific feedback and suggestions for improvement.

III. Concern persists despite informal written feedback

1. Contact the instructor of record to develop and initiate a **Clinical Remediation Plan (CRP)**
 - a. The clinical educator completes the Performance Evaluation Form-midterm on CALIPSO detailing the specific areas of concern.
 - b. The instructor of record creates the actual **CRP** and sends it back to the clinical educator for the development and addition of goals specific to the areas of concern.
 - c. The instructor of record will observe a clinical session.
 - d. A meeting is scheduled between the student, clinical educator and instructor of record.
 - (a) Discuss each area of concern and present goals that must be achieved to earn a CREDIT for the clinic as outlined on the **CRP**.
 - (b) Offer concrete strategy and recommendations for improvement.

- (c) Determine a follow-up date that all goals must be met in order for the **CRP** to be discontinued.
 - e. Require weekly email updates to the instructor of record on progress from the clinical educator and student.
2. If the student meets all goals by the determined date, the **CRP** is formally discontinued.

IV. Concern persists beyond the formal Clinical Remediation Plan (CRP) follow - up date

1. Contact the clinic director and revise and update the **Clinical Remediation Plan (CRP)**.
- a. The clinical educator adds updated details of the persistent areas of concern on the **CRP**.
 - b. A meeting is scheduled between the student, clinical educator and instructor of record
 - (a) Present the updated **CRP** and offer concrete strategy, recommendations and expectations in order to earn a CREDIT for the clinic.
 - (b) Determine a follow-up date that all goals must be met for the **CRP** to be discontinued and for the student to earn a CREDIT for the clinic.
2. If the student meets all goals by the determined date, the **CRP** is formally discontinued.

V. Goals are ultimately not met by the formal Clinical Remediation Plan (CRP) update

1. The clinical educator completes the Performance Evaluation Form-final on CALIPSO reflecting all performance and highlighting the reason for the student earning NO CREDIT.
- a. The student does NOT earn a CREDIT for the clinical experience and will be rescheduled for the next semester.

CLINICAL REMEDIATION PLAN (CRP) SUMMARY

, 2024

Student:

On-Site clinical educator:

Site:

(Student and on-site clinical educator present for conference)

The purpose of this conference was to discuss the student's progress in his/her clinical practicum during the [REDACTED] semester, and to clarify the required clinical practicum performance necessary to receive credit at the end of the semester.

At this time, the student has not demonstrated the necessary level of skills to receive a grade of Credit (CR) for the current clinical practicum as outlined in the course syllabus. The following areas of difficulty must improve in order to receive a grade of Credit (CR) by the end of the semester.

PERFORMANCE RATING SCALE

- 1 **Early Emerging:** Specific direction from clinical educator does not alter unsatisfactory performance.
- 2 **Emerging:** The clinical skill/behavior is beginning to emerge. Efforts to modify may result in varying degrees of success. Maximum amount of direction from clinical educator needed to perform effectively.
- 3 **Present:** Inconsistently demonstrates clinical behavior/skill. Exhibits awareness of the need to monitor and adjust and make changes. Modifications are generally effective. Moderate amount of direction from the clinical educator needed to perform effectively.
- 4 **Developing Mastery:** Displays minor technical problems which do not hinder the therapeutic process. Minimum amount of direction from the clinical educator needed to perform effectively.
- 5 **Independent:** Adequately and effectively implements the clinical skill/behavior. Demonstrates independent and creative problem solving.

Specific areas of difficulty in clinic have included the following:

EVALUATION SKILLS

- - CURRENTLY (1)
 - **GOAL: by midterm...**

TREATMENT SKILLS

- - Currently a
 - **GOAL: By midterm...**

PROFESSIONAL PRACTICE, INTERACTION, AND PERSONAL QUALITIES

- - Currently a
 - **GOAL: By midterm...**

I have read and understand the above summary.

, B.A., Student	Date

Clinical Educator	Date

Instructor of record	Date

Sabrina Nii, M.S., CCC-SLP Clinic Director	Date

CLINICAL INCIDENT REPORT INSTRUCTIONS

If a specific and concerning incident occurs within the clinic with a student not related directly to clinical skills but rather ethical or other, a formal Clinical Incident Report (CIR) will be initiated. See below for the steps of the CIR followed by the form used.

<p>FRESNO STATE-SCOTTISH RITE SPEECH AND LANGUAGE CLINIC AND THE CSDS RESEARCH CLINICS Department of Communicative Sciences and Deaf Studies</p>	
<h3>CLINICAL INCIDENT REPORT POLICY & PROCEDURE</h3>	
<p>II. Purpose of the Clinical Incident Report (CIR)</p>	<p>The purpose of a Clinical Incident Report (CIR) is to thoroughly document a specific clinical incident or concern, identify the standards impacted, offer concrete feedback, and set a clearly defined intervention.</p>
<p>II. A specific clinical incident or concern arises</p>	<p>1. Email the student and instructor of record (CC the clinic director) with the following information:</p> <ol style="list-style-type: none"> a. Indicate the exact incident or concern and the situation that brought the issue to light. b. Inform the student that a Clinical Incident Report (CIR) will be developed.
<p>III. Development of the Clinical Incident Report (CIR)</p>	

1. Contact the instructor of record to help develop and initiate a **Clinical Incident Report (CIR)**.
 - a. The clinical educator completes the *Incident/Concerns and Intervention portions* of the **Clinical Incident Report (CIR)** and sends the document back to the instructor of record.
 - b. The instructor of record adds the specific *Standards Impacted*.
 - c. The clinical educator and instructor of record schedule a meeting with the student to discuss the incident and present the **Clinical Incident Report (CIR)**.
 - (a) Discuss the specific incident that occurred and the standards impacted.
 - (b) Offer concrete intervention to remediate the situation.
 - (c) Determine a follow-up date that the intervention must be completed and the issue must be resolved in order for the **CIR** to be discontinued.
 - f. Require weekly email updates to the clinic director on progress from the clinical educator and student.

IV. Clinical incident or concern persists beyond the specified Clinical Incident Report (CIR) follow-up date

1. Contact the clinic director and instructor of record and report the persistent issues despite a clearly defined intervention on the **CIR**.
 - a. The clinical educator contacts instructor of record and clinic director to schedule a meeting with the student to discuss the persistent issues and the consequences of not following the **CIR**.

CLINICAL INCIDENT REPORT (CIR)

Incident/Concerns	Specific Standards Impacted	Intervention
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[Empty table area for reporting details]

I have read and understand the above summary.

Student Clinician

Date

Clinical Educator

Date

Instructor of Record

Date

Clinic Director

Date

GRADE DISPUTE INSTRUCTIONS

If the student clinician believes the NC grade has been assigned unfairly, information may be obtained pertaining to the University's policy and procedure for protesting a final grade in the Office of Advising Services, Joyal Administration, Room 121.

If a student receives a grade for a clinic practicum he or she believes was assigned incorrectly, unfairly, prejudicially, or capriciously, the following steps should be taken:

1. The student should speak with the clinical educator who assigned the grade by no later than the end of the third week of the next semester. It may simply be that an error has occurred, which can be easily corrected with a grade correction form signed by the instructor and submitted to the records office.
2. If the student is not satisfied with the supervisor's explanation, he or she may discuss the issue with the clinic director which may arrange a conference with the student and clinical educator in order to develop a resolution.
3. If the student is not satisfied with the clinic director's intervention, the student may appeal the grade and speak to the department chair about it immediately. The department chair will discuss the allegation with the clinical educator and give the student a response within ten working days.
4. If the student is still not satisfied with the department chair's response, the student may submit a written statement protesting the grade to the chair of the Student Academic Petitions Committee (SAPC) within five working days.
5. The student should contact the Office of Advising Services, Joyal Administration Building, Room 224, at 278-1787, and ask to make an appointment with the counselor in charge of grade protests. The counselor will provide the student with the necessary paperwork to be submitted to the Student Academic Petitions Committee and will help guide the student through the grade protest process.
6. The chair of the SAPC will send the student's statement to the supervisor who is required to respond in writing by a specified date. The student's statement and the supervisor's statement will be reviewed by the SAPC committee at its next meeting.
7. Once a decision by the SAPC is reached, the student will be notified of it in writing and will receive a copy of the supervisor's written response.
8. Further information on the University's Dispute Policy can be found here: <http://fresnostate.edu/academics/facultyaffairs/documents/apm/415.pdf>

STUDENTS WITH DISABILITIES

Upon identifying themselves to the instructor and the university, students with disabilities will receive reasonable accommodation for learning and evaluation. For more information, contact Services to Students with Disabilities in the University Library, Room 1202 (278-2811).

The following University policies can be found on the web at:

- [Adding and Dropping Classes](#)
- [Cheating and Plagiarism](#)
- [Computers](#)
- [Copyright Policy](#)
- [Disruptive Classroom Behavior](#)
- [Honor Code](#)

- Title IX

TITLE IX AND DISCRIMINATION

Fresno State is committed to fostering a safe, productive learning environment for all students. Title IX and CSU policy prohibit discrimination on the basis of sex, which includes sexual harassment, domestic and dating violence, sexual assault, sexual exploitation, and stalking. We understand that sexual violence can undermine students' academic success and we encourage students who have experienced some form of sexual misconduct to access appropriate resources so they can get the support they need and deserve.

As an instructor, I have a mandatory reporting responsibility as a part of my role. It is my goal that you feel comfortable sharing information related to your life experiences in classroom discussions, in your written work, and in our one-on-one meetings. I will seek to keep the information you share private to the greatest extent possible. However, I am required to report information I receive regarding sexual misconduct or information about a crime that may have occurred during your time at Fresno State.

Students can report incidents of alleged sexual misconduct to either or both of the following resources:

Title IX and Clery Compliance Office | titleix.fresnostate.edu | 559.278.5003
 Fresno State Police Department | fresnostate.edu/police | 559.278.8400

Students can access confidential support from two separate resources on campus:

Survivor Advocates | fresnostate.edu/survivoradvocate | 559.278.6796
 Counseling Services | fresnostate.edu/health/counseling | 559.278.2734

If you have concerns and you are unsure who to contact, please visit the [Concern & Action Guide](#).

SPEECH-LANGUAGE PATHOLOGY COMPLAINT PROCEDURE TO CAA

A complaint about any accredited speech-language pathology program or program in candidacy status may be submitted by any individual(s). Complaints about programs must meet all of the following criteria:

- a. be against an accredited graduate education program or program in candidacy status in audiology or speech-language pathology;
- b. relate to the Standards for Accreditation of Entry-Level Graduate Education Programs in Audiology and Speech-Language Pathology, including the relationship of the complaint to the accreditation standards;
- c. be clearly described, including the specific nature of the charge and the data to support the charge;
- d. be within the timelines specified below:
 - if the complaint is being filed by a graduate or former student, or a former faculty or staff member, the complaint must be filed within one year of separation from the program, even if the conduct occurred more than 4 years prior to the date of filing the complaint;
 - if the complaint is being filed by a current student or faculty member, the complaint must be filed as soon as possible, but no longer than 4 years after the date the conduct occurred;
 - if the complaint is being filed by other complainants, the conduct must have occurred at least in part within 4 years prior to the date the complaint is filed.

Complaints also must meet the following submission requirements:

a. include verification, if the complaint is from a student or faculty/instructional staff member, that the complainant exhausted all pertinent institutional grievance and review mechanisms before submitting a complaint to the CAA;

b. include the complainant's name, address, and telephone contact information and the complainant's relationship to the program in order for the Accreditation Office staff to verify the source of the information;

c. be signed and submitted in writing via U.S. mail, overnight courier, or hand delivery—not via e-mail or as a facsimile—to:

Chair, Council on Academic Accreditation in Audiology and Speech-Language Pathology American
Speech-Language-Hearing Association
2200 Research Boulevard, #310
Rockville, MD 20850

CLINIC SERVICES

Speech-language pathology services are provided by student clinicians under the direct supervision of a California licensed and ASHA certified professional. Services are provided for children and adults. Speech-language pathology and Audiology services are provided during the fall, spring, and summer sessions.

BASIC SERVICES

Fresno State-Scottish Rite Speech and Language Clinic

Speech and/or language evaluation
Speech and/or language therapy- individual
Speech and/or language therapy- group

CSDS Research Clinics

Speech and/or language Evaluation
Speech and/or language therapy-individual
Speech and/or language therapy-group

CLINIC FEES

The Fresno State Speech and Hearing Clinic is FREE for all services but donations are welcomed. All donations received will be used for replacement of consumable assessment/treatment materials, clinic maintenance, cleaning, and technology. Donations are not required for participation in our clinics.

The fees are as follows:

- *Individual clinic- No Charge*
- *Each additional sibling- No Charge*
- *Active students of CSU, Fresno- No Charge*
- *Children of active CSU, Fresno students- No Charge*
- *Diagnostics Clinic- No Charge.*
- *Aphasia Clinic- No Charge*
- *All CSDS Research Clinics (Parkinson's, Neurological/Aphasia, Hearing)- No Charge*

CLIENT ADMISSION

Clients are admitted to the clinic based on the following guidelines:

- Availability and qualifications of supervisor.
- Needs for clinical hours and qualifications of student clinicians.
- Continuing enrollment from previous semester(s).
- Date the case history was received.

No individual is denied services because of his or her gender, race, national origin, age, or disability. When an individual contacts the clinic concerning speech-language pathology services, the clinic staff will do the following:

- Describe clinic services. If requested, the clinic staff will mail a copy of services to the individual.
- Describe procedures for applying for services. The clinic staff requests that the person complete a case history form in WAITLIST PLUS and include copies of reports of any related services. The clinic staff also states that an appointment cannot be guaranteed and explains the criteria for admittance.
- Give names of other professionals or agencies. If the individual is not interested in pursuing services at the clinic or requires services that are not available through the clinic, he or she is given the names of other professionals or agencies in the community.

SPEECH-LANGUAGE PATHOLOGY

When a completed case history is completed in WAITLIST PLUS, the clinic staff will:

1. Case History will be evaluated in WAITLIST PLUS by the clinic director to determine the best placement for the client based on the information provided.
2. Create a client file in ClinicNote.
3. If the client is research eligible, and faculty approve, the client will be presented with a consent form to participate in the research project and placed in the CSDS Research Clinic appropriate for their needs.

If a client/parent requests an assessment, the clinic staff will place the case history in the “diagnostics waitlist” in ClinicNote. This file is reviewed at the beginning of each semester to arrange appointments.

Making Appointments for Speech Therapy

Speech-language pathology clients are assigned by the clinic director, scheduled by the clinic assistant and confirmed by student clinicians. Student clinicians are responsible for completing the following prior to the first session of clinic:

1. View their clients in ClinicNote.
2. Call the client to confirm appointment times using GOOGLE VOICE for phone communication.
3. Note phone communication with the client or caregiver on the Client Contact in ClinicNote.
4. Inform the clinic staff, or clinic director that the appointment is confirmed.

If clients cannot attend at the scheduled time, student clinicians are responsible for completing the following:

1. Inform clients that other appointment times cannot be guaranteed. The clients' "appointment time" will be assigned to other clients on our waiting list and the clinic will attempt to reschedule them.
2. Tell clients that if the clinic is unable to reschedule their appointment, their names will remain on the waiting list and the clinic will try and reschedule, as appointments become available (including the next semester). **Again, students must clearly inform clients that if they turn down the proposed appointment, they may not receive services during the current semester.**
3. Note the communication on the Client Contact Record, including the times when the client is available for an appointment.
4. Immediately inform the clinic staff, or clinic director that the client cannot attend at the proposed time.

CLIENT POLICY AND PROCEDURES



Discovery. Diversity. Distinction.

SPEECH, LANGUAGE, HEARING CLINIC POLICIES AND PROCEDURES

Effective Date: 1/1/2024

Revision Date: 11/13/23

CLINIC SCHEDULING POLICY

- Returning clients have priority for clinic assignments however, **no clinic assignment is guaranteed and is based on availability, student needs, and client needs.**
- There is a 5-semester limit policy for the clinic; after a client's 5th semester, the client can request to return to the wait list after sitting out, at least, 1 semester.
- If siblings are participating in the clinic, each sibling must adhere to the 5th-semester rule.
- **Clients who confirm a clinic placement and withdraw less than two weeks prior to the start of clinic (including AFTER clinic starts), will be moved to the bottom of the clinic waitlist.**
- Clients may not request specific clinicians or request a "more advanced" clinician in the program. This is a learning institution, and the clinic director will match clients with clinicians as appropriate.

ABSENCE/LATE POLICY

- **Please initial on the lines below:**
 - _____ Clients are expected to attend regularly, be on time, and ready to engage in therapy sessions twice a week for 12 weeks.
 - _____ Clients are allowed up to 3 absences during the semester. An absence qualifies as:
 - no show/no call
 - Vacation
 - Other non-emergency
 - Illness
 - Clients who miss any three (3) sessions, including informed absences, are subject to the clinic director's sole discretion regarding whether treatment will continue. The clinic director's determination is final.
 - _____ If the client is dropped from the clinic for excessive tardies, absences, or they unexpectedly drop themselves, the client will not be invited back in future semesters.
 - _____ Some flexibility will be granted if an absence is COVID related only and at the clinic director's discretion.

- _____ Alert the student clinician and clinic office of your absence by entering your absence in your ClinicNote Portal.
- _____ I understand that consistent attendance is vital for client progress AND student clinical hours needed to graduate.

COVID 19 POLICY

- **Please initial on the lines below:**
- _____ **If the client's COVID-19 test is POSITIVE**, the client can return to clinic in the following circumstances:
 - After five (5) days from the date you tested positive or experienced symptoms (Day 0 is the day you began feeling sick; Day 1 is the next day):
 - **If You have no symptoms, or your symptoms are mild and getting better; AND**
 - **You have not had a fever** for 24 hours without taking medicine that lowers fevers.
 - Wear a mask until day ten (10).
- _____ Sessions can be conducted via teletherapy in the event of a positive test or illness until the client is cleared to return to clinic (if the client feels well enough to participate).

EQUITABLE TREATMENT POLICY

- The Department of Communicative Sciences and Deaf Studies is Committed to the principle of equal opportunity. The University, College, and Department do not discriminate in the delivery of professional services or the conduct of research scholarly activity on the basis of race, ethnicity, religion, national origin, gender, gender-identity, sexual orientation, age, marital status, physical characteristics, or disability.

PAYMENT POLICY

- The speech, language, and hearing clinic does not accept insurance.
- The Fresno State Speech Clinic will gladly accept donations to cover operational costs, but a donation is NOT required for participation. Donations can be made at the link below:
 - <https://chhs.fresnostate.edu/csds/shl-clinic/donate.html>

TREATMENT SESSION/WAITING ROOM POLICY

- Clients with significant health and/or behavioral needs may require the attendance of the client's parent/caregiver for the client to be able to participate in clinic.
- The clinic will not be responsible for personal belongings left in the observation and/or clinic observation area.
- Phones/tablets may be allowed in the clinic observation area as long as the device is not a distraction to the clinic supervisor and other clients' families.
- Please respect both the clinic observation and waiting room areas by keeping them clean and quiet.
- Everything viewed or heard in the clinic observation space is considered strictly confidential.

TREATMENT MAKE-UP SESSIONS

- If clients are absent due to COVID, therapy can be conducted via teletherapy but missed sessions cannot be made up.
- If the clinician is absent, the client/parent/guardian *may* be given the choice to make-up the session at the end of the semester if time permits.
- During summer clinic, make-up sessions are not offered due to time constraints.

PARKING POLICY

- Clients are allowed to park in either the yellow or green parking lots by displaying a parking slip received from one of the on-campus parking dispensers.
 - **A parking code will be provided to you from the speech and hearing clinic after an appointment has been confirmed.**
- If you experience difficulties with the parking dispenser, contact campus police at (559) 278-8400. Please be sure to allow yourself enough time so that you do this and still make it on time to your scheduled appointment.
- You cannot park in one of the parking meters with the parking slip because you will receive a ticket.
- **For clients with physical limitations**, designated parking slots in front of the Social Sciences building are available. **Note:** a special card must be displayed on your dashboard along with your parking slip or you may also be subject to a ticket.
 - The card can be received at the clinic office and is reserved for clients with physical limitations only.
 - There is a limited number of tickets available in the office and are handed out in a first come, first served basis.
- If you do receive a parking ticket, be sure to look at the back of it or contact the police department at (559) 278-8400 for information on how to contest it.
 - The Speech and Hearing Clinic does not petition tickets on behalf of clients.

If you have any questions about any of these policies, please contact the Fresno State-Scottish Rite Speech, Language, and Hearing Clinic office at (559) 278-2422.

I have read and understand the above policy and procedure _____

Client or Caregiver Signature

Date

INFECTION CONTROL POLICY AND PROCEDURES



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FRESNO STATE-SCOTTISH RITE INFECTION CONTROL POLICY AND PROCEDURES

Effective Date: 1/1/2024

Revision Date: 12/13/2023

PURPOSE

This policy and procedure were developed to ensure the healthiest possible environment for our clients, families, students, faculty, and staff. The goal is to limit contact with contagious diseases and prevent the spread of illness and disease within our clinics, voice lab, and department.

GENERAL PROCEDURES FOR ALL ON-CAMPUS CLINICAL SETTINGS

1. ALL CLINIC INFECTION CONTROL

a. **Handwashing Guidelines:** <https://www.cdc.gov/handwashing/when-how-handwashing.html>

Handwashing is one of the most effective ways to prevent the spread of infection and illness. Clean hands can stop germs from spreading from one person to another and throughout an entire community.

i. Follow these five steps every time.

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

b. **Hand Sanitizer Guidelines:** Use hand sanitizer when soap and water are not readily available or between handwashing.

- i. Hand sanitizers do not get rid of all types of germs.
- ii. Hand sanitizers may not be as effective on visibly dirty hands.
- iii. How to use hand sanitizers:
 1. Apply hand sanitizer (60% alcohol) to the palm of one hand.
 2. Rub hands together.
 3. Rub the sanitizer all over the surface of your hands and fingers until dry (about 20 seconds).
- iv. You must clean your hands before working with a client, before placing gloves, immediately upon removal of gloves, and at the end of each session.

- c. **Regular Surface Cleaning Guidelines:** <https://www.cdc.gov/flu/school/cleaning.htm>
 - i. Tables and other non-porous surfaces- Use the university-provided cleaning spray to clean nonporous surfaces such as tables, chairs, doorknobs, and light switches before and after each client to reduce the spread of illness and germs.
 - ii. Plastic toys- For plastic toys with batteries, use food-grade disinfecting wipes or spray (7th Generation Wipes) and let them completely dry before allowing a child to handle them.
 - iii. The above must be completed before each client's session *and* after each client leaves the clinic.
- d. **Universal Precautions-Gloves:** <https://www.cdc.gov/oralhealth/infectioncontrol/summary-infection-prevention-practices/standard-precautions.html> Gloves are considered Personal Protective Equipment (PPE) and are designed to protect professionals from exposure to or contact with infectious agents.
 - i. In the on-campus clinic, gloves should be worn to cover your hands and reduce exposure to blood, saliva, and mucous membranes during oral-motor assessment and treatment activities.
 - ii. Reduce the further spread of contamination while using gloves during contact with the client:
 - 1. Keep hands away from your face.
 - 2. Limit touching surfaces with a gloved and contaminated hand.
 - 3. Remove gloves when done with the procedure, immediately discard gloves, and wash hands using the procedures above. Gloves cannot be reused.
 - 4. Gloves (PPE) must be used during the following procedures:
 - a. Oral motor assessment and treatment
 - b. Swallowing/feeding
 - c. Articulation therapy with physical prompts
 - d. Cleaning clinic surfaces (table, chairs, handles, toys) with university-provided disinfecting spray after each session
- e. **Universal Precautions- Masks, Plexiglas Barriers, and Air Filtration**
 - i. Masks:
 - 1. Masks are optional for all sessions. If a client OR student clinician prefers a mask, then a mask must be worn for the whole session.
 - 2. If the client and student clinician are comfortable without a mask, masks do not need to be worn.
 - ii. Plexiglas Barriers:
 - 1. Each clinical space will have a Plexiglas Barrier for use as the student deems necessary. Barriers are NOT required but are to be used at student and supervisor discretion.
 - iii. Air Filtration:
 - 1. Air filtration is provided in each clinical space due to reduced natural airflow in the clinic. Students are expected to turn the filtration system on at the start of each day but must remember to turn off the unit at the end of each day.

VOICE/SPEECH SCIENCE LAB INFECTION CONTROL

1. All procedures described above for *ALL CLINIC INFECTION CONTROL* will be adhered to in the Voice / Speech Science Lab. In addition, the following precautions will be followed:
 - f. **Handwashing** is required before using any of the lab equipment and prior to interacting with each new client/student.
 - g. **Gloves** are to be worn when using the endoscopy unit.
 - h. **Cleaning CSL Equipment**
 - i. The microphone, keyboard, mouse, and surrounding surface area are wiped down prior to each lab session using the *PDI Super Sani Cloth Germicidal Disposable Wipes*. This procedure is repeated at the end of each session.
 - i. **Videostroboscopy Unit**
 - i. The laryngeal microphone, keyboard, mouse, moveable tray table, endoscope, and surrounding surface area are wiped down prior to each lab session using the *PDI Super Sani Cloth Germicidal Disposable Wipes*. This procedure is repeated at the end of each session.
 - ii. Disposable cardboard tube liners are used for the endoscope holder. These are discarded and a new one placed prior to using the scope with a new client/student.
 - iii. The gauze pads that are used to hold the client's tongue are disposable, individually wrapped items that are opened just prior to each exam and disposed of immediately after the exam.
 - iv. A disposable liner is used to cover the tray table which will hold the gloves and gauze pad for the exam. This liner is replaced just prior to the exam and discarded immediately following the exam.
 - v. The endoscope is sanitized and cleaned using the following recommended procedures:
 1. The scope is sanitized using a Cidex OPA solution. The Cidex OPA is mixed on an as needed basis, according to the manufacturer's instructions and the activation date is written on the label, where indicated. Any unused portion is discarded after 75 days, as per the manufacturer's instructions.
 2. Prior to each exam, a wall-mounted vessel designed for this purpose is filled with Cidex OPA. At the end of the session, any unused Cidex OPA in the wall vessel is discarded and the vessel is rinsed.
 3. Prior to each exam, the scope is wiped using the disposable PDI Super Sani Cloth, then placed in a solution of Cidex OPA. Upon removal from the Cidex OPA, it is wiped again with the Sani Cloth, then rinsed with water and dried before being placed in the holder.

VACCINE POLICY FOR GRADUATE CLINICIANS

1. Proof of the following valid vaccines is required prior to the student clinician's contact with clients:
 - <https://www.cdc.gov/handhygiene/providers/guideline.html>
 - a. Hepatitis B- 3 doses
 - b. Measles/Mumps/Rubella (MMR)- 2 doses

- c. Diphtheria, Tetanus, and Pertussis (TDap)- 10 years
- d. TB- annually
- e. COVID vaccines and boosters are required per university policy

PROCEDURES POST-EXPOSURE

1. Although the risk of blood exposure in our clinic is unlikely, there is a possibility of exposure to body fluids such as saliva during oral motor examinations or some speech sound training techniques. The following procedure must be followed in the event one occurs:
 - a. Exposure to blood/bodily fluids <https://www.nhs.uk/common-health-questions/accidents-first-aid-and-treatments/what-should-i-do-after-contact-with-someone-elses-blood-or-saliva/>
 - i. Wash the blood or saliva off your skin with soap and lots of running water.
 - ii. If your skin is broken, encourage the wound to bleed and rinse it thoroughly under running water – but don't scrub or suck the wound.
 - iii. Wash the blood or saliva out of your eyes, nose or mouth with lots of cold water – if you wear contact lenses, rinse before and after taking them out, and spit the water out after washing your mouth.
 - iv. Inform the clinic director of exposure so an incident report can be initiated with Risk Management if the client has known communicable illness and/or fluid encountered an open sore or mucus membranes.
 - b. When to seek medical attention:
 - i. If the client you are working with has a known communicable illness and/or fluid came in contact with an open sore or mucus membranes.
2. COVID-19 exposure instructions:
 - a. Immediately complete a COVID-19 reporting form with the university at the following link if a student test comes out positive <http://www.fresnostate.edu/president/coronavirus/index.html>
 - i. The following is required to return to the clinic upon a positive COVID test:
 1. **If the COVID-19 test is POSITIVE**, the student can return to clinic in the following circumstances:
 2. After five (5) days from the date you tested positive or experienced symptoms (Day 0 is the day you began feeling sick; Day 1 is the next day):
 - a. **If you have no symptoms, or your symptoms are mild and getting better; AND**
 - b. **you have not had a fever** for 24 hours without taking medicine that lowers fevers.
 - c. Wear a mask until day ten (10).
 3. Sessions can be conducted via teletherapy in the event of a positive test or illness until the client is cleared to return to clinic (if the client feels well enough to participate).

UNIVERSITY PROCEDURES FOR COMMUNITY GUESTS/CLIENTS

3. The following is required to return to the clinic upon a positive COVID test:

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/What-to-do-if-You-Test-Positive-for-COVID-19.aspx#>:

 - i. The following is required to return to the clinic upon a positive COVID test:
 1. **If the COVID-19 test is POSITIVE**, the client can return to clinic in the following circumstances:
 - a. After five (5) days from the date they tested positive or experienced symptoms (Day 0 is the day you began feeling sick; Day 1 is the next day):
 - b. **If they have no symptoms, or your symptoms are mild and getting better; AND**
 - c. **they have not had a fever** for 24 hours without taking medicine that lowers fevers.
 - d. Wear a mask until day ten (10).
 2. Sessions can be conducted via teletherapy in the event of a positive test or illness until the client is cleared to return to clinic (if the client feels well enough to participate).

CLIENT DISMISSAL

Clients will be dismissed if they meet any of the following criteria:

- Service completed
- Treatment objectives met
- No longer benefits from treatment
- Repeated absences. It is suggested that after two (2) absences, clients be counseled regarding the importance of regular attendance. If clients are absent for unexcused reasons after counseling, they should be told that another unexcused absence would result in their being dismissed from clinic. A client dismissed for repeated absences should be given a letter of explanation and a copy of the letter placed in his or her file. All client contacts should be noted on the Client Communication tab in ClinicNote. Clinical educators may use their own judgment regarding attendance problems. However, it is important to maintain documentation for future clinical educators.
- Client moves to a different geographical location.
- Client chooses to discontinue services at the clinic.

The student clinician will do the following when dismissing a client from treatment:

- Write a discharge report on all clients who received treatment at the clinic.
- Obtain clinical supervisor approval of the report and have the supervisor co-sign the report.
- Original report will be filed in the clients' ClinicNote folder and one copy of the report given to the client directly or sent through the portal.

The clinic supervisor will do the following:

- Discharge clients according to dismissal policy.
- Counsel clients regarding reason for discharge, as needed.
- Review, approve, and sign all discharge reports.

On-going clients who are not able to attend during the current semester will be placed on the client waiting list and contacted the following semester up to one year and then will be placed in Inactive files.

REFERRAL

Clients will be referred to other agencies if the clinic is unable to provide appropriate services or if the client requests additional or alternate services. The clinic personnel (staff or clinical educators) making the referral should do the following:

1. Give the names of at least three providers or agencies. Lists of audiologists and speech-language pathologists are available through the clinic staff.
2. Note the referral on the clinical report.
3. Note the referral on the Client Contact Record in Clinic Note.
4. Place a copy of any referral letter in client's files. (Make sure a signed release of information is in the client's file before releasing any information).

Clinic personnel shall not accept any type of compensation for referring clients to other agencies for service.

RECORDS

CLIENT RECORDS

The clinic maintains client records for a period of at least 7 years. Client files are located in ClinicNote and are divided into two sections: waiting for assessment and active files. Inactive files are stored separately.

Each client's ClinicNote file initially contains the following:

- Client Contact Record. The Client Contact Record provides an area for notes on all client contracts such as telephone calls to client, date of initial appointment, etc.
- Case history.
- Referral source.
- Release of information.
- Signed permission for observation.
- Signed/initialed Clinic Policy
- Any reports, referral letters, or other pertinent information submitted by the client.

Files of clients who have had or are currently receiving service at the clinic also contain the following:

- Diagnostic reports.
- Reassessment reports, treatment plans, progress reports, treatment summary reports daily progress notes, and lesson plans.
- Copies of any letters sent to other professionals or agencies.

Student clinicians and their supervisors are responsible for maintaining complete and orderly client files. At the end of each semester, the supervisor reviews each current client's file with the student clinician.

CONFIDENTIALITY OF CLIENT RECORDS

All client records are confidential. **No information may be released to outside individuals or agencies** without the client's prior written consent except in certain life or death emergencies, by court order, or in certain child abuse cases. Student clinicians may not release information without written consent or without prior approval of the clinic supervisor. All releases of information should be documented on the Client Contact Record. Client ClinicNote files should not be viewed in public places at any time.

Confidentiality and HIPAA:

- HIPAA Compliance is the LAW! See <https://www.hhs.gov/hipaa/for-professionals/index.html>
 - You must ALWAYS adhere to HIPAA compliance or you could lose your license or face fines/penalties.
 - Do not discuss patients in the open at your site.
 - Do not share stories about your clients with any friends or family, even if you omit names.
 - Don't lose documents in your site, bring anything out of the site, or leave in the car.
 - DO NOT access the medical records system to access medical records for yourself, friends, family, or ANYONE at any time unless it is directly for patient care.

STUDENT CLINICIAN RECORDS

Student clinicians' clinical and academic information is stored in CALIPSO. CALIPSO contains documentation of student clinicians' earned clinical clock hours, Student Practicum Evaluation Forms, medical clearance copies, KASA forms, and any Clinical Remediation Plans or Clinical Incident Reports. **Student clinicians may view this information at any time in CALIPSO.**

CONFIDENTIALITY/FERPA:

- FERPA Compliance is the LAW! See <https://www.cde.ca.gov/ds/ed/dataprivacyferpa.asp>
 - You must ALWAYS adhere to FERPA compliance, or you could lose your license or face fines/penalties.
 - Do not discuss kids in the open at your site.
 - Do not share stories about your clients/kids with any friends or family, even if you omit names.
 - Don't lose documents in your site, bring anything out of the site, or leave in the car.
 - DO NOT access records for yourself, friends, family, or ANYONE at any time unless it is directly for treatment/assessment of kids on your caseload.

CONFIDENTIALITY OF STUDENT CLINICIAN RECORDS

The information in student clinicians' CALIPSO accounts is confidential and can only be accessed by the clinic director, the department chair, the graduate coordinator, and the student.

ASSESSMENTS

GENERAL INFORMATION

Student clinicians evaluate clients under the supervision of licensed and certified audiologist or speech-language pathologist. At least 25% but up to 100% of each evaluation session must be supervised. Student clinicians must discuss evaluation plans in advance with their supervisors.

DIAGNOSTIC AND THERAPY SUPPLIES

Tests available in the clinic are listed in the Assessment Inventory book. A copy of the inventory is located in the Media Center and in GOOGLE DRIVE.

ASSESSMENT REPORT

A report must be written following each evaluation. Supervisors will provide students with the specific report format required. Student clinicians give the parent/client/caregiver the approved completed reports (verified by clinic supervisor signature).

Each speech-language pathology evaluation will usually include a hearing screening. The results of the screening should be documented in the report. If a hearing screening was not possible, this should also be documented in the report. Clients failing the hearing screening should be referred for an Audiological evaluation, as appropriate.

REPORTS

CLIENT REPORTS

Following is a list of the required written reports:

- Assessment report. The assessment report contains results of the initial assessment, conclusions, and recommendation. All clients receiving treatment must have a diagnostic report in their files.
- Reassessment Report. Written for clients who have received previous diagnostic reports through the clinic.
- Treatment plan. A treatment plan must be prepared for each client receiving therapy. Clinical educators may use different types of treatment plans. Each plan must contain brief assessment information (including diagnosis), type of services recommended, and goal/objectives.
- Daily progress/SOAP notes. Client progress must be recorded in the client's folder at the end of each therapy session.
- Treatment summary report. At the end of the semester (or treatment period) a report of progress must be written for each client who received treatment.
- Discharge report. A discharge report must be written when treatment is terminated.

With the exception of daily progress/SOAP notes, all clinic reports must be signed by both the student clinician and the clinical educator.

CLINICAL EDUCATORS

Clinical educators are responsible for ensuring quality service delivery in the clinic.

Minimally, clinical educators must:

- Possess a current Certificate of Clinical Competence in the subject area in which supervision is provided.
- Possess a current California State License in the subject area in which clinical education is provided.
- Provide proof of completed 2- hours of professional development in the area of supervision.
- Possess knowledge of and experience in the subject area or areas in which clinical education is provided.
- Review and approve in advance all major clinical plans and decisions.
- Co-sign all clinical reports and letters.
- Observe a **minimum** of 25% of each clinical session taking into account the student's level of knowledge and experience.
- Provide student clinicians with information regarding clinic procedures, requirements, and performance expectations.
- Give student clinicians clinical instruction and model specific procedures and techniques, as necessary.
- Provide ongoing feedback to student clinicians regarding their performance.
- Give student clinicians midterm and final Performance Evaluations, and discuss the evaluations with them.

QUALITY IMPROVEMENT

CLINIC MEETINGS

Clinic procedures, policies, and other requirements are provided to each student clinician via email, emailed to all clinical educators (on and off campus), and uploaded to the clinic GOOGLE DRIVE each semester.

Clinical educators hold regular meetings with their student clinicians. These meetings may include suggestions related to clinical performance, discussion of a specific communicative disorder, or other information related to clinic.

The clinic director meets at least once per semester with student clinicians to review clinic procedures, to discuss cases and to present information related to clinic and clients.

CLIENT PROGRESS

Clinical educators must ensure that:

- Measurable treatment objectives are written for all clients receiving therapy.
- Progress towards these objectives is measured throughout the semester and documented in the form of progress/SOAP notes.
- Modifications of objectives or procedures are made as needed.
- Treatment objectives and procedures, client progress, and recommendations are evaluated and reported in a written final summary at the end of the semester (or treatment period).

CONSUMER SATISFACTION

Consumer satisfaction is measured at the end of each semester for clients receiving speech-language pathology services. Procedures are as follows:

- The clinic staff distributes the Client Questionnaires to the clients at the end of each semester.
- The student clinicians collect the completed questionnaires or ask the clients to complete the questionnaires and return them to the clinic office. (In person or by mail)
- The clinic staff uploads the results in Google Drive by semester.
- The clinic director, supervisors, and department chairperson discuss any areas of concern.
- The clinic director oversees any needed modifications.

CLINICAL EDUCATOR QUALIFICATIONS AND EVALUATION

The clinic staff or clinic director does the following:

- Maintains a list of all clinical educators, their CCC and license numbers, and the expiration dates of the CCC's and licenses.
- Verifies each clinic clinical educator's ASHA certification and state license on an annual basis.
- Verify completion of 2-hours of professional development in the area of supervision.
- Notifies the clinic director if a clinical educator has not maintained CCC or licensure.

Student clinicians evaluate their clinical supervisor at the end of the semester. Procedures are as follows:

- The clinic director instructs the student clinicians to complete the Supervisor/Clinical educator Evaluation on CALIPSO and the University mandated evaluation tool and pulls reports directly from the site, addressing any issues that may be noted.

The Clinic Director does the following:

- Reviews all clinical educator/supervisor evaluations.
- Discusses any area of concern with the department chairperson and the clinical educator.
- Makes changes, as needed.

SAFETY PRECAUTIONS

To help ensure their health and safety of their clients, all individuals responsible for providing services in the clinics should adhere to the following guidelines:

- In an emergency (e.g., accident, sudden illness, campus fire), dial 911. Stay on the line and given necessary information. The telephone report should include details as to building, location in the building, and nature of the fire. The safety of the clinic staff and clients are the first priority.
- Never leave a child unattended in the clinic.
- Do not allow children to stand on tables or chairs.
- Do not let children run in the clinic area.
- Unless used as a part of treatment, avoid giving clients food. Before using food in clinic, check with the client (or client's guardian) to assure that the client is not allergic to the food or otherwise restricted from eating it.
- If clients in wheelchairs do not lock their brakes when they enter the clinic room, advise them to do so. If clients are unable to independently operate their chairs, clinicians should lock the brakes on their clients' chairs.
- Do not smoke or allow smoking in the clinic.
- Wash your hand before and after each client. Antiseptic wipes are available in each clinic room.
- Use gloves when performing an oral peripheral examination, when there is a possibility of your coming into contact with the client's saliva or blood, or during other types of invasive procedures.
- Avoid touching your face while wearing gloves.
- Use disposable equipment for examinations or in treatment whenever possible (e.g., tongue depressors, swabs, gauze, etc.).
- Wipe off the clinic table after each use with antiseptic wipes.

RESEARCH

All research involving the CSDS Research Clinic Clients must be in accordance with California State University, Fresno Research Policy. All research involving clients must comply with the provisions of the Policy and Procedures for Research with Human Subjects at California State University, Fresno (October, 2001).

Faculty must notify the clinic director in advance of any client who is appropriate for the CSDS Research Clinic. Clients must be notified that they are eligible for a research project and sign the appropriate consent form. A client's attendance for research sessions (but not necessarily the results of the research itself) must be noted in the client's folder. Dates of sessions and reasons for attendance should be noted on the Client Contact Record. This documentation is necessary in the event the client later questions his or her participation in those sessions.

STUDENT ACCESS TO FILES AFTER GRADUATION

Former students who require access to their Academic Files or Clinical Files must contact the Clinic Office staff or the Clinic Director for access during regular business hours.



CODE OF ETHICS

ASHA CODE OF ETHICS

For the ENTIRE ASHA Code of Ethics, please visit <https://www.asha.org/code-of-ethics/>

Reference this material as: American Speech-Language-Hearing Association. (2016). Code of Ethics [Ethics]. Available from www.asha.org/policy.

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PREAMBLE

The American Speech-Language-Hearing Association (ASHA; hereafter, also known as “The Association”) has been committed to a framework of common principles and standards of practice since ASHA’s inception in 1925. This commitment was formalized in 1952 as the Association’s first Code of Ethics. This Code has been modified and adapted as society and the professions have changed. The Code of Ethics reflects what we value as professionals and establishes expectations for our scientific and clinical practice based on principles of duty, accountability, fairness, and responsibility. The ASHA Code of Ethics is intended to ensure the welfare of the consumer and to protect the reputation and integrity of the professions.

The ASHA Code of Ethics is a framework and focused guide for professionals in support of day-to-day decision making related to professional conduct. The Code is partly obligatory and disciplinary and partly aspirational and descriptive in that it defines the professional’s role. The Code educates professionals in the discipline, as well as students, other professionals, and the public, regarding ethical principles and standards that direct professional conduct.

The preservation of the highest standards of integrity and ethical principles is vital to the responsible discharge of obligations by audiologists, speech-language pathologists, and speech, language, and hearing scientists who serve as clinicians, educators, mentors, researchers, supervisors, and administrators. This Code of Ethics sets forth the fundamental principles and rules considered essential to this purpose and is applicable to the following individuals:

- a member of the American Speech-Language-Hearing Association holding the Certificate of Clinical Competence (CCC)
- a member of the Association not holding the Certificate of Clinical Competence (CCC)
- a nonmember of the Association holding the Certificate of Clinical Competence (CCC)
- an applicant for certification, or for membership and certification

By holding ASHA certification or membership, or through application for such, all individuals are automatically subject to the jurisdiction of the Board of Ethics for ethics complaint adjudication. Individuals who provide clinical services and who also desire membership in the Association must hold the CCC.

The fundamentals of ethical conduct are described by Principles of Ethics and by Rules of Ethics. The four Principles of Ethics form the underlying philosophical basis for the Code of Ethics and are reflected in the following areas: (I) responsibility to persons served professionally and to research participants, both human and animal; (II) responsibility for one’s professional competence; (III) responsibility to the public; and (IV) responsibility for professional relationships. Individuals shall honor and abide by these Principles as affirmative obligations under all conditions of applicable professional activity. Rules of Ethics are specific statements of minimally acceptable as well as unacceptable professional conduct.

The Code is designed to provide guidance to members, applicants, and certified individuals as they make professional decisions. Because the Code is not intended to address specific situations and is not inclusive of all possible ethical dilemmas, professionals are expected to follow the written provisions and to uphold the spirit and purpose of the Code. Adherence to the Code of Ethics and its enforcement results in respect for the

