CDDS 230

Student Clinician Manual

and

Policies and Procedures Manual

California State University, Fresno
Speech, Language & Hearing Clinic

Sabrina Nii, Clinic Director
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Student Clinician Manual

California State University, Fresno Speech, Language & Hearing Clinic
INTRODUCTION

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

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

25 hours undergraduate observation
20 hours Audiology Clinic (CDDS 250)
100 hours minimum Student Teaching (CDDS 257)
255 hours split between On-Campus Clinic (CDDS 230) and Externship (CDDS 267)

You will earn these hours at the California State University, Fresno (CSUF) Speech, Language and Hearing Clinic and at various off-campus sites. Supervised clinical practicum can also be earned in conjunction with assignments related to coursework in certain classes.

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

All students are encouraged to see their advisor each semester. You should discuss your questions about clinical practicum with your advisor, the clinic director, or clinic supervisor.
GOALS

The goals of the Speech, Language and Hearing Clinic at California State University, Fresno are:

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

Delivery of quality service is a continuing process in the Speech, Language and Hearing Clinic. You will be involved in weekly meetings with your supervisor to ensure the consistent and timely review of services. Client and clinician performance is evaluated regularly throughout the semester.

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

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

Evaluations of clinic supervisors are made each semester by student clinicians. The clinic office compiles the results of these evaluations. The clinic office retypes the numeric scores and comments before the results are given to the clinic supervisor.

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

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

Fees are charged for services at the Clinic. These fees enable the clinic to maintain current materials and equipment. Students should not discuss fees with clients. Any questions regarding reduced fees, inability to pay, payment plans, and so forth should be referred to the clinic director.
**CLINIC ENROLLMENT**

Prior to beginning the clinical component of the speech-language pathology or audiology program, a file is established for each student applying for clinic enrollment. The file becomes a part of the clinic’s records and is maintained for reference of such information as verification of clinical hours and review of student performance (evaluations). These files are maintained indefinitely.

Each student’s clinical practicum folder will contain the following:

- 25 undergraduate observation hours form
- Health clearance
  - TB (annually)
  - HepA&B
  - Dtap
  - MMR
- Record of clock hours earned in clinical practicum
- Any pertinent written comments or documentation from the clinic director or department chairperson
- Copies of any letters of recommendation or other appropriate correspondence
- Certificate of Clearance
PREREQUISITES TO CLINIC ENROLLMENT

CLINICAL PRACTICUM COURSES

The following clinical practicum courses must be completed prior to graduation: CDDS 230, 250, 257, and 267.

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

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

To avoid delay in enrolling in clinical practicum, students should see their advisor each semester. Any changes in requirements will be discussed with students at that time.

Transfer students should discuss pre-clinic requirements with their advisors when they plan their academic program. Practicum hours earned at another university may be accepted at California State University, Fresno as long as the hours were supervised by someone with the CCC and appropriately signed records are available directly from the other university. Transfer students should discuss transfer of clock hours with their advisor and the clinic director.

Students enrolling in an Externship (CDDS 267) must have completed the following: A minimum of three (3) semesters of on-campus clinic experience, CDDS 207, CDDS 213, and CDDS 220. Students will be able to accumulate additional hours in adult assessment and treatment in their externship. Students will be required to complete at least 40 full days (minimum of 4 days/week for 10 weeks) or 50 full days (minimum 5 days/week for 10 weeks) in their externship, depending on the number of units students are enrolled in.

Students enrolling in Student Teaching (CDDS 257) must have completed the following: A minimum of three (3) semesters of on-campus clinic experience, CDDS 204, 214, and 215 or concurrent. Students need at least 100 hours in the school setting, and will be required to complete at least 40 full days (minimum of 3 days/week for 13+ weeks) in their student teaching, depending on the number of units students are enrolled in.

OBSERVATION GUIDELINES

ASHA and California Licensure require students to obtain a minimum of 25 clock hours of supervised clinical observation prior to beginning their clinical practicum in speech-language pathology or audiology. (Students must also have completed their 25 observation hours prior to working with clients in CDDS 110.) Observation hours may obtained for treatment and evaluation of children or adults with communicative disorders. These 25 hours may be any combination of audiology and speech-language pathology observation. A minimum of 15 clock hours must be obtained at the California State University, Fresno Speech and Hearing Clinic. A
maximum of 10 hours can be completed at off-campus sites, as long as the SLP being observed has a current state license and CCCs.

Refer to Appendix 1 & 2 for specific observation guidelines and log sheets.

ONLINE SCHEDULE REQUEST SURVEY

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

HEALTH CLEARANCE

Health regulations are enforced for students’ and clients’ protection against certain communicable diseases. Before beginning practicum, students must present evidence of MMR vaccination (one time only), Hepatitis A and B, and testing for tuberculosis (TB). A TB clearance is required every year. The health clearance must be obtained prior to beginning clinic each semester. Students will not be assigned clients until they have met the health clearance requirements.

MMR vaccine is not required for on-campus clinic, but is required for many CDDS 267 placements. Completion of a cardiopulmonary resuscitation (CPR) class is not required to enroll in on-campus clinic, but will be required for placement in medical facilities for CDDS 267.

INSURANCE

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

After all necessary documents have been received by the clinic director, the student is accepted into clinical practicum. It is the student’s responsibility to submit all information to the clinic office in a timely manner. Remember that students who fail to complete and submit their required documentation by the due date may be denied enrollment in clinical practicum. Students continuing in clinical practicum (CDDS 230, 250, 257, 267) must respond to the online schedule request survey to be placed in the clinic of their choice.

LAB FEE

Student clinicians must pay a lab fee at the beginning of each semester (accounting office will bill you automatically). The fee is used to defray costs of replacing consumable items, worn out tests, and so forth. A fee is paid for each section of registered clinical practicum. For example, students enrolled in audiology practicum and speech-language pathology practicum pay fees for each clinical section. Students enrolled in off-campus practicum are not required to pay lab fees.

STEPS FOR ENROLLING IN CLINIC

Initial enrollment in clinic requires completion of the following:

- Requisite coursework
- Observation record
- MMR vaccination
- TB test (annually)
- Hepatitis A and B vaccination

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

- Verify health requirements are valid.
- Completed Online Schedule Request Survey (to ensure desired placement)

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

Registering for clinical practicum is considered a professional commitment. If a student withdraws from clinic before the clinic practicum begins (prior to first clinic meeting), the student is expected to notify the clinic director in writing, stating the reasons for withdrawal. The clinic withdrawal will be noted in the clinician’s file. Once clinical practicum begins, students may not withdraw without permission from the clinic director. Withdrawal without permission may result in future disqualification from the clinical program.
CLINIC FACILITIES

CLINIC ROOMS

Eight individual clinic rooms and two preschool clinic rooms are available for assessment, treatment, and consultation. These rooms are located on the second floor of the Professional Human Services (PHS) Building in room 222. The rooms are equipped with observation windows and receivers/headphones. Audiological assessments are performed on the first floor of the PHS building in room 101.

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

WAITING ROOM

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

MAINTENANCE

No scotch tape is to be placed on the clinic walls. Tacks are permitted on the wallboard. At the end of their sessions, student clinicians will turn off room lights, and pick up and return materials found in their rooms.

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

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

Clinic computers are reserved for use by student clinicians. As with other clinic materials or tests, students should practice using the computers prior to incorporating them into clinic sessions. Questions regarding operation of computers or computer software should be directed to the clinic director. The clinic director or supervisors may schedule training sessions periodically throughout each semester.
MEDIA CENTER

The media center is located in PHS 244 and is open Monday through Friday from 8:00am to 5:00pm. Student clinicians are responsible for returning items to the correct locations and leaving the room in order. Refer to Appendix 3 for check out procedures.

**Reservation Book**
If you want to reserve tests you must do so by using the reservation book. The book is kept in the media center. Students enrolled in clinic or instructors reserving items will have priority in using them. Certain materials will be checked-out for the semester only.

**Photocopy Machine**
There is a small photocopy machine available for student clinician use in the media center. Student clinicians may make photocopies for clinic use only. Students are not permitted to use the photocopy machine for other course materials without permission from either the clinic director or office staff.

**Telephone**
The telephone is for clinic use only and is available to student clinicians conducting clinical business. Personal calls are not permitted unless authorized by the clinic staff or clinic director.

**Test Protocols**
Test protocols are available in the media center. Please advise the clinic office if a protocol is running low. Please do not use the last protocol. Alert the office so more can be ordered.

CLINIC OFFICE

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

Clients are instructed to come to the clinic office for their first meeting. At that time the clients may pay their fees to the clinic office.

The clinic office is for clients, parents/caregivers, and other clinical business. Students are not to congregate in the clinic office and not to stand at the counter unless they need to request materials and/or information. Client files may be checked out and taken to the media center for review.

The clinic office maintains the following:

- Client folders
- Clinician’s folders (located in the clinic director’s office)
- Clinical equipment and test protocols
- Billing information
- Parking permits for clients
- Clinic schedule
CLIENT FOLDERS

Client folders are located in the clinic office and are divided into three sections: waiting for treatment, active files, and inactive. Files are maintained for a minimum of 5 years.

Client folders are identified by the client’s name and clinic number. The clinic number indicates the year and sequence in which a client entered the clinic. For example, 950020 indicates that the client began at the clinic in 1995 and was the 20th client of that year. If you have trouble locating a file, ask for help. Some older files may be in storage.

FILE CHECK-OUT

When taking a file out of the clinic office they may only be used in the media center, and clinic rooms. Files must not be removed from the clinic area. Do not make photocopies of the clinic files and do not take them off campus or store them in your lockers.

FILE CONTENTS

Each client folder must contain the following:

Client Contact Record (CCR) (Appendix 4)
This form is located on the inside left cover and includes client identification data (e.g., client name, address, etc.), type of billing, and file number. The CCR also provides an area for notes on all client contacts such as telephone calls to the client, date of initial meeting, etc. If you determine that any client identification information has changed, correct the CCR by making a single line through the incorrect or old information and writing the correct information above the line.

The CCR should provide a chronological log of client contacts. Any telephone contact with the client or the client’s family should be reported on this form. Contact with other professionals should also be reported on this form.

Include the following documentation on the CCR:

- Beginning and ending dates of treatment
- Telephone calls with client or client’s family
- Client absences/tardies
- Contact with other professionals (e.g., consultation, referral)
- Final recommendations
Case History (Appendix 5)
If you are assigned a client and there is no case history completed, you must have the client complete one immediately. File the case history form in the client’s folder.

Release of Information to the Speech, Language and Hearing Clinic (Appendix 6)
This form must be signed if the clinic and/or clinician needs to request client information from other agencies.

Observation Consent Form (Appendix 7)
Each folder must contain a signed observation consent form. If this form has not been signed, request the appropriate signature otherwise the client cannot receive services from the Clinic.

Release of Diagnostic Information (Appendix 8)
Before releasing any information to an outside agency or individual (other than the client or the client’s guardian), this form must be signed and placed in the client’s file.

Client Data Sheet (Appendix 9)
The Client Data Sheet should be completed to reflect a chronological log of tests administered.

Consent and Release for Photographs or Videotaping (Appendix 10)
This form is optional. Clients may not be photographed or videotaped without their permission. When clients agree to be photographed, videotaped, or both, they should be told how the material will be used.

Release of Liability Form (Appendix 11)
Clients receiving services on campus, in any capacity, must sign the Release of Liability form before treatment can begin.

Diagnostic Reports/Re-Assessment Reports (Appendix 12-15)
Clients receiving speech-language services must have a written diagnostic report in their folders. If you are assigned a client who does not have one, then you must write one. Supervisors may require periodic diagnostic reports be written. These should also be filed in the permanent record.

Other Clinical Reports, Treatment Summary Reports, Discharge Reports
Treatment Plans, tests record forms (signed and dated), reports from other professional, etc. must also be filed in the client’s folder.

Clinic Policy and Procedures (Page 55)
This policy/procedure will be initialed and signed by the client and placed in the file. A renewal policy will be signed at the start of each semester.
CLINICAL PRACTICUM

ASSIGNMENT OF SUPERVISORS

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

Clinic assignments are based on supervisor entitlement, supervisor availability, client availability and needs, and students’ class schedules. Off-campus assignments are based on the supervisors’ availability and students’ experience, qualifications, and areas of interest.

SCHEDULING SPEECH CLIENTS

Each student enrolled in the speech-language pathology practicum is responsible for contacting and confirming the scheduling of his or her own clients. Students will be assigned a minimum of two and maximum of three clients per semester and will meet with their clients twice a week for 35-50 minutes per session.

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

- Review clients’ files
- Telephone clients to confirm clinic appointments. Instruct clients to come to the office before their first appointments to pay their fee.
- Confirm clients’ appointments with the clinic office and clinic director
- Note client contact and the results of the contact on the CCR (e.g., called client-no longer interested in services: called client-confirmed appointment).
- Prepare for your first clinical session.
- Meet with your clinical supervisor approximately one week prior to the first day of clinic to present an assessment plan for approval.
- Follow all guidelines provided by your clinical supervisor. When you contact your clients and they are unable to attend at the proposed time, do the following:
  - Ask when they can attend (note time in CCR. e.g., Called client and needs appointment after 2:00p.m.).
  - Tell them their names will be put back on the waiting list and that we will try to reschedule them at a more convenient time. Inform them that we cannot guarantee that they can be scheduled at any other time.
  - Immediately tell the clinic office and the clinic director which clients cannot attend at the proposed time and what times they are available for scheduling.
  - Note client contact and results of the contact on the CCR.
SCHEDULING AUDIOLOGY CLIENTS

Audiology clients are scheduled by the clinic office according to a schedule arranged in advance by the audiology supervisor. Students enrolled in audiology practicum will follow instructions provided by their clinic supervisor to obtain specific information on confirming appointments. Students participating in audiology practicum must report any appointment changes to the clinic office immediately.

CANCELLATION OF CLINIC SESSION BY A CLIENT

A note will be placed in the clinician’s message box inside the Media Center if a client calls to cancel a clinic session. It is the student’s responsibility to check their boxes daily for any messages. Supervisors will also leave messages, papers, and reports in the clinician’s box. Students are NOT required to make-up this type of cancellation.

CANCELLATION OF CLINIC SESSION BY A CLINICIAN

If students are ill or unable to attend a clinic session due to a personal emergency, they must notify their clients and supervisor prior to their session. It is the student’s responsibility to have the phone number of his or her clients. Students must make up this type of cancellation unless otherwise instructed by their clinic supervisor.

After you have contacted your clients, call the clinic office (559-278-2422) and your supervisor that you canceled your clinic session and that your clients have been notified. Check with your supervisor regarding any additional cancellation procedures.

ASSESSMENT AND TREATMENT PLANS

Students must discuss with their clinic supervisors in advance assessment and treatment plans. Your supervisor will provide you with specific information regarding developing and writing evaluation and treatment plans. All clients receiving treatment in the Speech, Language and Hearing Clinic must have written measurable objectives (Appendix 14) in the form of a written treatment plan, summary of treatment, or initial summary. Also, before implementing any major changes in your plan, you must first discuss the proposed changes with your supervisor.

REFERRALS

Clients may need services that are not available at the Speech, Language and Hearing Clinic or may request referral to another agency. Before making a referral, discuss it with your clinic supervisor. Note any referrals on the CCR. Include copies of any referral letters in the client’s file.
RECORD KEEPING

Students are expected to maintain comprehensive and accurate records. Students enrolled in speech-language pathology practicum must: maintain a record of each clinical session via recording on progress notes and maintain a record of client attendance by completing and submitting the Clinical Practicum Hour Log (On or Off campus) (Appendix 16).

Students providing speech or hearing screenings must complete and submit a list of individuals screened. Supervisors will provide specific information concerning additional requirements.

It is the student’s responsibility to maintain a record of their current clinical clock hours earned. At the end of semester checkout, the supervisor verifies these hours by signing the Clinical Practicum Hour Log and the Clinical Practicum Hours-Master Log sheet. During checkout with the clinic office, these hours are verified

WRITTEN ASSIGNMENTS

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

Speech Pathology

- Diagnostic Report (new client) or Re-Assessment Report (continuing client) (Appendix 12).
- Treatment Plan (Appendix 13).
- Written treatment objectives (Appendix 14).
- Treatment Summary Report (client continuing) or Discharge Report (client dismissed) (Appendix 15).

Audiology

- Written report for each clinic appointment. All reports must be dated and signed by the clinician and the supervisor (Appendix 17).

All reports must be dated and signed by the student clinician and the clinical supervisor. All reports must be printed in letter quality on 20lb bond paper.

EMERGENCY PROCEDURES

Accident or Sudden Illness
Dial 911. Stay on the line to give necessary information. Apply any urgently needed first aid you are qualified to give. Report accidents and illnesses to the clinic office.

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

SAFETY PRECAUTIONS

To avoid accidents, adhere to the following guidelines:

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

HEALTH PRECAUTIONS

- Wash your hands before and after each client.
- Use gloves or finger cots when performing an oral peripheral examination, when there is a possibility of your coming into contact with the clients saliva or blood, or during any other type of invasive procedure.
- Avoid touching your face while wearing the gloves.
- Use disposable equipment for examinations or in treatment whenever possible (e.g., tongue depressors, swabs, gauze etc.).
- Sterilize equipment such as nasal olives, dental mirrors, probe tips, etc.
- Wipe off the clinic table after each use, as necessary.

PROFESSIONAL APPEARANCE

All student clinicians, as well as student observers, are expected to dress in a professional manner. Hair should be clean and combed, consisting of color that looks natural and professional. Clothes should be cleaned and pressed. Jeans, miniskirts, T-shirts, and midriff blouses are not considered professional attire. All tattoos must be covered and cannot be visible. You can not wear plugs or body-piercing jewelry on the eyebrow, tongue, nose, lip, etc. during therapy sessions, on or off campus. If you have a question as to whether something is appropriate to wear, do not wear it.

IDENTIFICATION BADGES

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

The client folders are maintained in locked file cabinets in the Clinic Office. All client information is confidential. Client folders may be checked out through the clinic office between 8:00am and 5:00pm and reviewed in the Media Center. The client files may be returned to the Clinic Office drop box during the lunch hour as well as after hours. Do not remove anything from the folders.

Client files may not leave the floor and may not be stored in the clinicians’ lockers. Any documentation worked on at home should only have initials with the full name added to the documents prior to placing them permanently to the client file. Clinicians may work on client reports on their personal laptop in the following areas:

1. Media Center
2. Graduate study/research room
3. Home

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

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

Supervisors are responsible for maintaining quiet in the clinic. Unauthorized observers will be asked to leave the clinic. All student observers, student clinicians, and supervisors are expected to know and abide by ASHA’s Code of Ethics and guidelines for client confidentiality.

Parents are discouraged from bringing other children with them to the observation area. Supervisors may use their discretion in asking parents to remain in the waiting area. Parents/caregivers and clients must always abide by strict confidentiality standards by never purposefully or inadvertently sharing any information seen or heard in the clinic.
OFF-CAMPUS CLINICAL PRACTICUM

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

GRADES

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

At midterm and at the end of the semester, supervisors will complete a written evaluation for each of their student clinicians. The written evaluation will be discussed with the student and copies of the evaluations given to the clinic office for inclusion in the student’s clinical file.

Students enrolled in CDDS 230, 250, 257 and 267 are awarded grades of CR (Credit) or NC (No Credit); consistent with the grading policy outlined in Appendix 20.

EVALUATION OF CLINIC SUPERVISORS

Each semester student clinicians complete a supervisor evaluation as part of their end-of-semester check out procedures. Precautions are taken to ensure the student’s confidentiality. Results of the rating scale and written comments are compiled by the clinic office and summarized in a typewritten format. The results are then distributed to the clinic director and the clinic supervisor. The supervisor does not receive the typewritten evaluation until after all grades have been submitted. Students should complete the supervisor evaluations prior to their appointments for their final evaluations with their supervisors.

END OF SEMESTER CHECK-OUT

All students enrolled in clinical practicum must complete the “End of Semester Checkout” with the clinic office. This includes audiology and speech-language pathology students enrolled in both on and off-campus practicum. Grades will not be issued for students failing to complete the End of Semester Checkout. End of Semester Checkout varies according to practicum assignments. Typically, checkout is scheduled for the week following the last day of clinic. This allows the clinic office time to obtain all necessary documents before students leave for the semester. Students must comply with the following:

Audiology Students

- Review the folder of every client seen during the semester. Make sure every appointment is recorded on the Client Data Sheet, all test forms are signed and dated, and the written report is completed, signed and dated.
- Complete and turn in the supervisor evaluation before your final meeting with your supervisor.
• Update information in your clinic file.
• Record practicum hours on your hour log and obtain your supervisor’s signature.
• Make a list of all clients needing follow-up appointments.
• Have all forms, lists, folders, and reports completed and available when you check out with the clinic office.

Speech-language pathology students

• Staple all SOAP notes and place them in the basket on the Clinic Office desk.
• If copy of Treatment Summary Report was not given directly to client, then it must be ready for mailing to client.
• Original reports (assessment, treatment, progress) must be signed (clinician and supervisor) and secured in the clients’ file.
• Review each of your client’s files and make sure all client contacts were noted on the CCR. Note any final semester recommendations on the CCR such as (“Client dismissed - all objectives met,” “Continue treatment”, “Client dismissed. Moving to another city”). Also make sure all test response forms were signed and dated, and all tests were noted and initialed on the Client Data Sheet.
• Turn in the Client Survey Forms you have collected (Appendix 18).
• Complete and turn in your supervisor evaluation to the clinic office before the final meeting with your supervisor. The supervisor does not see these or get results until after all grades are submitted.
• Update information in your clinical folder.
• Record hours on the Clinical Practicum Hours-Master Log Sheet and obtain supervisor’s signature. Have all forms and files completed and available when you check out with the clinic office.

Off-Campus Students

• Complete the supervisor evaluation prior to your last meeting with your supervisor. Your supervisor does not see the results of these evaluations until after your grades are submitted.
• Record clock hours earned on clinical practicum hour’s form and obtain supervisor’s signature.
• Update your clinical folder.
• Submit the original Supervisor Eval, Student Practicum Eval Form and Hour Logs to the Clinic Director’s mailbox.
• Refer to the Checkout Checklist for additional information (Appendix 19).
Appendix 1

OBSERVATION GUIDELINES

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

1. Be currently enrolled as a Communicative Disorders & Deaf Studies undergraduate or graduate student or with permission from the Clinic Director.

2. Read, sign and date the Health Insurance Portability and Accountability Act (HIPAA form). You should have received and signed the form in class if an observation was required by your professor. HIPAA forms must be signed and submitted to the clinic secretary.

3. Respect the client’s right to confidentiality. Do not discuss any client with individuals outside the clinic. Do not discuss any client in public places. Do not reveal clients’ names. Do not discuss any information you observe or hear with others, especially when you are observing (as family members are often sitting right next to you).

4. Professional dress is required in clinic. All student clinicians, as well as student observers, are expected to dress in a professional manner. Hair should be clean and combed, consisting of color that looks natural and professional. Clothes should be clean and pressed. Jeans, miniskirts, T-shirts, and midriff blouses are not considered professional attire. All tattoos must be covered and cannot be visible. You are not permitted to wear plugs or body-piercing jewelry on the eyebrow, tongue, nose, lip, etc. during observations, therapy sessions, on or off campus. If you have a question as to whether something is appropriate to wear, do not wear it.

Students observing at the CSUF Speech and Hearing Clinic must also comply with the following procedures:

1. Introduce yourself to the clinic supervisor and request permission to observe. Students observing in the Audiology Clinic must schedule observations in advance with the clinic office. Arriving late for a scheduled observation may result in your not being allowed to observe that session.

2. Turn off your cell phone, use appropriate professional behavior, and maintain confidentiality of all client information.

3. Students are prohibited from looking through client files, unless they have been directed by a faculty member, to locate specific information in order to complete a required classroom assignment.
4. Obtain a “student observer name badge” (located on the file cabinet in the individual clinic rooms or the preschool observation room) and wear it for the entire duration that you are observing in the clinic. Return the badge to the location in which you found it prior to leaving the clinic area.

5. Completely fill out the observation hours log sheet (blank copies are available in the media center) each time you observe a clinic session, and obtain the supervisor’s signature and ASHA # once the session is completed. Supervisor signatures must be obtained at the time that the student completes his/her observation.

6. Speak quietly in the clinic area. The clinic rooms are **not** sound proof. Also, remember parents and other family members are often in the clinic area.

7. Use the headphones if they are available otherwise try to bring earbuds or headphones of your own.

8. Clinic schedules may be obtained from the clinic office. Students observing in Audiology **must** attend the entire session and **must** arrive prior to the beginning of the session.

9. Ask the clinical supervisor to initial your Observation Hours immediately after the session is complete. Do not come back later or the next day, as supervisors will not sign off on your hours for a previous day/session.

**Students may obtain up to 10 of the 25 required observation hours at off-campus sites (i.e. schools, hospitals, etc.).** Off-campus sites may have additional rules and procedures. It is the observer’s responsibility to know each site’s guidelines for observers. Observers must verbally confirm that the SLP they are observing have current SLP license as well as CCC’s. Observers must have the SLP they observed sign off their hours after each observation is complete.
Appendix 2
CALIFORNIA STATE UNIVERSITY, FRESNO
Speech, Language and Hearing Clinic
5310 N. Campus Drive M/S PH80
Fresno, CA 93740-8019
(559) 278-2422

OBSERVATION HOURS - Speech Pathology and Audiology

Name: ___________________________________  Student ID# ______________________

<table>
<thead>
<tr>
<th>Date</th>
<th>SP</th>
<th>AUD</th>
<th>Code</th>
<th>Age</th>
<th>Observation Site</th>
<th>Supervisor’s Signature</th>
<th>Supervisor ASHA #</th>
<th># Min.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

**SUMMARY INFORMATION:**

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

**ACTIVITY CODE:** Check either (SP) for Speech Pathology or (A) for Audiology for each Observation.

Identify the specific type of Observation using one of the following:
### SPEECH PATHOLOGY
- (A) Articulation
- (L) Language
- (AP) Aphasia
- (V) Voice
- (F) Fluency
- (D) Diagnostic
- (S) Screening

### AUDIOLOGY
- (HA) Hearing Aid
- (AR) Aural Rehabilitation
- (ENG) Electronystagmography
- (BSER) Brainstem Evoked Response
- (CAT) Central Auditory Testing
- (SL) Site of Lesion Testing
- (S) Screening
- (O) Otolaryngological
- (IV) Initial Evaluation
Appendix 3

MATERIALS AND EQUIPMENT CHECK-OUT PROCEDURES

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

1. Get the items you wish to use or check out.

2. Materials may be checked-out for the day or overnight as follows:
   a. FOR THE DAY: Monday through Friday, from 8:00 a.m. to 4:00 p.m. All materials checked out must be returned the same day.
   b. WEEKENDS: Materials may be checked out for the weekend from 3:00 p.m. to 4:00 p.m., on Fridays only. The materials are due the following Monday morning between 8:00 a.m. and 8:15 a.m.
   c. For some items (video equipment, computer software, etc.) it may be necessary for you to leave your student body card with the clinic. It will be returned when the items are returned that you have checked-out.

3. When returning an item, first check it in with the clinic office or one of the assistants. Second, replace the items in the proper cabinets. It is your responsibility to make sure that your name is checked off. We will not be responsible for items left lying around. Do not assume that an item will checked off for you if you just leave it. If the item turns up missing, you will be responsible for replacing it since you were the last one to use it. Once again, make sure your name is checked off the list so that you will not be held responsible if the item turns up missing.

4. If you are a clinician in clinic after office hours and you have items checked out, have your supervisor open the office for you and follow the same procedure as described in number 4.

5. If you reserve an item, be sure to indicate when you need it.

6. Notify the clinic office if the equipment you checked out is defective or parts are missing. The clinic office maintains equipment and test materials. If equipment is in need of minor repair, the clinic office may be able to fix it.

7. Before checking an item out, see if it has already been reserved for that time and day.
### CLIENT CONTACT RECORD

<table>
<thead>
<tr>
<th>Date</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>9-10-96</td>
<td>T/C to confirm clinic schedule JC</td>
</tr>
<tr>
<td>9-14-96</td>
<td>Reviewed tx objectives with client JC</td>
</tr>
<tr>
<td>10-14-96</td>
<td>Client absent JC</td>
</tr>
<tr>
<td>10-16-96</td>
<td>Reviewed progress with parent JC</td>
</tr>
<tr>
<td>12-5-96</td>
<td>Reviewed progress &amp; final report with client JC</td>
</tr>
</tbody>
</table>

---

**Name**: Jane Doe  
**File #**: 0000000  
**Problem**: Apraxia  
**Referral**: School therapist

---

**Date of Diagnosis**  
**Supervisor**

---

**Parent’s/Caregiver’s Name**  
**Husband’s/Wife’s Name**

---

**City**  
**State**  
**Zip**  
**Billing**

---

**Address**
Appendix 5

CASE HISTORY

Clients complete an adult or child case history when applying for clinic services. If you would like to review a complete case history form, ask the clinic office for the form. Following is a copy of the first page of the Adult Case History form.

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

Adult Case History

PLEASE PRINT OR TYPE ALL INFORMATION CLEARLY

General Information

Today’s Date: __________

Name: __________________________________ Date of Birth: ________________

Address: __________________________________ Phone: ________________

City: __________________ Zip: ________________

Occupation: __________________ Business Phone: ________________

Employer: ____________________________________________

Single: ___ Widowed: ____ Divorced: ____ Spouse’s Name: ________________

Spouse’s Occupation: ____________________________________________

Names, ages, and gender of children:

____________________________________

____________________________________

____________________________________

Don’t forget to answer ____________________________________________

Referred By: ___________________________ Phone: ______

Address: ______________________________

Physician: _____________________________ Phone: ______

Address: ______________________________

32
CALIFORNIA STATE UNIVERSITY, FRESNO
Speech, Language and Hearing Clinic
5310 N. Campus Drive M/S PH80
Fresno, CA 93740-8019
(559) 278-2422

Release of Information to Speech and Hearing Clinic

To: ___________________________________ Date: ______________
______________________________________
______________________________________
______________________________________

Re: ____________________________________ Birthdate: __________
______________________________________
______________________________________
______________________________________

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

______________________________________
Parent/Guardian/Self (18 or older) Date
Appendix 7

OBSERVATION CONSENT

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

Observation Consent

Consent is hereby given to faculty, students and other persons approved by the clinical supervisor at the Speech and Hearing Clinic at California State University, Fresno to observe ___________________________ in the clinic or in off campus settings.

The purpose of these observations is to train University Communicative Disorders students (both diagnostic and treatment sessions may be observed). Students from other departments studying children and adults with language, hearing, and speech disorders may also watch and listen if the supervisor gives permission.

_________________________  _________________________
Parent/Guardian/Self (18 or older)  Date
Release of Diagnostic Information

To: ______________________________  Date: ________________

______________________________

______________________________

______________________________

Re: ______________________________  Birthdate: ___________

______________________________

______________________________

______________________________

The undersigned gives the Language, Speech and Hearing Clinic at California State University, Fresno, permission to release clinical information concerning the above named person to the appropriate medical and educational agencies involved in his or her care and education.

______________________________  ____________________
Parent/Guardian/Self (18 or older)  Date
### CLIENT DATA SHEET

#### SPEECH/HEARING

<table>
<thead>
<tr>
<th>Date</th>
<th>Tests Administered</th>
<th>Test Results</th>
<th>Clinicians Initials</th>
</tr>
</thead>
<tbody>
<tr>
<td>7-3-93</td>
<td>Hearing Screening</td>
<td>Passed</td>
<td>JC</td>
</tr>
<tr>
<td>7-3-93</td>
<td>PAT</td>
<td>See report</td>
<td>JC</td>
</tr>
<tr>
<td>7-3-93</td>
<td>PPVT-M</td>
<td>See Report</td>
<td>JC</td>
</tr>
<tr>
<td>7-3-93</td>
<td>Oral Exam</td>
<td>See Report</td>
<td>JC</td>
</tr>
</tbody>
</table>

Client: Jane Doe  
Birthdate: 10-10-90
Appendix 10

CONSENT TO PHOTOGRAPH

Consent and Release for Photographs or Video Tapes

Consent is hereby given to the Department of Communicative Sciences Disorders, California State University, Fresno, with the approval of _____________________________ to take photographs, or videotapes of _____________________________. These pictures will be used to train university students and demonstrate department activities to the general public.

I understand that I will be able to view the photographs or video tapes if I so request.

Date: ___________  

Parent/Guardian/Self (18 or older)
Appendix 11

RELEASE OF LIABILITY, PROMISE NOT TO SUE, ASSUMPTION OF RISK AND AGREEMENT TO PAY CLAIMS

Activity: Participation in evaluation and/or treatment in the California State University Speech and Hearing Clinic

Activity Date(s) and Time(s): Spring 2016 (February 1st - May 5th 2016)

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

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

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

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

I am 18 years or older. I understand the legal consequences of signing this document, including I. (a) releasing the University from all liability, (b) promising not to sue the University, (c) and assuming all risks of participating in this Activity, including travel to, from and during the Activity.
I understand that this document is written to be as broad and inclusive as legally permitted by the State of California. I agree that if any portion is held invalid or unenforceable, I will continue to be bound by the remaining terms.

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

Participant Signature: ________________________________

Participant Name (print): ________________________________ Date: ________________________________
Appendix 12

DIAGNOSTIC REPORT

Use the following format for your diagnostic report:

CALIFORNIA STATE UNIVERSITY, FRESNO
Speech, Language and Hearing Clinic
5310 N. Campus Drive/MS PH80
Fresno, CA 93740-8019
(559) 278-2422

DIAGNOSTIC (or RE-ASSESSMENT) REPORT

CLIENT: BIRTHDATE: CLINIC FILE NUMBER: 
ADDRESS: CLINIC FILE NUMBER: 
CITY: DIAGNOSIS: 
TELEPHONE: REFERRED BY: 
SUPERVISOR: CLINICIAN: 
ASSESSMENT DATE: 

BACKGROUND AND REASONS FOR REFERRAL

HISTORY

Medical History
Family, Social, and Educational History
Occupational History

OBSERVATIONS AND ASSESSMENT RESULTS

Hearing Screening
Oral-Peripheral Examination
Speech Production and Intelligibility
Voice and Fluency
Language Production and Comprehension

DIAGNOSTIC SUMMARY AND PROGNOSIS

IMPRESSIONS AND RECOMMENDATIONS

Submitted by: Student’s name
Student Clinician

Approved by: Supervisor’s name
Clinical Supervisor

Refer to A Coursebook on Scientific and Professional Writing in Speech-Language Pathology (Hegde, 1994) for additional information.
Appendix 13

TREATMENT PLAN

Use the following format when writing your treatment plans.

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

TREATMENT PLAN

CLIENT: BIRTHDATE: 
ADDRESS: CLINIC FILE NUMBER 
CITY: DIAGNOSIS: 
TELEPHONE: CLINICIAN: 
SUPERVISOR: 
DATE OF REPORT:

BACKGROUND INFORMATION

LONG TERM GOALS AND PROCEDURES

Long Term Goal #1: (general)

Objective #1: (specific, measurable)

Procedures: (specific, including information on baselines, treatment and probe procedures)

MAINTENANCE PROGRAM

Submitted by: ______________________

Student clinician

Approved by: ______________________

Supervisor’s name
Clinical Supervisor

I have read and understand the treatment goals and objectives.

________________________________

Client/Parent

Refer to A Coursebook on Scientific and Professional Writing in Speech-Language Pathology for additional information.
Appendix 14

WRITTEN TREATMENT OBJECTIVES

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

Following are a few sample objectives:

- (Client’s name) will correctly produce / / at the conversational speech level in response to the clinician’s questions and pictured stimuli with 90% accuracy across two consecutive sessions in the clinic setting.

- (Client’s name) will correctly produce / / in the final position of words at the phrase level in response to pictured stimuli and the clinician’s verbal prompt (e.g. sentence completion) with 90% accuracy across two consecutive sessions in the clinic setting.

- (Client’s name) will correctly identify an item’s semantic category out of a field of 5 categories (e.g. food, clothing, tools, animals, and electronics) while speaking in a complete sentence, in response to a black and white stimulus card presented by the clinician with 90% accuracy, over 3 sessions in the clinic setting.

- (Client’s name) will produce less than 20 dysfluencies in a 10 minute interval during the session in response to topics generated by the client and clinician at the conversational level across 3 treatment sessions in the clinic setting.
TREATMENT SUMMARY REPORT

BACKGROUND AND PRESENTING CONCERNS

OBJECTIVES AND TREATMENT

Long Term Goal #1: (general, same as treatment plan)

Objective #1: (specific and measurable, same as treatment plan)

Procedures: (same as treatment plan, or modified according to changes during the semester)

Progress: (was objective met? partially met? not met? Include objective data and narrative about progress with each objective)

Objective #2:

Procedures:

Progress: (ETC....)

SUMMARY AND RECOMMENDATIONS

I have read and understand this report

Submitted by: _______________________
Student’s name
Student clinician

Approved by: _______________________
Supervisor’s name
Clinical Supervisor

Client/Parent Signature
### CLINICAL PRACTICUM HOUR LOG

<table>
<thead>
<tr>
<th>Site Name</th>
<th>Hours</th>
<th>Date Completed</th>
<th>Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Site 1:</td>
<td>0.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Site 2:</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Site 3:</td>
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<td>Audiology Site</td>
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#### Clinical Activity & Client Ages

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<td>Fluency Disorder</td>
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<tr>
<td>0.00</td>
<td>Voice Disorder</td>
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<td>Dysphagia</td>
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<td>Cognitive/TBI</td>
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#### Observation Hours

| 25.00 |

#### Summary

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<th>Acquired Motor Speech Disorder</th>
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<td>Undergraduate 0.00</td>
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<tr>
<td>Graduate 0.00</td>
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</tr>
<tr>
<td>TOTAL 0.00</td>
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</table>

**Audiology. Minimum of 20 hours not obtained.**

<table>
<thead>
<tr>
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<tr>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
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</table>

**TOTAL HOURS 25.00**

Incomplete
Use the following format when writing your audiology reports.

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

AUDIOLOGICAL EVALUATION

NAME: ____________________________
ADDRESS: _______________________
CITY: ____________________________
TELEPHONE: _____________________
SUPERVISOR: ____________________
BIRTHDATE: _____________________
FILE NUMBER: __________________
DATE: __________________________
CLINICIAN: _____________________

BACKGROUND INFORMATION

AUDIOLOGICAL EVALUATION RESULTS

SUMMARY AND RECOMMENDATIONS

Submitted by: ______________________
Student’s name
Student clinician

Approved by: ______________________
Supervisor’s name
Audiologist
Clinical Supervisor

Talk to your supervisor for additional information.
# Appendix 18

## CLIENT SURVEY FORM

**Speech, Language and Hearing Clinic**

### CLIENT QUESTIONNAIRE

**PLEASE CHECK THE ANSWER WHICH BEST DESCRIBES YOUR FEELINGS:**

(It should take no more than 3 minutes to finish)

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<th></th>
<th>Favorable</th>
<th>Uncertain</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The diagnostic findings were explained to me in understandable terms:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. I would rate the clinician’s willingness to answer my questions as:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. I would rate the clinician’s ability to answer my questions as:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. I would rate the supervisor’s willingness to answer my questions as:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. I would rate the supervisor’s ability to answer my questions as:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. The way Clinic personnel have helped me (or my child) to understand my communication problem has been:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. The cost of services at the Clinic has been:</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>8. The convenience of the Clinic’s scheduling (when and how often) is:</td>
<td></td>
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<tr>
<td>9. The benefit derived from the communication services here have been:</td>
<td></td>
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<tr>
<td>10. My overall feeling about the Clinic is:</td>
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</tbody>
</table>

**COMMENTS:**
Appendix 19

CHECK-OUT CHECK-LIST FOR CDDS 230

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

(Check each item when completed.)

_____ All pertinent information (e.g., beginning of therapy, end of therapy, phone calls to other professionals, etc.) is noted on the Client Contact Record (CCR).

_____ Any new phone number, address, etc., is noted on the CCR.

_____ Final semester recommendations are noted on the CCR, (e.g., Continue Treatment, Dismiss-Objectives met, Dismiss-client moved, etc.)

_____ All test protocol forms are signed, dated and secured in file brackets.

_____ All tests administered are noted and initialed on the Client Data Sheet.

_____ Treatment plans are signed (clinician, supervisor, and client) and dated.

_____ SOAP notes completed for EACH session.

_____ SOAP notes are stapled together and placed (not attached to brackets) in the clients’ folders.

_____ Original reports (assessment, treatment, progress) must be signed and secured in the clients’ file.

_____ Does the client file need to be replaced or repaired? If so, see clinic office staff for a new folder before you checkout.
CHECK-OUT CHECK-LIST FOR CDDS 230 (CONT.)

Bring the following when you check out:

1) All of your clients’ folders.

2) Speech Therapy Hour Log Sheets.

3) Your clinical file.

4) Your Clinical Practicum Hours-Master Log sheet with the practicum hours earned this semester recorded and signed off by your supervisor.

5) Completed supervisor evaluation.
CHECK-OUT CHECK-LIST FOR CDDS 250

Before you check-out, review the folder of every client seen during the semester for the following items:
( Check each item when completed.)

____ All pertinent communication (e.g., phone calls, referrals, etc.) are recorded on the Client Contact Record.

____ Appointment is recorded on the Client Data Sheet.

____ Any new phone number, address, etc. is noted on the CCR.

____ Final recommendations are noted on the CCR.

____ All test recording forms are signed and dated.

____ All tests administered are noted and initialed on the Client Data Sheet.

____ Original report is signed (clinician and supervisor), dated and secured in the clients file.

Bring the following with you when you check out:

1) Your Clinical Practicum Hours-Master Log sheet with the practicum hours earned this semester recorded and signed-off by your supervisor.

2) Completed supervisor evaluation.
CHECK-OUT CHECK-LIST FOR CDDS 257/267

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

1) Completed Supervisor Evaluation form.

2) Obtain supervisor signatures on “Off Campus Speech Therapy Hour Log” form or signed letter from supervisor outlining hours earned.

3) Your Clinical Practicum Hours-Master Log sheet with the practicum hours earned this semester recorded and signed-off by your supervisor.

4) Completed Clinical Student Evaluation form, signed by supervisor and turned in to Clinic Director.
Appendix 20

Overall Grading Policy for CDDS 230, 250, 257 & 267

Student clinicians receive a grade of credit or no-credit as a result of their performance in their practicum assignment(s). The clinical supervisor and university supervisor (clinic director) jointly confer with the student clinician and complete the appropriate form designed for evaluation. After the university supervisor consults with the clinical supervisor, a mid-term progress report and a final report are completed and presented to the student clinician by the university supervisor. There are two requirements:

1) The successful completion of all student practicum competencies based on the Student Practicum Evaluation Form.
2) Satisfactory evaluation by the master clinician and the university supervisor of above average performance.

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

1) A joint conference will be held from the time deficiency is noted with the student, clinical supervisor, and university supervisor (clinic director).
2) A written remediation plan will be prepared by the university and clinical supervisor. This report will state the areas of needed improvement and recommendations/goals for remediation. The student, university supervisor, and clinical supervisor must sign and date the report. Copies of all evaluations and progress logs are attached to the report. Copies will be given to all concerned parties.
3) The clinical supervisor will document the student clinician’s progress, conferring daily. The university supervisor will conduct two formal observations and evaluations. A conference to review progress will be conducted at least once weekly by the on-site supervisor.
4) If satisfactory improvement has not been demonstrated by the student, a second joint conference will be conducted between the student, clinical supervisor, and university supervisor.
5) A written summary of this conference will be prepared by the university supervisor. This summary, with evaluations, will include a notation that the student has been placed on probationary status. Areas of needed improvement will be identified as well as steps for remediation. A specified date for satisfactory completion will be noted, and the student must adhere to this time line or be removed from the placement site which will result in a grade of no-credit (NC). The student and university supervisor must sign and date this report and copies will be given to all concerned parties.
6) A third conference will be held with all concerned parties within three days of the deadline date specified in the second conference, again followed by a written summary with recommendations and signatures of the parties involved.
7) The final responsibility for the assignment of a course grade lies with the university supervisor.
8) This process will not be extended beyond the term of the CSUF semester.
9) If the student clinician believes the NC grade has been assigned unfairly, information may be obtained pertaining to the University’s policy and procedure for protesting a final grade in the Office of Advising Services, Joyal Administration, Room 121.

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

1. The student should speak with the supervisor who assigned the grade by no later than the end of the third week of the next semester. It may simply be that an error has occurred, which can be easily corrected with a grade correction form signed by the instructor and submitted to the records office.
2. If the student is not satisfied with the supervisor's explanation, he or she may discuss the issue with the clinic director which may arrange a conference with the student and supervisor in order to develop a resolution.
3. If the student is not satisfied with the clinic director’s intervention, the student may appeal the grade and speak to the department chair about it immediately. The department chair will discuss the allegation with the
supervisor and give the student a response within ten working days.

4. If the student is still not satisfied with the department chair's response, the student may submit a written statement protesting the grade to the chair of the Student Academic Petitions Committee (SAPC) within five working days.

5. The student should contact the Office of Advising Services, Joyal Administration Building, Room 224, at 278-1787, and ask to make an appointment with the counselor in charge of grade protests. The counselor will provide the student with the necessary paperwork to be submitted to the Student Academic Petitions Committee and will help guide the student through the grade protest process.

6. The chair of the SAPC will send the student's statement to the supervisor who is required to respond in writing by a specified date. The student's statement and the supervisor's statement will be reviewed by the SAPC committee at its next meeting.

7. Once a decision by the SAPC is reached, the student will be notified of it in writing and will receive a copy of the supervisor's written response.


**Speech-Language Pathology Complaint Procedure to CAA**

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

a. be against an accredited graduate education program or program in candidacy status in audiology or speech-language pathology;

b. relate to the Standards for Accreditation of Entry-Level Graduate Education Programs in Audiology and Speech-Language Pathology, including the relationship of the complaint to the accreditation standards;

c. be clearly described, including the specific nature of the charge and the data to support the charge;

d. be within the timelines specified below:

• if the complaint is being filed by a graduate or former student, or a former faculty or staff member, the complaint must be filed within one year of separation from the program, even if the conduct occurred more than 4 years prior to the date of filing the complaint;

• if the complaint is being filed by a current student or faculty member, the complaint must be filed as soon as possible, but no longer than 4 years after the date the conduct occurred;

• if the complaint is being filed by other complainants, the conduct must have occurred at least in part within 4 years prior to the date the complaint is filed.

Complaints also must meet the following submission requirements:

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

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

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

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

The goals of the California State University, Fresno Speech, Language, and Hearing Clinic are:

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

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

NONDISCRIMINATION POLICY

The California State University, Fresno Speech, Language and Hearing Clinic, including the faculty, staff, and student clinicians, adheres to a policy of nondiscrimination. The Clinic does not discriminate against clients, student clinicians, or staff on the basis of race, religion, national origin, gender, age, sexual orientation, marital status, or disability.
California State University, Fresno  
Speech, Language, and Hearing Clinic  
Policies and Procedures-Client  
(Updated: October 27, 2016)

Clinic Scheduling Policy:
- Returning clients have priority for clinic assignments:
  - if a spot is available
  - the client questionnaire is returned by the clinic registration deadline
  - if the clients’ fees are paid in full
- Clients who participate in Diagnostics Clinic will receive priority placement the next semester following current active clients.
- **No clinic assignment is guaranteed.**
- There is a 5 semester limit for clinic; after a client’s 5th semester, he/she can request to return to the wait list after sitting out, at least, 1 semester.
- If siblings are participating in clinic, each sibling must adhere to the 5th semester rule.
- Clients will be moved to the inactive waitlist if they have been contacted 2 consecutive semesters and no reply is received.
- Clients who confirm a clinic placement and withdraw less than two weeks prior to the start of clinic (including AFTER clinic starts), will be moved to the bottom of the clinic waitlist.
- Clients may not request specific clinicians or request a “more advanced” clinician in the program. This is a learning institution and the Clinic Director will match clients with clinicians as appropriate.

Absence/Late Policy:
- **Please initial on the lines below:**
- Contact the clinic assistant at (559) 278-2422 if you will be absent from clinic. The clinic assistant will notify the student clinician for you.
  - ____ Clients are allowed up to 2 **unexcused** absences. An unexcused absence qualifies as:
    - no show/no call
    - Vacation
    - Other non-emergency
  - ____ More than 2 unexcused absences will constitute withdrawal of the client from clinic for that semester.
  - ____ Clients are allowed up to 3 **excused** absences. An excused absence qualifies as:
    - illness
    - family emergency
    - an absence out the client’s control
    - The clinic assistant MUST be notified 2 hours prior to the start of the session to be considered excused.
  - ____ More than 3 excused absences will constitute withdrawal of the client from clinic for that semester.
  - ____ A TOTAL combined excused/unexcused absence shall not exceed 3 absences. Absences combined greater than 3 will constitute a withdrawal from the clinic.
  - ____ The client may request to be placed back on the waitlist after sitting out for 2 semesters (including summer) following withdrawal for any of the above reasons.
  - ____ Any client who is late (10 minutes or more) 3 times will be withdrawn from clinic for that semester.

Payment Policy:
- The client and/or the parent or guardian is responsible to choose a payment plan and make regular payments the time the client is receiving therapy.
  - They agree to make **regularly scheduled payments** and will not be invited to participate/return to the clinic if the balance is not paid in full by the last treatment session.
- The speech, language and hearing clinic does not accept insurance.
• The speech and hearing clinic ONLY accepts payments by cash, check, or money order.
• We do not accept debit or credit cards.
• The fees for clinic are as follows:
  o Individual clinic- $250 per semester
  o Each additional sibling- $125 each
  o Active students of CSU, Fresno- $125
  o Children of active CSU, Fresno students- $125 each
  o Diagnostics Clinic- No Charge, however a $25 deposit is collected which is immediately returned in full on the day of the evaluation. The deposit is forfeited if the client “no shows” the evaluation or cancels less than two weeks prior to the scheduled evaluation.
  o Audiological Evaluations- No Charge
  o Aphasia Clinic- $35 per semester

Refund Policy:
• Clients are responsible for all accumulated treatment sessions and are only due a refund if:
  o they have paid for services in advance and are dropped from clinic because the client cannot benefit from services
  o your clinician withdraws from the program and a replacement is not available.
• A refund will not be given:
  o if the client/family withdraws themselves
  o the client is withdrawn from the clinic by the clinic director due to absences/excessive tardiness or long absence due to family vacation.
  o The full payment will be required in both instances.

Treatment Session/Waiting Room Policy:
• Younger clients and siblings of younger clients are to be supervised by an adult at all times whether they are in the waiting room or the observation area. Please do not leave children unattended.
  o If observers are disruptive during clinic sessions, they will be asked to leave the clinic observation area until the session is finished. All cell phones must be on silence in the clinic observation area.
• Minor aged clients (Ages 2-13) will not be permitted to participate in clinic unless a responsible adult remains in the clinic building for the duration of the session. This policy is in place to ensure the safety of the child.
• Clients with significant health and/or behavioral needs may require the attendance of the clients’ parent/caregiver at all times in order for the client to be able to participate in clinic.
• Due to limited space and equipment, no more than 2 family members are allowed to sit in the observation area at any time.
• The clinic will not be responsible for personal belongings left in the observation and/or clinic observation area.
• Phones/tablets may be allowed in the clinic observation area as long as the device is not a distraction to the clinic supervisor and other clients’ families.
• Please respect both the clinic observation and waiting room areas by keeping them clean and quiet.

Illness Policy:
• Client/Parent/Guardian must notify the clinic office (278-2422) within two hours of the scheduled clinic session, if the client is ill.
  o Please keep the client at home whenever he or she is sick.
  o Fevers 100 degrees or higher must be reduced to normal (98.6 degrees) for a minimum of 24 hours before returning to the clinic.
  o If the client is put on an antibiotic, please keep him/her home for at least 48 hours (2 days) before returning to the clinic.
• The illness policy is in place to protect the client, clinician, and any other parties who attend the clinic to prevent the spread of contagious viruses/infections.

Treatment Make-Up Session:
• If clients are absent, the missed session(s) will not be made up.
• If the clinician is absent, the client/parent/guardian may be given the choice to make-up the session at the end of the semester if time permits.
• During summer clinic, make up sessions are not offered due to time constraints.

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

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

I have read and understand the above policy and procedure ____________________________________________  Client Signature                     Date
CLINIC SERVICES

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

BASIC SERVICES

Audiology

- Audiological evaluation
- Diagnostic follow-up
- Immittance testing
- Immittance re-check
- Hearing screening
- School hearing screening

Speech-language Pathology

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

The clinic office describes clinic fees to clients when they first contact the clinic regarding services. All client fees are paid at the beginning of the appointment/treatment period unless a payment plan has been approved.

With prior approval from the clinic director, fees may be paid on a weekly or monthly plan. In a few instances, the Clinic Director may waive or reduce a fee when proven financial hardships exist with a client. Student clinicians are not authorized to discuss changes in clinic fees with clients. Clients requesting fee reductions should be referred to the clinic director.

The fees are as follows:

- **Individual clinic-** $250 per semester
- **Each additional sibling-** $125 each
- **Active students of CSU, Fresno-** $125
- **Children of active CSU, Fresno students-** $125 each
- **Diagnostics Clinic-** No Charge, however a $25 deposit is collected which is immediately returned in full on the day of the evaluation. The deposit is forfeited if the client “no shows” the evaluation or cancels less than two weeks prior to the scheduled evaluation.
- **Audiological Evaluations-** No Charge
- **Aphasia Clinic-** $35 per semester
CLIENT ADMISSION

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

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

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

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

SPEECH-LANGUAGE PATHOLOGY

When a completed case history is returned, the clinic staff will:

1. Assemble the client folder.
2. Number the folder.
4. Add the person’s name to the client list.
5. File the folder in the “waitlist” file.

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

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

1. Pick up your client folder from the clinic office.
2. Phone the client to confirm appointment times.
3. Instruct the client to come to the clinic office before his or her first appointment to pay the fee and obtain a parking permit. (Arriving about 15 minutes early should be enough time)
4. Note phone communication with the client or caregiver on the Client Contact Record (CCR).
5. Inform the clinic staff, or clinic director that the appointment is confirmed.

After clients are assigned and appointments confirmed, the clinic staff will:

1. Complete and file the billing invoice.
2. File the folder behind the supervisor’s name in the “diagnostics” file or “active speech therapy” file.
3. Write the names of clients scheduled for diagnostics in the speech-language pathology appointment book.

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

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

When a completed case history form is returned, the clinic staff will:

1. Schedule clients based on pre-arranged scheduling guidelines. The clinic staff, clinic director, and audiology supervisors review scheduling guidelines prior to beginning clinic each semester.
2. Direct clients to come to the office before their appointments to obtain a parking permit and to be prepared to pay their fees. (If appropriate)
3. Assemble the clients’ folders.
4. Number the folders.
5. Make and file clients’ reference cards.
6. Complete and file billing invoices. (If appropriate)
7. File folders behind the supervisor’s name.

If a competed case history is returned along with a recent audiological examination report (within last 3 months), the clinic staff will discuss with the audiology supervisor what appointments will be necessary before scheduling the client. **Evaluating children under the age of 3 years old must be approved in advanced by the audiology supervisor.**
CLIENT ATTENDANCE

Absence/Late Policy:

- Please initial on the lines below:
- Contact the clinic assistant at (559) 278-2422 if you will be absent from clinic. The clinic assistant will notify the student clinician for you.
  - ________ Clients are allowed up to 2 *unexcused* absences. An unexcused absence qualifies as:
    - no show/no call
    - Vacation
    - Other non-emergency
  - ________ More than 2 *unexcused* absences will constitute withdrawal of the client from clinic for that semester.
  - ________ Clients are allowed up to 3 *excused* absences. An excused absence qualifies as:
    - illness
    - family emergency
    - an absence out the client’s control
    - The clinic assistant **MUST be notified 2 hours prior** to the start of the session to be considered excused.
  - ________ More than 3 *excused* absences will constitute withdrawal of the client from clinic for that semester.
  - ________ A TOTAL combined excused/unexcused absence shall not exceed 3 absences. Absences combined greater than 3 will constitute a withdrawal from the clinic.
  - ________ The client may request to be placed back on the waitlist after sitting out for 2 semesters (including summer) following withdrawal for any of the above reasons.
  - ________ Any client who is late (10 minutes or more) 3 times will be withdrawn from clinic for that semester.
CLIENT DISMISSAL

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

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

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

- Write a discharge report on all clients who received treatment at the clinic.
- Obtain supervisor approval of the report and have the supervisor co-sign the report.
- Original report will be filed in the clients’ folder and one copy of the report given to the client.

The clinic supervisor will do the following:

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

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

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

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

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

CLIENT RECORDS

The clinic maintains client records for a period of at least 5 years. Client folders are located in the clinic office and are divided into three sections: waiting for assessment, waiting for treatment and active files. Inactive folders are stored separately. Folders are cross-referenced on client data cards and on the master client folder list.

Each client folder initially contains the following:

- Client Contact Record (CCR). The clinic staff types the client’s name, file number, birthdate, address, phone number, referral source, names of parents/spouse, and types of problem on the CCR. The CCR also provides an area for notes on all client contracts such as telephone calls to client, date of initial appointment, etc.
- Case history.
- Referral source.
- Release of information.
- Signed permission for observation.
- Signed/initialed Clinic Policy
- Client data sheet.
- Any reports, referral letters, or other pertinent information submitted by the client.

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

- Diagnostic reports.
- Reassessment reports, treatment plans, progress reports, treatment summary reports daily progress notes, and lesson plans. At the end of the semester, lesson plans and daily progress notes are removed from clients’ folders and stored separately.
- Test record forms, signed and dated.
- Copies of any letters sent to other professionals or agencies.
- Chronological log of services provided.
- Name(s) of the student clinician and supervising speech-language pathologist or audiologist.

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

All client records are confidential. **No information may be released to outside individuals or agencies** without the client’s prior written consent except in certain life or death emergencies, by court order, or in certain child abuse cases. Student clinicians may not release information without written consent or without prior approval of the clinic supervisor. All releases of information should be documented on the Client Contact Record. **Client folders may not be removed from the clinic area.** The clinic area includes the clinic office, media center, audiology suites, and clinic treatment rooms. No information (reports, letters, etc.) is to be removed from client folders except at the direction of the clinic director.

STUDENT CLINICIAN RECORDS

Student clinicians’ folders are housed in the clinic director’s office. These folders contain documentation of student clinicians’ completion of clinic prerequisites, clinic enrollment, clinic performance, and earned clinical clock hours. **Student clinicians have the right to review all information in their clinic folders.** Refer to the student clinician manual for additional information.

CONFIDENTIALITY OF STUDENT CLINICIAN RECORDS

The information in student clinicians’ folders is confidential. **No information is to be placed in or removed from these folders without permission of the clinic director.**
GENERAL INFORMATION

Student clinicians evaluate clients under the supervision of licensed and certified audiologist or speech-language pathologist. At least 50% of each evaluation session must be supervised. Student clinicians must discuss evaluation plans in advance with their supervisors.

DIAGNOSTIC AND THERAPY SUPPLIES

Tests available in the clinic are listed in the Clinic Inventory book. A copy of the inventory is located in the clinic office.

CLIENT DATA SHEET

A client data sheet is in each client folder. At the end of an evaluation, the examiner lists tests administered and results on the client data sheet.

ASSESSMENT REPORT

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

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

CLIENT REPORTS

Following is a list of the required written reports:

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

With the exception of daily progress notes, all clinic reports must be signed by both the student clinician and the clinic supervisor.
CLINIC SUPERVISORS

Clinic supervisors are responsible for ensuring quality service delivery in the clinic. Minimally, supervisors must:

- Possess a current Certificate of Clinical Competence in the subject area in which supervision is provided.
- Possess a current California State License in the subject area in which supervision is provided.
- Possess knowledge of and experience in the subject area or areas in which supervision is provided.
- Review and approve in advance all major clinical plans and decisions.
- Co-sign all clinical reports and letters.
- Observe a minimum of 50% of each evaluation session.
- Observe a minimum of 25% of each treatment session.
- Provide student clinicians with information regarding clinic procedures, requirements, and performance expectations.
- Give student clinicians clinical instruction and model specific procedures and techniques, as necessary.
- Provide ongoing feedback to student clinicians regarding their performance.
- Give student clinicians midterm and final evaluations, and discuss the evaluations with them.

The clinic staff will:

- Maintain a list of current supervisors and the expiration date of their CCC’s and licenses.
- Validate the currency of the supervisors’ CCC’s and licenses regularly.
QUALITY IMPROVEMENT

CLINIC MEETINGS

Clinic procedures, policies, and short and long-term goals are given to each student clinician via hard copy as well as emailed to all clinic supervisors (on and off campus) each semester.

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

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

CLIENT PROGRESS

Clinic supervisors must ensure that:

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

CONSUMER SATISFACTION

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

- The clinic staff distributes the questionnaires to the student clinicians.
- The student clinicians give the questionnaires to their clients and ask the clients to complete the questionnaires and return them to the clinic office. (In person or by mail)
- The clinic staff tallies the results of the questionnaires.
- The clinic director reviews and distributes the results of the questionnaires to the clinic supervisors and department chairperson.
- The clinic director, supervisors, and department chairperson discuss any areas of concern.
- The clinic director oversees any needed modifications.
SUPERVISOR QUALIFICATIONS AND EVALUATION

The clinic staff does the following:

- Maintains a list of all clinic supervisors, their CCC and license numbers, and the expiration dates of the CCC’s and licenses.
- Verifies each clinic supervisor’s ASHA certification and state license on an annual basis.
- Notifies the clinic director if a supervisor has not maintained CCC or licensure.
- Distributes a supervisor evaluation to each student clinician, tallies the results of the completed evaluation, and forwards the results to the clinic director.

**Student clinicians evaluate their supervisors at the end of the semester.** Procedures are as follows:

- The clinic staff distributes a supervisor evaluation to each student clinician.
- Student clinicians complete the evaluations and return them to the clinic staff.
- The clinic staff tallies and averages the numeric scores. The clinic staff then types all written comments (verbatim) on a blank evaluation form and gives it to the clinic director.

**The Clinic Director does the following:**

- Reviews all supervisor evaluations.
- Summarizes the results and provides a written report to the department chairman and the clinic supervisor.
- Discusses any area of concern with the department chairperson and the supervisor.
- Makes changes, as needed.
SAFETY PRECAUTIONS

To help ensure their health and safety and the health and safety of their clients, all individuals responsible for providing services at the California State University, Fresno, Speech, Language and Hearing Clinic should adhere to the following guidelines:

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

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

Faculty must notify the clinic director in advance of any research involving Speech, Language and Hearing Clinic clients or the use of clinic facilities. Clients must be notified that they are involved in a research project. A client’s attendance for research sessions (but not necessarily the results of the research itself) must be noted in the client’s folder. Dates of sessions and reasons for attendance should be noted on the Client Contact Record. This documentation is necessary in the event the client later questions his or her participation in those sessions.

STUDENT ACCESS TO FILES AFTER GRADUATION

Former students who require access to their Formative Assessment Files, Academic Files or Clinical Files must contact the Clinic Office staff or the Clinic Director for access during regular business hours.
Disclaimer: The American Speech-Language-Hearing Association disclaims any liability to any party for the accuracy, completeness, or availability of these documents, or for any damages arising out of the use of the documents and any information they contain.
PREAMBLE

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

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

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

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

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

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

The Code is designed to provide guidance to members, applicants, and certified individuals as they make professional decisions. Because the Code is not intended to address specific situations and is not inclusive of all possible ethical dilemmas, professionals are expected to follow the written provisions and to uphold the spirit and purpose of the Code. Adherence to the Code of Ethics and its enforcement results in respect for the
profession and positive outcomes for individuals who benefit from the work of audiologists, speech-language pathologists, and speech, language, and hearing scientists.

**TERMINOLOGY**


*advertising* – Any form of communication with the public about services, therapies, products, or publications.

*conflict of interest* – An opposition between the private interests and the official or professional responsibilities of a person in a position of trust, power, and/or authority.

*crime* – Any felony; or any misdemeanor involving dishonesty, physical harm to the person or property of another, or a threat of physical harm to the person or property of another. For more details, see the “Disclosure Information” section of applications for ASHA certification found on [www.asha.org/certification/AudCertification/](http://www.asha.org/certification/AudCertification/) and [www.asha.org/certification/SLPCertification/](http://www.asha.org/certification/SLPCertification/).

*diminished decision-making ability* – Any condition that renders a person unable to form the specific intent necessary to determine a reasonable course of action.

*fraud* – Any act, expression, omission, or concealment—the intent of which is either actual or constructive—calculated to deceive others to their disadvantage.

*impaired practitioner* – An individual whose professional practice is adversely affected by addiction, substance abuse, or health-related and/or mental health-related conditions.

*individuals* – Members and/or certificate holders, including applicants for certification.

*informed consent* – May be verbal, unless written consent is required; constitutes consent by persons served, research participants engaged, or parents and/or guardians of persons served to a proposed course of action after the communication of adequate information regarding expected outcomes and potential risks.

*jurisdiction* – The “personal jurisdiction” and authority of the ASHA Board of Ethics over an individual holding ASHA certification and/or membership, regardless of the individual’s geographic location.

*know, known, or knowingly* – Having or reflecting knowledge.

*may vs. shall* – May denotes an allowance for discretion; shall denotes no discretion.

*misrepresentation* – Any statement by words or other conduct that, under the circumstances, amounts to an assertion that is false or erroneous (i.e., not in accordance with the facts); any statement made with conscious ignorance or a reckless disregard for the truth.
negligence – Breaching of a duty owed to another, which occurs because of a failure to conform to a requirement, and this failure has caused harm to another individual, which led to damages to this person(s); failure to exercise the care toward others that a reasonable or prudent person would take in the circumstances, or taking actions that such a reasonable person would not.

nolo contendere – No contest.

plagiarism – False representation of another person’s idea, research, presentation, result, or product as one’s own through irresponsible citation, attribution, or paraphrasing; ethical misconduct does not include honest error or differences of opinion.

publicly sanctioned – A formal disciplinary action of public record, excluding actions due to insufficient continuing education, checks returned for insufficient funds, or late payment of fees not resulting in unlicensed practice.

reasonable or reasonably – Supported or justified by fact or circumstance and being in accordance with reason, fairness, duty, or prudence.

self-report – A professional obligation of self-disclosure that requires (a) notifying ASHA Standards and Ethics and (b) mailing a hard copy of a certified document to ASHA Standards and Ethics (see term above). All self-reported information, takes additional processing time.

shall vs. may – Shall denotes no discretion; may denotes an allowance for discretion.

support personnel – Those providing support to audiologists, speech-language pathologists, or speech-language and hearing scientists (e.g., technician, paraprofessional, aide, or assistant in audiology, speech-language pathology, or communication sciences and disorders).

telepractice, teletherapy – Application of telecommunications technology to the delivery of audiology and speech-language pathology professional services at a distance by linking clinician to client/patient or clinician to clinician for assessment, intervention, and/or consultation. The quality of the service should be equivalent to in-person service.

written – Encompasses both electronic and hard-copy writings or communications.
PRINCIPLE OF ETHICS 1

Individuals shall honor their responsibility to hold paramount the welfare of persons they serve professionally or who are participants in research and scholarly activities, and they shall treat animals involved in research in a humane manner.

RULES OF ETHICS

A. Individuals shall provide all clinical services and scientific activities competently.
B. Individuals shall use every resource, including referral and/or interprofessional collaboration when appropriate, to ensure that quality service is provided.
C. Individuals shall not discriminate in the delivery of professional services or in the conduct of research and scholarly activities on the basis of race, ethnicity, sex, gender identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language, or dialect.
D. Individuals shall not misrepresent the credentials of aides, assistants, technicians, support personnel, students, research interns, Clinical Fellows, or any others under their supervision, and they shall inform those they serve professionally of the name, role, and professional credentials of persons providing services.
E. Individuals who hold the Certificate of Clinical Competence may delegate tasks related to the provision of clinical services to aides, assistants, technicians, support personnel, or any other persons only if those persons are adequately prepared and are appropriately supervised. The responsibility for the welfare of those being served remains with the certified individual.
F. Individuals who hold the Certificate of Clinical Competence shall not delegate tasks that require the unique skills, knowledge, judgment, or credentials that are within the scope of their profession to aides, assistants, technicians, support personnel, or any nonprofessionals over whom they have supervisory responsibility.
G. Individuals who hold the Certificate of Clinical Competence may delegate to students tasks related to the provision of clinical services that require the unique skills, knowledge, and judgment that are within the scope of practice of their profession only if those students are adequately prepared and are appropriately supervised. The responsibility for the welfare of those being served remains with the certified individual.
H. Individuals shall obtain informed consent from the persons they serve about the nature and possible risks and effects of services provided, technology employed, and products dispensed. This obligation also includes informing persons served about possible effects of not engaging in treatment or not following clinical recommendations. If diminished decision-making ability of persons served is suspected, individuals should seek appropriate authorization for services, such as authorization from a spouse, other family member, or legally authorized/appointed representative.
I. Individuals shall enroll and include persons as participants in research or teaching demonstrations only if participation is voluntary, without coercion, and with informed consent.
J. Individuals shall accurately represent the intended purpose of a service, product, or research endeavor and shall abide by established guidelines for clinical practice and the responsible conduct of research.
K. Individuals who hold the Certificate of Clinical Competence shall evaluate the effectiveness of services provided, technology employed, and products dispensed, and they shall provide services or
dispense products only when benefit can reasonably be expected.
L. Individuals may make a reasonable statement of prognosis, but they shall not guarantee—directly or by implication—the results of any treatment or procedure.
M. Individuals who hold the Certificate of Clinical Competence shall use independent and evidence-based clinical judgment, keeping paramount the best interests of those being served.
N. Individuals who hold the Certificate of Clinical Competence shall not provide clinical services solely by correspondence, but may provide services via telepractice consistent with professional standards and state and federal regulations.
O. Individuals shall protect the confidentiality and security of records of professional services provided, research and scholarly activities conducted, and products dispensed. Access to these records shall be allowed only when doing so is necessary to protect the welfare of the person or of the community, is legally authorized, or is otherwise required by law.
P. Individuals shall protect the confidentiality of any professional or personal information about persons served professionally or participants involved in research and scholarly activities and may disclose confidential information only when doing so is necessary to protect the welfare of the person or of the community, is legally authorized, or is otherwise required by law.
Q. Individuals shall maintain timely records and accurately record and bill for services provided and products dispensed and shall not misrepresent services provided, products dispensed, or research and scholarly activities conducted.
R. Individuals whose professional practice is adversely affected by substance abuse, addiction, or other health-related conditions are impaired practitioners and shall seek professional assistance and, where appropriate, withdraw from the affected areas of practice.
S. Individuals who have knowledge that a colleague is unable to provide professional services with reasonable skill and safety shall report this information to the appropriate authority, internally if a mechanism exists and, otherwise, externally.
T. Individuals shall provide reasonable notice and information about alternatives for obtaining care in the event that they can no longer provide professional services.

PRINCIPLE OF ETHICS II

Individuals shall honor their responsibility to achieve and maintain the highest level of professional competence and performance.

RULES OF ETHICS

A. Individuals who hold the Certificate of Clinical Competence shall engage in only those aspects of the professions that are within the scope of their professional practice and competence, considering their certification status, education, training, and experience.
B. Members who do not hold the Certificate of Clinical Competence may not engage in the provision of clinical services; however, individuals who are in the certification application process may engage in the provision of clinical services consistent with current local and state laws and regulations and with ASHA certification requirements.
C. Individuals who engage in research shall comply with all institutional, state, and federal regulations that address any aspects of research, including those that involve human participants and animals.
D. Individuals shall enhance and refine their professional competence and expertise through engagement in lifelong learning applicable to their professional activities and skills.
E. Individuals in administrative or supervisory roles shall not require or permit their professional staff
to provide services or conduct research activities that exceed the staff member’s certification status, competence, education, training, and experience.

F. Individuals in administrative or supervisory roles shall not require or permit their professional staff to provide services or conduct clinical activities that compromise the staff member’s independent and objective professional judgment.

G. Individuals shall make use of technology and instrumentation consistent with accepted professional guidelines in their areas of practice. When such technology is not available, an appropriate referral may be made.

H. Individuals shall ensure that all technology and instrumentation used to provide services or to conduct research and scholarly activities are in proper working order and are properly calibrated.

**PRINCIPLE OF ETHICS III**

Individuals shall honor their responsibility to the public when advocating for the unmet communication and swallowing needs of the public and shall provide accurate information involving any aspect of the professions.

**RULES OF ETHICS**

A. Individuals shall not misrepresent their credentials, competence, education, training, experience, and scholarly contributions.

B. Individuals shall avoid engaging in conflicts of interest whereby personal, financial, or other considerations have the potential to influence or compromise professional judgment and objectivity.

C. Individuals shall not misrepresent research and scholarly activities, diagnostic information, services provided, results of services provided, products dispensed, or the effects of products dispensed.

D. Individuals shall not defraud through intent, ignorance, or negligence or engage in any scheme to defraud in connection with obtaining payment, reimbursement, or grants and contracts for services provided, research conducted, or products dispensed.

E. Individuals’ statements to the public shall provide accurate and complete information about the nature and management of communication disorders, about the professions, about professional services, about products for sale, and about research and scholarly activities.

F. Individuals’ statements to the public shall adhere to prevailing professional norms and shall not contain misrepresentations when advertising, announcing, and promoting their professional services and products and when reporting research results.

G. Individuals shall not knowingly make false financial or nonfinancial statements and shall complete all materials honestly and without omission.

**PRINCIPLE OF ETHICS IV**

Individuals shall uphold the dignity and autonomy of the professions, maintain collaborative and harmonious interprofessional and intraprofessional relationships, and accept the professions’ self-imposed standards.

**RULES OF ETHICS**

A. Individuals shall work collaboratively, when appropriate, with members of one’s own profession and/or members of other professions to deliver the highest quality of care.

B. Individuals shall exercise independent professional judgment in recommending and providing
professional services when an administrative mandate, referral source, or prescription prevents keeping the welfare of persons served paramount.

C. Individuals’ statements to colleagues about professional services, research results, and products shall adhere to prevailing professional standards and shall contain no misrepresentations.

D. Individuals shall not engage in any form of conduct that adversely reflects on the professions or on the individual’s fitness to serve persons professionally.

E. Individuals shall not engage in dishonesty, negligence, fraud, deceit, or misrepresentation.

F. Applicants for certification or membership, and individuals making disclosures, shall not knowingly make false statements and shall complete all application and disclosure materials honestly and without omission.

G. Individuals shall not engage in any form of harassment, power abuse, or sexual harassment.

H. Individuals shall not engage in sexual activities with individuals (other than a spouse or other individual with whom a prior consensual relationship exists) over whom they exercise professional authority or power, including persons receiving services, assistants, students, or research participants.

I. Individuals shall not knowingly allow anyone under their supervision to engage in any practice that violates the Code of Ethics.

J. Individuals shall assign credit only to those who have contributed to a publication, presentation, process, or product. Credit shall be assigned in proportion to the contribution and only with the contributor’s consent.

K. Individuals shall reference the source when using other persons’ ideas, research, presentations, results, or products in written, oral, or any other media presentation or summary. To do otherwise constitutes plagiarism.

L. Individuals shall not discriminate in their relationships with colleagues, assistants, students, support personnel, and members of other professions and disciplines on the basis of race, ethnicity, sex, gender identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language, dialect, or socioeconomic status.

M. Individuals with evidence that the Code of Ethics may have been violated have the responsibility to work collaboratively to resolve the situation where possible or to inform the Board of Ethics through its established procedures.

N. Individuals shall report members of other professions who they know have violated standards of care to the appropriate professional licensing authority or board, other professional regulatory body, or professional association when such violation compromises the welfare of persons served and/or research participants.

O. Individuals shall not file or encourage others to file complaints that disregard or ignore facts that would disprove the allegation; the Code of Ethics shall not be used for personal reprisal, as a means of addressing personal animosity, or as a vehicle for retaliation.

P. Individuals making and responding to complaints shall comply fully with the policies of the Board of Ethics in its consideration, adjudication, and resolution of complaints of alleged violations of the Code of Ethics.

Q. Individuals involved in ethics complaints shall not knowingly make false statements of fact or withhold relevant facts necessary to fairly adjudicate the complaints.

R. Individuals shall comply with local, state, and federal laws and regulations applicable to professional practice, research ethics, and the responsible conduct of research.

S. Individuals who have been convicted; been found guilty; or entered a plea of guilty or nolo contendere to (1) any misdemeanor involving dishonesty, physical harm—or the threat of physical
harm—to the person or property of another, or (2) any felony, shall self-report by notifying ASHA Standards and Ethics (see Terminology for mailing address) in writing within 30 days of the conviction, plea, or finding of guilt. Individuals shall also provide a certified copy of the conviction, plea, nolo contendere record, or docket entry to ASHA Standards and Ethics within 30 days of self-reporting.

T. Individuals who have been publicly sanctioned or denied a license or a professional credential by any professional association, professional licensing authority or board, or other professional regulatory body shall self-report by notifying ASHA Standards and Ethics (see Terminology for mailing address) in writing within 30 days of the final action or disposition. Individuals shall also provide a certified copy of the final action, sanction, or disposition to ASHA Standards and Ethics within 30 days of self-reporting.