



**COLLEGE OF NURSING AND HEALTH SCIENCES
SCHOOL OF REHABILITATIVE SCIENCES
DEPARTMENT OF COMMUNICATION SCIENCES AND DISORDERS**

SPEECH AND LANGUAGE CLINIC HANDBOOK

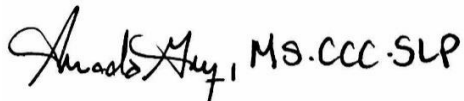
2024-2025

Welcome Letter from the Director of Clinical Education

Welcome to the Master of Science (MS) program in Speech-Language Pathology program at Piedmont University. The mission of the Communication Sciences and Disorders (CMSD) program is to engage and empower a diverse student population in the acquisition of knowledge and skills in communication sciences and disorders and swallowing across the lifespan. Through innovative and interactive curriculum design, faculty mentored research, evidence-based clinical service delivery, and dedicated outreach to the community, students will be prepared to provide high-quality, culturally diverse and responsive services and serve as leaders in the field. Our vision aims to address the academic and clinical needs of master's students by providing rich learning opportunities that integrate theory and research with the best clinical practices. The program is dedicated to fostering professional excellence that will benefit the quality of life of persons with communication and swallowing disorders as well as advancing knowledge in the discipline.

Over the next two years, at various times, you will find this journey to be exciting, challenging, tiring, and everything in between. However, once you have completed your M.S. degree and are a practicing speech-language pathologist, we have no doubt that your overarching feeling will be "rewarded." You will likely find many aspects of this endeavor rewarding, such as the satisfaction of successfully accomplishing the degree program and the fulfillment of reflecting on the knowledge and skills you have acquired through hard work and commitment. But most of all, we believe you will find great reward in the clinical experiences that allow you to serve your clients and their families to the best of your ability. On behalf of all the faculty and staff in the speech-language pathology program, welcome to our (and now your) Master of Science (MS) in Speech-Language Pathology in Communication Sciences and Disorders.

Sincerely,

A handwritten signature in black ink that reads "Amanda Gomez, MS-CCC-SLP". The signature is written in a cursive style.

Amanda Gomez, MS-CCC-SLP, CAS
Director of Clinical Education
Communication Sciences & Disorders
Piedmont University

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CLINICAL PRACTICUM

Clinical practicum encompasses a wide variety of academic and clinical tasks that take place outside the classroom over the course of your senior year and/or graduate career. Augmenting your coursework, practicum will prepare you to be an independent, thoughtful, analytic, and confident clinician. This practicum is based on instruction in compliance with ASHA's clinical curriculum standards.

Elements of this course include your clinical work with clients in the Piedmont University Clinic and at our off-site clinical rotations, clinic lab meetings, training sessions, guest lectures, research experiences, and presentations and discussion at colloquium, among various other tasks. Each semester we will focus on clinical skills while incorporating more independence in interdisciplinary communication, critical thinking, and analytical approaches to treatment planning.

Students will complete five semesters of clinical practicum. Course number and enrollment sequence will vary based on whether you are on the BS/MS path or the 2-year MS path (see course descriptions and learning outcomes below).

During the practicum experience, each student will be expected to provide services to individuals with communication disorders in the Piedmont University Clinic and various off-campus centers under the supervision of clinical and academic faculty who are ASHA-certified speech-language pathologists. The amount of supervision will be appropriate to the student's level of knowledge, experience, and competence. Supervision provided will be sufficient to ensure the welfare of the client/patient.

Supervised practicum must include experience with client/patient populations across the lifespan and from culturally/linguistically diverse backgrounds. Practicum must include experience with client/patient populations with various types and severities of communication and/or related disorders, differences, and disabilities. Academic advisors will assist students in tracking their experiences across the spectrum noted above.

We strive to maintain the highest standards of clinical practice and professionalism in our clinic and depend on you to help us maintain that integrity. Please utilize this handbook as a resource during your CMSD 4000 or CMSD 5101 practicum and supplement to the many training labs and clinical education opportunities provided across this time.

COURSE DESCRIPTIONS

4000 Undergraduate Clinical Practicum (3.00 credit hours)

This clinical practicum experience is designed for undergraduate students who are accepted into the BS/MS Integrated Program. Students will learn how to plan and conduct assessment and intervention sessions for clients with communication disorders. One-hour meetings will be included to review practicum experiences with other student clinicians to foster collaboration. Essential functions for clinical performance will be included, in addition to standards for ethical practice. Students are eligible to collect 50 clinic hours toward certification and licensure. Prior to participating in CMSD 4000, students will be required to have completed 25 observation hours.

5101 Graduate Clinical Practicum (3.00 credit hours per semester)

The graduate clinical practicum experience is designed to train students how to plan and conduct assessment and intervention sessions for clients with communication and swallowing disorders. Students will complete supervised direct clinical experience or simulated experiences in the assessment and treatment of speech, language, and swallowing disorders across the lifespan. Prior to participating in CMSD 5101, students will be required to have completed 25 observation hours and complete all orientation activities. In addition to completing direct clinical experiences, students are required to attend clinic colloquium.

5201 Externship (3.0 credit hours)

During the final two clinical practicum enrollments, students will participate in clinical tasks that take place outside Piedmont University Speech and Language Clinic. During this time, students are expected to further develop skills to become independent, thoughtful, analytic, and confident clinicians. During this practicum experience, each student will be expected to provide services to individuals with communication and swallowing disorders in a clinical, educational, or medical setting under the supervision of ASHA-certified speech-language pathologists. The amount of supervision will be no less than 25% of direct client contact, appropriate to the student's level of knowledge, experience, and competence, and be sufficient to ensure the welfare of the client/patient. Supervised practicum will include experience with client/patient populations across the lifespan, from culturally/linguistically diverse backgrounds, and various types and severities of communication and/or related disorders, differences, and disabilities.

To ensure a diverse and comprehensive learning experience, externship placements will not be assigned within the same district where the student is currently employed as a Speech-Language Pathology Assistant (SLPA). This policy is designed to provide students with exposure to varied clinical settings and practices.

Clinical Practicum Student Learning Outcomes

Learning outcomes are outlined on the “Clinical Performance Evaluation” in Calipso. Each outcome aligns with the standards and competencies required by CAA and CFCC to qualify for accreditation and certification in Speech-Language Pathology. Students must earn a score of at least “3” in the section averages of the intervention, evaluation, professional practice, and additional clinical skills outcomes by the end of the semester in their first clinical enrollment, and a “4” in the remaining practicum enrollments. These score minimums reflect competence in each of the learning outcomes.

Clinical Enrollment Flowchart

CMSD 4000/CMSD 5101 for Students on the BS/MS path

Semester	Enrollment	Location	Supervision
Senior Year/First MS Year Fall	Clinical Practicum I CMSD 4000	On-site	Piedmont University Faculty
Senior Year/First MS Year Spring	Graduate Clinical Practicum II CMSD 5101	On-site	Piedmont University Faculty
Summer	Graduate Clinical Practicum III CMSD 5101	On-site/Off-site with special permission	Piedmont University Faculty/Non-faculty SLP Preceptor

CMSD 5101 for Graduate Students on the 2-year MS path

Semester	Enrollment	Location	Supervision
First Year – Fall	Graduate Clinical Practicum I CMSD 5101	On-site	Piedmont University Faculty
First Year – Spring	Graduate Clinical Practicum II CMSD 5101	On-site	Piedmont University Faculty

Summer	Graduate Clinical Practicum III CMSD 5101	On-site/Off-site with special permission	Piedmont University Faculty/Non-faculty SLP Preceptor
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CMSD 5201 –Externship for Graduate Students on either path

Semester	Enrollment	Location	Supervision
Second Year – Fall	Externship I CMSD 5201	Off-site	Non-faculty SLP Preceptor
Second Year - Spring	Externship II CMSD 5201	Off-site	Non-faculty SLP Preceptor

CLOCK HOUR REQUIREMENTS

For certification in Speech-Language Pathology, students must complete a minimum of 400 clock hours of supervised clinical experience before graduation from the Master’s program. The program must be accredited or be an approved candidate for accreditation by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA). A total of 25 hours of clinical observation and 375 hours in direct client/patient contact is required. Of the required 375 hours, a minimum of 250 hours must be on-site and in-person. At the graduate level, as many as 125 hours may be earned through telepractice and 75 hours may be earned through clinical simulation. Up to 50 hours may be earned at the undergraduate level. The CMSD Program goal is for students to earn approximately 50 clock hours during each enrollment of clinical practicum and a minimum of 100 clock hours during each externship enrollment.

CLINICAL SIMULATION

Graduate students have the opportunity to earn up to 75 hours of direct clinical contact through the use of CS (clinical simulation). These experiences enable students to obtain a sufficient variety of supervised clinical experiences in different work settings, with different populations, regardless of geographic location. The use of CS is optional; it is another tool available to students to develop clinical knowledge and skills. Clinic supervisors may assign and supervise CS cases to students who may not have had sufficient contact time or experience in a particular delivery area.

TELEPRACTICE

Effective January 1, 2023, as many as 125 hours of the graduate clinical practicum may be completed via telepractice. These clinical experiences will be supervised by a licensed and certified speech- language pathologist who is comfortable, familiar, and skilled in providing and supervising services through telepractice. Select cases are at the discretion of the graduate program, will be appropriate for the student’s skill level, and will meet the requirements of all relevant regulatory agencies.

OBSERVATION

Prior to this course, it is required that students complete all 25 clock hours of guided observation of evaluation and treatment sessions held with individuals with a variety of communication disorders. Students entering their first clinical semester without 25 observation hours need to contact the clinic director to determine a plan that will allow this requirement to be met and not interfere with the clinic schedule. Students should have gained, in previous coursework, knowledge of the nature of speech, language, hearing, swallowing and communication disorders and differences, including the etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates.

GRADING

Clinical knowledge and skills are monitored by faculty via email, electronic and hard-copy documentation, conversations with students, and direct observation of performance with clients. Assessment of skill outcomes is completed formally at midterm and final conferences. Clinical hours and competencies throughout the program will be tracked by the web-based application CALIPSO. Piedmont University maintains this account each year so that this data is available to students after graduation when they apply for state licensure.

GRADING SCALE:

Grading rubric (total evaluation score) based on clinical enrollment:

Grade	First Clinical Enrollment (Undergrad)	First Clinical Enrollment (Graduate)	Second Clinical Enrollment	Third Clinical Enrollment	First Advanced Clinical Enrollment	Second Advanced Clinical Enrollment
A	3.5+	3.5+	4.25+	4.5+	4.25+	4.5+
B	3.0-3.49	3.0-3.49	4.0-4.24	4.0-4.49	4.0-4.24	4.0-4.49
F	2.99 or below	2.99 or below	3.99 or below	3.99 or below	3.99 or below	3.99 or below

Students must earn a score of at least “3” in the section averages of the intervention, evaluation, professional practice, and additional clinical skills outcomes by the end of the semester in their first clinical enrollment, and a “4” in the remaining practicum enrollments.

PERFORMANCE RATING SCALE

Very Early Emerging: Skill not evident most of the time. Student requires direct instruction to modify behavior and is unaware of the need to change. Supervisor/clinical educator must model behavior and implement the skill required for client to receive optimal care. Supervisor/clinical educator provides numerous instructions and frequent modeling. Critical thinking/problem solving is very early emerging. Student primarily observes and states limited facts. (skill is present <25% of the time).

Early Emerging: Skill is emerging but is inconsistent or inadequate. Student is beginning to show awareness of need to change behavior with supervisor/clinical educator input. Supervisor/clinical educator frequently provides instructions and support for all aspects of case management and services. Critical thinking/problem solving is early emerging. Student primarily observes and states a few facts. (skill is present 26-38% of the time).

Emerging: Skill is emerging but is inconsistent or inadequate. Student shows awareness of need to change behavior with supervisor/clinical educator input. Supervisor/clinical educator frequently provides instructions and support for all aspects of case management and services. Critical thinking/problem solving is emerging. Student primarily observes and states several facts. (skill is present 39-50% of the time).

Developing with Ongoing Monitoring/Feedback: Skill is present and needs further development. Student is aware of need to modify behavior but does not do this independently. Supervisor/clinical educator provides on-going monitoring and feedback; focuses on increasing student’s critical thinking on how/when to improve skill. Critical thinking/problem solving is developing. The student is identifying and analyzing problems and is beginning to reach conclusions. (skill is present 51-63% of the time).

Developing with Intermittent Monitoring/Feedback: Skill is present and needs further development. Student is aware of need to modify behavior but does not do this independently. Supervisor/clinical educator provides intermittent monitoring and feedback; focuses on increasing student's critical thinking on how/when to improve skill. Critical thinking/problem solving is developing. The student is identifying and analyzing problems and is beginning to reach conclusions. (skill is present 64-75% of the time).

Beginning to Refine: Skill is developed/ implemented most of the time and needs continued refinement or consistency. Student is aware and is modifying behavior in-session some of the time and beginning to self-evaluate. Problem solving is refining. The student analyzes problems and more consistently reaches appropriate solutions. Supervisor/clinical educator acts as a collaborator to plan and suggests possible alternatives. (skill is present 76-83% of the time).

Refining: Skill is developed/ implemented most of the time and needs continued refinement or consistency. Student is aware and is modifying behavior in-session and is self-evaluating. Problem solving is refining. The student analyzes problems and more consistently reaches appropriate solutions. Supervisor/clinical educator acts as a collaborator to plan and suggests possible alternatives. (skill is present 84-90% of the time).

Consistent: Skill is consistent and well developed. Student can modify own behavior as needed and is consistently problem solving. The student analyzes problems and consistently reaches appropriate solutions. Student can maintain skills with other clients, and in other settings, when appropriate. Supervisor/clinical educator serves as consultant in areas where student has less experience. Supervisor/clinical educator provides guidance on ideas initiated by student (skill is present >90% of the time).

SUPERVISION AND FEEDBACK

Supervisor-Student Communication

SLP faculty provide instruction throughout the process of planning, evaluation, intervention, and documentation process. Students will meet individually with their supervisors at least one time per week for clinical education and support specific to their assigned clients. Students will also attend a weekly group clinic meeting for additional general instruction and support. Direct supervision of client-contact is conducted in accordance with ASHA guidelines. As much as 100% supervision, which may include direct modeling, will be provided during the initial clinic sessions each semester. Direct supervision time will be gradually reduced to no less than 25% as students demonstrate greater independence. The amount of supervision provided each session will be adjusted according to student needs and sufficient to ensure the welfare of the client as determined by the supervisor.

Feedback

Supervisors provide feedback and guidance in a number of ways, including individually and in group sessions, verbally and/or in writing before, during, and after the session as appropriate. Feedback and guidance are adjusted to fit the needs of the situation. This feedback is an expected and essential part of the supervisory and clinical development process. Critique and guidance are designed to develop clinical skill and perspective, not to be punitive. Students are expected to respond to feedback by integrating recommendations into future session planning and execution. Student response to feedback is tracked and utilized to inform midterm and final grades, which are discussed in supervisory conferences.

Assessment and Conference

The development of clinical skill is monitored regularly and discussed with the student throughout the semester. Clinical skills are formally assessed at midterm and end of semester. Records of this

assessment are kept in Calipso. See section on grading and refer to the evaluation form in Calipso for more information on this process and the clinical performance rating scale.

Self-Reflection and Assessment

Clinicians are required to complete a written self-reflection and assessment of at least two clinical sessions through video review each semester. Self-reflection forms are available in Canvas. These reviews will enable students to analyze their own performance as a clinician as well as the performance of their client. In addition, students should complete a summative assessment of their clinical skills in CALIPSO at midterm and end of semester. The summative assessment will enable students to analyze their clinical strengths, growth, and areas of needed improvement.

REMEDICATION AND SUCCESS PLANS

In order to successfully practice in the field of speech-language pathology, students must demonstrate superior educational/medical knowledge and critical thinking skills, as well as the ability to comprehend and synthesize large quantities of new knowledge quickly and accurately. If a student is having clinical difficulties, it is the student's responsibility to notify the clinical supervisor of any problems and initiate procedures to obtain additional assistance. Because the clinical faculty is charged with determining which students can apply academic knowledge into clinical practice, the assessment of each student includes assessment of overall clinical grades, ability to learn and apply clinical knowledge, and the ability to professionally exhibit essential functions for clinical success.

Any student who receives an unsatisfactory score (based on clinic enrollment) in the average rating in treatment, evaluation, or professional practice at end of semester will be in need of remediation. A grade below a "B" in any practicum experience will indicate a need for remediation. A success plan will be developed, and the practicum must be repeated. Clinical hours obtained during that semester may not be counted toward hours required for ASHA certification. Students who have a success plan in place may not be eligible to participate in the subsequent practicum until the goals of the plan have been met.

The student will be notified in writing of the need for a plan. The student will meet with the clinical supervisor and director of clinical education to develop an action plan to ensure course competencies and clinical expectations will be met. Goals addressing deficit areas and a time frame during which improvements are expected will be established.

Formative and summative procedures will be utilized to determine achievement of competencies. Students and participating faculty will sign copies indicating they have participated in the success plan. Signed plans will be distributed to students and participating faculty and maintained in students' e-files within the administrative office. If significant improvements in performance are not demonstrated within the specified period of time and/or have not been met within two semesters (including summer), additional practicum requirements may be instituted or dismissal from the clinical program may be recommended.

STUDENT EXPECTATIONS

Initial Requirements

Prior to the end of the orientation period, students participating in clinical practicum must access/complete the following:

- TB screening (two PPD skin tests or blood draw) Piedmont Requirement
- Proof of vaccinations and immunities* (MMR, Hepatitis B, Varicella, TDAP, COVID) Piedmont Requirement

- Background check (\$50-\$90) CMSD program requirement
- Drug screening (may be required) (\$20)
- BLS CPR certification card (\$55) CMSD program requirement
- Personal health insurance (costs vary depending on company) Piedmont Requirement
- Student liability insurance (costs vary depending on company) CMSD program requirement

*Students declining any vaccination for medical or religious reasons must see the clinic director to sign an acknowledgement of potential outcomes form.

Students should upload copies of their TB test, vaccinations, CPR card, personal health insurance, and liability insurance into Calipso.

Requirements for Clinic

Students must complete the following prior to being assigned clients in the clinic:

- Completed and signed Registration Checklist for CMSD 5101 and CMSD 5201
 - Copy of 25 Observation Hours- CMSD program requirement
 - Student Responsibility Statement (Appendix A)- CMSD program requirement
 - Proof of MMR 1, 2- Piedmont requirement
 - Proof of Hepatitis B 1, 2, 3 (strongly recommended)
 - Proof of Varicella (chicken pox) 1, 2 (strongly recommended)
 - Influenza (recommended; expiration date is 12 months from the shot date)
 - TB Test (blood test OR skin test 1+2; expiration date is 12 months from the test date)- Piedmont requirement
 - DTap (Diphtheria/Tetanus/Pertussis) (expiration date is 10 years from shot date)- Piedmont requirement
 - Fingerprinting may be required depending on the site.
 - Bloodborne Pathogen Tutorial- CMSD program requirement
 - HIPAA course (expiration date is 12 months from test date)- CMSD program requirement
 - Signed Confidentiality Statement (expiration date is 12 months from signature date)- CMSD program requirement
 - Copy of current Basic Life Support (BLS)/CPR card- CMSD program requirement
 - Background check (expiration date is 12 months from test date)- CMSD program requirement
 - Drug Screening (for hospital placements- only if required)
 - Copy of current, privately purchased \$1,000,000 minimum liability insurance policy- CMSD program requirement
 - FERPA Course- CMSD program requirement
 - Infection Control & Universal Precautions Course- CMSD program requirement
 - Mandated Reporting Course- CMSD program requirement

Mandatory 25 Observation Hours

It is a requirement for ASHA certification to have a total of 25 “guided” clinical observations hours as part of your clinical training in Speech-Language Pathology. All 25 of these observation hours must be documented (see “forms titled “Guided Observation of Evaluation Session,” “Guided Observation of Treatment Session,” and “Clinical Observation Log” in APPENDIX), and adhere to ASHA 2020 standards. These hours should represent a variety of clinical disorders and client ages.

Implementation: Guided clinical observation hours generally precede direct contact with clients/patients. Examples of guided observations may include but are not limited to the following activities: debriefing of a video recording with a clinical educator who holds the CCC-SLP, discussion

of therapy or evaluation procedures that had been observed, debriefings of observations that meet course requirements, or written records of the observations. It is important to confirm that there was communication between the clinical educator and observer, rather than passive experiences where the student views sessions and/or videos. It is encouraged that the student observes live and recorded sessions across settings with individuals receiving services with a variety of disorders and completes debriefing activities as described above.

The observation and direct client/patient contact hours must be within the [ASHA Scope of Practice in Speech-Language Pathology](#) and must be under the supervision of a qualified professional who holds a current ASHA certification in the appropriate practice area. Guided clinical supervision may occur simultaneously during the student's observation or afterwards through review and approval of the student's written reports or summaries. Students may use video recordings of client services for observation purposes.

TB Test (waiver eligible) – Piedmont Requirement

- Annual Renewal
- Expiration date is 1 year from when the test was read, not the *vaccine serum* expiration date on your form
- Copy of negative results
- If your TB test routinely shows a false positive, you will need a chest x-ray and verifying statement from your physician
- If pregnant, CDC recommends that the shot may only be taken in the third trimester; CMSD recommends waiting until after giving birth; indicate this on the form
- NGHHS Habersham conducts TB Testing- 770-219-7828. The cost is

Fingerprinting

- May be required by some off-site placements.

Background Check- CMSD program requirement

- Annual Renewal
- May be specific to placement setting (may have their own system requirements)
- Must be a NATIONAL check, including all states you have lived in.
 - Your local Sherriff's Department (**\$15-20**)

Drug Testing (may be required at some off-site placements; would need to be renewed each clinical rotation)

- Lab at Northeast GA Habersham- 10 Panel Test, results sent directly to Clinical Director. Call 770-219-7828 to set up. Cost is **\$20** per student.

CPR Certification- CMSD program requirement

Basic Life Support (BLS) CPR certification may be offered through the College of Nursing and Health Sciences at a cost of **\$55** per student, or students may elect to complete training on their own. The Clinic Director will send out an email with information regarding this class if it is being offered through the CONHS.

- CPR certification is valid for two years and must remain current throughout clinical practicum enrollment.
- Online courses are not allowed for first time, renewal of certification only.

Liability Insurance- CMSD program requirement

Students must have continuous liability insurance coverage throughout their on-campus and off-

campus clinical enrollments. Students can purchase speech pathology student coverage from Proliability through AMBA by going online to <https://www.proliability.com/professional-liability-insurance/students-individuals.html>. Other companies that may offer student rates include: marsh.com, HPSO.com, Hiscox.com. Cost varies depending on company.

FERPA Course- CMSD program requirement

- Annual renewal
- <https://studentprivacy.ed.gov/content/online-training-modules> (Free)

Infection Control and Universal Precautions- CMSD program requirement

Clinicians are to approach infection control by treating all bodily fluids as if they ARE known to be infections. Whenever conducting client contact that may include contact with bodily fluids, all students and faculty are expected to follow standard universal precautions. Each student clinician must successfully complete universal precautions training during orientation. For more information on universal precautions, please visit:

<https://www.osha.gov/SLTC/etools/hospital/hazards/univprec/univ.html>

- Annual renewal
- <https://bissafety.com/courses/infection-prevention-and-control-basic-awareness/> (Free)

Bloodborne Pathogen Training- CMSD program requirement

- <https://pdhsafety.com/course/osha-bloodborne-pathogens-free-training/> (Free)

HIPAA Course- CMSD program requirement

- Annual renewal
- <https://compliance-group.com/free-hipaa-training/register/> (Free)

Confidentiality Statement- CMSD program requirement

- Appendix B in Clinic Handbook
- Submitted prior to beginning 1st Clinical Practicum

Mandated Reporting- CMSD program requirement

- Annual renewal
- Abuse and Neglect in Children: Mandated Reporting Requirements for Employees, Volunteers, and Contractors <https://www.prosolutionstraining.com/menu> (Free)

INITIAL COMPETENCIES

Undergraduate and graduate student clinicians are expected to be able to do the following without training:

- Utilize basic computer and website skills.
- Open documents in email.
- Send documents in appropriate format.
- Use Microsoft word to create and edit reports and treatment plans.
- Contact IT and/or Student Support Services
- Use Piedmont University email for ALL clinic-related communications.

ONLINE CLINIC MODULES

Completion of a clinical modules may be required during orientation, throughout the semester, and for review each semester. These modules will include education on topics such as HIPAA, infection control, universal health precautions, and policies/procedures/laws at the federal, state, and local levels. Modules will be assigned as appropriate.

ENGLISH PROFICIENCY REQUIREMENTS

This program follows the guidelines of our university. Given the scope of practice in communication disorders, oral English proficiency is considered an essential tool. Piedmont University's graduate catalog states that international students whose first language is not English are required to pass an English proficiency test before they may be admitted to candidacy for a graduate degree.

Additionally, if a student whose native language is not English is accepted into Piedmont University's Speech-Language Pathology graduate program, and if there is evidence that this student is having exceptional difficulty with one or more of the tasks required in clinical service delivery (e.g., speech perception, speech/language modeling, comprehending speech or language produced by individuals with communication disorders, writing clinical reports, counseling families, etc.), the student will be required to address these deficits through a remediation plan (e.g., therapy for accent reduction, perceptual training). Training and/or therapy will be provided by one of the clinical or academic faculty members outside the clinic to protect the student's privacy.

TIME COMMITMENT

Advanced clinical practicum is a major time commitment. Students are expected to act not only as graduate students, but as responsible employees of the clinic. Prior to begin of each clinical semester, students must ensure they have arranged to make this practicum a priority and be available Monday- Thursday 9:00am – 5pm. When students anticipate competing time commitments, a conference with the clinical director must be made immediately in order to discuss options.

PRACTICUM ATTENDANCE

In addition to maintaining a client caseload, students are required to attend all professional seminars, colloquia, clinical labs, presentations, training workshops, modules, weekly scheduled clinic meetings, and other professional and clinical development activities. Failure to do so will result in an infraction notice and a lowering of the CMSD 4000/5101 final grade by one letter.

SESSION ATTENDANCE

Student clinicians enrolled in CMSD 4000/5101 have an obligation to provide clients with regular and consistent therapy sessions. Consistent attendance is also required to enable students to gain appropriate skills across disorders. If students anticipate that other obligations will cause excessive absence during a semester, they should consider not registering for clinic that semester. Students are welcome to make an appointment with the chair or clinic director to discuss any concerns about this. Only extreme illness will be considered an excusable absence and a reason for canceling an appointment with clients, and/or failing to attend assigned clinical placements. If any sessions conflict with religious holidays, the absence will be excused provided the student notifies the supervisor and makes alternate arrangements in advance.

Students enrolled in CMSD 4000/5101 must prioritize both their health and the well-being of their clients, classmates, and instructors. If a student is too ill to attend class, they are also considered too ill to participate in clinical sessions. Students should prioritize rest and recovery, and they are encouraged to notify clinic supervisors as soon as possible to make alternative arrangements for missed sessions. This policy ensures a safe and productive learning environment for all clinic participants.

If the student will not be able to attend a scheduled client session, the assigned supervisor must be contacted as early as possible. The student and supervisor will then need to agree on a plan for session coverage or cancellation. Students are not to cancel any client sessions without first

discussing it with their supervisor. Students will, however, be required to offer make-up sessions for any treatment/diagnostic sessions missed.

Excused absences may not exceed two sessions before an infraction is incurred. Unexcused tardiness and absences in excess of one time per clinical assignment will be considered excessive and will result in an infraction. Please note, the attendance policy applies to clinic and all clinic-related activities and guest lectures.

DECLINING CLINICAL PLACEMENT/CLOCK HOUR OPPORTUNITIES

At the Piedmont University Speech-Language Clinic, we understand that unforeseen circumstances may arise. However, students are expected to attend all scheduled clinical placements and clock hour opportunities. Excuses for absence will only be accepted under the following conditions:

- Extreme illness
- Family emergency
- Religious holiday

Students must provide appropriate documentation for any of the above reasons. Additionally, students are required to sign an acknowledgment form stating they understand that declining clinical placements or clock hour opportunities may result in an inadequate number of earned clock hours. This may consequently extend their program and delay graduation.

If a student declines an opportunity, they must sign the Communication Sciences and Disorders Acknowledgement Form (Appendix D), acknowledging their responsibility to meet the clinical hour requirements and the potential impact of their decision on their academic progress.

SLP CLINIC DRESS CODE

Professional and clean attire is mandatory in all Piedmont University Speech-Language Pathology Clinic areas and off-site placements. Clinicians will be asked to go home and change or remove/cover items if they do not meet these requirements. Clinicians represent the clinic and may only enter clinical areas if they meet these requirements.

Our dress code includes the following:

- Hair must be clean and away from the clinician's eyes and face.
- Earrings/jewelry
 - Stud earrings only; no dangles, they could get pulled out.
 - No dangle bracelets.
- Scrub tops and bottoms required. Black only.
 - Winter weather- black undershirt worn under scrub top.
- Shoes should be clean and must not have holes or signs of wear.
- Piercings of the ears, nose, or lips must:
 - not be distracting or draw attention to the wearer's body,
 - not present a health or safety risk,
 - be deemed appropriate for the setting.
- Tattoos must be covered if:
 - they portray vulgar, rude, or violent language or imagery,
 - they portray any religious, political, or social beliefs that may be offensive to others,
 - they are distracting or draw attention to the wearer's body,
 - the clinical supervisor deems them inappropriate for the setting.

PROFESSIONAL CONDUCT

The Piedmont University Speech-Language Pathology Clinic maintains high professional standards at ALL times. Student clinicians are expected to conduct themselves with professionalism and dignity at

all times while in the clinic and surrounding areas.

NOTICE OF STUDENT RESPONSIBILITY

It is the student's responsibility to be aware of and to meet all clinical responsibilities outlined in this manual and the Student Responsibility Agreement must be signed. Failure to adhere to the clinical requirements contained in these guidelines may result in a letter grade drop, loss of clinical privileges and/or dismissal from the clinical program. This document is a living document and can change at any time should it be necessary. Students will be notified of changes if they occur, and an updated Clinic Handbook will be posted in Canvas.

Piedmont University Speech-Language Pathology Clinic Non-Discrimination Policy:

Student clinicians are bound by Piedmont University's non-discrimination policy when interacting with clients, students, faculty, staff, and community.

Non-Discrimination Statement:

It is the policy of Piedmont University not to discriminate in its educational programs, activities, or employment on the basis of sex, gender identity, sexual orientation, physical or mental disability, pregnancy, race, age, religion, color, national or ethnic origin, veteran status, genetic information, or any other category protected by applicable federal, state, or local law.

Student Dismissal

Students will be notified in writing by the program director if substandard clinical or professional performance, despite development of a success plan, results in dismissal. If dismissal occurs, students will have the right to appeal. Grounds for dismissal from the Program include—but are not limited to—the following:

Failure to comply with Program requirements for attendance, ethical conduct, academic honesty, patient safety, academic standards, or technical standards. A single grade of "C+" or lower on any clinical course, earned after the development of a success plan.

Academic misconduct

Excessive academic or professional warnings regardless of individual course grades or cumulative Program GPA. Student is deemed unsafe to provide patient care as determined by clinical supervisor/faculty.

Termination of an external rotation by the supervisor or Program faculty as the result of poor or inadequate clinical or professional performance on the part of the student. Failing to do remedial work as outlined in the success plan within the prescribed time period or if quality of remedial work is unsatisfactory as determined by the clinical educator or director. Abuse of controlled substances (e.g., prescription pain medications) and alcohol; use of illegal substances (e.g., marijuana, cocaine). Rotations may require random testing for these and other substances. Student compliance is required.

ON-CAMPUS CLINICAL PROCEDURES

CLINIC MATERIALS

The materials closet is located in the front desk area of the clinic. All materials must be signed in and out for every use. Piedmont University's Speech and Language Clinic maintains a wide variety of formal tests and assessment materials designed to be used as part of speech/language evaluations. These materials are located in the materials closet. All test booklets, manuals, and necessary manipulatives are filed on the shelving and are labeled. Test protocols can be found in the metal horizontal file cabinets; arranged alphabetically. Please **DO NOT** use the last remaining test protocol for a given test. If you notice that the supply is low, let the Office Manager know and new forms will be

ordered. Do not write on/in any testing materials. It is expected that all diagnostic materials be returned to the materials closet and logged in as returned within two days of the diagnostic session. Students will be responsible for replacing missing or damaged tests or materials.

Various toys and materials are also located in the materials closet. Electronic devices such as iPads, Digital recorders, etc. are stored in the locked filing cabinets. Students will inspect and clean all materials as they are returned. Please return the materials to the areas you originally found them. Students will be responsible for replacing missing or damaged toys or materials.

Everyone is expected to return all materials as soon as they are done using them. NOTE: Whoever checks out the materials is responsible for assuring that they are returned. All students who have not returned materials at the end of the day will receive a note from the Office Manager or the Supervising Faculty the following morning. Repeat offenses of not returning materials can result in being addressed by the CMSD Conduct of Professional Standards policy. The list of materials that have not been returned by the end of the day of notice will be provided to the Clinic Director for follow-up. If the equipment is faulty, not functioning properly, or it is noted that there is any other type of problem with materials and/or equipment, please immediately notify the Office Manager and provide an explanation of the issue.

Overnight Checkout: Materials/equipment may be checked out overnight and must be checked out from the Materials Closet for overnight use between 4:00 and 5:00pm. All overnight materials must be returned to the Materials Closet by 8:30am the following day. Any materials and/or equipment checked out prior to 4:00 must be returned between 4:00 and 5:00pm for overnight checkout. During the first month of the semester, evaluation materials may not be removed from the clinic for overnight use unless given specific permission by their assigned clinical faculty.

Use of tests and test forms outside of clinic (class or off-campus placements) and Clinic materials are not available for use at practicum sites during the day unless approved by the Clinic Director/Coordinator. No more than two of the published test forms per test may be used off site. Additional forms need to be purchased by the site.

Client Assignments

Students will receive client assignments within two weeks of the beginning of the semester. As soon as the assignment is received, students should schedule an appointment to meet individually with their assigned supervisor(s) to discuss a plan for the first session. Prior to that meeting, students will complete a chart review on their clients and develop a preliminary plan. Students should complete the Chart Review Form and Session Plan form and bring it to the supervisor meeting. Students should call their clients 24-48 hours prior to their session to confirm the appointment and ask additional questions needed to prepare for the first session (see Clinic Client Communication Policy, Appendix E).

First Session Procedures

During the first client session, students will review the following with their clients:

- Contact information, medications, allergies, and alerts for any changes in history
- Privacy Practices acknowledgement
- Semester schedule
- Release of information forms

Group Meetings/Clinic Learning Communities

Students will attend a weekly group clinic learning community to discuss a variety of clinical topics and procedures. These learning opportunities are required as part of your clinic enrollment.

Individual Meetings

Students will also meet individually with their assigned supervisors on a regular basis to discuss client plans, progress, and potential plan modifications. A clinic performance evaluation (CPE) meeting will also be scheduled at midterm and at the end of the semester to discuss progress and needs with clinical skill development. Additional meetings may be scheduled throughout the semester as needed given advanced notice.

DIAGNOSTIC PROCEDURES

Diagnostic/Evaluation Session Scheduling

Initial comprehensive client diagnostics/evaluations are typically scheduled for 1-2 hour sessions depending on assessment needs. These sessions will be completed by a team of two graduate clinicians. The clinical faculty and staff are responsible for scheduling diagnostic sessions, assigning student teams, and notifying teams of upcoming scheduled sessions. Student teams are responsible for contacting the client to relay the scheduled day/time of appointment (see Clinic Client Communication Policy, Appendix E).

Diagnostic/Evaluation Session Planning:

Once a diagnostic/evaluation team is notified of the scheduled session, that team is responsible for contacting the client to confirm appointment day/time (see Clinic Client Communication Policy, Appendix E) completing a chart review, developing a preliminary plan, and scheduling a planning meeting with the assigned supervisor. The team must submit the chart review form and session plan form to the supervisor 48 hours prior to meeting with the supervisor.

Once the plan has been approved by the supervisor, the team is responsible for acquiring all materials and thoroughly learning and preparing the assessment tools and tasks. Students should call the client 24-48 hours prior to the session to confirm the appointment and ask any questions needed to prepare for the first session.

Diagnostic Session:

On the day of the diagnostic session, the team should arrive at least 30 minutes prior to the session to set up the room accordingly. The team should ensure the supervisor has a copy of the updated plan as well as copies of the test protocols.

When the client arrives, the supervisor will make introductions, and the team will then initiate the diagnostic session. The team should plan on completing all interviews and testing tasks within the allotted time. Once all interview questions and testing tasks have been completed, the team will meet with the supervisor for a brief meeting to discuss preliminary results and recommendations. This information will be shared with the client/caregiver prior to the end of the session.

Immediately after the session, the team will meet with the supervisor to ask questions and receive feedback. The team will enter its first draft of the diagnostic report with goals into Fusion within 48 hours of the diagnostic session. The supervisor will review and send feedback to the team within 48 hours from the time of submission. This process will continue until the report has been finalized. Once the report has been finalized, the team is responsible for printing the report, addressing the envelope, and providing the final report with envelope to the supervisor for mailing or presenting to the client. If additional report copies have been requested for submission to other professionals, fax cover sheets should also be submitted to the supervisor with the final report. The goal is to have the finalized report sent to the client/caregiver within no more than two weeks.

DOCUMENTATION

Initial Evaluation Report

Following each diagnostic/evaluation session, the student will complete an initial evaluation report in Fusion within 48 hours of completing the diagnostic. The clinical supervisor will review the report and provide written feedback regarding revisions within the document. Revisions will continue and the report will remain unsigned until the student's supervisor has approved the final draft.

Re-Evaluations for Returning Clients (Progress Notes/Reports):

Returning clients may be eligible to receive an updated assessment in the form of a Progress Note/Report. This would include re-assessing areas that were previously identified as requiring support. The same procedures for Diagnostic/Evaluation Session Planning will apply. Following each re-evaluation, the student will complete an evaluation report in Fusion within 48 hours of completing the diagnostic. The clinical supervisor will review the report and provide written feedback regarding revisions within the document. Revisions will continue and the report will remain unsigned until the student's supervisor has approved the final draft.

Goals

Following each diagnostic/evaluation session, the student will enter long-term and short-term client goals into Fusion. The clinical supervisor will review the goals and provide written feedback within the document. Revisions will continue and until the student's supervisor has approved the goals.

Plan of Care

A Plan of Care will serve as the basis for your treatment for the semester. It is automatically generated in Fusion from the initial evaluation after goals have been entered. The Plan of Care may periodically need to be modified to reflect the client's progress and needs.

Session Plans

Student clinicians are responsible for developing a session plan including goals, methods, materials, activities, and potential modifications/advancements for the upcoming clinical session. Session plans should be developed in accordance with the semester plan of care and in response to the observations made and reported in your session outcome notes. Session plans must be submitted to your supervisor's preferred location (email, One Drive file, etc) no later than 48 hours prior to the scheduled clinic session. Supervisors will review the session plan and provide feedback prior to your session. Training on the development of session plans is provided during orientation or during one of the group clinic learning community meetings. Sample plans and templates are available in Canvas.

Daily Notes

Student clinicians are responsible for developing a daily note following each diagnostic and treatment session. Daily notes are written in SOAP note format. SOAP stands for: Subjective, Objective, Assessment, and Plan. The idea of a SOAP note is to be brief, informative, focus on what readers need to know (e.g., doctors, nurses, teachers, OT, PT, social worker, another SLP, caregivers, etc.), and include information an insurance company would need to justify continued involvement with the patient. Daily note drafts must be entered into Fusion within 48 hours after the scheduled clinic session. Training on the development of your daily notes is provided during your Clinical Methods course and/or one of the group clinic learning community meetings. Sample session outcome notes are available in Fusion or Canvas.

Progress Reports

At the beginning (if a returning client) and end of each semester (for all clients), the student clinician will complete a progress report in Fusion within 48 hours prior to the last scheduled session of the semester. It must be finalized and signed by your supervisor prior to the last session. Once the report has been finalized, the clinician is responsible for printing the report and reviewing it with the

client/family during the last session of the semester. Training on the development of progress reports is provided during your Clinical Methods course and/or one of the group clinic learning community meetings. Sample reports are available in Fusion or Canvas.

Clock Hours

Students are responsible for tracking their clinical hours earned throughout their clinical experiences. During the semester, students should document clock hours in CALIPSO daily. Hours will be reviewed and approved by your clinical supervisor during your weekly meetings. During midterm and final meetings, progress toward accumulation of hours will be reviewed.

Documentation Flowchart

	Before each Dx and Tx session	After each Dx session	After each Tx session	At the beginning and end of the semester	Location
Session Plan	x				Supervisor's One Drive
Initial Evaluation Report		x			Fusion
Plan of Care and Goals		x			Fusion
Daily Notes		x	x		Fusion
Progress Report				x	Fusion
Clock Hours		x	x		CALIPSO

NOTE: Documentation requirements differ for off-campus placements and externships and may differ for each supervisor. Please speak with your supervisor for specific documentation requirements.

BILLING AND CODING

While client's insurance will not be billed for speech therapy services, students will enter the appropriate billing and procedure codes into each daily note. The materials fee for each clinic session is \$10 and is to be paid to the clinic office each session. The materials fee for each diagnostic is \$100 and should also be paid at the time of the evaluation. The diagnostic materials fee is only charged one time regardless of the number of sessions needed to complete evaluations and/or progress updates.

ICD Codes:

ICD codes are diagnosis codes used for each diagnostic and therapy client. For each client, there is at least one primary (underlying etiology) ICD code (what you are treating in therapy) and possibly one or more secondary (manifestation) ICD codes if applicable.

CPT Codes:

CPT codes are procedural codes used for each diagnostic and therapy session. They indicate the procedure or service provided by the clinician in the corresponding session. More than one code may be used each session. CPT codes used should be specifically designated for an SLP; codes used by other disciplines cannot be used. Most of our CPT codes are "untimed," meaning the code is reported one time per session regardless of the time spent providing that service. Other codes must be documented in 15-minute intervals as established by Medicare.

All ICD and CPT codes should be accurate and used consistently for each client. Refer to the clinic's procedure and coding manual in Canvas or on the ASHA website at https://www.asha.org/practice/reimbursement/medicare/SLP_coding_rules/. Further instruction on CPT codes will occur between supervisor and clinician during clinical training and clinic weekly topic meetings.

EXTERNSHIP PROCEDURES

Refer to the Externship Handbook for information and guidelines for students and preceptors/supervisors.

RISK MANAGEMENT AND PRIVACY PROTECTION

Health Insurance Portability and Accountability Act (HIPAA):

HIPAA is a federal mandate governing the privacy and security of all health care information. All CMSD students will be required to review and comply with all aspects of patient health care information.

Students will be required to sign a confidentiality statement outlining requirements for this program as well as complete HIPAA training prior to clinical observation or practicum.

Confidentiality

Students enrolled in the College's professional programs must hold in confidence all client/patient related information. On admission to the SLP program, the student will sign a Confidentiality Statement to be placed in the permanent record (See Appendix A). Failure to protect any client's right to confidential treatment may result in a failing course grade, dismissal from the SLP program, and civil liability for a breach of confidentiality. All MS-SLP students should be familiar with the following statements:

- Students must not transmit or place online individually identifiable patient/client information.
- Do not share or post information or photos gained through the patient/client relationship.
- Students may not photograph, video, or otherwise use their camera when in the clinical setting.
- Phones are for emergency use only and must be kept out of the clinical environment.
- Do not upload images of yourself or others students/faculty in a clinical environment unless approved by faculty.
- Students must observe ethically prescribed professional patient/clinician boundaries.
- Accepting a client's "friend" request can damage the therapeutic relationship.
- Students should understand that patients/clients, colleagues, institutions, and employers may view postings.
- Students should take advantage of privacy settings and seek to separate personal and professional information online.

Promptly report a breach of confidentiality or privacy. Students should bring content that could harm a patient's privacy, rights, or welfare to the attention of the CMSD Director or CMSD faculty for review. Remember that standards of professionalism are the same online as in any other circumstances. Do not make disparaging remarks about patients/clients, co-workers, faculty, clinical instructors, or any other person, even if they are not identified. Be careful with the tone of your remarks. Failure to maintain professionalism and confidentiality may result in course failure or expulsion from the program.

Client Welfare

All student clinicians enrolled in clinic will receive training on procedures for ensuring the welfare of the clients within the clinic. Clinicians and clinical supervisors are bound by the American Speech

Language and Hearing Association (ASHA) Code of Ethics and agree to the following:

- Honor their responsibility to hold paramount the welfare of persons they serve professionally or who are participants in research and scholarly activities.
- Honor their responsibility to achieve and maintain the highest level of professional competence and performance.
- Act with honesty and integrity when engaging with the public and shall provide accurate information involving any aspect of the professions.
- Uphold the dignity and autonomy of the professions, maintain collaborative and harmonious interprofessional and intraprofessional relationships, and accept the professions' self-imposed standards.

Mandated Reporting

Students providing clinical services are considered to be mandated reporters of suspected abuse or neglect in the state of Georgia.

For suspected abuse or neglect of a child in Georgia:

Report to DFCS "immediately" (within 24 hours or sooner) when maltreatment has been suspected or it is believed it will occur. If the child is in imminent danger (threat of immediate harm that could cause serious injury or death), call 911.

There are three options for reporting suspected abuse and neglect to DFCS.

- Option #1: Make a report by phone by calling 1-855-422-4453.
- Option #2: Email or fax the Georgia Mandated Reporter form to 229-317-9663 or cpsintake@dhs.ga.gov.
- Option #3: Submit the Georgia Mandated Reporter form online at <https://cps.dhs.ga.gov/Main/Default.aspx>.

Use one of the following codes to report online:

Facility/Reporter Type	Code
Hospital/ Clinic	CPS23577
Medical Facility Staff	CPS30630
School Personnel	CPS47694
Other Mandated Reporter	CPS35170

Refer to this website for additional information:

<https://dph.georgia.gov/health-topics/injury-prevention-program/cdc-core/child-abuse-and-neglect>

For suspected abuse or neglect of an At-Risk Adult in Georgia:

- Mandated reporters must report suspected abuse to both Adult Protective Services and to law enforcement (O.C.G.A. 30-5-4(b)(1)(A)).
- Call local law enforcement if abuse, neglect or exploitation is suspected (911). Contact the Division of Aging Services' Adult Protective Services:
 - Central Intake in Metropolitan Atlanta 404-657-5250 or outside of Atlanta at 1-866-552-4464 OR report online at:
<https://hssgaprod.wellsky.com/assessments/?WebIntake=97267103-7A5E-4B72-B44F-DD4264B727D8>
- For suspected abuse or neglect in a long-term care facility or residence, call (404) 657-5728 or (404) 657-5276 or the toll-free number 800-878-6442 OR report online at:
<https://dch.georgia.gov/divisionsoffices/healthcare-facility-regulation>

Refer to this website for additional information:

<https://aging.georgia.gov/report-elder-abuse/abuse-neglect-and-exploitation-risk-adults-georgia>

- Annual renewal
- Abuse and Neglect in Children: Mandated Reporting Requirements for Employees, Volunteers, and Contractors <https://www.prosolutionstraining.com/menu/?clearFilter> Mandated Reporter Requirements for At-Risk Adults; CANVAS

Endoscope Management

Any staff or student using endoscopes will be trained in appropriate cleaning, use, and disposal procedures prior to their use. In addition, these procedures will be posted in the voice and swallowing lab for reference.

Biohazardous Waste

Biohazardous waste kits are available in the clinic materials room. Small biohazardous materials, such as used bandages or gauze can be disposed of in available sharps containers which are in the waiting room restroom and the clinic multipurpose room. Clinicians are to notify the clinic office manager to request pickup/disposal of the items.

PRAXIS INFORMATION

The **Praxis Examination in Speech-Language Pathology (5331)** is an integral component of ASHA certification standards. The development of the exam is commissioned by ASHA and facilitated by the Educational Testing Service (ETS) to provide a system of thorough, fair, and carefully validated assessments. The speech-language pathology Praxis exam is owned and administered by ETS as part of The *Praxis II*®: Subject Assessments; however, ASHA's [Council for Clinical Certification in Audiology and Speech-Language Pathology](#) (CFCC) appoints subject matter experts, makes a final determination for the passing score, and reviews [Praxis Exam Policies](#) [PDF] for fairness.

The [current passing score for purposes of ASHA certification](#) is **162** (on a 100–200 scale).

The Praxis Exam as a Requirement

The Praxis exam is used as a [requirement](#) for one or more of the following:

- [ASHA Certificate of Clinical Competence in Speech-Language Pathology](#)
- [State Professional Licensure](#)

The Praxis Exam and State Credentials

Each state determines its passing score for professional licensure and teacher credentialing. Most states adopt the same score as required for ASHA certification, but in some states the Praxis examination score for licensure or teacher credentialing may be higher or lower than the ASHA passing score. The passing score adopted by a state is based on a review of ASHA's standard-setting study and/or an independent standard-setting study commissioned by the state or state agency.

The Praxis Exam and ASHA Certification

Individuals are eligible to apply for certification once they have completed all graduate-level academic course work and clinical practicum and been judged by the graduate program as having acquired all of the knowledge and skills mandated by the current standards. Once certification has been applied for, applicants have 2 years in which to [complete the certification process](#), which includes passing the Praxis exam. The CFCC requires that [all applicants must pass the national examination](#) in the area for which the Certificate of Clinical Competence (CCC) is sought.

Standard VI: Assessment of the [2020 Speech-Language Pathology Certification](#)

[Standards](#) states: ***The applicant must have passed the national examination adopted by ASHA for purposes of certification in speech-language pathology.***

Praxis Exam Acceptability

Results of the Praxis Examination in Speech-Language Pathology submitted for initial certification must come directly to ASHA from ETS and must have been obtained no more than 5 years prior to the submission of the certification application. [Scores older than 5 years will not be accepted for certification](#). Applicants who fail the examination may retake it; however, if the exam is not successfully passed within the 2-year application period, the applicant's certification file will be closed. If the exam is passed at a later date, the individual will have to reapply for certification under the standards in effect at that time.

When to Take the Exam

It is recommended that individuals [register and take the Praxis exam](#) **no earlier** than the completion of their graduate coursework and graduate clinical practicum or during their first year of clinical practice following graduation. Applicants should take into consideration any state licensing requirements regarding completion of the exam.

PRAXIS Codes:

- Georgia Board of Examiners for SLP/Aud: **7259**
- Georgia Professional Standards Commission: **7694**
- Piedmont University SLP: **5637**
- Piedmont University Recipient Code: **0637**

APPENDIX A

STUDENT RESPONSIBILITY STATEMENT

In order to meet the requirements for Clinical Practicum and/or Internship/Externship Education, STUDENTS shall read the following and indicate their understanding by signing below. This Student Responsibility Statement is **in addition to the course syllabus**, and the student is responsible for being familiar with the content of both documents. In consideration of the opportunity to enter into a clinical education/internship educational program, I agree to:

- A. Complete and be responsible for the cost of providing all health forms and certificates requested by the FACILITY.
- B. Provide the PROGRAM and FACILITY with written confirmation of professional liability coverage for the term of the clinical/internship education assignment if required by the degree program.
- C. Secure my own housing, but welcome FACILITY housing and/or assistance in obtaining private housing, during my clinical/internship education assignment.
- D. Follow the policies, rules and regulations of FACILITY, including those regarding confidentiality of protected health information or other confidential information pertaining to client and patient records.
- E. At all times conduct myself, both at the FACILITY and outside normal business hours, in a personally and professionally ethical manner.
- F. Conform in my attire and appearance to the accepted standard of the FACILITY, and procure the appropriate and necessary attire required, if any, but not provided by the FACILITY.
- G. Provide my own transportation to and from the FACILITY and any reasonable special assignment by the faculty or FACILITY. I will never transport patients.
- H. Conform to the work schedule of the FACILITY and make up time and work missed during unavoidable illnesses, in consultation with my academic coordinator and clinical instructor.
- I. Notify the FACILITY and PROGRAM Clinical Education Coordinators if I learn I am pregnant before or during the clinical practicum and/or internship/externship education assignment so that appropriate personal safety precautions can be implemented.
- J. Obtain prior written approval from PROGRAM and FACILITY before publishing or presenting any material relating to the clinical experience outside normal educational settings of the PROGRAM.

Student Name: _____
(Please type or print)

Student Signature

Date

Appendix B

Confidentiality Statement

In accordance with the Law (Official Code of Georgia, Annotated, Sections 37-3, 37-4, 37-7 and HIPAA) every patient's right to confidential treatment must be protected.

As a student and/or provider of care, I understand that the patient's right to privacy must be protected and treatment must remain confidential. While providing care, I may become knowledgeable of certain patient related information. This information may include patient identity, information related to a patient's treatment, diagnosis, or to other services received.

I understand that at all times I am restricted from discussing any information pertaining to a patient with anyone other than CMSD faculty or clinical instructors directly responsible for the patient's care. I understand this includes other students. Personally, identifiable information is any information, which is readily used to identify a particular patient including but not limited to: name, address, diagnosis, Social Security number, physical description, names of family members, and photographs. I further understand that if I do discuss patient information, I subject myself to civil liability and may be subject to a failing course grade and dismissal from Piedmont University's SLP program.

I understand that I am not to transmit nor post any patient information electronically, including email, cell phone messaging, social networking sites or journaling/blogs, such as, but not limited to, Facebook, Twitter, Instagram, Snap Chat. Patient information includes identifying information but also includes pictures, treatment information or any clinical or other information. If such information is found to be posted; the result may include course failure or immediate dismissal from the program.

Student's Signature

Date

This signed form will be part of your student file.

APPENDIX C

Registration Checklist for CMSD 5101 and CMSD 5201 Students

Required documentation to be submitted prior to registering for each clinical rotation, including externship. Detailed instructions pertaining to these items are available on pages 3 & 4 of this document. When submitting, **please submit page 1-2 only.**

Personal Information

Print Student Name _____

Piedmont Email _____

Circle Clinical Rotation: **Fall** **Spring** **Summer** **Externship01** **Externship02**

Designate each item with an "A" if documentation is "Attached" or an "O" if documentation is current and "On File".

	<u>A or O</u>
Copy of 25 Observation Hours	_____
Student Responsibility Statement (submit with 1 st Clinical Practicum paperwork only)	_____
MMR 1, 2(Measles, Mumps, and Rubella) <i>Provide proof in not already on file</i>	_____
Hepatitis B 1, 2, 3 (strongly recommended): <i>Provide proof in not already on file</i>	_____
Varicella 1 ,2 (Chicken Pox):	_____

The following items must remain current at ALL times throughout each clinical experience unless specifically waived by the clinical site (see next page). If a document expires during a clinical experience, you must submit a copy of the updated renewal to remain in the class. Expired documentation may result in being administratively dropped from your clinical experience. Write in all expiration dates & indicate if the document is Attached or On File BEFORE you submit this form to the CMSD office. Check your CALIPSO page for dates currently on file.

I have checked my CALIPSO file and confirm all items are current and correct. _____

I have printed and attached verification of my fingerprint status if required by site. _____

	<u>Expiration Date (month, day, year)</u>	<u>A or O</u>
Influenza Shot (recommended; expiration date is 12 months from the shot date)	_____	_____
TB Test (blood test OR skin test 1&2 ; Expiration date is 12 months from the test date)	_____	_____
DTap (Tetanus/Diphtheria/Pertussis) (Expiration is 10 years from shot date)	_____	_____
Fingerprinting (site-dependent; may be required by some sites)	_____	_____
Bloodborne Pathogen Tutorial (org date _____) (Update for CMSD 5101)	_____	_____
HIPAA Course (Expiration date is 12 months from the test date)	_____	_____
Confidentiality Statement (Expiration date is 12 months from signature date)	_____	_____
Copy of Current Basic Life Support (BLS)/CPR Card (expiration date is 2 years from test date)	_____	_____
Background Check (Expiration date is 12 months from test date)	_____	_____
Drug Screening (for hospital placements- only if required)	_____	_____
Copy of current, privately-purchased \$1,000,000 minimum liability insurance policy	_____	_____
FERPA Course	_____	_____
Infection Control & Universal Precautions	_____	_____
Mandated Reporting	_____	_____

Submit THIS signed checklist and all other appropriate documents as 1 complete packet (place this page on top & other documents, including any proofs of renewal, in the order listed above).

I attest that I have had the required hours of CMSD graduate coursework, per my Program of Study, prior to registering for my first clinical rotation. I am aware that I must turn in the above information within the timeframes indicated and that it is my responsibility to ensure the most current information is on file for all subsequent clinical experiences. Should any information be missing or outdated, I am aware that I may not earn clinical hours while documentation is missing or expired, and that I may be administratively dropped from this course and will not be awarded a grade for any current clinical rotation until all documents are on file.

Student Signature

Piedmont ID #

Semester /Year of This Practicum

OFFICE USE ONLY

Class # _____

Professor Signature: CMSD 5101/5201 course instructor approval

Registration Checklist for Clinical Experience – Discussion of items

IF AN ITEM IS WAIVER ELIGIBLE, YOU MUST SUBMIT A LETTER OR EMAIL FROM YOUR SITE STATING THAT THE ITEM IS NOT NECESSARY AT THE SITE. THIS CORRESPONDENCE MUST BE SUBMITTED WITH YOUR CMSD PACKET (REGISTRATION CHECKLIST AND INFORMATION FOR PRACTICUM/EXTERNSHIP) PRIOR TO BEING ALLOWED TO REGISTER FOR THE COURSE.

NO SITE IS ALLOWED TO “WAIVE” AN ITEM ON THIS REGISTRATION CHECKLIST UNLESS “WAIVER ELIGIBLE”.

Copy of 25 Observation Hours – CMSD program requirement (usually from previous university/college)

Student Responsibility Statement- CMSD program requirement (from CMSD Clinic Handbook)

- Submitted prior to beginning 1st Clinical Practicum

MMR (Measles, Mumps, and Rubella) – Piedmont requirement

- Must submit copy of actual record
- Series of two; must indicate both dates
- Two vaccines are required if born after 1956, or provide titer test proving immunization
- If pregnant, CDC recommends waiting until after giving birth; indicate this on the form

Hepatitis B (waiver eligible) – Strongly recommended by Piedmont

- Series of three shots that takes at least seven months to complete; must provide documentation for all three dates
- If pregnant, CDC states that the “risk is very low”; CSD recommends waiting until after giving birth; indicate this on the form

Influenza Shot (expiration date is 12 months from the shot date) (waiver eligible) – recommended by Piedmont

- If pregnant, CDC states that the shot may be taken while pregnant but may increase nausea
- CSD recommends that you get the shot in September.
- There are some sites who will accept religious and medical exemption for the flu shot item, however, the site will probably require you to do the following:
 - Use the site’s form for requesting an exemption.
 - The form must be signed by your religious leader or your medical doctor.
 - If approved by the site, you will probably be required to wear a face mask in all patient care areas.
- Submit the site’s exemption form with your packet.

TB Test (waiver eligible) – Piedmont Requirement

- Annual Renewal
- Expiration date is 1 year from when the test was read, not the *vaccine serum* expiration date on your form
- Copy of negative results
- If your TB test routinely shows a false positive, you will need a chest x-ray and verifying statement from your physician
- If pregnant, CDC recommends that the shot may only be taken in the third trimester; CMSD recommends waiting until after giving birth; indicate this on the form

Tdap (Tetanus/Diphtheria/Pertussis) (waiver eligible)- Piedmont Requirement

- Lasts 10 years
- Given when adult
- After 10 years, only need Tetanus booster shot
- If pregnant, CDC recommends that the shot may only be taken in the third trimester; CMSD recommends waiting until after giving birth; indicate this on the form

Fingerprinting (site-dependent; may be required by some sites)

Background Check- CMSD program requirement

- Annual Renewal
- May be specific to placement setting (may have their own system requirements)

- Suggested resources:
 - <https://app.advantagestudents.com/school/login> \$82.95
 - <https://fieldprintgeorgia.com/individuals>

Drug Testing (hospital setting only; required each clinical rotation)

- Suggested resources:
 - Lab at Northeast GA Habersham- 10 Panel Test, results sent directly to Clinical Director. Call 770-219-7828 to set up.

Bloodborne Pathogen Training- CMSD program requirement

- Suggested resources:
 - <https://nationalcprfoundation.com/courses/standard-bloodborne-pathogens-2/>
 - <https://pdhsafety.com/course/osha-bloodborne-pathogens-free-training/>
 - <https://training.safetyculture.com/course/bloodborne-pathogens/>

HIPAA Course- CMSD program requirement

- Annual renewal
- Suggested resources:
 - Healthcare Documentation, Coding, and HIPAA Requirements: An SLP's Guide; Course: #10130; Speech Pathology.com; CANVAS
 - <https://www.oshacademy.com/courses/training/625-hipaa-privacy-training/625.php>
 - <https://miora.org/free-hipaa-citi-training/>
 - <https://training.safetyculture.com/course/hipaa-compliance-training/>

Confidentiality Statement- CMSD program requirement

- Submitted prior to beginning 1st Clinical Practicum

Copy of Current CPR Card/Certificate- CMSD program requirement

- Online courses are not allowed
- May be offered by CMSD department; cost \$55/student

Copy of current, privately-purchased, \$1,000,000-minimum personal liability insurance policy- CMSD program requirement

- Must show beginning and ending dates of coverage (try marsh.com, HPSO.com, etc.)
- You may be able to purchase coverage early and set the Effective Date to just before your practicum begins

FERPA Course- CMSD program requirement

- Annual renewal
- Suggested resources:
 - FERPA: Family Educational Rights and Privacy Act; Course: #1033786; SpeechPathology.com; CANVAS
 - <https://usferpatraining-console.lrn.com/login> (You'll need to create an account)

Infection Control & Universal Precautions- CMSD program requirement

- Annual renewal
- Suggested resources:
 - Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens Standards: What You Need to Know; Course: #1033794; Speech Pathology.com

Mandated Reporting- CMSD program requirement

- Annual renewal
- Suggested resources:
 - Abuse and Neglect in Children: Mandated Reporting Requirements for Employees, Volunteers, and Contractors <https://www.prosolutionstraining.com/menu/?clearFilter> Mandated Reporter Requirements for At-Risk Adults; CANVAS

Communication Sciences and Disorders Acknowledgment Form

By declining the following clinical assignment/activity _____
provided by _____ on _____. I understand this
decision may result in an inadequate number of earned clock hours and/or experience needed to demonstrate
readiness for an off-campus experience, including the advanced clinical practicum/externship. I understand a
delay in readiness for off-campus experiences may ultimately extend my program and delay graduation.

Student Name

Date

Clinical or Academic Faculty

Date

Piedmont University Speech-Language Clinic: Client Communication Policy

Purpose: To ensure effective communication and build a professional relationship between student clinicians and their clients, this policy outlines the procedures for contacting clients prior to appointments.

Policy: Student clinicians are required to call their clients **no later than 24 hours** prior to every scheduled appointment. The purpose of this call is for one or all of the following reasons:

1. Introduce themselves at the beginning of the semester.
2. Ask for any updates that the clinic needs to be aware of.
3. Ask the client's preferred method of communication.
4. Confirm appointment times.

Procedure:

1. **Introduction:**
 - At the beginning of the semester, student clinicians must introduce themselves to their clients during the initial call. This helps establish rapport and sets the tone for future interactions.
2. **Updates:**
 - During each call, student clinicians should inquire if there are any updates or changes in the client's condition or circumstances that the clinic should be aware of. This ensures that the clinic is informed and can provide the best possible care.
3. **Preferred Method of Communication:**
 - Student clinicians must ask clients for their preferred method of communication (e.g., phone call or email) and document this preference in the client's file. This ensures that future communications are conducted in a manner that is convenient for the client.
 - If the client's preferred method of communication is email, verify with the Office Manager that this option is marked in Fusion to receive email reminders.
4. **Appointment Confirmation:**
 - Student clinicians must confirm the appointment time with the client to ensure that both parties are aware of and prepared for the upcoming session.

Emergencies: In the event of an emergency that prevents the student clinician from making the call within the 24-hour timeframe, the student clinician must notify their supervising clinician as soon as possible. The supervising clinician will then determine the appropriate course of action, which may include rescheduling the call or having another clinician make the call on their behalf. This is for emergencies **only**.

Missed Appointments by Clients: If a client misses an appointment without prior notice, the student clinician must document the missed appointment and attempt to contact the client to reschedule. Repeated missed appointments without notice may be addressed by the supervising clinician, and the client may be reminded of the importance of attending scheduled sessions for effective intervention. If the session is missed because the student clinician(s) did not place a reminder call, this is not considered the client's fault.

Consequences of Non-Compliance: Failure to adhere to this policy may result in the following consequences:

1. Verbal Warning:

- The first instance of non-compliance will result in a verbal warning from the supervising clinician.

2. Written Warning:

- A second instance of non-compliance will result in a written warning and a meeting with the supervising clinician to discuss the importance of following the policy.

3. Further Disciplinary Action:

- Continued non-compliance may result in further disciplinary action, which could include suspension from clinical duties or other academic consequences as deemed appropriate by the program director.

Review and Acknowledgment: All student clinicians are required to review this policy and acknowledge their understanding and commitment to comply by signing below.

[Student Clinician Name]

[Date]

[Supervising Clinician Name]

[Date]
