Department of Communication Sciences & Disorders Student Handbook

Baldwin Wallace University

Updated: August 7, 2023

NOTE: This Handbook is updated on an annual basis or sooner if needed. The changes are then reviewed and voted on by the CSD Department full-time faculty. If approved the revised handbook is posted and shared with the students, administration and faculty.

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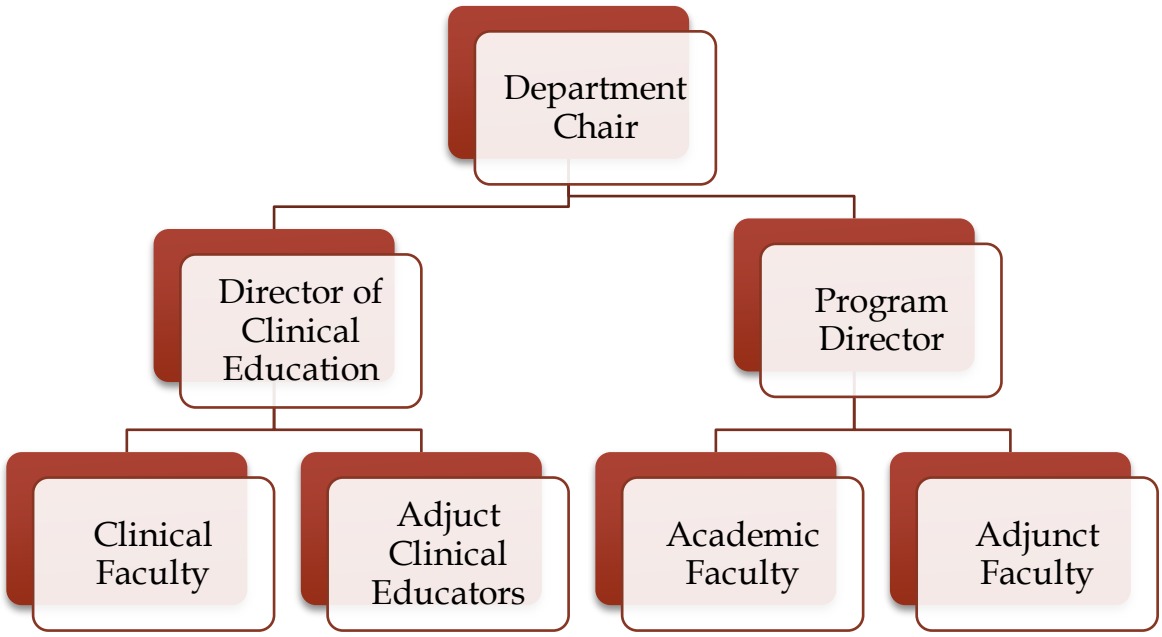

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Introduction

The Department of Communication Sciences and Disorders houses the Bachelor of Science (B.S.) program in Communication Sciences and Disorders as well as a Master of Science (M.S.) in Speech-Language Pathology. The Department has a rich history of community service and linking clinical skills with academic coursework. Further information can be found in the department mission presented below.

The Baldwin Wallace Speech Clinic has been offering speech, language and hearing services to adults and children in the community since 1972. Quality therapy and in-depth diagnostic evaluations are provided by the student clinicians under the supervision of licensed and certified Speech-Language Pathologists. The supervisors are licensed by the Ohio Speech and Hearing Professionals Board and certified by the American Speech-Language-Hearing Association. The Speech Clinic is located at 285 Front Street in Berea.

Mission

Baldwin Wallace University Mission Statement

Baldwin Wallace University is an academic community committed to the liberal arts and sciences as the foundation for lifelong learning. The University fulfills this mission through a rigorous academic program that is characterized by excellence in teaching and learning within a challenging, supportive environment that enhances students' intellectual and spiritual growth. Baldwin Wallace assists students in their preparation to become contributing, compassionate citizens of an increasingly global society and encourages their pursuit of personal and professional excellence.

Department of Communication Sciences and Disorders Vision:

Empowering our students to affect meaningful and progressive change, through mindful engagement as global citizens within the greater community, as well as effectively serving those with disabling communication impairments.

Department of Communication Sciences and Disorders Mission:

Mission for Undergraduate Program:

Educating students to be compassionate, innovative leaders in the area of communication disorders and/or related fields.

Mission for Graduate Program:

Educating future Speech-Language Pathologists to be compassionate, innovative leaders and effectively serve the local and global communities.

Baldwin Wallace Speech Clinic Mission Statement

In addition to our commitment to the Mission of Baldwin Wallace University and the Department of Communication Sciences and Disorders, the Baldwin Wallace Speech Clinic is committed to providing students with quality learning experiences that will allow them to expand their knowledge of the areas of speech-language pathology while providing free high-quality services to northeast Ohio.

Mailing Address, Physical Address, and Email

U.S. Mailing Address
Baldwin Wallace Speech Clinic
275 Eastland Road
Berea, OH 44017

Physical Location:
Baldwin Wallace Speech Clinic
285 Front Street
Berea, OH 44017

Clinic Phone: 440-826-2149
Clinic Fax: none

Clinic Email: BWSpeechClinic@bw.edu

Clinic Website: http://www.bw.edu/centers/speech-clinic/

Credentialing and Licensure

The profession of Speech-Language Pathology is regulated by various organizations.

Ohio Licensure

In the State of Ohio, all Speech-Language Pathologists are required to hold current licensure from the Ohio Speech and Hearing Professionals Board. The academic and clinical program at Baldwin Wallace University prepares students for application for licensure upon graduation. The Ohio laws and regulations governing the profession can be found at http://shp.ohio.gov/enforcement/laws-and-rules. Application forms can be found at http://shp.ohio.gov/elicenseohiogov. All speech-language pathologists entering the profession immediately after completion of a graduate degree are required to complete a professional experience year in the state of Ohio. An overview of educational requirements can be found at: http://codes.ohio.gov/oac/4753-3-04. Students need to be aware that the Ohio Speech and Hearing Professionals Board does require individuals to disclose any criminal convictions and/or attest that you have no prior convictions. Fingerprinting is now also required for licensure.

The State of Ohio requires additional registration for professionals who wish to work in the school setting. Students are encouraged to review the requirements for licensure located at: http://codes.ohio.gov/oac/3301-24-05.

Certificate of Clinical Competence in Speech-Language Pathology

The American Speech-Language-Hearing Association grants qualified individuals with a Certificate of Clinical Competence in Speech-Language Pathology. The academic and clinical program at Baldwin Wallace University prepares students for application for certification upon graduation. After graduation all students are encouraged to apply for certification and to successfully complete a clinical fellowship year. Information on requirements for application can be found at:
http://www.asha.org/certification/SLPCertification/

Accreditation

The Master of Science (M.S.) education program in speech-language pathology (residential) at Baldwin Wallace University is accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association, 2200 Research Boulevard, #310, Rockville, MD 20850, 800-498-2071 or 301-296-5700.

Non-Discrimination Policy

Baldwin Wallace University's non-discrimination policy can be found on the website https://www.bw.edu/Assets/policies/policy-equal-opportunity-harassment-nondiscrimination.pdf

Baldwin Wallace University Non-Discrimination Policy is reflected in the University's vision, mission, core values and strategic plan Baldwin Wallace challenges its students and employees to live out the spirit of inclusion in their daily pursuits. We maintain that the value of the diversity reflected at BW is far greater than the sum of its parts.

To this end, in concert with the principle of "Respect for Persons" as outlined in our Community Standards of Conduct, Baldwin Wallace University prohibits discrimination and harassment based on age, citizenship, disability, ethnicity, gender identity, genetic information, national origin, race, religion, sex, sexual orientation, and veteran status. Discrimination or harassment of members of the

University community falls short of our community standards and will not be tolerated.

When a person believes that they or others have been the victim of discrimination or harassment, they should report the incident as soon as possible. Based on the nature of the incident, the University will choose the appropriate response mechanism and do its best to address the situation in a timely manner with care and transparency. Response mechanisms include but are not limited to inquiries performed by the Discrimination Investigators and referrals to Student Conduct.

- Complaints or notice of alleged policy violations, or inquiries about or concerns regarding this policy and procedures, may be made internally to:
- Nancy Gussett, Ph. D., Coordinator for Grievance Resolution Center for Inclusion 202C Bonds Administration Building (440) 826-2122 ngussett@bw.edu
- Inquiries about this policy and procedure may be made internally to: Chief Diversity Officer/ Title IX Coordinator Center for Inclusion 202C Bonds Administration Building (440) 826-2426

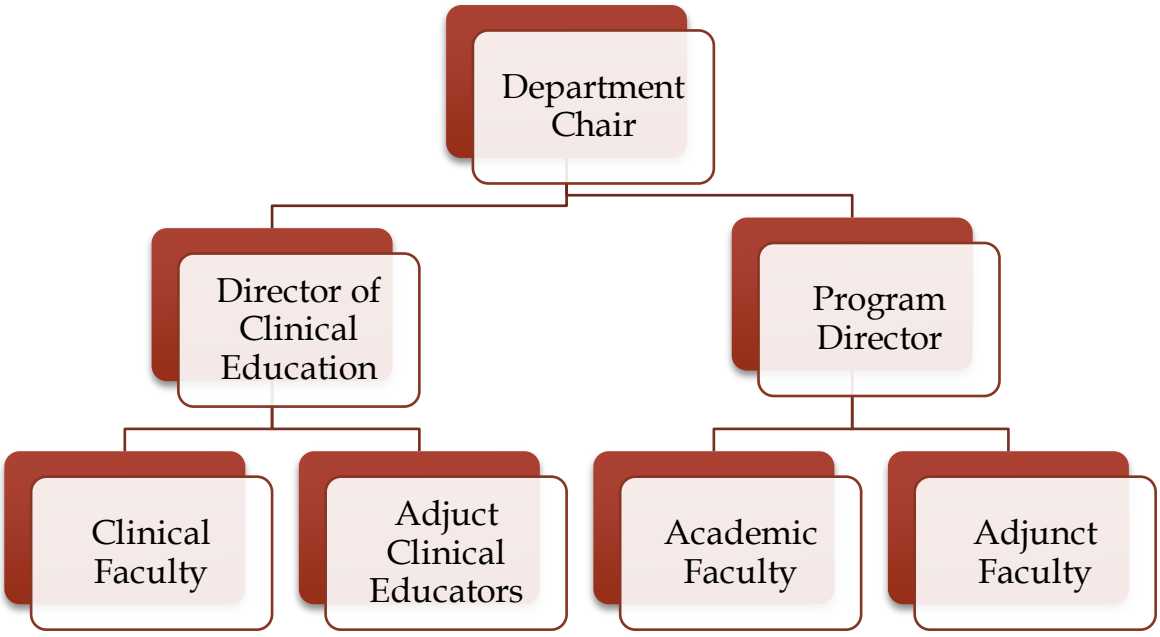
Ethics and Compliance Hotline at 440-826-8557

Policies and regulations may be amended by action of the responsible bodies. Check the BW website for further updates.

Organizational Structure

The Department of Communication Sciences and Disorders (CSD) is part of the College of Education and Health Sciences (CoEHS). The CSD Department offers a Bachelor of Science in CSD, and a Master of Science degree in Speech-Language Pathology, as well as minor in CSD. The Department Chair is responsible for oversight of all academic and clinical programs, and other administrative responsibilities. The Program Director provides oversight of the academic aspects of the graduate program, while the Director of Clinical Education is responsible for oversight of the clinical aspects of the program. The Program Director and Director of Clinical Education both report to the Department Chair, who then reports to the Dean of the CoEHS who reports to the Provost.

Organization of Structure



Academic Program

The Department of Communication Sciences and Disorders (CSD) offers a Bachelor of Science in CSD, a 5-Year Integrated BS/MS Program in Speech-Language Pathology, and a Master of Science degree in Speech-Language Pathology, as well as minor in CSD. The following are the suggested course of study for all programs.

Undergraduate Program in Communication Sciences and Disorders

(2023 Catalog, previous years please refer to the University catalog on Student Planning Tool)

Bachelor of Science

Please refer to Student Planning Tool and Teams for courses by semester.

CSD 105D Introduction to Communication Disorders
CSD 220 Speech and Language Development
CSD 225 Phonetics & Phonology
CSD 235 Clinical Management and Standards
CSD 236 Speech and Language Observation

CSD 321 Neurology, Anatomy & Physiology of Speech and Hearing Mechanism
CSD 325 Articulation and Phonology Disorders
CSD 335X Clinical Practice – Individual
CSD 336 Clinical Practice
CSD 340 Language Disorders
CSD 351 Speech & Hearing Science
CSD 420 Audiology
CSD 421 Aural Rehabilitation
CSD 435X Clinical Practice
CSD 440 Research Methods in Communication Disorders
CSD 477 Capstone in Communication Disorders
PSY 100 Principles of Psychology
PSY 205 Developmental Psychology
PSY 278 Elements of Statistics

Elective and Recommended Courses
CAS 285D Introduction to Intercultural Communication
CSD 341 Fluency and Voice Disorders
CSD 436 Clinical Practice
CSD 359 Faculty Student Collaboration
CSD 459 Faculty Student Collaboration
ENG 210 Introduction to the Study of Language
HPE 206 Medical Terminology
SOC 281 Data Analysis using PASW

5-Year Integrated BS/MS Program in Speech-Language Pathology

Admission process and requirements: Applications for the program are accepted during the summer between sophomore and junior year

Direct admission

- Major in CSD
- Minimum of 60 credit hours completed at BW
- Overall GPA and major GPA of 3.5 or higher

Application for Admission

- Major in CSD
- Minimum of 60 credit hours completed at BW
- Overall GPA and major GPA of 3.2- 3.49
- Completion of application for 5-Year program
- Application review and decisions made by mid-July

Requirements for enrollment in graduate courses for the 5-Year program

- Admission into the 5-Year program during the summer between sophomore and junior year

- Completion of required CSD major courses, minor area of study, and general education requirements for the 5-Year Integrated BS/MS Program in SLP
- Completion of at least 90 credits at BW
- Overall and major GPA of 3.2 or higher

Required courses for 5-Year BS/MS Integrated Program
CSD 105D Introduction to Communication Disorders
CSD 220 Speech and Language Development
CSD 225 Phonetics & Phonology
CSD 235 Clinical Management and Standards
CSD 236 Speech and Language Observation
CSD 321 Neurology, Anatomy & Physiology of Speech and Hearing Mechanism
CSD 325 Articulation and Phonology Disorders or CSD 340 Language Disorders
CSD 335X Clinical Practice
CSD 351 Speech & Hearing Science
CSD 420 Audiology
PSY 100 Principles of Psychology
PSY 205 Developmental Psychology
PSY 278 Elements of Statistics
BIO – Human or Animal Biology
Physical Science – Any CHM or PHY course
Minor such as Psychology Diversity Studies or other minor approved by the Department Chair
All Core Curriculum Requirements EXCEPT Interdisciplinary requirement and International Studies requirement.
All required Graduate SLP courses

Minor in Communication Sciences and Disorders

A total of 18 credits are required for the Communication Sciences and Disorders minor, courses include:

Required Courses
CSD 105D Introduction to Communication Disorders
CSD 220 Speech and Language Development
CSD 225 Phonetics and Phonology

Take 9 credits from the following list of courses:
CSD 321 Anatomy & Physiology of Speech & Hearing Mechanisms
CSD 325 Articulation and Phonology Disorders
CSD 340 Language Disorders
CSD 341 Voice and Fluency Disorders
CSD 351 Speech & Hearing Science

CSD 420 Audiology
CSD 440 Research Methods in Communication Disorders

Graduate Program: Masters of Science in Speech-Language Pathology

1st Year

Fall

CSD 510 Child Language Disorders
CSD 525 Articulation and Phonology Disorders
CSD 530 Clinical Foundations
CSD 535 Clinical Practice
CSD 550 Integrations
CSD 557 Culturally Responsive Practitioners

Spring

CSD 521 Neuroanatomy of the Speech and Hearing Mechanism
CSD 536 Clinical Practice
CSD 551 Integrations
CSD 560 Foundations of EBP
CSD 563 SLP 2B in Zambia
CSD 610 Adult Language Disorders
CSD 625 Dysphagia

Summer

CSD 531 Diagnostics in Speech-Language Pathology
CSD 534 AAC/ Assistive Technology
CSD 537 Clinical Practice
CSD 552 Integrations
CSD 626 Motor Speech Disorders

2nd Year

Fall

CSD 541 Voice Disorder
CSD 542 Fluency Disorders
CSD 621 Aural Rehabilitation
CSD 635 Clinical Practice
CSD 638 Clinical Practice – School-Based Setting-
CSD 650 Integrations

Spring

CSD 636 Clinical Practice
CSD 677 Capstone

Elective Course
CSD 660 Applied Research

Student Records

Students can access records regarding progress toward program completion through two different tools. One tool is maintained by the University and contains progress on academic requirements. This program, called Student Planning Tool, can be accessed via the web and a secure login.

Students can also access progress toward completion of clinical hours and the Knowledge and Skills Assessment by utilizing the CALIPSO program. This program is also web-based and can be accessed with a secure log in.

Student Advising

All undergraduates in the program will be assigned an academic advisor by the academic advising office. Advising is assigned based on each faculty member's current advising load. If an undergraduate student wishes to change an advisor, he or she contacts academic advising and requests a change in advisors. Academic affairs then may contact the department chair for additional information or permission. The Department Chair will consider changes based on the faculty member's advising load.

Students admitted to the 5-Year BS/MS Program in Speech-Language Pathology will be assigned an additional advisor (SLP Program Director) for their junior year. This advisor will provide them with information regarding coursework that needs to be completed prior to enrolling in the graduate courses.

Graduate students will be assigned both an academic and clinical advisor. Research doctoral faculty serve as academic advisors and clinical practitioner faculty serve as clinical advisors.

If a graduate student wishes to change an advisor, he or she should discuss the request with the Department Chair. These requests will be considered based on faculty member's advising load.

Admission Information for Graduate Program

Please see website (https://www.bw.edu/academics/speech-language-pathology/admission/) for information regarding admissions.

SLP Program Core Functions

The following information was created by the Council of Academic Programs in Communication Sciences and Disorders (CAPCSD) and adopted by the Department of Communication Sciences and Disorders at Baldwin Wallace University in May 2023. The document differentiates core functions from individual program requirements and to be inclusive of differences in behavioral and learning preferences associated with race, ethnicity, culture, sexual orientation, gender identity, language, and sensory, physical, or neurological status. Core functions represent the functions that individuals typically are expected to employ in didactic and clinical experiences to acquire the knowledge and demonstrate the competencies that will lead to graduation and successful entry into professional practice.

For the sake of this document, the term "core functions" refers to behavioral or cognitive functions that an individual must be able to perform with or without accommodations necessary to ensure equitable access. The document intentionally does not address how stated core functions are demonstrated, recognizing that there are multiple ways an individual can successfully meet the demands of clinical education and practice. The determination of possible accommodations exemplified in this document varies from institution to institution based on numerous factors not covered in the scope of this document. The degree to which accommodations are determined is under the governance of the Americans with Disabilities Act, Section 504 of the Rehabilitation Act of 1973. It is the responsibility of the institution and the individual to work together to identify possible services and accommodations.

To ensure the integrity of the messaging in this document, a glossary of terms is included at the end of the document.

Communication

Statements in this section acknowledge that audiologists and speech-language pathologists must communicate in a way that is understood by their clients/patients and others. It is recognized that linguistic, paralinguistic, stylistic, and pragmatic variations are part of every culture, and accent, dialects, idiolects, and communication styles can differ from general American English expectations. Communication may occur in different modalities depending on the joint needs of involved parties and may be supported through various accommodations as deemed reasonable and appropriate to client/patient needs. Some examples of these accommodations include augmentative and alternative communication (AAC) devices, written displays, voice amplification, attendant-

supported communication, oral translators, assistive listening devices, sign interpreters, and other non-verbal communication modes.

- Employ oral, written, auditory, and non-verbal communication at a level sufficient to meet academic and clinical competencies.
- Adapt communication style to effectively interact with colleagues, clients, patients, caregivers, and stakeholders of diverse backgrounds in various modes such as in person, over the phone, and in electronic format.

Motor

Statements in this section acknowledge that clinical practice by audiologists and speech-language pathologists involves a variety of tasks that require manipulation of items and environments. It is recognized that this may be accomplished through a variety of means, including, but not limited to, independent motor movement, assistive technology, attendant support, or other accommodations/modifications as deemed reasonable to offer and appropriate to client/patient needs.

- Engage in physical activities at a level required to accurately implement classroom and clinical responsibilities (e.g., manipulating testing and therapeutic equipment and technology, client/patient equipment, and practice management technology) while retaining the integrity of the process.
- Respond in a manner that ensures the safety of clients and others.

Sensory

Statements in this section acknowledge that audiologists and speech-language pathologists use auditory, visual, tactile, and olfactory information to guide clinical practice. It is recognized that such information may be accessed through a variety of means, including direct sensory perception and /or adaptive strategies. Some examples of these strategies include visual translation displays, text readers, assistive listening devices, and perceptual descriptions by clinical assistants.

- Access sensory information to differentiate functional and disordered auditory, oral, written, and visual communication.
- Access sensory information to correctly differentiate anatomical structures and diagnostic imaging findings.
- Access sensory information to correctly differentiate and discriminate text, numbers, tables, and graphs associated with diagnostic instruments and tests.

Intellectual/Cognitive

Statements in this section acknowledge that audiologists and speech-language pathologists must engage in critical thinking, reasoning, and comprehension and retention of information required in clinical practice. It is recognized that such skills may be fostered through a variety of means, including assistive technology and /or accommodations/modifications as deemed reasonable and appropriate to client/patient needs.

- Retain, analyze, synthesize, evaluate, and apply auditory, written, and oral information at a level sufficient to meet curricular and clinical competencies.
- Employ informed critical thinking and ethical reasoning to formulate a differential diagnosis and create, implement, and adjust evaluation and treatment plans as appropriate for the client/patient's needs.
- Engage in ongoing self-reflection and evaluation of one's existing knowledge and skills.
- Critically examine and apply evidence-based judgment in keeping with best practices for client/patient care.

Interpersonal

Statements in this section acknowledge that audiologists and speech-language pathologists must interact with a diverse community of individuals in a manner that is safe, ethical, and supportive. It is recognized that personal interaction styles may vary by individuals and cultures and that good clinical practice honors such diversity while meeting this obligation.

- Display compassion, respect, and concern for others during all academic and clinical interactions.
- Adhere to all aspects of relevant professional codes of ethics, privacy, and information management policies.
- Take personal responsibility for maintaining physical and mental health at a level that ensures safe, respectful, and successful participation in didactic and clinical activities.

Cultural Responsiveness

Statements in this section acknowledge that audiologists and speech-language pathologists have an obligation to practice in a manner responsive to individuals from different cultures, linguistic communities, social identities, beliefs, values, and worldviews. This includes people representing a variety of abilities, ages, cultures, dialects, disabilities, ethnicities, genders, gender identities or expressions, languages, national/regional origins, races, religions, sexes, sexual orientations, socioeconomic statuses, and lived experiences.

- Engage in ongoing learning about cultures and belief systems different from one's own and the impacts of these on healthcare and educational disparities to foster effective provision of services.
- Demonstrate the application of culturally responsive evidence-based decisions to guide clinical practice.

This document should be considered a living document and therefore reviewed by CAPCSD and the CSD Department at regular intervals to ensure that current terminology, practice, and ideas are reflected.

Glossary

- **Cultural responsivity** involves "understanding and respecting the unique cultural and linguistic differences that clients bring to the clinical interaction" (ASHA, 2017) and includes "incorporating knowledge of and sensitivity to cultural and linguistic differences into clinical and educational practices".
- **Evidence-based practice** involves "integrating the best available research with clinical expertise in the context of patient characteristics, culture, and preferences" (Evidence Based Practice in Psychology, n.d.).

References

American Speech-Language-Hearing Association. (2017). Cultural competence in professional service delivery [Position statement]. Available from https://www.asha.org/policy/ps2017-00346/

Council for Academic Program in Communication Sciences and Disorders. (2023). A Guide for Future Practitioners in Audiology and Speech-Language Pathology: Core Functions. Retrieved June 8, 2023, from https://growthzonesitesprod.azureedge.net/wp-content/uploads/sites/1023/2023/04/Core-Functions-for-AUD-_and-SLP.pdf

Evidence-Based Practice in Psychology. (n.d.). Https://www.apa.org. Retrieved March 3, 2023, from https://www.apa.org/practice/resources/evidence

Professional Behaviors

Students are expected to demonstrate professional behaviors in the classroom, clinic and all activities sponsored or endorsed by the University. The University's Student Handbook has detailed description student behavior standards. That handbook can be found at: https://www.bw.edu/Assets/Offices/student-affairs/handbook.pdf

The Communication Sciences and Disorders Department requests that students following the additional guidelines listed below:

Email/Communication

Students are expected to be respectful in all communication with faculty, staff, supervisors, patients, and each other. This includes emails, phone calls and face-to-face interactions. Students should remember that emails sent during the week to full-time faculty would get replies within 24 hours (sent Monday through Thursday). Emails sent on the weekend may take longer for a reply. Emails sent to off-site supervisors, patients, or adjunct faculty may require students to wait longer for a reply. Face-to-face interactions should be conducted in a way that shows respect for the person. If you have questions about whether an interaction is professional, please ask the Director of Clinical Education/Program Director/Department Chair for further guidance and support.

Cell Phone Policy

The use of cell phones during class and clinic will not be permitted. Texting, using social media, responding to emails, or taking phone calls are all examples of behaviors not permitted in class or clinic. This list is not exclusive. Faculty members are permitted to ask students to leave class if disruptive.

Technology

Students are encouraged to speak with faculty members regarding the use of technology during clinic and academic classes.

Professional Dress

Students must be aware of the clinic's hours of operation. During clinic hours, students are requested to be in professional dress, if they will be entering the clinic space for any reason. Each professor also has the right to require a separate dress code during courses. Black scrub bottoms and tops are permissible in the Speech Clinic.

Ethical Practice and Behaviors

All students engaged in either the undergraduate CSD program or the graduate SLP program are expected to be familiar with and abide by the ethical guidelines established by the profession upon admission to the programs. Violations of the code of ethics will be reported to the Program Director and Director of Clinical Education and the student will be requested to meet with the appropriate administrator. Consequences of ethical violations may be remediation of ethical skills or ultimately dismissal from program.

Students are instructed to review the American Speech-Language-Hearing Association Code of Ethics at: https://www.asha.org/policy/ET2016-00342/

And the Ohio Board of Speech-Language Pathology and Audiology Code of Ethics at: http://codes.ohio.gov/oac/4753-9

Students are also advised that some activities are considered violations of the code of ethics. Some of these activities are providing speech and language therapy activities while babysitting, tutoring in the areas of speech and language, planning, and administering speech and language activities during ABA (Applied Behavior Analysis, Discrete Trial) tutoring, providing speech and language activities during respite care. If a student has questions about what activities may be considered unethical, please contact the Program Director, Director of Clinical Education, or Department Chair.

HIPAA and Confidentiality

In 1996, the Health Insurance Portability and Accountability Act (HIPAA) was passed. The Baldwin Wallace Speech Clinic and the Department of Communication Sciences and Disorders hold patient confidentiality as a high priority. Secondary to this, all students in the Department of Communication Sciences and Disorders who are engaged in observation hours, clinical practice, or externships will be trained in HIPAA by the Director of Clinical Education.

After training, all students will be asked to take and pass an online quiz. Score on the online quiz will be maintained by the Director of Clinical Education and must be renewed annually.

Academic Integrity Statement

The Academic Integrity Statement is post within each course site as part of the Syllabus Statements. It states the following:

Academic honesty is always expected. Academic dishonesty includes claiming someone else's work as your own (e.g., plagiarism), seeking an unfair advantage over other students in taking a test or fulfilling an assignment, and fraud. Any offense will result in a zero or grade of F for the exam or assignment in question and may result in failure of the course. Infractions will be reported to the student's advisor and to the provost. The complete Academic Honesty Policy can be found at
https://jacketconnect.bw.edu/get_file?pid=eb3116af970d2e09b318f012a481712f5873e64556606cf0f33521fb7cf269e7

Academic Honesty and Professional Behavior Violations

All departments with graduate programs are expected to submit criteria and guidelines for academic honesty and professional behavior that conform to their respective professional standards, including but not limited to program accreditation and graduated student professional licensure. Such criteria and guidelines are to be submitted to the Graduate Affairs Committee and the University Provost for review and approval.

The following definitions and guidelines serve as the floor for expectations of academic honesty and professional behavior for all graduate students. Graduate students who are also working and/or interns or graduate assistants at the University are expected to adhere to relevant BW workplace rules and procedures, including but not limited to the Nondiscrimination policy, BW Community Standards of Conduct, FERPA, and HIPAA. The appeal process for students outlined in the Faculty Handbook is considered standard procedure for all graduate students.

Behaviors that manifest academic dishonesty are classified in five ways.

1. The first is claiming someone else's work as your own, including but not limited to the following examples:
    - Using answers that someone else has given on a test;
    - Turning in a paper for which someone else did the original research and writing;
    - Quoting from another work without using quotation marks to show that the material is a direct quotation and citing and documenting the source;
    - Plagiarism, a specific form of false claim, is defined as using someone else's words or ideas, images, or other intellectual property, written, recorded, or spoken without citing and documenting the source from which they come;
    - Using someone else's sentence structure written, recorded, or spoken without citing and documenting the source from which it comes;
    - Using the structure of someone else's argument, written, recorded, or spoken without citing and documenting the source from which it comes;
    - Paraphrasing or rewording another's words or ideas, written, recorded or spoken, without citing and documenting the source from which they come;
    - Violating the copyright of images or music taken from written, recorded, spoken, or internet sources;

- Copying or reproducing source code without written permission from the original creator; or
- Missing or inadequate attribution of direct quotations.

2. The second is seeking an unfair advantage over other students in taking a test or fulfilling an assignment. Some examples of such behavior may include but are not limited to the following:
   - Copying from another student's paper, or otherwise communicating with another student during an examination;
   - Allowing another student to copy from one's exam paper;
   - Unauthorized use of notes or electronic devices during an exam;
   - Copying another student's work and representing it as one's own;
   - Selling or giving one's work to another student so that he/she/they may copy it and represent it as his/her/their own; or
   - Acquiring a copy of an examination without the permission of the instructor.

3. The third is fraud. Examples include but are not limited to the following:
   - Signing the name of an academic advisor or any instructor, staff member, or administrator to an official form or document;
   - Writing a paper or taking an exam for someone else;
   - Fabricating research material, interviews, scientific data, or other materials or sources for a project; or
   - Creating, participating in, or using the services of any group or organization that promotes or contributes to academic dishonesty on the Baldwin Wallace University campus or in the global academic community.

4. The fourth is professional misconduct during off-site clinical or other placements with community agencies/institutions.
   - Misrepresenting yourself or Baldwin Wallace University in the community setting at a host institution
   - Not adhering to guidelines as specified by the host institution
   - Placing yourself or others in situations that may be harmful
   - Falsifying or fabricating documentation from clinical preceptors or affiliate faculty of the university
   - Failing to comply with professional communications standards while at the host institution
   - Other unprofessional behaviors that are inconsistent with the ethical and moral principles of the student's chosen program/profession

5. The fifth category is harassment or discrimination. The University's stance on Non-Discrimination and policies regarding discriminatory harassment and discrimination may be found in the Equal Opportunity, Harassment, and Non-Discrimination Policy. These policies apply to

students, faculty and staff in all contexts. Examples include but are not limited to:

- Sexual Harassment and assault
- Identity based harassment or discrimination (i.e. race, gender, ability, and all other identities protected under the policy)
- Inappropriate sexual or amorous relationships between faculty and students/subordinates
- Dating/Domestic Violence & Stalking

Accusations against Students

Faculty, staff or students making an accusation of academic dishonesty against a student should contact the Provost's office. Instructors should follow the procedure outlined below.

1. This Academic Honesty Policy is considered to be part of every graduate course syllabus. Instructors may make additional policies in their syllabi; for example, they may specify when collaboration is permitted, the sanctions that will be applied to specific violations, or opportunities for revision that will be afforded when source documentation is inadequate.
2. When an instructor believes a student has violated the academic honesty policy, the instructor shall handle the case according to this policy and their syllabus. The instructor is also required to report the incident to the College Dean with information that includes: the date; the student's name and identification number; the course name, semester, and year; a brief summary of the incident; and the sanction that was applied.
3. Instructors may choose to consult the Department Chair or Associate Dean if they do not wish to handle the case on their own, and the Chair/Associate Dean will handle the case. However, cases of academic dishonesty must be kept confidential from everyone except the Chair/Associate Dean.
4. Upon receiving this information, the College Dean will determine whether the student has previous violations. If so, the College Dean may apply additional sanctions according to the policy.
5. At the same time, the College Dean will send a letter to the student, copied to the instructor, the student's academic advisor, the Department Chair, and Associate Dean of the Department, School, and College where the incident took place. This letter will notify the student that a violation has been reported and inform the student of their right to appeal.
6. To appeal, the student must notify the College Dean of his/her/their intent to appeal within one week of receiving the College Dean's letter.

The student's appeal will then be heard by a Committee consisting of three to five faculty members from the Grievance Review Committee, including one Graduate faculty member from a related discipline selected by the Grievance Review Committee.

7. To hear the student's appeal, the faculty/student Grievance Review Committee shall conduct a hearing following the "Recusal" and "Procedures for Resolution Hearings" of the Faculty Handbook. The Committee determines whether the student violated the Policy on Academic Honesty and reports its finding to the Provost. The Provost determines any appropriate sanctions.

Please note, all accusations which fall under the University's Equal Opportunity, Harassment, and Non-Discrimination Policy are reported directly to the University's Center for Inclusion which coordinates the University's response to all discrimination and sexual misconduct claims.

Sanctions for Academic Honesty Violations

For students in graduate programs, the following sanctions are the minimum sanctions that students who violate academic honesty shall incur. Appropriate sanctions will be imposed based on the type of incident. Depending on the severity of the offense, students may be dismissed from the graduate program after the first, second, or third offense at the discretion of the Provost. Examples of tiered sanctions are below as a general guideline.

First Offense

- Reduction in grade, unsatisfactory mark, or other appropriate action (specific to department) if determined as appropriate by the instructor. Such reductions may include failure or grade of zero on the test, paper, project, or other evaluation method in question. These actions may result in failure for the course for failure of the off-site experience.
- Notification of the student's academic advisor and the Provost's office.

Second Offense

- Failure of the course in which the academic dishonesty took place.
- Notification of the student's academic advisor and the Provost's office.

Alternative sanctions may include:

- Academic Probation.
- Academic Suspension.
- Academic Expulsion.

Third Offense

- Academic Suspension or Expulsion from Baldwin Wallace University.

Sanctions for Violations of Professional Misconduct

For students in graduate programs, the following sanctions are the minimum sanctions that would be imposed upon students who violate professional misconduct standards as written in the graduate program handbook in which the student is enrolled. Appropriate sanctions will be imposed based on the type of incident and could result in dismissal from the graduate program after the first, second, or third offense at the discretion of the Provost. Examples of tiered sanctions are below as a general guideline.

First Offense

- Reduction in grade, unsatisfactory mark, or other appropriate action (specific to department) if determined as appropriate by the instructor. Such reductions may include failure or grade of zero on the test, paper, project, or other evaluation method in question. These actions may result in failure for the course or failure of the off-site experience.
- Notification of the student's academic advisor and the Provost's office.

Second Offense

- Failure of the course in which the academic dishonesty took place.
- Notification of the student's academic advisor and the Provost's office.

Alternative sanctions may include:

- Academic Probation.
- Academic Suspension.
- Academic Expulsion.

Third Offense

- Academic Suspension or Expulsion from Baldwin Wallace University.

Graduate Student Appeal Process

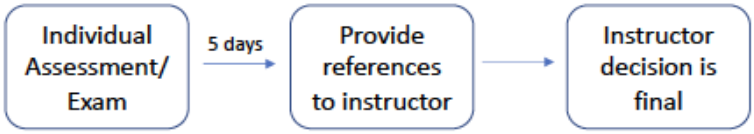
Graduate Student Appeal Process: Individual Assessment/ Exam

A graduate student may challenge an individual assessment/exam grade at any time with the course instructor. If the student is challenging a specific question(s), the student must follow the following process:

1. A student desiring to challenge answers to specific questions must:

a. Through email, provide two (2) reference sources (i.e., major texts, validated resources) acceptable to the course director in support of the challenge.
b. The student's supporting references must be presented to the course instructor within five (5) days after receiving their graded examination/assessment from the course instructor

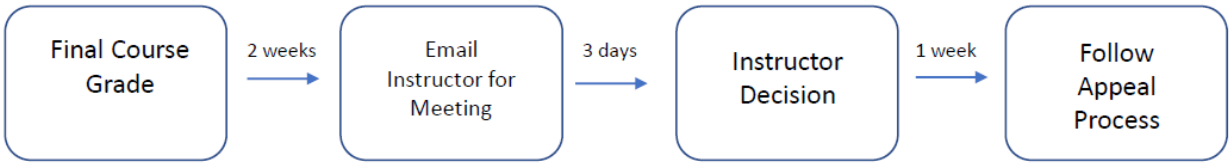
2. When possible, the student will be notified of the course instructor's decision via email within three (3) working days of the receipt of the student's supporting references.
3. It is the course director's purview either to accept or disallow any additional answer(s). The course director's decisions are final.



Graduate Student Appeal Process: Final Course Grade

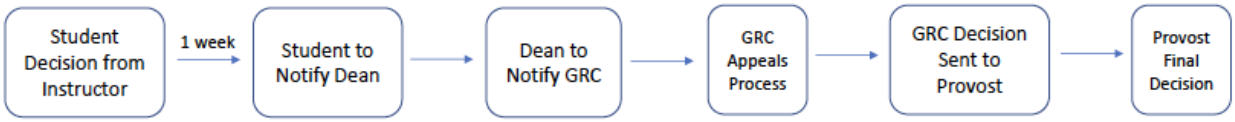
A graduate student may challenge a final course grade within two weeks of the final exam/assessment in the course. If the student is challenging a final course grade the student must follow the following process:

1. A student desiring to challenge a final course grade must:
   a. Make an appointment via email to meet with the course instructor to review the reasons for challenging the final grade within two (2) weeks.
   b. If the student is challenging specific questions on an individual assessment/exam, the above process regarding individual assessment/exam will be followed.
2. When possible, the student will be notified of the course instructor's decision via email within three (3) working days of the receipt of the instructor's decision after appropriate information was presented by the student
3. It is the course director's purview either to change or accept the final course grade based on the information provided by the student.
4. If the student is not satisfied with the outcome given by the instructor, the student may appeal utilizing the Graduate Appeals Process for Final Course Grades (see below).



Graduate Appeal Process for Final Course Grades

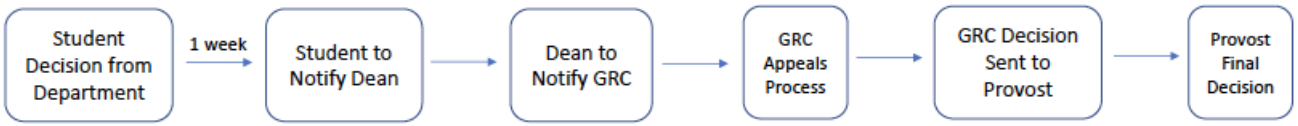
1. The student must notify the College Dean of their intent to appeal via email within one (1) week of receiving the decision from the course instructor. The student's appeal will then be heard by a Committee consisting of three to five faculty members from the Grievance Review Committee (including one Graduate faculty member).
2. To hear the student's appeal, the faculty/student Grievance Review Committee shall conduct a hearing following the "Recusal" and "Procedures for Resolution Hearings" of the Faculty Handbook. In addition to the student testimony, the Committee may request a written or verbal testimony from the course instructor or department Chair. The Committee then determines sufficient evidence has been presented warrant a grade change based on the information provided to the committee. The findings of the committee are then sent to the Provost. The Provost then determines the final course grade, and this decision is final.



Graduate Student Dismissal and Probationary Status

Dismissal and probationary decisions due to academic/professional reasons are initially determined at the graduate department/program level based on the policies in the respective graduate program handbook. If a student is facing dismissal or probation based on academic or professionalism reasons, the following appeal process may be followed:

1. The student must notify the College Dean of their intent to appeal via email within one (1) week of receiving the decision from the department Chair. The student's appeal will then be heard by a Committee consisting of three to five faculty members from the Grievance Review Committee (including one Graduate faculty member).
2. To hear the student's appeal, the faculty/student Grievance Review Committee shall conduct a hearing following the "Recusal" and "Procedures for Resolution Hearings" of the Faculty Handbook. In addition to the student testimony, the Committee may request a written or verbal testimony from the department Chair or Associate Dean. The Committee then determines whether sufficient evidence has been presented to warrant a decision reversal based on the information provided to the committee. The findings of the committee are then sent to the Provost. The Provost then determines the course of action and this decision is final.



GAC Last edited 3.30.22
Edited and approved for faculty vote by Faculty Senate 11/2/2022

Expectations for Primary Sources in Class Projects

All students will be required to complete a wide variety of assignment types throughout the curriculum. It is the expectation of the Department of Communication Sciences and Disorders that all assignments will utilize primary sources that are appropriately cited using the most recent edition of the American Psychological Association (APA) Publication Manual. Primary sources are defined as original sources containing original data, experiments, and observations. Ideally, these primary sources should be peer-reviewed prior to publication or presentation. Please refer to the course professor for clarification if needed.

Accessible Education Statement

Baldwin Wallace University is committed to providing all students equal access to learning opportunities. Students who have a diagnosed disability (e.g., mental health, attentional, learning, vision, hearing, physical or systemic) and would like to determine if they are eligible for reasonable accommodations should contact the Office of Accessible Education at (440) 826- 2090 or disability@bw.edu. Additional information about how to get connected with OAE is available at: http://www.bw.edu/accessible-education

Center for Academic Success & Achievement (CASA)

Center for Academic Success & Achievement (CASA)
CASA offers services to build reading, writing, and learning skills necessary for your BW coursework. Join us on the top floor of Ritter Library to study on your own, meet with a tutor, or attend a workshop. Learn how we can help you achieve success by visiting https://bw.edu/casa.

Individual Services: Work one-on-one with professional staff or peer tutors by making appointments for Academic Coaching, Individual Tutoring, Reading Support, and Writing Support. Schedule online or in-person appointments through https://bw.edu/casa.

Group Services: Engage with a community of learners by visiting Drop-In Tutoring, attending Supplemental Instruction (SI) sessions, participating in Success Seminars, or joining a study group.
External Online Services: When CASA staff and tutors are unavailable, BW students have 24/7 access to Smarthinking online tutoring, Study Edge, and a premium subscription to Grammarly.

Counseling Services

As a college student, there may be times when personal stressors or emotional difficulties interfere with your academic performance or well-being. If you find that life stressors are interfering with your academic or personal success, consider contacting BW Counseling Services. You can learn more about the broad range of confidential mental health services available at BW by calling 440-826-2180 or visiting the Counseling Services web page. Our 24/7 BW Counselor on Call can be reached at 440-260-4399.

TimelyCare is a supplement to mental health services available through BW Counseling Services and provides access to 24/7/365 mental telehealth care from anywhere in the United States, with no cost at the time of visit. Students can visit https://app.timelycare.com/auth/login or counseling on https://jacketconnect.bw.edu/counselingservices/home/ for more information.

BW Sexual Misconduct Reporting

All faculty and staff of Baldwin Wallace University are mandated reporters of sexual misconduct (excluding Health & Counseling Center staff and University Chaplain who provide confidential services). Mandated reporters are required by university policy to report any disclosure of sexual misconduct to appropriate University administrators and can promise the utmost discretion but not full confidentiality. The BW Interim Equal Opportunity, Harassment, and Nondiscrimination policy can be found by entering the following link into your browser:
https://www.bw.edu/Assets/policies/policy-equal-opportunity-harassment-nondiscrimination.pdf.

To report Discrimination and/or Sexual Misconduct directly and seek University resources and response (including supportive measures) please contact Nancy J. Gussett, Grievance Resolution Coordinator at 440-826-2027 or 440-826-2122 or complete the online report form by entering the following link into your browser: https://fs22.formsite.com/bwtest1/form120/.

Knowledge and Skills Assessment

The Master of Science in Speech-Language Pathology prepares students for licensure in the State of Ohio and for a Certificate of Clinical Competence in Speech-Language Pathology from the American Speech-Language-Hearing Association (ASHA). The requirements for application for the Certificate of Clinical Competence are defined by the 2020 Standards of the Certificate of Clinical Competence in Speech-Language Pathology. Access to the complete document can be found at:
https://www.asha.org/certification/2020-slp-certification-standards/
Students can track progress toward completion of the knowledge and skills outcomes defined by the above document using CALIPSO. In order for the use of CALIPSO to be most effective for students, clinical hours are to be entered daily or weekly dependent upon the supervisor's request. At the end of each semester the Director of Clinical Education will review progress toward clinical hours and the Program Director will review progress toward academic knowledge outcomes. Students are encouraged to meet with his/her academic advisor, Director of Clinical Education or Program Director if concerns about progress toward completion are present.

Praxis Exam

In addition to successfully completing and passing all the academic and clinical requirements for the program, graduate students in the Speech-Language Pathology program are required to take the PRAXIS Examination in Speech-Language Pathology (offered by ETS) for the graduate degree to be awarded.

Academic Status

Student in the Bachelor of Science in Communication Sciences and Disorders are expected to meet the academic requirements set forth by the University. A copy of the current academic status requirements is located in the student handbook and can be found at: https://www.bw.edu/Assets/Offices/student-affairs/handbook.pdf

General Academic Expectations of Graduate Students

Students enrolled in the Graduate Program in Speech-Language Pathology are expected to adhere to the academic requirements set forth by the program. A student whose performance within any clinical assignment and/or academic course is at or below a B- will automatically be referred for an academic or clinical remediation plan. Concerns regarding a student's performance related to ethics and professionalism (e.g., consistently late assignments, inconsistent performance in the classroom or clinical setting, suspicion of or verification of plagiarism, effective communication, etc.) can also lead to the need for an

remediation plan. Any faculty member and/or clinical supervisor who has concern about a student's academic and/or clinical performance will communicate that concern to either the Director of Clinical Education (for clinical concerns) and/or the Program Director (for academic concerns). The Director of Clinical Education and the Program Director will meet to discuss any areas of concern and determine the appropriate plan of action which may include a conversation with the student regarding the areas of concern and/or a formal remediation plan designed to aid the student in meeting the expectations in the area(s) of concern.

Students may only be placed on a remediation plan once per area of concern. For example, a student placed on a remediation plan for clinical placement attendance one semester may not be placed back on a remediation plan for attendance in a different semester once the original plan was met. If a problem arises where a student needs further remediation on the same skill, dismissal from program may be considered. Furthermore, the maximum number of remediation plans allowed during the graduate program is five remediation plans. If a student exceeds this number, the student will be dismissed from the program. Additional information regarding program dismissal is discussed below.

It should be noted that clinical hours will not be earned for failing performance within clinic. Academic credits will not be earned for performance below a B-.

Graduate students on a remediation plan may not be eligible to participate in extern opportunities. This determination will be made by the team and documented on the remediation plan.

Academic Remediation Plan Qualifications

Students in the Graduate Program in Speech-Language Pathology may be offered an academic remediation plan for any of the following reasons:

- Poor overall performance in any academic course (B- or below)
- Poor overall performance at end of semester grades (B- of below)
- Demonstrated difficulty (not demonstrating competency) on one of the knowledge areas targeted within an academic course (one of KASA standards)
- Overall graduate GPA of 3.25 or below
- Excessive absences from academic courses
- Any documented reason that is interfering with the student's ability to demonstrate knowledge outcomes of the academic course.

Clinical Remediation Plan Qualifications

Students in both the Graduate and Undergraduate programs may be offered a clinical remediation plan for any of the following reasons:

- Poor clinical writing skills
- Difficulty maintaining or establishing clinical rapport
- Difficulty demonstrating clinical decision making commensurate with student's education level
- Lack of growth in clinical skills
- Any documented reason that is interfering with the student's ability to demonstrate skills outcomes of the clinical course

* * NOTE: It may be necessary to the Director of Clinical Education to remove a student from a clinical placement or case dependent upon the needs identified above.

Professionalism & Ethical Practice Remediation Plan Qualifications

Students in the Graduate Program in Speech-Language Pathology may be offered a professionalism and ethical practice remediation plan for any of the following reasons:

- Violations of the University Academic Integrity Statement, ASHA Code of Ethics, and/or the program's statements of Professional Behaviors and/or Ethical Practice and Behaviors.
- HIPAA/Confidentiality concerns or complaints. Three HIPAA violations will result in a failing grade in clinic and may result dismissal from program.
- Noted concerns with professional behavior including, but not limited to, professional interactions, timely completion of work, attendance, and unacceptable behavior towards faculty, staff, supervisors, clients, caregivers, classmates, etc.
- Dishonest behavior in the classroom, clinic, and off-campus settings.

Remediation Plan Implementation

Remediation plans will be offered to the student. The student has the right to refuse the remediation plan in which case they are still be expected to demonstrate competency without the additional support of the team for the areas identified as needing remediation. Failure to demonstrate competency in the area by the agreed upon date will lead to a failing grade in the academic or clinical course. If the student agrees to the remediation plan, then then plan is developed by the pertinent team members (e.g., faculty member(s), Program Director,

Director of Clinical Education, Clinical Faculty, academic or clinical advisor, and/or other members as indicated) and the student. The student will be an active member in the development process and will be required to sign an agreement for the implementation of the plan. Each plan will have explicit goals (SMART goals – specific, measurable, achievable, relevant, and time-bound), recommended strategies for achieving the goals, and a specific time period in which the plan will be completed. The plan will be monitored based on the specific timeline established in the plan. If remediation is required in more than one area (i.e., course, clinic or professional and ethical behavior), then a separate plan will be developed for each area. If the need for remediation is determined at the end of the semester, then the student will earn an "Incomplete" for that course or clinical placement, until the remediation plan is successfully completed. At that time, the course and/or clinical grade will be submitted to the Registrar.

If a student does not complete the remediation plan by the target date, the team has the option of extending the deadline if the student has been making adequate progress on the goals; or the student fails that aspect of the course and therefore earns a failing grade for the course.

Leave of Absence

A leave of absence may occur for a medical and/or personal reason. Students requesting a leave of absence need to contact the Program Director to discuss the leave of absence and possible implications for program completion. Typically, if the requested is under 4-weeks – it will be managed at the program/department level; however, this is dependent on the semester a student is in the program (i.e., externships may not allow extended absence as part of a placement). If the needed leave of absence is more than 4-weeks, then academic administrators may be involved in the management of the leave of absence.

Probation

Students are placed on probation for the following reasons:

- Being on a remediation plan
- Refusing a remediation plan
- Earning two or more B-'s during a semester
- Semester and/or overall GPA of 3.25 or below without any grades of C+ or below.

Students on probation are at risk of being dismissed from the program if they do not improve their performance or grades to be in "good standing". Specifically, students in need of remediation must successfully meet the competencies stated on the remediation plan and/or in the course by the agreed upon date on the

plan whether they accepted or declined the plan. Students on probation due to an overall GPA at or below 3.25 will have one semester to improve their grades to obtain an overall GPA above 3.25. During this time, the student is not eligible to participate in the Study Abroad portion of the program. Should the student wish to participate in the Study Abroad program, they can appeal this aspect of the probation.

Dismissal

Students will be dismissed from the program for any of the following reasons:

- Earning an overall grade C+ or below or fail (in a pass/fail course) in any course or clinical practicum (No C's or failing grades in the program)
- Overall GPA below a 3.25 after the probationary period
- Being on more than 5 Remediation Plans (academic, clinical and professionalism) during the program.
- Not successfully demonstrating competency for the areas listed on a remediation plan by the agreed upon deadline.
- Academic integrity violations
- Violations of the BW Student Code of Conduct

Conflict Resolution Process

This department structure is meant to demonstrate for students and faculty how the chain of command in the clinic and academic courses operate. Students and faculty should always start by speaking to the faculty member involved, then moving up through the chain of command (Director of Clinical Education for clinical matters and Program Director for graduate academic matters). If concerns persist after speaking to the Director of Clinical Education or Program Chair, then Department Chair should be contacted, and then the Dean of the College of Education and Health Sciences. We encourage all students and faculty to follow the chain of command when issues/concerns or comments arise.

If the student continues to have concerns after working with the Director of Clinical Education, Program Director, Department Chair, and Dean of the College of Education and Health Sciences, then a grievance may be filed with the grievance board on campus. This procedure is outlined in the Student Handbook for the University this is located at:
https://www.bw.edu/Assets/Offices/student-affairs/handbook.pdf

If the student continues to have concerns that have not been addressed, then the student or faculty member may file a complaint with the Council for Academic

Accreditation. The procedure for this complaint process is located online at: https://caa.asha.org/programs/complaints/

Policy on Work Outside of CSD Department

It is recommended that students be very cautious about taking on work positions outside of the CSD and/or Speech-Language Pathology programs. Students may not work with patients outside of the clinic environment if the student currently sees that patient. This includes babysitting and/or respite care. Students are never allowed to provide speech/language tutoring services to anyone outside of supervised practicum. This can lead to misrepresentation as a speech-language pathologist and create ethical dilemmas.

Applied Behavioral Analysis (ABA) tutoring may be an option for student work, but only if the student is provided with a specific plan and is not responsible for making clinical or therapeutic decisions on the patient's behalf. It is also recommended that students only provide ABA tutoring in areas other than speech and language.

If at any time a student has questions about whether a work position may be appropriate, they should see the guidance of their academic advisor, Program Director, or Director of Clinical Education.

Degree Checklist

Records for each student's planned course of study will be maintained by the Registrar's Office. Each student will meet with their academic advisor prior to registration to discuss the appropriate courses to register for. As each student registers and successfully completes each course, the Registrar will update their transcript, which in turns updates the Academic Evaluation on Student Planning Tool. Students and advisors have access to this information through Student Planning Tool. Students can see all the required courses, completed courses, courses that are in-progress, and grades for all completed courses.

Clinical hours and progress toward completion of ASHA's CCC requirements and the Ohio Speech and Hearing Professionals Board requirements will be maintained through CALIPSO. Students will be required to update clinical hours daily or weekly dependent upon supervisor request. Students, academic advisors, clinical advisors, Program Director, and Director of Clinical Education can then monitor this progress.

Internship Placement Procedures

Students enrolled in the Bachelor of Science degree in Communication Sciences and Disorders will need to complete 3 credits of internship IF the student does not meet the minimum GPA requirements for clinic. Students should work with Career Services on campus and their academic advisor in determining appropriate internship experiences. It is important for students to note that these internship credits may not be at a clinical placement for Speech-Language Pathology (see Externship section of this handbook).

Procedures on securing an internship and internship requirements can be found by visiting the BW One Stop at https://www.bw.edu/one-stop/

Clinical Placement Requirements

Scope of Practice

All students (undergraduate or graduate) participating in clinical placements are expected to be familiar with and adhere to the scope of practice for Speech-Language Pathologists. This position statement is written by the American Speech-Language-Hearing Association and can be found at: https://www.asha.org/siteassets/publications/sp2016-00343.pdf. If students have questions about the Scope of Practice, please ask the Program Director or Director of Clinical Education.

Prerequisites

Undergraduate

Undergraduate students must complete CSD 105D, 220, 225 and either CSD 325 or CSD 340; earn a B- or above in both CSD 235 and CSD 236; and have a GPA of 3.2 or above or consent of Director of Clinical Education in order to enroll in CSD 335X, 336, 435X or 436.

Graduate

Graduate students are recommended to have completed 25 hours of guided clinical observation, thus meeting the requirements set forth by the American Speech-Language-Hearing Association. Proof of completion according to these standards must be given to the Director of Clinical Education prior to enrollment in the 1st semester of graduate coursework. For information on the guidelines for the hours of guided clinical observation, please refer to the information provided at https://www.asha.org/certification/2020-slp-certification-standards/ (Standard V-C).

Transferring Hours from Undergraduate Programs to Graduate Work

Graduate students will be allowed to submit clinical hours completed as an undergraduate to the Director of Clinical Education for approval. Once approved up to 50 clinical intervention or diagnostic hours may be counted toward the total 375 hours needed for licensure and certification. Please note that verification of hours from the undergraduate program will be needed to assure that all hours were obtained in accordance with the guidelines set forth by the American Speech-Language-Hearing Association. These guidelines can be obtained at https://www.asha.org/certification/2020-slp-certification-standards/ (Standard V-D, V-E, V-F). The Director of Clinical Education has the right to deny the transfer of clinical hours if proper documentation is not provided.

Expectations for Clinical Behavior

Attendance

Attendance Policy for Blended, Hybrid, or HyFlex Courses - The rules, expectations, and outcomes set forward in the general attendance policy apply in their entirety to blended, hybrid, or hyflex courses. Because these courses may require students to commit to an assigned schedule of attendance either in-person, synchronous remote, or asynchronous remote, a further expectation exists around these modes of attendance. Students are expected to attend class in the manner they are assigned. Absent prior written approval from the instructor to attend a particular class in a different mode (for example, attend a class period remote synchronous when assigned in-person) constitutes an absence from class. Such an absence counts against attendance requirements listed in the course syllabus and against the total number of absences listed in the University general attendance policy and may result in a lowering of an assigned grade or an automatic failure.

Attendance during clinical practice is **mandatory**. Students who are unable to come to clinic MAY NOT come to academic classes. If students are too ill for clinic, then they are too ill for class and vice versa.

Students should arrive at the clinic and check in with the clinical supervisor or designee at least 30 minutes prior to their first scheduled client. Students also must check out with the clinical supervisor or designee prior to leaving the clinic.

Illness/Family Emergency

A student with contagious illnesses or a family emergency (i.e., death in family) should contact his/her clinical supervisor as soon as possible. The student should also contact the Director of Clinical Education and the Office Manager. The student is responsible for contacting and securing a substitute clinician. Clinical sessions will only be cancelled as a last resort when coverage is not

possible. Students that are unable to come to clinic MAY NOT come to academic classes.

Communication

Students are asked to remember that the clinic is a functioning business. Every interaction with faculty members and supervisors, patients, caregivers, community members and other students reflects upon the Baldwin Wallace Speech Clinic. For this reason, students are asked to be aware of their language, conversation, body language, and overall communication in the clinic.

Teamwork

The Baldwin Wallace Speech Clinic requires a team effort to operate. This means that students may be asked to assist with duties around the clinic. Some examples of these may be greeting patients upon arrival, cleaning/organizing supplies, wiping down therapy materials, or covering for a peer.

Confidentiality

The protection of patient confidentiality is the responsibility of all students in the clinic. Students should not talk about patients in hallways, the waiting room, or other common areas.

Tb Tests

Tuberculin (Tb) Testing: The two-step Mantoux Tb skin test is required to be completed by the student's healthcare provider. This is an annual requirement of the affiliating clinical agencies and will need to be repeated by the student during the program prior to expiration with documentation provided to the SLP program. Students who have a medical history of a false positive, allergy to the Mantoux test, BCG vaccination or are a converter are required to undergo Tb QuantiFERON testing (interferon-gamma release assay [IGRA]) for Tb infection through their provider, annually. All students are required to provide documentation of a two-step Tb Test to the Director of Clinical Education. This test must be current (within the last 12 months) and students must obtain new documentation annually. Students not providing this documentation will not be assigned to clients within our clinic or off-site until proper documentation is obtained. This test must be updated yearly.

Some extern sites also request documentation of current Tb Test completion. The Director of Clinical Education will provide this documentation with a signed release from the student. Students can view dates of completion for this requirement at any time on the CastleBranch program.

Criminal Background Checks

All SLP students are required to complete a comprehensive background check, including fingerprinting, as part of the initial enrollment process.

The BW SLP program has partnered with CastleBranch, a background check and compliance management company to coordinate fingerprinting, medical information, and CPR. Students whose background checks reveal a criminal history or arrest record of any sort that has not been expunged or sealed, and that cannot be successfully adjudicated prior to the beginning of the program, will not be allowed to begin the Master of Science SLP program.

Although students with an expunged record may be eligible for enrollment in BW's SLP program, an expunged or sealed record may impact a student's eligibility for clinical placement or future employment in certain work settings. Eligibility for a professional license varies by state and may be assessed on a case-by-case basis by the professional licensing board.

Some extern sites and clinical placements require copies of BCI and FBI checks. The Director of Clinical Education will provide this documentation with a signed release from the student. Students can view dates of completion for this requirement at any time on the CastleBranch program.

Immunization Records

All graduate students will need to provide documentation of appropriate immunizations, or written validation of titers establishing immunity for measles (rubeola), German measles (rubella), mumps, tetanus, diphtheria, pertussis, chicken pox (varicella), hepatitis B and polio immunizations upon enrollment into the graduate program. Failure to complete this process may result in a delay in the start of clinical practicum.

Many clinical placements also require documentation of the COVID vaccine series (including boosters) and the Flu Vaccine annually. The Director of Clinical Education will provide this documentation to sites when a signed release is on file for the student. Documentation should be provided directly to the Director of Clinical Education and will be in the student's file. Students seeking an exemption for the COVID vaccine requirement should contact the Director of Clinical Education to initiate the process.

Liability Insurance

Undergraduate and graduate students are covered under the University's liability insurance policy. This policy covers students enrolled in clinical

experiences and supervised by on and off-site clinical supervisors. This insurance is included as part of your tuition.

Many clinical placements also require that students provide proof of additional liability insurance. If this is the case, it is recommended that the student contact the Ohio Speech-Language-Hearing Association (OSLHA) at www.ohioslha.org. Liability insurance can be purchased for a very reasonable cost through OSLHA.

Clinic Fee Schedule and Billing

Fee Schedule

The Baldwin Wallace University Speech Clinic is a free clinic. So, all services are provided at no charge to clients at the facility.

Billing

Students will utilize ICD 10 billing codes with the assistance of their supervisor to learn proper coding as if insurance was billed. ClinicNote provides a vehicle for students to learn billing with the patients in the clinic.

Clinical Sequence

Undergraduate Students in B.S. Program

Semester One: CSD 335X Clinical Practice
Semester Two: CSD 336 Clinical Practice
Semester Three: CSD 435X Clinical Practice
Semester Four (optional): CSD 436 Clinical Practice

Graduate Students

Semester One:
CSD 530 Clinical Foundations
CSD 535 Clinical Practice
Semester Two:
CSD 536 Clinical Practice
Semester Three:
CSD 537 Clinical Practice
CSD 531 Diagnostics
Semester Four:
CSD 635 Clinical Practice
CSD 638 Clinical Practice – School-Based Setting
Semester Five:
CSD 636 Clinical Practice

Clinical Knowledge and Skills Assessment

The clinical supervisor assesses clinical knowledge and skills twice a semester. The first assessment occurs at midterm and the second at the conclusion of the semester (finals). The CALIPSO program tracks all assessments and students that earn a B- or below will be placed on a clinical remediation plan as outlined above. Specifics on how students are graded on clinical knowledge and skills are listed below. A sample assessment is in the appendices.

Rating Scale

Supervisors will use a 7-point rating scale to rank a student's clinical competence on different skills across the nine areas of speech and language prevention/intervention/assessment (articulation, swallowing, voice, fluency, receptive/expressive language, cognitive language skills, communication modalities, hearing, and social aspects). Different conversion measures are used based on the clinical course in which the student is enrolled. This allows for the student's independence level in the clinic to be accounted for pass/fail grade for the course.

7-point Scale

7 – Clinical skills are consistent and well developed. Student can modify behaviors independently and problem solves familiar clinical situations with little to no supervision. The supervisor consults with student during unfamiliar cases.

6 – Clinical skills are adequate. Student requires less supervision and is beginning to self-evaluate and problem solves behaviors. Supervisor is needed to assist with consistency of skills and works collaboratively with the student.

5 – Clinical skills are present. Student demonstrates clinical skills and behaviors. The student can recognize the need for modification of skills but needs supervisor input to assist with modification.

4 – Developing clinical skills. Student is demonstrating clinical skills with limited self-awareness. The supervisor assists the student in recognizing the need for changes and possible solutions to clinical problems.

3 –Beginning clinical skills. Student is beginning to demonstrate some clinical behaviors/skills without direct instruction from supervisor. These clinical behaviors may have varying levels of success and require frequent supervisor instruction.

2 – Maximum support. Student requires maximum instruction and support from the supervisor. Responds to direct instruction from supervisor.

1 – Skills not evident or demonstrated. Direct instruction from the clinic supervisor does not alter behavior.

Undergraduate 1st Semester

Undergraduate student ratings in the 1st semester of clinical practicum will be converted to pass/fail as follows:

Start	End	Letter
3.40	7.00	Pass
0.00	3.39	Fail

Undergraduate 2nd Semester

Undergraduate student ratings in the 2nd semester of clinical practicum will be converted to pass/fail grades as follows:

Start	End	Letter
3.60	7.00	Pass
0.00	3.60	Fail

Undergraduate 3rd Semester

Undergraduate student ratings in the 3rd semester of clinical practicum will be converted to letter grades as follows:

Start	End	Letter
4.00	7.00	Pass
0.00	3.99	Fail

Undergraduate 4th Semester

Undergraduate student ratings in the 3rd semester of clinical practicum will be converted to letter grades as follows:

Start	End	Letter
4.25	7.00	Pass
0.00	4.24	Fail

Graduate All Semesters

Graduate student ratings clinical practicum will be converted to pass or fail grades as follows:

CSD 535:

Start	End	Letter
4.50	7.00	Pass
0.00	4.49	Fail

CSD 536:

Start	End	Letter
5.00	7.00	Pass
0.00	4.99	Fail

CSD 537:

Start	End	Letter
5.50	7.00	Pass
0.00	5.49	Fail

CSD 635:

Start	End	Letter
5.50	7.00	Pass
0.00	5.49	Fail

CSD 636:

Start	End	Letter
5.00	7.00	Pass
0.00	4.99.49	Fail

Clinical Assignment Protocol

This document is meant to clarify how students are assigned patients in the speech clinic.

- At the beginning of the semester clinical supervisors and Director of Clinical Education look at the student's completed coursework. Students are then assigned patients based on successful completion of the prerequisite coursework first (e.g., completion of Voice and Fluency Disorders will result in fluency patient in the clinic).
- First semester students will be paired first with articulation and language patients.
- If for any reason a student is assigned a patient for which they have not completed the prerequisite course work the following protocol goes into effect:
    - The clinical supervisor and student will meet, and the clinical supervisor will provide individualized training on the patient's disorder.
    - The clinical supervisor will provide the student with further readings and video case studies.
    - The clinical supervisor and student will then meet and write goals and lesson plans for the patient.
    - The first session may be led by the clinical supervisor with student participating.

    - The student will write detailed lesson plans that contain rationale and support for all activities. Each lesson plan will be approved by the clinical supervisor.
- If a student is struggling with a clinical assignment the following protocol will go into effect:
    - The student and clinical supervisor will schedule weekly meetings or more frequently if needed.
    - A remediation plan will be developed. This plan will include measurable objectives and a timeframe for completion. See clinical remediation for more details.
    - The student may be asked to complete additional activities to assist with remediation of target skills. These activities may include, but are not limited to, reviewing session tapes, further observation, and/or completion of simulation cases.
    - If the student is not making the desired progress the student may be removed from the patient's case.

Externships

Graduate students will be asked to participate in up to 2 externships during the five-semester program. Externships are clinical experiences at off-site placements. A licensed and certified Speech-Language Pathologist employed by the externship site supervises these experiences and all placements are governed by affiliation agreements. The Director of Clinical Education coordinates all placements and is responsible for monitoring compliance. Graduate students or their families ARE NOT permitted to contact facilities directly.

Requirements

To participate in externship rotations graduate students must successfully complete onsite clinical experiences, complete a minimum of 50 clinical hours, be in good academic standing (i.e., not on probation) and have the permission of the Director of Clinical Education.

Procedures for the Placement of Students at Externships

- The Director of Clinical Education contacts the external site to inquire about student placements. If the site is agreeable, an agreement is established using our standard agreement or the site's agreement, it is then reviewed and approved by both the site's. Once a fully executed agreement is established, copies are dispersed as appropriate.
    - The Director of Clinical Education keeps up to date copies of all agreements. Agreements are signed and renewed on an ongoing basis.
- Students are not allowed to make direct contact with external sites for externships, however, students complete a survey during their first two semesters about preferences for placements. In addition, students with

specific requests are encouraged to meet with the Director of Clinical Education to express those preferences.

- The Director of Clinical Education makes all placement decisions based on clinical and academic performance in conjunction with a review of student preferences.
    - The Director of Clinical Education reviews preference lists submitted by each student, sites are called to confirm availability, then students are matched to sites based on student preference, and clinical and academic performance.
- The Director of Clinical Education verifies all extern supervisor credentials (ASHA CCC's, State license, and Educator license where applicable). The Director of Clinical Education also speaks to the supervisor to collect information about population type and needs at the facility to complete the site information form.

How externships are evaluated

- The Director of Clinician Education oversees the students' external placement. Contact is made throughout the placement to discuss progress, concerns, and midterm and final grades. During the externship, students and external supervisors are asked to complete an online survey (Microsoft Forms or Qualtrics) to determine perceptions on how the placement is going. The Director of Clinical Education also schedules phone, video or in-person visits with external supervisors throughout the semester as needed.
- All student clinicians are invited to complete a survey in Qualtrics to determine student perception of the educational opportunity provided. External supervisors are also surveyed every 3 years and asked to complete a Qualtrics survey to determine their satisfaction with the student clinician's performance. This information is reviewed and discussed by the program leadership (Director of Clinical Education, Program Director and Department Chair), and kept by the Director of Clinical Education to use when selecting future placements. These results are stored in Qualtrics and/or in the Director of Clinical Education's electronic files.

Process for Monitoring Externships

- The Director of Clinician Education oversees all graduate clinicians during the students' external placement. Contact is made throughout the placement to discuss progress, concerns, and midterm and final grades.
- Calipso is used to monitor progress via the midterm and final evaluation.

Supervision Requirements

Graduate students must be supervised a minimum of 25% of the time for intervention and 25% of the time for diagnostics. A licensed and certified Speech-Language Pathologist must provide this supervision. In Ohio this means that the

therapist must have a current Ohio License from the Ohio Speech and Hearing Professionals Board, and a Certificate of Clinical Competence in Speech-Language Pathology from ASHA.

Attendance

Graduate students must arrive on time to the facility (prior to the start of the first session-specific times are arranged with supervising therapist). Daily attendance at the externship site is mandatory. Graduate students are not permitted to ask for days off during the externship experience. Students are also expected to follow the externship's schedule. For example, a hospital will not have Spring Break; therefore, the student is expected to attend the externship even during the University's Spring Break.

Dress Code

Every facility has different requirements for dress code. The graduate students should communicate with the supervisor prior to starting the externship about proper dress. When in doubt students should adhere to the dress code for the Baldwin Wallace Speech Clinic.

Clinical Hours Tracking

All students enrolled in clinical practicum (undergraduate and graduate) will be required to enroll in CALIPSO. Students will enter clinical clock hours daily or weekly dependent upon supervisor preference. The hours as approved will be added to the student's total clock hours. The Director of Clinical Education will review clock hours at minimum once a semester.

Hours not entered weekly will not be approved. It is essential that hours are entered at minimum weekly so that your progress is up to date and that the hours are accurately reported.

Directions on how to enter clinical clock hours can be found in the Student CALIPSO Instruction section of this handbook.

Guidelines for Clinical Hours

ASHA guidelines for earning clinical clock hours state that "student clinicians may earn clock hours only for that portion of time they are actively engaged in providing services to a client."

This means that only hours spent actively engaged in intervention or diagnostic activities may count toward the licensure or certification requirements.

Active engagement includes, but is not limited to, the following:

- Actual service delivery (therapy or diagnostics)

- Interviewing and counseling with clients/families regarding treatment recommendations, home programming, etc.
- Managing client's behavior
- Providing scaffolding, cues, or prompts

Report writing, planning sessions, learning to administer tests or procedures, or passively observing without active involvement with the client/family CANNOT be counted as clinical clock hours.

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

Conference time with Clinical Instructors/Supervisors may NOT be counted.

If a client presents communication disorders in two or more of the disorder categories, accumulated clock hours should be distributed among these categories according to the amount of treatment time spent on each.

The Council for Clinical Certification (CFCC) offer the following guidance on what types of hours are allowed and how many hours are needed in each category.

Supervised Clinical Practicum Options	**Required**	**Minimum Toward the 400 Hours**	**Maximum Toward the 400 Hours**
Guided Clinical Observations	Yes	25	25
On-Site and In-Person Direct Contact Hours	Yes	250	No Maximum
Undergraduate Hours	No	0	50
Clinical Simulations	No	0	75
Telepractice	No	0	125

IF IN DOUBT ABOUT WHETHER TO COUNT TIME TOWARD CLINICAL CLOCK HOURS PLEASE CONTACT THE DIRECTOR OF CLINICAL EDUCATION.

Supervision Requirements

Students must be provided with supervision commensurate with their level of competence with each patient and disorder. All students must be supervised a minimum of 25% of the time for intervention and 25% of the time for diagnostics. A licensed and certified Speech-Language Pathologist must provide this supervision. In Ohio this means that the therapist must have a current Ohio

License from the Ohio Speech and Hearing Professionals Board, and a Certificate of Clinical Competence in Speech-Language Pathology from ASHA.

Supervisor Feedback

All students enrolled in clinical practicum at the undergraduate or graduate level will be asked to provide supervisor feedback at minimum one time each semester. This feedback will be collected via CALIPSO and provided to the supervisor anonymously. Written directions can be found in the CALIPSO Student Instruction located in the Appendix of this handbook.

Grievance Policy and Procedures

Please refer to section entitled Conflict Resolution in this handbook.

Relationships with Clients and Families

Students may not engage in personal relationships with clients or families. Students may not transport patients at any time due to liability issues. Students may not provide childcare or babysitting services for current clients or families. Students should refer to the ethical behaviors portion of this handbook for more information on what behaviors may be considered inappropriate.

Dress Code

Students should plan to come to clinic in clothing that allows them to be comfortable and best represent themselves and Baldwin Wallace University to their supervisor, peers, and clients. Students should strive to be present in clothing that will not be interpreted as offensive in nature. A good standard to consider is wearing a pair of pants (not jeans/leggings/sweats) with a top that reaches the top of pants (to cover the body when you bend over). Skirts and dresses may be worn if they are long enough to provide coverage when bending over.

All graduate students will receive a set of black scrubs. These scrubs may be worn in the clinic and at community partner sites as permitted.

Perfumes/Lotions

Students need to be aware of scented lotions and perfumes in the clinic setting. Many patients are allergic or sensitive to smells so clinicians will not be allowed to wear perfumes or lotions with strong smells in the clinic.

Shoes

All students are expected to wear shoes that are comfortable to the clinic. Please be aware that you will be sitting on the floor and possibly following a patient at a hurried pace down the hall.

****Please note the supervisor has the right to request that a student not wear a specific outfit for clinic in the future. The Director of Clinical Education can assist if there are questions about appropriateness******

Smoking

Baldwin Wallace University is a non-smoking campus. This includes the Baldwin Wallace Speech Clinic. The official university policy can be found in the student handbook. Students should not come to clinic with clothing that smell like cigarette smoke or other substances.

Drugs/Alcohol/Substance Abuse

Students must adhere to the policies set forth in the Baldwin Wallace University Student Handbook. This handbook can be found at https://www.bw.edu/Assets/Offices/student-affairs/handbook.pdf
In addition, ethical practice guidelines for the profession of Speech-Language Pathology state that individuals may not provide intervention, diagnostics, counseling or services while influenced by drugs or alcohol or illegal substances. Students found in violating this will be subject to disciplinary action as outlined in the student handbook and will be immediately removed from patient care.

Video and Audio Recording Procedures

All students will be given a access to the clinic recording system, valt.bw.edu. The Director of Clinical Education is responsible for working the Information Technology department to add students to the system. Students will use their BW identification and password to sign onto the system.

For specific instructions regrading use of the video system please see the Director of Clinical Education.

Clinic Materials Procedures

The Baldwin Wallace Speech Clinic has a large inventory of materials, tablets, equipment, and diagnostic materials available for student use. All students are required to check out materials to use in sessions and check the items back in when done. If a student desires to use materials at an offsite placement, he/she must checkout the materials using Libib.

Limited materials are also available for checkout through Ritter Library. For directions on how to check out materials from Ritter please go to: https://libguides.bw.edu/borrow

Students are responsible for putting all materials away after use and may not leave materials laying in work areas, hallways, therapy rooms, or common areas.

Intervention/Therapy Materials

A large number of intervention and therapy materials are available for student use. These materials range from resource manuals with therapy activities to board games or toys. All materials should be cleaned after patient use if possible. If a student notices that materials are damaged or there are materials that the student would like to request for purchase, the student should complete the Materials Request/Repair Form in the appendix of this document. Please remember that most of the materials have been purchased through grants or donations so please handle all materials accordingly.

Diagnostic Materials

Diagnostic materials are available for use in the Baldwin Wallace Speech Clinic. All materials needed for each diagnostic should be stored together and signed out as a set (i.e., do not sign out just the manual for a diagnostic).

Tablets

The Baldwin Wallace Speech Clinic has been able to provide a library of tablets (iPads) for student use with patients. The clinic account already holds a large number of apps suitable for use with patients of all diagnosis, ages, and skills. A list of current apps is available and which tablet holds the app is available in the notebook on the tablet shelf in the materials room. If a student wishes to purchase an app for a specific client, the student should complete a Materials Request/Repair Form located in the on Teams or by scanning the QR code below.

Audiometers

Multiple audiometers and other hearing equipment are available for use through the Baldwin Wallace Speech Clinic. This equipment must be signed out with Libib for use.

Access to Clinic and Clinical Materials

Students can obtain access to the clinic 24 hours a day and 7 days a week. Students should swipe into the building and use the secure keypad to enter the materials/workroom.

Client Medical Records Procedures

All client medical records are kept in a HIPAA compliant medical records program, ClinicNote. This electronic program contains billing information, diagnostic and intervention information, consents, correspondence documentation, and information from outside sources.

This information should only be viewed in settings where the confidentiality of the client can be maintained. So medical records cannot be viewed in public places, such as, but not limited to, restaurants, coffee shops, computer labs, libraries, or stores. Students need to be sure to place themselves so that individuals cannot see their computer screen and should not save any documents with identifying information to personal computers, unencrypted flash drives, public computers, etc.

Correspondence with Clients and Families

All correspondence with clients and families must be documented in the client's medical record on ClinicNote. The patient portal referred to below should be used for written correspondence with the patient. Correspondence includes, but is not limited to, telephone calls, emails, and traditional mail correspondence.

When calling a client of the Baldwin Wallace Speech Clinic, students should not use personal cell phones. Students should only contact clients from phones located within the clinic. Students should also clearly identify themselves when corresponding with clients.

A patient portal is available on ClinicNote. This portal allows students to send HIPAA compliant messages to patients. This is the preferred method of communication between the clinic and patients.

Clinical Paperwork Timelines

Students are expected to adhere to the paperwork guidelines established by the supervisor. Grades will not be posted at the end of the semester until the student has completed and properly filed all paperwork.

Infection Control Procedures

Hand Washing

Antibacterial soap is located in all restrooms. Students should wash their hands prior to each patient. If hand washing is not an option, hand sanitizer is available

throughout the clinic, student work rooms and on the shelves in some of the therapy rooms.

Disinfectant Procedures for Equipment and Materials

All tables and chairs should be wiped with disinfecting wipes at the end of each session. They should also be wiped if a patient attends with a known illness or cold, prior to the next therapy session. This will assist in limiting the spread of disease from one patient to another.

The waiting room should be wiped with disinfecting wipes at the beginning of each therapy day and at the end.

Any toy that has been used with a patient MUST be sanitized before placing back in the materials room. Please use disinfecting wipes to sanitize toys. Toys that are plush or paper based should not be wiped with sanitizing wipes. Instead, please talk to your supervisor or the Director of Clinical Education for how to clean these items.

Employee and Student Health Safety

Students and supervisors are required to wear gloves, googles, KN95 masks/N95 masks, and disposable gowns as needed when engaged in aerosol generating activities, feeding, or oral motor activities. In addition, gloves and masks should be worn if the student or faculty will be contact with mucus, blood or other bodily fluid is possible.

Emergency Procedures

Fire

In the case of fire, exit the building in a safe manner.

Students first need to remove patients and visitors from the building. Exits on the FIRST floor are located at the front and back of the building. NOTE: the only handicapped accessible exit is the door at the top of the ramp. If this exit is blocked, please remove clients from wheelchairs and carry them from building down the back stairs. On the BASEMENT floor, utilize the exits at the front and back of the building.

Once all patients, students, and supervisors have been safely evacuated from the building, call 911 to alert the Fire Department of the fire.

After the situation has been reported to the authorities, the clinical supervisor is responsible for immediately notifying the Director of Clinical Education.

Tornado/Inclement Weather

In case of tornado/inclement weather that require patients, students, and supervisors to seek shelter please follow the procedure below:

- Evacuate patients to lowest level of building (basement).

- Carefully enter basement and stay away from all windows.
- Wait for supervisor to give all clear.

Campus Wide Emergencies

In case of a campus wide emergency (i.e., lock down, evacuation, etc.) instructions will be delivered via the campus text alert system.

Medical Emergencies

If a patient has a medical emergency, please follow the protocol below:

If the Patient is accompanied by a Caregiver/Parent:

1. Notify Parent/Caregiver immediately
2. Send for supervisor help.
3. Call 911, if life threatening
4. Once help has arrived, the clinical supervisor will immediately notify Director of Clinical Education of situation
5. Within 24 hours the Director of Clinical Education will assist with the completion of any required paperwork.

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Appendices

Baldwin Wallace University
CALIPSO
Supervisor Feedback Form
Printed for
Doe, Jane

Session times out in: 1:39:07

Supervisor Feedback Form

* Supervisor:

* Site:

* Semester:

1. Provided an orientation to the facility and caseload.

N/A	No orientation provided. Student oriented him/herself.	Informal orientation provided.	Formal orientation provided with supplemental documentation.

2. Provided the student with feedback regarding the skills used in diagnostics.

N/A	Comments were vague; and therefore, difficult to apply.	Comments were useful but lacked specifics or concrete examples.	Comments were useful, specific, and constructive.

3. Provided the student with feedback regarding the skills used in interviewing.

N/A	Comments were vague; and therefore, difficult to apply.	Comments were useful but lacked specifics or concrete examples.	Comments were useful, specific, and constructive.

4. Provided the student with feedback regarding the skills used in conferences.

N/A	Comments were vague; and therefore, difficult to apply.	Comments were useful but lacked specifics or concrete examples.	Comments were useful, specific, and constructive.

5. Provided the student with feedback regarding the skills used in behavioral management.

N/A	Comments were vague; and therefore, difficult to apply.	Comments were useful but lacked specifics or concrete examples.	Comments were useful, specific, and constructive.

6. Provided the student with feedback regarding the skills used in therapy.

N/A	Comments were vague; and therefore, difficult to apply.	Comments were useful but lacked specifics or concrete examples.	Comments were useful, specific, and constructive.

7. Provided the student with feedback regarding his/her selection of diagnostic or therapy materials.

N/A	Comments were vague; and therefore, difficult to apply.	Comments were useful but lacked specifics or concrete examples.	Comments were useful, specific, and constructive.

8. Explained and/or demonstrated clinical procedures to assist student in clinical skills development.

N/A	Provided minimal explanations and/or demonstrations.	Provided adequate explanations and/or demonstrations when requested.	Provided thorough explanations and/or demonstrations for all clinical procedures.

9. Utilized evidence-based practice.

N/A	Rarely referenced current literature.	Occasionally referenced current literature.	Frequently referenced current literature.

10. Encouraged student independence and creativity.

N/A	Minimally receptive to new ideas and differing techniques.	Somewhat receptive to new ideas and differing techniques but did not encourage them.	Very receptive to new ideas and encouraged use of own techniques.

11. Provided positive reinforcement of student's successes and efforts.

N/A	Rarely commented on successes and efforts.	Occasionally commented on successes and efforts.	Frequently commented on successes and efforts.

Session times out in: 1:39:07

12. Provided student with written and/or verbal recommendations for improvement.

N/A	Rarely provided written and/or verbal recommendations except on midterm and final evaluations.	Occasionally provided written and/or verbal recommendations in addition to the midterm and final evaluations.	Systematically provided written and/or verbal recommendations in addition to the midterm and final evaluations.

13. Demonstrated enthusiasm and interest in the profession and in providing clinical services.

N/A	Enthusiasm and interest rarely observed; frequent negative comments.	Enthusiasm and interest occasionally observed; occasional negative comments.	Enthusiasm and interest regularly observed; frequent positive and optimistic comments.

14. Demonstrated effective interpersonal communication with student.

N/A	Seemed uninterested and/or unwilling to listen or respond to student's needs.	Some interest in student's needs shown, but communication lacked sensitivity.	Aware of and sensitive to student's needs; open and effective communication.

15. Receptive to questions.

N/A	Unwilling to take time to answer questions.	Answered questions inconsistently.	Answered questions with helpful information or additional resources which encouraged me to think for myself.

16. Available to me when I requested assistance.

N/A	Supervisor was rarely available.	Supervisor was occasionally available.	Supervisor was always available.

17. Utilized effective organizational and management skills.

N/A	Rarely organized; showed difficulty balancing supervisory and clinical responsibilities.	Somewhat organized; balanced supervisory and clinical responsibilities with little difficulty.	Always organized; balanced supervisory and clinical responsibilities with ease.

18. Referred me to or provided me with additional resources (materials, articles, video tapes, etc.)

N/A	Provided minimal or no additional resources.	Provided helpful resources upon student request.	Provided helpful resources without student request.

19. Realistically demanding of me as a student intern.

N/A	Expectations were either too high or too low for level of experience with no attempts to adjust.	Expectations were generally appropriate for my level of experience.	Expectations were individualized and adjusted according to my strengths and weaknesses.

Overall, how would you rate this clinical experience?

Additional comments?

What experience during this practicum provided you with the greatest learning opportunity

Submit feedback

Authored by: Laurel H. Hays, M.Ed., CCC-SLP and Satyajit P. Phanse, M.S.

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Clinical Skills Evaluation Form

Baldwin Wallace University
CALIPSO
Performance Evaluation
You have been identified as Needham, Christie

Session times out in: 1:39:05

Home | Logout | Make a duplicate | Delete | Student information

Performance Evaluation

Fields marked with an * are required.

Supervisor: Needham, Christie Adelle

*Student: Doe, Jane

*Site: BW Speech Clinic

*Evaluation Type: Midterm

*Semester: 2022 Fall

*Course number: CAS 635 Clinical Practice Fall II

*Patient population (check all that apply):
- [x] Young Child (0-5)
- [ ] Child (6-17)
- [ ] Adult (18-64)
- [ ] Older adult (65+)

* Severity of Disorders (check all that apply):
- [x] Within Normal Limits
- [ ] Mild
- [ ] Moderate
- [ ] Severe

Interprofessional (or collaborative) practice (IPP) includes (check all that apply): [?]
- [ ] Audiologist
- [ ] Dentist
- [ ] Dietitian
- [ ] Family Member
- [ ] Interpreter
- [ ] Music/Creative Arts Therapist
- [ ] 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

Cultural and Linguistic Variables (check all that apply when the variables for the client/patient differ from that of the student): [?]
- [ ] Age
- [ ] Bilingual/Multilingual
- [ ] d/Deaf and Hard of Hearing
- [ ] Disability
- [ ] Ethnicity
- [ ] Gender Expression
- [ ] Gender Identity
- [ ] National Origin
- [ ] Non-Verbal Language
- [ ] Race
- [ ] Religion
- [ ] Sex
- [ ] Sexual orientation
- [ ] Verbal Language
- [ ] Veteran Status
- [ ] 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 7, in 0.25 increments (1.25, 1.5 etc.)

1 - Not Evident
2 - Maximum Support
3 - Beginning Skills
4 - Developing Skills
5 - Skills Present
6 - Skills Adequate
7 - Well Developed

* If n/a, please leave space blank

Evaluation Skills	Speech Sound Production [?]	Fluency [?]	Voice [?]	Language [?]	Hearing [?]	Swallowing [?]	Cognition [?]	Social Aspects [?]	Communication Modalities [?]
	Refer to Performance Rating Scale above and place number corresponding to skill level in every observed box.								
1. Conducts screening and prevention procedures, including prevention activities (CFCC V-B, 1a)									
2. Demonstrates current knowledge of the principles and methods of prevention and assessment, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates (CFCC IV-D)									
3. Collects case history information and integrates information from clients/patients, family, caregivers, teachers, and relevant others, including other professionals (CFCC V-B, 1b)									
4. Selects appropriate evaluation procedures (CFCC V-B, 1c) [?]									
5. Administers non-standardized and standardized tests correctly (CFCC V-B, 1c) [?]									
6. Adapts evaluation procedures to meet the needs of individuals receiving services (CFCC V-B, 1d)									
7. Demonstrates knowledge of communication and swallowing disorders and differences (CFCC IV-C) [?]									
8. Interprets, integrates, and synthesizes all information to develop diagnoses (CFCC V-B, 1e)									
9. Interprets, integrates, and synthesizes all information to make appropriate recommendations for intervention (CFCC V-B, 1e)									
10. Completes administrative and reporting functions necessary to support evaluation (CFCC V-B, 1f)									
11. Refers clients/patients for appropriate services (CFCC V-B, 1g) [?]									
Score totals:	0	0	0	0	0	0	0	0	0

Total number of items scored: 0 Total number of points: 0 Section Average: 0

Comments:

Save

Treatment Skills	Speech Sound Production [?]	Fluency [?]	Voice [?]	Language [?]	Hearing [?]	Swallowing [?]	Cognition [?]	Social Aspects [?]	Communication Modalities [?]
Refer to Performance Rating Scale above and place number corresponding to skill level in every observed box.									
1. Develops setting-appropriate intervention plans with measurable and achievable goals that meets client/patient needs, demonstrating knowledge of the principles of intervention and including consideration of anatomical/physiological, developmental, and linguistic cultural correlates. Collaborates with clients/patients and relevant others in the planning process (CFCC IV-D, V-B, 2a)									
2. Implements intervention plans that involve clients/patients and relevant others in the intervention process (CFCC V-B, 2b)									
3. Selects or develops and uses appropriate materials and instrumentation (CFCC V-B, 2c)									
4. Measures and evaluates clients'/patients' performance and progress (CFCC V-B, 2d)									
5. Modifies intervention plans, strategies, materials, or instrumentation to meet individual client/patient needs (CFCC V-B, 2e)									
6. Completes administrative and reporting functions necessary to support intervention (CFCC V-B, 2f)									
7. Identifies and refers patients for services as appropriate (CFCC V-B, 2g) [?]									
Score totals:	0	0	0	0	0	0	0	0	0

Total number of items scored: 0 Total number of points: 0 Section Average: 0

Comments:

Save

Additional Clinical Skills	Score
1. Sequences tasks to meet objectives	
2. Provides appropriate introduction/explanation of tasks	
3. Uses appropriate models, prompts or cues. Allows time for patient response.	
4. Demonstrates effective behavior management skills	
5. Practices diversity, equity and inclusion (CAA 3.4B)	
6. Addresses culture and language in service delivery that includes cultural humility, cultural responsiveness, and cultural competence (CAA 3.4B)	
7. Demonstrates clinical education and supervision skills. Demonstrates a basic understanding of and receives exposure to the supervision process. (CAA 3.1.6B) [?]	

Total number of items scored: 0 Total number of points: 0 Section Average: 0

Comments:

Save

Session times out in: 1:37:07

Professional Practice, Interaction and Personal Qualities
1. Demonstrates knowledge of basic human communication and swallowing processes. Demonstrates the ability to integrate information pertaining to normal and abnormal human development across the life span (CFCC IV-B; CAA 3.1.6B) [?]
2. Demonstrates knowledge of processes used in research and integrates research principles into evidence-based clinical practice (CFCC IV-F; CAA 3.1.1B Evidenced-Based Practice) [?]
3. Demonstrates knowledge of contemporary professional issues that affect Speech-Language Pathology (CFCC IV-G; CAA 3.1.1B) [?]
4. Demonstrates knowledge of entry level and advanced certifications, licensure, and other relevant professional credentials, as well as local, state, and national regulations and policies relevant to professional practice (CFCC IV-H)
5. Communicates effectively, recognizing the needs, values, preferred mode of communication, and cultural/linguistic background of the individual(s) receiving services, family, caregivers, and relevant others (CFCC V-B, 3a; CAA 3.1.1B Effective Communication Skills, CAA 3.1.6B) [?]
6. Provides counseling regarding communication and swallowing disorders to clients/patients, family, caregivers, and relevant others (CFCC V-B, 3c; CAA 3.1.6B) [?]
7. Manages the care of individuals receiving services to ensure an interprofessional, team-based collaborative practice (CFCC V-B, 3b; CAA 3.1.1B) [?]
8. Demonstrates skills in oral and other forms of communication sufficient for entry into professional practice (CFCC V-A) [?]
9. Demonstrates skills in written communication sufficient for entry into professional practice (CFCC V-A) [?]
10. Demonstrates knowledge of standards of ethical conduct, behaves professionally and protects client welfare (CFCC IV-E, V-B, 3d; CAA 3.1.1B-Accountability; 3.6B) [?]
11. Demonstrates an understanding of the effects of own actions and makes appropriate changes as needed (CAA 3.1.1B - Accountability)
12. Demonstrates professionalism (CAA 3.1.1B - Professional Duty, 3.1.6B) [?]

Total number of items scored: 0 Total number of points: 0 Section Average: 0

Comments:

Save

Met All	Not Met All	(N/A) All	Met/Not Met
○	○	◉	1. Demonstrates openness and responsiveness to clinical supervision and suggestions
○	○	◉	2. Personal appearance is professional and appropriate for the clinical setting
○	○	◉	3. Displays organization and preparedness for all clinical sessions
○	○	◉	4. Practices the principles of universal precautions to prevent the spread of infectious and contagious diseases (CAA 3.8B)
○	○	◉	5. Differentiates service delivery models based on practice sites (e.g., hospital, school, private practice) (CAA 3.1.1B - Accountability)
○	○	◉	6. Explains healthcare landscape and how to facilitate access to services in the healthcare sector (CAA 3.1.1B - Accountability)
○	○	◉	7. Explains educational landscape and how to facilitate access to services in the educational sector (CAA 3.1.1B - Accountability)
○	○	◉	8. Identifies and acknowledges the impact of both implicit and explicit bias in clinical service delivery and actively explores individual biases and how they relate to clinical services (CAA 3.4B)
○	○	◉	9. Identifies and acknowledges the impact of how their own set of cultural and linguistic variables affects clients/patients/students' care (CAA 3.4B) [?]
○	○	◉	10. Identifies and acknowledges the impact cultural and linguistic variables of the individual served may have on delivery of effective care (CAA 3.4B) [?]
○	○	◉	11. Identifies and acknowledges the interaction of cultural and linguistic variables between caregivers and the individual served (CAA 3.4B) [?]
○	○	◉	12. Identifies and acknowledges the social determinants of health and environmental factors for individuals served and how these determinants relate to clinical services (CAA 3.4B) [?]
○	○	◉	13. Identifies and acknowledges the impact of multiple languages. Explores approaches to address bilingual/multilingual individuals requiring services, including understanding the difference in cultural perspectives of being d/Deaf and acknowledge Deaf cultural identities. (CAA 3.4B)
○	○	◉	14. Recognizes that cultural and linguistic diversity exists among various groups (including d/Deaf and hard of hearing individuals) and fosters the acquisition and use of all languages (verbal and nonverbal), in accordance with individual priorities and needs (CAA 3.4B)
○	○	◉	15. Engages in self-assessment to improve effectiveness in the delivery of clinical services (CAA 3.1.6B)

Save

Strengths:

Improvements since last evaluation if applicable:

Opportunities for growth:

Recommendations for continued growth:

Considering the student's knowledge and experience obtained thus far in the program, is the student meeting your expectations? Is the student performing above expectations, meeting expectations or performing below expectations?:

Do you recommend an intervention or action plan for this student? If yes, what skills should be supported and what specific recommendations do you have for the intervention or action plan?:

Student 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/bw
- 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/bw and login to CALIPSO using your school e-mail and **password that you created for yourself during the registration process (step one.)**
- Upon logging in for the first time, you will be prompted to pay the student fee and to provide consent for the release of information to clinical practicum sites.

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.
- An electronic file of the original documents can be accessed, if uploaded by the Clinical Coordinator, by clicking “Files” located within the blue stripe.
- Click “Home” located within the blue stripe to return to the home page.

Step 5: 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.
- 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 6a: 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 6b: 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.
- View consolidated clock hour entries by clicking "Clockhours list" located within the blue stripe.

Step 7: 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 8: 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 9: 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 10: 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 11: 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 12: 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 13: 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.

Remediation Plan Template

Student Name: _____ Date: _____

Area in need of remediation:

☐ Academic ☐ Clinical ☐ Professional & Ethical Behaviors

Identification/Explanation of Student Needs:

Remediation Plan Team Members (* Team Leader):

_____

_____

_____

_____

Principles of the Remediation Team and Plan:

1. Student needs remediation beyond the usual teaching and supervision procedures to fulfill skills and knowledge requirements under ASHA standards.
2. When a student is on a remediation plan, they are on probation until the plan is successfully completed.
3. Team consists of clinical educators, faculty, advisors, and others as deemed necessary by the Team members.
4. Student and Team Members will identify academic, clinical, or professional and ethical behavior needs and develop goals for the semester. All goals must be approved by Team.
5. Progress toward goals will be reviewed by the Team in meetings held during the time period identified on the plan.
6. The Team serves to guide and support the student through the knowledge and skills improvement process, but the student is responsible for demonstrating necessary knowledge and skills as defined by the plan.
7. Students on remediation plan can be removed from clinical practicum at any time if it is deemed in the best interest of the patient.
8. A student who chooses to decline a remediation plan is still expected to demonstrate competency in the area(s) in need of remediation. However, this will be done without the additional support of the Team. The student declining a plan may be prohibited from participating in clinical practicum if it is determined that doing so would not be in the best interest of client.
9. Documentation regarding active remediation plans is held by the Team Leader. Once the plan is completed the documentation will be stored in the student's folder in the Director of Clinical Education's office.
10. Students who do not successfully complete the remediation plan by the deadline listed on the plan will earn a failing grade in the academic course or clinical experience in the area(s) in need of remediation.

Remediation Plan Agreement: I understand the Principles of the Remediation Team and Plan as stated above. I agree with the goals developed in this document.

☐ I am accepting this plan and will utilize the resources of the Team to assist me.

☐ I am refusing this plan and will work on my own to achieve competency.

_____

Student's Name and Date

Student Name: _____ Date: _____
Target Completion Date: _____

KASA Competency In Need of Remediation	Measurable Goals	Strategies	Date & Status	Date & Status

Status:
N = Not started or insufficient data
A = Adequate progress
I = Inadequate progress
C = Completed – met goal

Meeting Notes (include meeting date, Team members in attendance and specific notes regarding status)