

CLINIC MANUAL

UNIVERSITY OF CINCINNATI SPEECH, LANGUAGE HEARING CLINIC

ON-CAMPUS CLINIC PROCEDURES AND POLICIES

The Speech, Language and Hearing Clinic provides screening, diagnostic evaluations, and a full range of therapy services to children and adults with speech, language and hearing disorders.

All graduate students are supervised by Speech-Language Pathologists and Audiologists who are licensed by the state of Ohio and certified by the American Speech-Language-Hearing Association.

Professional Expectations:

All students participating in clinical activities are expected to present a professional appearance. Style of dress and jewelry should reflect the role of a professional. Blue jeans, shorts, low cut tops, and gym shoes are not considered appropriate dress.

Promptness is a professional courtesy all student clinicians must extend to clients. Clinicians should arrive in the clinic with enough time before their scheduled appointments to check equipment, set up therapy rooms, consult with their supervisors, etc. in order to enable them to see their clients promptly at the scheduled time.

Confidentiality:

Information regarding clients must be held in the strictest confidence. Cases may be discussed with the supervisor, faculty, other professionals, and other student clinicians in the clinic area; however, clients are not to be discussed with others outside these locations. Do not talk about clients in the waiting room, hallways, or anywhere else; individuals not entitled to the information might overhear your conversation. Clients must give written or verbal permission to be observed. The Speech-Language-Hearing Clinic follows Privacy Practices which are posted in the clinic waiting room. All students will be required to take the University of Cincinnati on-line HIPAA training course and sign a confidentiality statement at the beginning of their academic program to enforce this responsibility. There are consequences for violating confidentiality practices.

Code of Ethics:

All student clinicians are expected to perform according to the standards, practices, and guidelines established by the ASHA and/or the American Academy of Audiology (AAA) as described in the Code of Ethics. Students are advised to become familiar with these documents that will apply to their professional practice.

Activities that may place students in violation of the Code of Ethics and Ohio licensure laws include, but are not limited to, providing speech/language/hearing diagnosis and therapy while babysitting, engaging as a tutor for the purpose of providing speech/language/hearing services or implementing goals from a student's IEP (individualized educational plan). Some programs for children with disabilities (e.g. Autism, Downs Syndrome, Cerebral Palsy, Learning Disabilities) may include speech and language intervention for which a student is not properly supervised. If you have any questions regarding a specific activity, please contact the Clinic Director.

Professional Liability Insurance:

Students are required to carry professional liability insurance coverage. All students enrolled in the CSD program are automatically covered under the University of Cincinnati's Professional Liability Insurance program during the time they are enrolled in the CSD program at no cost to the student. A copy of the liability coverage may be obtained upon request.

Practice of Clinical Procedures:

No student shall practice any invasive clinical procedures on another student or nonstudent without a clinic supervisor aware of the activity and supervising either directly or indirectly. Such procedures may include laryngeal examination, cerumen removal or ear impression fabrication.

Infection Control Policy

All staff and students assigned to clinic must review this document which is posted in the Clinic Resource Room G-43.

Immunizations, Blood Borne Pathogens Training, and Criminal Background Checks

All students are required to have a physical examination and proof of immunization for measles, mumps, rubella, chicken pox, and 3-step series and titer for hepatitis B. A yearly two-step Mantoux tuberculin test is required for most practicum sites. HIPAA and blood-borne pathogens training are required yearly as well as criminal background checks. You will be given instructions regarding procedures during student orientation at the beginning of the school year.

Scheduling Clients:

Clients referred to the clinic are scheduled through the clinic office. For SLP students, the Clinic Coordinator/Supervisor will create the client files and assign students and supervisors to that client. The student and supervisor will collaborate regarding

coordinating schedules and client contact. The student should let the Clinic Coordinator know if the client needs a confirmation letter and/or map.

Audiology clients are scheduled through the clinic office. The day's schedule will be available in the clinic office G-65.

There are seven parking spots in the front of the French East building for clients and/or families are in need of parking close to the building. They can request a parking pass for these spots through the clinic office (G-65.)

The Clinic Coordinator will confirm therapy room availability. Room schedules will be posted on the doors of the clinic rooms. When in session, the student will post a sign indicating that the room is in use. When not in use, the sign should be placed back in the therapy room. For students who need to use the Audio Lab (G06), this room must be reserved by signing the scheduling sheet, which is posted on the door to the Lab. Clients must give written or verbal permission to be observed.

It is essential that clients know the importance of consistent attendance if maximum benefit of therapy is to be seen. If a clinician needs to cancel a session for whatever reason, they are required to offer a make-up session to the client. If a client needs to cancel, a makeup session will be up to the discretion of the student clinician and the supervisor. Clients will call the Clinic Office at 558-8503 if they need to cancel a session.

Client Safety

Remember that the **safety** of our clients is one of our prime responsibilities as a clinician. If there is a medical emergency, please contact your supervisor to assure that all medical and reporting procedures are followed. If there is an emergency in the building due to fire, weather, etc, follow the evacuation procedures. If at any time you suspect child or elder abuse, you are obligated to notify your supervisor.

Clinic Room Responsibilities:

Clinicians assigned to specific therapy rooms are responsible for keeping the room in order.

Client Files

The student is responsible for completing and maintaining the file for each of their patients. The file will remain in the file cabinet in the clinic office, room G65. **NO CLINIC FILES ARE TO BE REMOVED FROM THE BUILDING.** This rule must be strictly enforced to avoid lost or missing folders which would result in a breach of confidentiality. The door to G65 should never be open without a student or faculty person

in the room. To ensure confidentiality of clinic charts, the door must be closed and locked when you leave. Supervisors have access to clinic file drawers.

Clinical Reports

The student is responsible for including a copy of the diagnostic report and professional documentation for each client. Evaluation reports are to be completed within 48 hours of the diagnostic evaluation. **Clinic reports that contain any patient identifiers (e.g. name, address, phone numbers, date of birth, social security number) must not be saved on any computer. Students may not write clinic reports on their personal computers or any computer outside the clinic area.**

The student's draft report should be saved without any identifying protected health information on a clinic computer and emailed through the UC email system only to the supervisor for editing and approval. The final printout after approval will include identifying information. The report is then placed in the client file and mailed to designated report recipients (with appropriate signed release). The report must be immediately erased after it is placed in the patient file.

Some supervisors may use the secure clinical documentation feature of CALIPSO instead of the above process. Your supervisor will explain this process to you.

Diagnostic and Therapy Materials:

Speech-Language Pathology: Tests, test forms and therapy materials are located in cabinets in Room G43. Clinic materials may be checked out of G43 using sign out sheets. All assessments **must** be checked out and returned through the Clinic Office G65.

Tests may only be allowed to leave the facility for use with a client, or for a specific course assignment (with approval of the Clinic Coordinator). In these cases, the tests must be returned within 24 hours, or over a weekend. Never use test forms for practice. You may copy a form and use the copy for practice. Remember we must use original test protocols for clients we are seeing in the clinic. Forms may not be used for research or class purposes. You may need to purchase your own test protocol forms or make copies for research or class projects at your own expense.

Clinic materials must be signed out as well. You may borrow a material to study or review and return within 24 hours.

IPADS

There are six assigned IPADS dedicated for work with clients in the clinic. All IPADS need to be checked out by the Clinic Coordinator - Room G65. IPADS are not to leave the building unless it is a designated for a clinical session with a client. Selection for APPS for designated IPADS will be determined by the Clinic Director.

All audiometric equipment must be checked out on clipboards and located in the audiology lab. All equipment must be returned within 24 hours unless you have approval from the Clinic Director.

Forms:

Case Record Form
Case History Form
Release/Clearance Form
Notice of Privacy Practices

Lesson Plan
Diagnostic Report
Term End Report
Client Information Sheet

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INFECTION CONTROL POLICY

UNIVERSITY OF CINCINNATI SPEECH, LANGUAGE, HEARING CLINIC

Revised

3/15/12

Revised 2-8-05

In order to ensure the safety of clients served in the Clinic, it is important for all supervisors, staff, and students to be aware of basic infection control practices. At present, such practices include routine hand washing as well as cleaning, disinfecting, and/or sterilization of diagnostic and therapy materials and audiological implements.

Both the Speech-Language Pathology and Audiology professions have expanded their scopes of practice and procedures in order to manage the increased risk of spreading infection and disease. For example; "audiologists make deep ear canal impressions and manage cerumen and speech-language pathologists perform dysphagia therapy and may perform videostroboscopy"

The following guidelines for infection control are written to provide instruction to all who participate in treating clients at the University of Cincinnati Speech, Language, and Hearing Clinic. It is also the policy of the Clinic that all students and supervisors take Blood Borne Pathogen training once a year. The Clinical faculty will review these guidelines for infection control yearly.

Basic "Stop Disease" method of hand washing

Rub your hands Use soap and running vigorously

1. Wash all surfaces, including back of hands, wrists, between fingers and under fingernails.
2. Rinse well.
3. Turn off water using a paper towel instead of bare hands.
4. Note: When thorough hand washing is not possible, the Center for Disease Control recommends use of a liquid hand disinfectant. Hand washing, or use of a liquid disinfectant, should be routine following EVERY patient contact.

General Housekeeping Practices and Environmental Infection Control

Environmental infection control requires cleaning, disinfecting and sometimes sterilizing items or surfaces that are reused. These terms are not arbitrarily selected to describe products or procedures. Each has a very specific legal meaning as defined by the Environmental Protection Agency (EPA). For example, a product that only cleans cannot be called a disinfectant, and a disinfectant cannot be called a sterilant unless it has been demonstrated to meet the requirements of a sterilant. It is important to understand the differences among these terms.

Cleaning

To clean means to remove the gross contamination from an object or surface without regard to killing germs. Cleaning is an important precursor to disinfecting and sterilizing as gross contamination must first be removed before these procedures will be effective. Cleaning can be accomplished with a brush or a wipe.

Disinfecting

To disinfect means to kill a specific number of germs, the number of which is determined by the level of disinfectant used. Healthcare facilities, such as audiology practice settings, should use a hospital grade disinfectant (Rutala, 1990). Effective disinfectants may be in the form of a towelette, a spray or a soak used for a static soaking tray or ultrasonic machine. Disinfectant products are commercially available for use that will not chemically denature plastic, silicone, rubber and acrylic. Before disinfecting, all items should be first cleaned of gross contamination.

Disinfection is acceptable on "non-critical" items, those items that do not touch blood or other potentially infectious substances or are not likely to break the skin. Surfaces in work areas should be disinfected regularly. The same applies to patient "touch" surfaces such as examination chair arm rests and reception counters. Toys and devices used for assessment should be cleaned and disinfected after each use. Toys should be nonporous and easily disinfected. Plastic materials are easier to maintain than painted wood, metal surfaces or fuzzy, furry toys. Because children invariably place toys in their mouths, great care should be taken when handling objects covered with saliva. Waiting room toys should be cleaned and disinfected daily. Always thoroughly wash hands after contacting a potentially infectious item or wear gloves while cleaning up.

Sterilization

To sterilize means to kill 100 percent of the vegetative microorganisms and their endospores 100 percent of the time. Many microbes, when challenged, will return in a spore form that is much more resistant than the vegetative form. If the spore is not killed it may become vegetative again and cause disease. Sterilization is indicated when an object is contaminated with a potentially infectious material such as blood, mucous or other bodily fluid or substance. Objects that are capable of breaking the skin (i.e. curettes, wax loops) must be sterilized prior to re-use regardless of contamination. Heat under pressure in an autoclave, the preferred sterilization technique, can melt many of the implements used by audiologists and therefore "cold sterilization" with chemicals is the recommended procedure.

Cold sterilization is accomplished by soaking instruments in 2% glutaraldehyde for ten hours or in 7.5% hydrogen peroxide. Currently these are the only chemicals approved for sterilization. These solutions are only to be used for sterilizing and must be stored in a tightly covered soaking tray to control fumes. Glutaraldehyde must not touch skin so gloves should be worn when accessing the tray, and objects sterilized should be rinsed thoroughly prior to re-use. Due to the current controversy on the potential biohazard of glutaraldehyde and the greater use precautions of glutaraldehyde as a known carcinogenic, the use of the hydrogen peroxide solution Sporox is the recommended cold sterilant for audiology and speech-language pathology.

"Critical items", those that may contact blood or mucus, or those items that are likely to break the skin, require sterilization. Cerumen is not an infectious substance per se, but often contains dried blood or mucus. If there is visible blood in or on cerumen, then that cerumen specimen is a potentially infectious substance and the instruments contacting it must be pre-cleaned and then sterilized.

Basic Guidelines for toy selection, clinical materials and cleaning.

1. Shared toys should be limited to those with non-porous surfaces (i.e. plastic, rubber, vinyl, metal, wood) that can easily be cleaned. Avoid stuffed toys.
2. All toys should be examined before and after use for disrepair, etc.
3. All toys used in diagnostics or therapy should be washed in dishwashing soap and warm water using a brush if needed. After toys have been washed, they should be wiped with a disinfectant wipe or spray. A household bleach solution may also be used. (1 part of household bleach to 10 parts tap water.) Small toys may be wiped with an alcohol swab and allowed to air dry. Rinsing with water is not necessary. Cleaning materials are stored in the preschool storage area.
4. All tabletops should be wiped with a disinfectant spray after every therapy use. All student clinicians are responsible for cleaning all areas following the above guidelines after they have seen clients.
5. Gloves should be worn for all procedures including oral-motor examinations, ear mold impressions and whatever procedures deemed appropriate by each clinician. Gloves should be discarded following each procedure.

Personal Illness

Faculty and students are encouraged to use good judgment regarding personal illness when working with clients to avoid the potential for spreading disease. Medical treatment for strep throat, conjunctivitis and other contagious diseases is required before returning to clinic.

Specific infection control procedures for Audiology will be posted in the Audiology Lab in Room G-06 and the Hearing Aid Fabrication Lab in G-11. In addition, specific infection control procedures will be posted in the Voice lab in Room G-20. A copy of Infection Control for the Professions of Audiology and Speech-Language Pathology will be housed in the Clinic Resource Room – G-43.

Nondiscrimination Statement Language

Electronic Nondiscrimination Statement – Websites and Emailed Publications

Notice of Non-Discrimination

The University of Cincinnati does not discriminate on the basis of disability, race, color, religion, national origin, ancestry, medical condition, genetic information, marital status, sex, age, sexual orientation, veteran status or gender identity and expression in its programs and activities.

The University does not tolerate discrimination, harassment, or retaliation on these bases and takes steps to ensure that students, employees, and third parties are not subject to a hostile environment in University programs or activities.

The University responds promptly and effectively to allegations of discrimination, harassment, and retaliation. It promptly conducts investigations and takes appropriate action, including disciplinary action, against individuals found to have violated its policies, as well as provides appropriate remedies to complainants and the campus community. The University takes immediate action to end a hostile environment if one has been created, prevent its recurrence, and remedy the effects of any hostile environment on affected members of the campus community.

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The following person has been designated to handle inquiries regarding discrimination, harassment, or retaliation based on disability, race, color, religion, national origin, ancestry, medical condition, genetic information, marital status, age, and veteran status:

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The following person has been designated to handle inquiries regarding discrimination, harassment, or retaliation based on sex, sexual orientation, gender, and gender identity or expression:

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