

**UNIVERSITY OF CINCINNATI
COLLEGE OF ALLIED HEALTH AND SCIENCES**

**DEPARTMENT OF COMMUNICATION
SCIENCES AND DISORDERS**

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**SPEECH-LANGUAGE PATHOLOGY
SCHOOL PRACTICUM EXPERIENCE
HANDBOOK**

REVISED
8/2013

Table of Contents

Introduction

Conceptual Framework

Student Orientation

School Start up

Workload Considerations

Practicum Requirements

Clinical Clock Hours

University Supervisor Responsibilities

School Practicum Class

Materials

Absences

Final Comments

Clinical Certification Supervision Requirements

Practicum Forms

 Practicum Commitment Form

 Work Schedule and Information Sheet

 Clinical Hours Tracking Form

 Calipso Performance Evaluation Form

 Calipso Self-evaluation Form

 Calipso Supervisor Feedback Form

Calipso Instructions for Supervisor

Calipso Instructions for Students

Letter of Insurance Verification

Practicum Remediation Action Plan

Action Plan Outcome

Knowledge and Skills Needed by Speech-Language Pathologists providing Clinical Supervision

Timelines

INTRODUCTION

The faculty in the Department of Communication Sciences and Disorders considers the Speech-Language Pathology School Practicum Experience a most important one for graduate students. For many of the students, this will be their first opportunity to work full time with a skilled professional in a school setting. Graduate students have received extensive training in communication sciences and disorders, and they welcome the opportunity to utilize and further develop their knowledge and skills under the guidance of their site supervisor.

This handbook contains information and suggestions which are intended to be useful for both students and site supervisors in planning an effective School Practicum Experience. Flexibility within each individual school setting is expected, and site supervisors and students are encouraged to work out a program which will best meet the needs of a particular setting within the framework of the overall SLP School Practicum Experience guidelines. The key to this experience is the opportunity for students to use and develop the skills they will need to be successful as a speech-language pathologist when they enter the profession after receiving their master's degree.

CONCEPTUAL FRAMEWORK

Speech and language pathology is one of seventeen related programs to teacher preparation on the UC campus. Because we are all responsible for preparing educators, we support the core framework defined by its members.

The conceptual framework identified by the University of Cincinnati educator preparation community is to prepare *committed, caring and competent educators*:

- With foundation knowledge, including knowledge of how individuals learn and develop;
- With content knowledge, able to articulate the central concepts, tools of inquiry, and the structures of their discipline;
- Who successfully collaborate and who demonstrate leadership;
- Who are able to address issues of diversity with equity;
- Who are able to use technology to support their practice; and
- Who use assessment to inform their efforts.

As committed, caring competent educators we:

- Are concerned about all aspects of an individual's well being, assets and need;
- Are dedicated to continuous learning, professional discourse and an enthusiasm for the discipline each of us teaches;
- Support other in our efforts to be resourceful, creative and ready to think on your feet;
- Respect the diverse talents of all learners and recognize developmental differences;
- Share responsibility for establishing and sustaining a positive climate
- Expect students to learn
- Delight in exploration, inquiry, reflection, and self-evaluation.

These are just some of the values and beliefs that guide our practice

STUDENT ORIENTATION

In order to help the graduate student in speech-language pathology acclimate to the school setting, it would be important for the site supervisor to introduce the student to other staff members, including the school principal and the school secretary. In the first week of the experience, the following activities may be helpful to the student: a tour of the school building(s); providing copies of school handbooks or policies and procedures to read; making available academic content standards, curriculum maps and textbooks; providing copies of faculty or department newsletters to read; discussing materials and equipment that are available to the student to use; discussing space that is available to the student for storage of his/her materials and personal things; and a general orientation to the speech-language pathology program as it is set-up in a particular school. In addition, the graduate student may also benefit from information concerning extracurricular events at the school(s) such as music programs or sports events so that they can be informed about the school as a whole.

Students should provide a copy of their background checks to the human resource department of your school district. They may need a picture identification badge and an approved password to access the computers. You may need to guide them in these activities.

The graduate students are responsible for informing their site supervisor about their background including areas of strengths and needs in the development of their speech-language pathology skills and their expectations for the School Practicum Experience. Students will provide you with a current resume. Students also have the responsibility to maintain the speech-language pathology program in the manner that the site supervisor directs, remembering that the site supervisor has spent a lot of time setting up and establishing the program and relationships with the faculty at that school. Appropriate and professional dress is expected of the students, using other faculty members' style of dress as a guideline.

SCHOOL "START UP"

All students are required to do school "start up" in a school district. If the student is assigned Fall semester, he/she will begin as soon as the students in the district have their first day of school. This will most likely be before the semester begins on campus. If the student is scheduled for spring semester, he/she will also begin as soon as the students in the district begin and put in a minimum of 5 days as long as it does not interfere with their fall practicum assignment. .

This school start up experience is intended to help the graduate SLP student gain experience by observing their site supervisor setting up a speech-language pathology program for the school year. Observations may include activities such as: screenings, evaluations, consultations with classroom teacher, parents or students, setting up a caseload schedule, checking and programming devices, gathering reports and schedules, developing data systems, material and test inventory, meeting with students, etc. The graduate student and the site supervisor should work together in planning this experience, but sufficient time should be allowed to give the graduate student a good understanding of this important time of the school year.

WORKLOAD CONSIDERATIONS

Taking over the site supervisor's caseload should be a gradual process with increasing responsibility as the semester proceeds. At first, students are expected to observe their site supervisor conducting therapy sessions and performing assessments in order to become familiar with the students, therapy environment, methods, materials, etc. Naturally, involving the students in this process in some manner is helpful, and students should be able to be directly involved in some way by the end of the first week. Assessment and therapy provide the opportunity for students to develop their skills as do parent or staff meetings about students who are being evaluated or who are already on the site supervisor's caseload. Most students need evaluation hours as part of their school based experience and should discuss the needs in this area with their site supervisor. Student involvement in the RTI, ETR and IEP process also provides valuable experience. The site supervisor and the student should discuss the timing of taking over the workload responsibilities at the beginning of the semester and should work toward having the student taking over full responsibility for the caseload during the last few weeks of the semester.

Students should be encouraged to develop their own style and techniques within the guidelines of the site supervisor, ensuring that a rationale is provided for their ideas. Written lesson plans are expected for each session, including the objectives being addressed and the materials being utilized. Students should also be responsible for taking data and integrating results onto future therapy sessions as appropriate. Students and site supervisors should work closely together to review the therapy plans and outcomes, and the expectations from the site supervisor should be clearly stated to the student. Weekly conferences to discuss ongoing work may be helpful in promoting positive communication where both the student and the site supervisor feel comfortable expressing questions and concerns as needed. Written feedback at the end of a session or the end of a day is very effective and appropriate for the student. Self reflection on treatment and diagnostics is encouraged.

Students are responsible for keeping track of their clinical clock hours as outlined in the Handbook for Clinical Practicum guidelines. At the end of this semester, the site supervisor should review the clock hours and sign the form including their ASHA certification number. A copy of the tracking form is included in this handbook. ASHA requires a minimum of 25% direct supervision for diagnostic evaluations and therapy. The site supervisor should be on site 100% of the time (see “ABSENCES” section for additional information on this subject.)

PRACTICUM REQUIREMENTS

Graduate students in Speech-Language Pathology must demonstrate that they have acquired the knowledge and skills necessary to practice in the profession. Students will need to achieve clinical competencies at designated levels in assessment and treatment for a variety of disorder areas across the age range. Graduate students are given opportunities for practicum in a range of settings including health care and school settings.

CLINICAL CLOCK HOURS

ASHA specifies that students should engage in practicum experiences that encompass the breadth of the current scope of practice with both adults and children (with no specific clock-hour requirements for given disorders or settings) resulting in a minimum of **400 clock hours** of supervised practicum. A minimum of 375 hours must be obtained in direct client/patient assessment or treatment and 25 hours in clinical observation.

The following is a breakdown of the department requirements for **minimum required clinical hours**. Students will also need to gain 50 hours of practicum experience in at least 3 different clinical sites.

EVALUATION: 40 hours

Language Disorders –	20
Adults –	10
Children –	10
Speech Disorders* –	20
Adults –	10
Children –	10

TREATMENT: 80 hours

Language Disorders –	40
Adults –	20
Children –	20
Speech Disorders*-	40
Adults –	20
Children –	20

***Speech Disorders include Voice, Articulation, Stuttering and Dysphagia.

The student’s goal should not be to meet the minimum hour requirements in each area. The more clinical hours obtained with a variety of clients, the better prepared the student will be to meet the challenge of working in the profession.

UNIVERSITY SUPERVISOR RESPONSIBILITIES

The university supervisor will make a 1-2 site visits to each student and their site supervisor. . A schedule will be set by the university supervisor after receiving the input from each student and site supervisor, and the chosen dates will be confirmed with the student who will have the responsibility of informing their site supervisor. Changes will be made in the schedule if necessary, and additional site visits can be scheduled if the need arises.

Generally, the university will observe the student working in the school setting as scheduled, either doing therapy, performing diagnostic evaluation, meeting with staff or parents, etc. At the end of the observation period, some time for

discussion of the observation and collaboration with the student and the site supervisor would be helpful. The university supervisor is interested in collaborating on a variety of subjects during these conferences, including questions the student or site supervisor may have, review of forms for evaluations during the semester, sharing comments on specific cases, materials, methods, upcoming in-service opportunities, strengths and challenges, feedback from observation, etc.

SCHOOL PRACTICUM CLASS

The School Practicum Class will meet before Graduate Seminar at 4:00 p.m. on some of the Tuesdays during the semester (approximately 6). Students may need to leave their school setting a little earlier on these days, and it is the student's responsibility to inform their site supervisor about these seminar meeting times. The practicum seminar is designed to allow time for students to exchange ideas, as well as to provide an opportunity for discussion of subjects pertinent to speech-language pathology practices in the school setting. Students are notified of the specific dates and times of these classes at the beginning of each semester. Students that have their practicum site within one hour traveling distance from the University are expected to attend. All students must participate weekly in topics posted on Blackboard. If the student is assigned to a part-time practicum over 2 semesters, the student attends the campus classes only the first semester.

MATERIALS

Graduate students coming into the school setting may or may not have many materials of their own which they can use for therapy sessions. It is always helpful to students if their site supervisor shares materials or resources for materials with the student. Most students appreciate any ideas which site supervisors may have for materials development. Students are encouraged to ask specific questions about choosing materials and using commercially or personally developed materials which site supervisors have found to be effective in their therapy sessions. It is important for them to have access to classroom textbooks, assignments and classroom curriculum.

ABSENCES

Students are responsible for informing their site supervisor if they are going to be absent that day. They are also responsible for keeping a record of their absences and turning that absence form in to the university supervisor at the end of the semester. Regular attendance is expected, and any unusual length of absence should immediately be reported to the university supervisor by the student or the site supervisor. Extended absences may need to be made up. Attendance at conferences or in-services are not considered absences and are encouraged if the site supervisor and the student think the topics being addressed would be beneficial to the student's experience.

If the site supervisor is absent, the student should still attend that day with arrangements being established ahead of time as to what the student should do that day. Site supervisors may wish to discuss the options for student work during any possible absences with their school principal. Possible ideas might be: having the student take over the caseload in the site supervisor's absence with the okay of the principal and the ability to reach the site supervisor by phone; having the student observe another SLP in the district for the day; having the student observe one or several teachers in the classroom(s) where students who have speech-language IEPs are placed; having the student develop materials for future therapy sessions, etc. A contingency plan for possible site supervisor absences should be discussed at the beginning of the semester during the general orientation time.

FINAL COMMENTS

Working with SLP student teachers can be a very rewarding experience which sometimes results in continuing friendships and renewed interest in varying aspects of the field of speech-language pathology. The role of the site supervisor in a school based setting cannot be overstated. Many students will go on to successful careers as school based speech-language pathologists because of the experience they gained under the direction of a dedicated professional who took the time to encourage someone who was new to the profession.

The faculty in the Department of Communication Sciences and Disorders recognizes the value of the role that site supervisors play in the development of the graduate students in our program. The extra time that site supervisors spend in training graduate students makes a difference in the quality of work that students go on to perform in their jobs when they complete their graduate degree. The supervised practice that students get in their school based and other clinical speech-

language pathology experiences brings their academic coursework to life. Without these supervised real life experiences which are made possible by dedicated professionals in the field of speech-language pathology, students would not be as well prepared to enter our profession.

CLINICAL CERTIFICATION SUPERVISION REQUIREMENTS AND TERMINOLOGY

1. Persons holding CCC's in Speech-Language Pathology may supervise:
All speech-language pathology evaluation and treatment services.
Non-diagnostic audiological screening (i.e. pure tone air-conduction screening for the purpose of performing a speech and/or language evaluation or for the purpose of initial identification of individuals with other communication disorders)
Aural habilitation and rehabilitative services
2. Only direct client contact may be counted as clinical practicum hours.
3. Hours to be counted in the "evaluation" category include the initial and formal diagnostic assessment or re-evaluation.
5. Time spent in a multi-disciplinary staffing, education appraisal and review or in meetings with professional persons regarding diagnosis and treatment of a given client may not be counted. Conference time with clinical supervisors may not be counted.
6. If a client presents communication disorders in a two or more of the disorder categories, accumulated clock hours should be distributed among these categories according to the amount of treatment time spent on each. For example, if a client with both language and articulation problems received twenty hours of treatment and approximately $\frac{3}{4}$ of each treatment session was spent on language and $\frac{1}{4}$ was spent on articulation, the clinician should record credit for 15 hours of language treatment and 5 hours of articulation treatment.
7. "Reporting Functions" refer to both written and verbal tasks that student may be doing during practicum. This can include presenting at meetings, writing progress reports, notes to parents, IEPs, evaluation reports, developing intervention plans, etc.
8. "Client Referrals" refer to the ability of a student to know when and how to make referrals within a school district or to an outside agency. Although it would be highly unlikely that a student would make a referral during school practicum, it is important that they know the procedure in your district. This can best be assessed by presenting the student with short scenarios and asking the student to describe the procedure. These scenarios may involve how to refer to the school nurse, psychologist, OT, PT, counselor, feeding team, ESY, dentist, ENT, etc.

PRACTICUM FORMS

The student is responsible for completing the following forms every semester. Students are advised to make copies of all paperwork for their records.

- Practicum Commitment Form (Due second week after practicum begins)
- Work Schedule and Information Sheet
- Clinical Hours Tracking Form
- Practicum Reflection (Narrative)

PRACTICUM COMMITMENT FORM

At the beginning of the term, the student and supervisor will meet to negotiate and sign the practicum commitment. This form should be given to the UC Practicum Coordinator by the second week of the semester.

WORK SCHEDULE AND INFORMATION SHEET

At the beginning of the term, the student will fill in the schedule that includes arrival, lunch and departure times, building assigned each day, building address and name of principal. This form will be given to the UC practicum coordinator by the second week of the semester. This form is used to locate the student and plan site visitations by UC practicum coordinator.

CLINICAL HOURS TRACKING FORM

This is the form that students use to keep track of their ongoing clinical hours during the term. Students will be entering their own hours in CALIPSO with supervisor approval at any interval the student and supervisor agree upon.

PRACTICUM REFLECTION

At the end of the semester, the student clinician will write a narrative reflection about his/her practicum experience. The reflection should be discussed with the supervisor and then submitted to the Practicum Coordinator.

CALIPSO

Clinical education documentation is managed via a web-based program called Calipso. You can access CALIPSO by going to www.calopso.com/uc. You will receive step-by-step instructions on how to register for CALIPSO after you are assigned a graduate student and we have received the Practicum Commitment

PRACTICUM COMMITMENT

University of Cincinnati Communication Sciences and Disorders Department

Student: _____
Semester/Year: _____
Site: _____
Supervisor: _____
Address: _____
Email: _____
Phone: _____

The University of Cincinnati student who has been assigned to a Communication Sciences and Disorders Practicum has agreed to the following guidelines and expectations.

1. The student will begin the practicum experience on _____ and finish on _____.
Days per week: (circle) M T W TH F
2. The student will maintain the following hours: _____
3. **Regular attendance is expected.** Negotiated days off from practicum might include religious holidays, professional conferences/conventions, and required department activities such as Fluency Friday (fall semester) and PRAISE (spring semester). The student is required to make up days they are absent from practicum including illness if not negotiated in the practicum commitment at the beginning of the term.
4. The student will follow all rules of confidentiality as they pertain to clients and clients' families.
5. Therapy plans, evaluations, and other reports must be submitted by deadlines specified by the site supervisor:

6. The student will participate in at least _____ of directed observation before he/she begins to provide clinical services (up to a maximum of _____).
7. The student will comply with all policies and procedures of the practicum site:

If at any time in the first five weeks of the term, the supervisor feels that the student is not progressing towards independence at the practicum site, the practicum coordinator should be contacted to discuss a plan of action. The on-site supervisor has agreed to the following guidelines:

1. The supervisor will have primary responsibility for coordination and supervision of the student's professional work at this site.
2. The supervisor recognizes and agrees to abide by the observation requirements set by ASHA; supervision at a minimum of 25% of client contact time for therapy and diagnostic evaluations.
3. The supervisor and student will have conferences scheduled at least _____
_____.
4. The supervisor will share the evaluation of the student's performance with the student and Practicum Coordinator.

The Practicum Coordinator will make ____ visit(s) to the practicum site during the semester.

Student

Site Supervisor ASHA# State License#
(Please provide a photocopy of your updated ASHA card)

U.C. Practicum Coordinator



University of Cincinnati
CALIPSO
 Performance Evaluation
 Printed for
 Test Supervisor,

Performance Evaluation

Supervisor: Test Supervisor,

*Student:

*Site:

*Evaluation Type:

*Semester:

*Course number:

*Patient population:

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

% the student was observed while providing: Evaluation: (minimum of 25% of the total contact with each client/patient)
 Treatment: (minimum of 25% of the total contact with each client/patient)

Save

PERFORMANCE RATING SCALE

[Click to see Rating Scale](#)

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

- 1 - Not evident 4 - Refining
- 2 - Emerging 5 - Independent
- 3 - Developing

* If n/a, please leave space blank

Evaluation skills	Articulation?	Fluency?	Voice?	Language?	Hearing?	Swallowing?	Cognition?	Social Aspects?	Communication Modalities?
	Refer to Performance Rating Scale above and place number corresponding to skill level in every observed box.								
1. Conducts screening and prevention procedures (std III-D, std IV-G, 1a).	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Performs chart review and/or collects case history from interviewing patient and/or relevant others (std IV-G, 1b).	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. Selects appropriate evaluation instruments/procedures (std IV-G, 1c).	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. Administers and scores diagnostic tests correctly (std IV-G, 1c).	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. Adapts evaluation procedures to meet patient needs (std IV-G, 1d).	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6. Possesses knowledge of etiologies and characteristics for each communication and swallowing disorder (std III-C).	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7. Interprets and formulates diagnosis from test results, history, and other behavioral observations (std IV-G, 1e).	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8. Makes appropriate recommendations for intervention (std IV-G, 1e).	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9. Completes administrative functions including reporting and documentation necessary to support evaluation (std IV-G, 1f).	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10. Makes appropriate recommendations for patient referrals (std IV-G, 1g). ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Score totals:	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Total number of items scored: <u>0</u> Total number of points: <u>0</u> Section Average: <u>0</u>									

Comments:

Save

Treatment skills	Articulation?	Fluency?	Voice?	Language?	Hearing?	Swallowing?	Cognition?	Social Aspects?	Communication Modalities?
	Refer to Performance Rating Scale above and place number corresponding to skill level in every observed box.								
1. Develops appropriate treatment plans with measurable and achievable goals. Collaborates with clients/patients and relevant others in the planning process. (std IV-G, 2a)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Implements treatment plans (std IV-G, 2b).	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. Selects and uses appropriate materials/instrumentation (std IV-G, 2c).	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. Sequences task to meet objectives.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. Provides appropriate introduction/explanation of tasks.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6. Measures and evaluates patients' performance and progress (std IV-G, 2d).	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7. Uses appropriate models, prompts, or cues. Allows time for patient response.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8. Adapts treatment session to meet individual patient needs (std IV-G, 2e).	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9. Completes administrative functions including reporting and documentation necessary to support treatment (std IV-G, 2f).	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10. Identifies and refers patients for services as appropriate (std IV-G, 2g). ?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Score totals:	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Total number of items scored: <u>0</u> Total number of points: <u>0</u> Section Average: <u>0</u>									

Comments:

Save

Preparedness, Interaction, and Personal Qualities	Score
1. Possesses foundation for basic human communication and swallowing processes (std III-B).	<input type="text"/>
2. Integrates research principles into evidence-based clinical practice (std III-F).	<input type="text"/>
3. Possesses knowledge of contemporary professionals issues, including trends in professional practice, academic program accreditation standards, ASHA practice policies and guidelines, and reimbursement procedures, and advocacy (std III-G).	<input type="text"/>
4. Communicates effectively, recognizing the needs, values, preferred mode of communication, and cultural/linguistic background of the patient, family, caregiver, and relevant others (std IV-G, 3a).	<input type="text"/>
5. Establishes rapport and shows sensitivity to the needs of the patient.	<input type="text"/>
6. Uses appropriate rate, pitch, and volume when interacting with patients or others.	<input type="text"/>
7. Provides counseling and supportive guidance regarding communication and swallowing disorders to patients, family, caregivers, and relevant others (std IV-G, 3c).	<input type="text"/>
8. Collaborates with other professionals in case management (std IV-G, 3b).	<input type="text"/>
9. Displays effective oral communication with patient, family, or other professionals (std IV-B).	<input type="text"/>
10. Displays effective written communication for professional correspondence (std IV-B).	<input type="text"/>
11. Adheres to the ASHA Code of Ethics and conducts him or herself in a professional, ethical manner (std III-E, IV-G, 3d).	<input type="text"/>
12. Assumes a professional level of responsibility and initiative in completing all requirements.	<input type="text"/>
13. Demonstrates openness and responsiveness to clinical supervision and suggestions.	<input type="text"/>
14. Possesses the ability to self reflect and self evaluate.	<input type="text"/>
15. Personal appearance is professional and appropriate for the clinical setting.	<input type="text"/>
16. Displays organization and preparedness for all clinical sessions.	<input type="text"/>
Total number of items scored: <u>0</u> Total number of points: <u>0</u> Section Average: <u>0</u>	

Comments:

Save

Improvements Since Last Evaluation:

Strengths/Challenges:

Recommendations for Improving Clinical Skills:

Total points (all sections included): 0 Adjustment: 0.0

divided by total number of items 0

Evaluation score: 0

Letter grade: Fail

Quality points: N/A

By entering the student's name, I verify that this evaluation has been reviewed and discussed with the student prior to final submission.

Student name:

Date reviewed:

I verify that this evaluation is being submitted by the assigned clinical supervisor and that I have supervised the above named student.

*Supervisor name:

*Date completed:

Final submission (if this box is checked, no more changes will be allowed!)

Save

Standards referenced herein are those contained in the Membership and Certification Handbook of the American Speech-Language-Hearing Association. Readers are directed to the [ASHA Web site](#) to access the standards in their entirety.



Self-evaluation

*Site: University of Cincinnati Speech, Language, a

*Evaluation Type: Final

*Semester: 2013 Spring

*Course number: 1st Yr Spring

*Patient population:

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

Save

PERFORMANCE RATING SCALE

[Click to see Rating Scale](#)

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

- 1 - Not evident 4 - Refining
- 2 - Emerging 5 - Independent
- 3 - Developing

* If n/a, please leave space blank

Evaluation skills	Articulation?	Fluency?	Voice?	Language?	Hearing?	Swallowing?	Cognition?	Social Aspects?	Communication Modalities?	
	Refer to Performance Rating Scale above and place number corresponding to skill level in every observed box.									
1. Conducts screening and prevention procedures (std III-D, std IV-G, 1a).										
2. Performs chart review and/or collects case history from interviewing patient and/or relevant others (std IV-G, 1b).										
3. Selects appropriate evaluation instruments/procedures (std IV-G, 1c).										
4. Administers and scores diagnostic tests correctly (std IV-G, 1c).										
5. Adapts evaluation procedures to meet patient needs (std IV-G, 1d).										
6. Possesses knowledge of etiologies and characteristics for each communication and swallowing disorder (std III-C).										
7. Interprets and formulates diagnosis from test results, history, and other behavioral observations (std IV-G, 1e).										
8. Makes appropriate recommendations for intervention (std IV-G, 1e).										
9. Completes administrative functions including reporting and documentation necessary to support evaluation (std IV-G, 1f).										
10. Makes appropriate recommendations for patient referrals (std IV-G, 1g). ?										
Score totals:	0	0	0	0	0	0	0	0	0	0
Total number of items scored: 0 Total number of points: 0 Section Average: 0										
Comments:										

Save

Refer to Performance Rating Scale above and place number corresponding to skill level in every observed box.

1. Develops appropriate treatment plans with measurable and achievable goals. Collaborates with clients/patients and relevant others in the planning process. (std IV-G, 2a)	<input type="text"/>									
2. Implements treatment plans (std IV-G, 2b).	<input type="text"/>									
3. Selects and uses appropriate materials/instrumentation (std IV-G, 2c).	<input type="text"/>									
4. Sequences task to meet objectives.	<input type="text"/>									
5. Provides appropriate introduction/explanation of tasks.	<input type="text"/>									
6. Measures and evaluates patients' performance and progress (std IV-G, 2d).	<input type="text"/>									
7. Uses appropriate models, prompts, or cues. Allows time for patient response.	<input type="text"/>									
8. Adapts treatment session to meet individual patient needs (std IV-G, 2e).	<input type="text"/>									
9. Completes administrative functions including reporting and documentation necessary to support treatment (std IV-G, 2f).	<input type="text"/>									
10. Identifies and refers patients for services as appropriate (std IV-G, 2g). ?	<input type="text"/>									

Score totals: 0 0 0 0 0 0 0 0 0

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

Comments:

Save

	Preparedness, Interaction, and Personal Qualities	Score
1. Possesses foundation for basic human communication and swallowing processes (std III-B).	<input type="text"/>	<input type="text"/>
2. Integrates research principles into evidence-based clinical practice (std III-F).	<input type="text"/>	<input type="text"/>
3. Possesses knowledge of contemporary professionals issues, including trends in professional practice, academic program accreditation standards, ASHA practice policies and guidelines, and reimbursement procedures, and advocacy (std III-G).	<input type="text"/>	<input type="text"/>
4. Communicates effectively, recognizing the needs, values, preferred mode of communication, and cultural/linguistic background of the patient, family, caregiver, and relevant others (std IV-G, 3a).	<input type="text"/>	<input type="text"/>
5. Establishes rapport and shows sensitivity to the needs of the patient.	<input type="text"/>	<input type="text"/>
6. Uses appropriate rate, pitch, and volume when interacting with patients or others.	<input type="text"/>	<input type="text"/>
7. Provides counseling and supportive guidance regarding communication and swallowing disorders to patients, family, caregivers, and relevant others (std IV-G, 3c).	<input type="text"/>	<input type="text"/>
8. Collaborates with other professionals in case management (std IV-G, 3b).	<input type="text"/>	<input type="text"/>
9. Displays effective oral communication with patient, family, or other professionals (std IV-B).	<input type="text"/>	<input type="text"/>
10. Displays effective written communication for professional correspondence (std IV-B).	<input type="text"/>	<input type="text"/>
11. Adheres to the ASHA Code of Ethics and conducts him or herself in a professional, ethical manner (std III-E, IV-G, 3d).	<input type="text"/>	<input type="text"/>
12. Assumes a professional level of responsibility and initiative in completing all requirements.	<input type="text"/>	<input type="text"/>
13. Demonstrates openness and responsiveness to clinical supervision and suggestions.	<input type="text"/>	<input type="text"/>
14. Possesses the ability to self reflect and self evaluate.	<input type="text"/>	<input type="text"/>
15. Personal appearance is professional and appropriate for the clinical setting.	<input type="text"/>	<input type="text"/>
16. Displays organization and preparedness for all clinical sessions.	<input type="text"/>	<input type="text"/>

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

Comments:

Save

Improvements Since Last Evaluation:

Strengths/Challenges:

Recommendations for Improving Clinical Skills:

Total points (all sections included): 0 Adjustment: 0.0
divided by total number of items 0
Evaluation score: _
Letter grade _
Quality points: _

Final submission (if this box is checked, no more changes will be allowed!)

Standards referenced herein are those contained in the Membership and Certification Handbook of the American Speech-Language-Hearing Association. Readers are directed to the [ASHA Web site](#) to access the standards in their entirety.



Supervisor Feedback Form

* Supervisor:

* Site:

* Semester:

1. Provided an orientation to the facility and caseload.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

9. Utilized evidence-based practice.

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

10. Encouraged student independence and creativity.

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

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

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

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

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

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

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

14. Demonstrated effective interpersonal communication with student.

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

15. Receptive to questions.

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

16. Available to me when I requested assistance.

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

17. Utilized effective organizational and management skills.

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

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

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

19. Realistically demanding of me as a student intern.

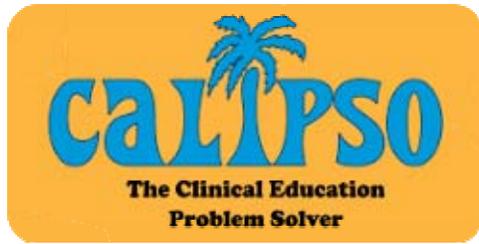
- N/A
 Expectations were either too high or too low for level of experience with no attempts to adjust.
 Expectations were generally appropriate for my level of experience.
 Expectations were individualized and adjusted according to my strengths and weaknesses.

Overall, how would you rate this clinical experience?

Additional comments?

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

Submit feedback



CALIPSO INSTRUCTIONS FOR CLINICAL SUPERVISORS

<https://www.calipsoclient.com/uc>

Step 1: Register as a Supervisor on CALIPSO (Clinical Assessment of Learning, Inventory of Performance, and Streamlined Office-Operations)

- Before registering, have available your 1) PIN provided by the Clinical Coordinator, 2) ASHA card, 3) state licensure card, and 4) teacher certification information if applicable. If possible, have available scanned copies of your certification and licensure cards for upload during the registration process.
- Go to <https://www.calipsoclient.com/uc>
- Click on the “Supervisor” registration link located below the login button.
- Complete the requested information and click “Register.”
- On the following screen, again complete the requested information and click “Save” at the bottom of the page. A “Registration Complete” message will be displayed and you will automatically be logged into CALIPSO.

Step 2: Login to CALIPSO

- For subsequent logins, go to <https://www.calipsoclient.com/uc> and login to CALIPSO using your 8-digit ASHA number and **password that you created for yourself during the registration process (step one.)**

Step 3: Select Supervisee / Student

- Locate “Change class to:” and select from the drop-down menu the appropriate class
- Click “Change.”
- Click on “Student Information”
- Locate “Add Student of Interest” and select your student from the drop-down menu.
- Click “Add.”

Step 4: View Student Clock Hour Records

- Click on “Clockhours” then “Experience Record” to view a summary of clock hours obtained and clock hours needed.
- Students may be required to gain a minimum of (20) hours in the evaluation and treatment of children and adults for both speech and language disorders which is summarized in the table at the bottom of the page.
- Please note the student’s Clinical Competency Level (I, II, or III) on the page header if applicable.
- Print/save clock hour record by clicking “Print Experience Record.”
- Click “Student Information” located within the blue stripe to return to the student list.

Step 5: View Student Cumulative Evaluation

- Click on “Cumulative evaluation” to view a summary of your student’s clinical competency across the 9 disorder areas.
- Upon completion of the clinical program, students must have an average score of 3.0 or higher for all clinical competencies listed on the form.
- Please make note of any areas of deficiency (highlighted in orange.)
- Click “Student Information” located within the blue stripe to return to the student list.

Step 6: View Student Immunization and Compliance Records

- Click “Compliance/Immunizations” to view a record of compliance and immunization documents.
- To create a document to save and/or print, click “PDF.”
- An electronic file of the original documents can be accessed, if necessary and if uploaded by the Clinical Coordinator, by clicking “Files” located within the blue stripe.
- Click “Home” located within the blue stripe to return to the home page.

Step 7: Complete Site Information Form

- From the home page, click on the “Site Information Forms” link under the Management header.
- Click “Add new form.”
- Complete the requested information and click “Save.”

Step 8: Upload Files for Student or Clinical Administrator (optional)

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

Step 9: Complete Midterm Evaluation

- Login to CALIPSO (step two)
- Select the desired “Class” and click “change.”
- Click “New evaluation”.
- Complete required fields designated with an asterisk and press save.
- Continue completing evaluation by scoring all applicable skills across the Big 9 using the provided scoring method and saving frequently to avoid loss of data.
- Once the evaluation is complete, review it with the student. Type his/her name with the corresponding date as well as your name with the corresponding date located at the bottom of the page.
- Check the “final submission” box located just below the signatures.
- Click “save.”
- Receive message stating “evaluation recorded.”
- Please note: you may edit and save the evaluation as often as you wish until the final submission box is checked. Once the final submission box is checked and the evaluation saved, the status will change from “in progress” to “final”. Students will then have access to view the submitted evaluation when logged into the system.
- To view the evaluation, click “Student Information” located within the blue stripe then “evaluations” located to the right of the student’s name.

Step 10: Complete Final Evaluation

- Login to CALIPSO (step two)
- Select the desired “Class” and click “change.”
- Click “Student Information” then “evaluations” located to the right of the student’s name.
- Identify the evaluation completed at midterm and click on “Make a duplicate of this evaluation.”
- The duplicated evaluation will appear in the evaluations list.
- Identify the duplicate (noted as “in progress”) and click on the “current evaluation” link highlighted in blue.
- Change “Evaluation type” from midterm to final.
- Complete evaluation by changing and/or adding scores for applicable skills across the Big 9 using the provided scoring method and saving frequently to avoid loss of data.
- Once the evaluation is complete, review it with the student. Type his/her name with the corresponding date as well as your name with the corresponding date located at the bottom of the page.
- Check the “final submission” box located just below the signatures.
- Click “save.”
- Receive message stating “evaluation recorded.”

Step 11: Approve Clock Hours

- At the completion of the rotation or as often as directed, your student will log their clock hours into CALIPSO.
- An automatically generated e-mail will be sent notifying you that clock hours have been submitted and are awaiting approval.
- Login to CALIPSO (step two.)
- Click “clockhour forms pending approval.”
- Identify your current student’s record.
- Click “View/Edit” in the far right column.
- Review hours, making changes if necessary.
- Complete the % of time the student was observed while conducting evaluations and providing treatment.
- Approve clock hours by selecting “yes” beside “Supervisor approval” located at the bottom of the page.
- Click “Save.”

Step 12: View Your Supervisory Summary

- For an official record of this supervisory experience (past or present), click on the “Supervision summary” link located under the Management header on the home page.
- Select “Printable view (PDF)” to create a document to save and/or print.

Step 13: View Your Supervisory Feedback

- At the completion of the rotation, your student will complete a supervisory feedback form in CALIPSO.
- An automatically generated e-mail will be sent stating that you have feedback available to view.
- Login to CALIPSO (step two)
- Select the desired “Class” and click “change.”
- Click “Supervisor feedback forms.”
- Click “View/Edit” in the far right column.

Step 14: Update Your Information

- Update e-mail address changes, name changes, certification expiration dates with corresponding scanned copies of your card by logging into CALIPSO (step two.)
- Click “Update your information.”
- Make changes and click “save” and/or click “Edit licenses and certification.”
- Update information and upload supporting files and click “save” located at the bottom of the screen.



CALIPSO INSTRUCTIONS FOR STUDENTS

<https://www.calipsoclient.com/uc>

Step 1: Register as a Student User on CALIPSO

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

Step 2: Login to CALIPSO

- To login, go to <https://www.calipsoclient.com/uc> and login to CALIPSO using your school e-mail and **password that you created for yourself during the registration process (step one.)**
- Upon logging in for the first time, you will be prompted to pay the student fee and to provide consent for the release of information to clinical practicum sites.

Step 3: Enter Contact Information

- Click on “Student Information”
- Click on “Contact Info” and then “Edit” for each corresponding address.
- Enter your local, permanent, and emergency contact info. Enter “rotation” contact info when on externships. Return to this link to update as necessary.

- Click “Home” located within the blue stripe to return to the home page.

Step 4: View Immunization and Compliance Records

- Before each semester, click on “Student Information” and then “Compliance/Immunizations” to view a record of compliance and immunization records.
- Missing or expired records are highlighted in red.
- To create a document to save and/or print, click “PDF” located within the blue stripe.
- An electronic file of the original documents can be accessed, if uploaded by the Clinical Coordinator, by clicking “Files” located within the blue stripe.
- Click “Home” located within the blue stripe to return to the home page.

Step 5: View/Upload Clinical Placement Files

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

Step 6a: Enter Daily Clock Hours

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

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

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

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

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

Step 6b: Submit Clock Hours for Supervisor Approval

- Click on the “Daily clockhours” link located within the blue stripe.
- Select the record you wish to view (posted by supervisor, semester, and course) from the drop-down menu and click “Show.”
- Check the box (located beside the entry date) for all dates you wish to submit for approval then click “Submit selected clockhours for supervisor approval.” Clock hours logged for the dates selected will be consolidated into one record for supervisor approval. The designated supervisor will receive an automatically generated e-mail requesting approval of the clock hour record.

- Please note: Daily entries cannot be edited once approved. However, if you delete the entry from the “Clockhour list” link prior to approval, daily hours may be resubmitted.
- View consolidated clock hour entries by clicking “Clockhours list” located within the blue stripe.

Step 7: View Clinical Performance Evaluations

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

Step 8: View Cumulative Evaluation

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

Step 9: View Performance Summary

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

Step 10: View My Checklist

- Click on “Student Information” and then “My Checklist” to view your progress in meeting the clinical requirements for graduation.

- Upon graduation, all requirements should have been met, represented with a green check mark.

Step 11: Complete Self-Evaluation

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

Step 12: Complete Supervisor Feedback Form

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

Step 13: View Site Information Forms

- The “Site Information Forms” link located on the lobby page displays pertinent information on the sites/facilities that your school affiliates with for clinical placements.

- To view available information, identify the desired site and click “View” located in the fifth column under submitted.
- Please note: “In progress” forms are not accessible to students; only “submitted” forms are accessible to students.



**Office of Risk Management
and Insurance**

University of Cincinnati
PO Box 670785
Cincinnati, OH 45221-0785

118 Mont Reid Pavilion

(513) 584-5042
(513) 584-5559 Fax

February 14, 2012

To Whom It May Concern:

RE: University of Cincinnati Medical
Professional Liability Insurance Program

The University of Cincinnati, through its Office of Risk Management and Insurance, maintains a comprehensive program of self-insurance and commercially purchased insurance, covering property, casualty and liability exposures to the University and its employees, agents, and volunteers, while acting on the University's behalf. Students are covered under this program for Professional (patient care) liability only, while engaged in clinical rotations at the request or direction of the University through a health care education program.

The primary level of insurance for general and professional (patient care) liability is provided through a self-insurance program, consisting of trust funds maintained by an independent trustee and actuarially supported to liability limits of \$100,000 per occurrence for general liability and \$4 Million per occurrence for professional liability. The funds financial soundness is reviewed and certified annually by an outside actuarial firm. We also participate in a self-insurance program among several state universities in Ohio for automobile liability and general liability insurance coverage's. In addition, commercially purchased excess insurance is provided above the primary liability insurance coverage's with limits of \$15 Million and higher depending on the type of claim. However, because the primary level of coverage is through self-insurance, there is no "Certificate of Insurance" for this coverage, and additional insured parties cannot be named.

Worker's Compensation insurance for University employees is provided through the state fund. We have been assigned a "Worker's Compensation Risk Number", however, there is not a "certificate" for that coverage.

If there are any further questions, please feel free to contact the University of Cincinnati Office of Risk Management and Insurance at 513-584-5042.

Sincerely,

David F. Schwallie

David F. Schwallie, Esq.
Director



**DEPARTMENT OF COMMUNICATION SCIENCES AND DISORDERS
SPEECH-LANGUAGE PATHOLOGY
PRACTICUM REMEDIATION/ACTION PLAN**

Student: _____ Date: _____

Supervisor: _____

U. C. Liaison: _____

1. Identify (and agree to) competencies not being met during the practicum period:

Skills:

Assessment: _____

Intervention: _____

Interaction/Person Qualities: _____

2. Plan of

Action: _____

3. Action Steps Achieved: _____

Date: _____

If Not Achieved: _____

_____ Extend time at site

_____ Practicum at another site

_____ Terminate practicum

_____ Other

Comments: _____

Practicum Supervisor: _____ Student: _____

University Liaison _____

Action Plan Outcome Practicum

Students enrolled in practicum during their first or second year will need to achieve competency levels (of 3 and 4's respectively) in each disorder area experienced and in professional codes of conduct.

Students enrolled in practicum during their second year must achieve competencies at a 4 level in the nine areas of disorder types reflected on the SAMS (Student Assessment Management System) document. Competencies are achieved in the areas which reflect their current patient load. At the end of each semester, their competencies will be assessed and competency needs reviewed in order to achieve all 4's by graduation.

If a supervisor feels that, at any time, a student is not moving along the continuum for independence, she or he will contact the University liaison who will meet with the supervisor and student to develop an Action/Remedial plan. All will agree to the plan and its consequences and sign the form. If the student is not able to achieve the action steps at the end of the semester, they will not pass competencies for that practicum site. Clinical hours cannot be given if students do not pass their competencies. Students may be required to extend their practicum in order to meet competency levels or perform practicum at another site. Another plan or course of action may need to be developed depending on specific circumstances.

If a student has not met competencies at a site, they will be placed on practicum probation for the following semester which requires successful fulfillment of the remediation/action plan. If a student receives an action plan at two sites and is not successful in gaining the needed competencies, practicum will be terminated.



AMERICAN
SPEECH-LANGUAGE-
HEARING
ASSOCIATION

Knowledge and Skills Needed by Speech- Language Pathologists Providing Clinical Supervision

Ad Hoc Committee on Supervision in Speech-Language Pathology

Reference this material as: American Speech-Language-Hearing Association. (2008). *Knowledge and Skills Needed by Speech-Language Pathologists Providing Clinical Supervision* [Knowledge and Skills].

Available from www.asha.org/policy.

Index terms: supervision

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About This Document

This knowledge and skills document is an official statement of the American Speech-Language-Hearing Association (ASHA). This knowledge and skills statement was developed by the Ad Hoc Committee on Supervision. Members of the committee were Lisa O'Connor (chair), Christine Baron, Thalia Coleman, Barbara Conrad, Wren Newman, Kathy Panther, and Janet E. Brown (ex officio). Brian B. Shulman, vice president for professional practices in speech-language pathology (2006–2008), served as the monitoring officer. This document was approved by the Board of Directors on March 12, 2008.

Knowledge and Skills

This document accompanies ASHA's policy documents *Clinical Supervision in Speech-Language Pathology: Position Statement* and *Technical Report* (ASHA, 2008a, 2008b). ASHA's position statement affirms that clinical supervision (also called clinical teaching or clinical education) is a distinct area of expertise and practice, and that it is critically important that individuals who engage in supervision obtain education in the supervisory process. The role of supervisor may include administrative responsibilities in some settings, and, should this be the case, the supervisor will have two major responsibilities: clinical teaching and program management tasks. However, the knowledge and skills addressed in this document are focused on the essential elements of being a clinical educator in any service delivery setting with students, clinical fellows, and professionals.

Professionals looking for guidance in supervising support personnel should refer to the ASHA position statement and knowledge and skills documents on that topic (ASHA, 2002, 2004a, 2004b).

ASHA's technical report on clinical supervision in speech-language pathology (2008b) cites Jean Anderson's (1988) definition of supervision:

Supervision is a process that consists of a variety of patterns of behavior, the appropriateness of which depends on the needs, competencies, expectations and philosophies of the supervisor and the supervisee and the specifics of the situation (tasks, client, setting and other variables). The goals of the supervisory process are the professional growth and development of the supervisee and the supervisor, which it is assumed will result ultimately in optimal service to clients. (p. 12)

The ASHA technical report (2008b) adds the following elements to the above definition:

Professional growth and development of the supervisee and the supervisor are enhanced when supervision or clinical teaching involves self-analysis and self-evaluation. Effective clinical teaching also promotes the use of critical thinking and problem-solving skills on the part of the individual being supervised. (p. 3)

This expanded definition was used as a basis for the following knowledge and skills statements.

Developing Knowledge and Skills

All certified SLPs have received supervision during their student practica and clinical fellowship; however, this by itself does not ensure competence as a supervisor. Furthermore, achieving clinical competence does not imply that one has the special skills required to be an effective supervisor. ASHA does not have specific requirements for coursework or credentials to serve as a supervisor; however, some states or settings may require coursework and/or years of experience to serve as a supervisor. Knowledge and skills may be developed in a variety of ways: participating in courses or workshops on supervision, engaging in self-study, participating in Division 11 (Administration and Supervision), and gaining mentored experiences under the guidance of an experienced clinical educator.

The following 11 items represent core areas of knowledge and skills. The supervisee is an essential partner in the supervisory process; however, these areas are presented from the perspective of knowledge and skills that should be acquired by the supervisor.

I. Preparation for the Supervisory Experience

A. Knowledge Required

1. Be familiar with the literature on supervision and the impact of supervisor behaviors on the growth and development of the supervisee.
2. Recognize that planning and goal setting are critical components of the supervisory process both for the clinical care provided to the client by the supervisee and for the professional growth of the supervisee.
3. Understand the value of different observation formats to benefit supervisee growth and development.
4. Understand the importance of implementing a supervisory style that corresponds to the knowledge and skill level of the supervisee.
5. Understand the basic principles and dynamics of effective collaboration.
6. Be familiar with data collection methods and tools for analysis of clinical behaviors.
7. Understand types and uses of technology and their application in supervision.

B. Skills Required

1. Facilitate an understanding of the supervisory process that includes the objectives of supervision, the roles of the participants, the components of the supervisory process, and a clear description of the assigned tasks and responsibilities.
2. Assist the supervisee in formulating goals for the clinical and supervisory processes, as needed.
3. Assess the supervisee's knowledge, skills, and prior experiences in relationship to the clients served.
4. Adapt or develop observational formats that facilitate objective data collection.
5. Be able to select and apply a supervisory style based on the needs of the clients served, and the knowledge and skill of the supervisee.
6. Model effective collaboration and communication skills in interdisciplinary teams.
7. Be able to analyze the data collected to facilitate the supervisee's clinical skill development and professional growth.

8. Use technology as appropriate to enhance communication effectiveness and efficiency in the supervisory process.

II. Interpersonal Communication and the Supervisor-Supervisee Relationship

A. Knowledge Required

1. Understand the basic principles and dynamics of effective interpersonal communication.
2. Understand different learning styles and how to work most effectively with each style in the supervisory relationship.
3. Understand how differences in age, gender, culture, social roles, and self-concept can present challenges to effective interpersonal communication.
4. Understand the importance of effective listening skills.
5. Understand differences in communication styles, including cultural/linguistic, generational, and gender differences, and how this may have an impact on the working relationship with the supervisee.
6. Be familiar with research on supervision in terms of developing supervisory relationships and in analyzing supervisor and supervisee behaviors.
7. Understand key principles of conflict resolution.

B. Skills Required

1. Demonstrate the use of effective interpersonal skills.
2. Facilitate the supervisee's use of interpersonal communication skills that will maximize communication effectiveness.
3. Recognize and accommodate differences in learning styles as part of the supervisory process.
4. Recognize and be able to address the challenges to successful communication interactions (e.g., generational and/or gender differences and cultural/linguistic factors).
5. Recognize and accommodate differences in communication styles.
6. Demonstrate behaviors that facilitate effective listening (e.g., silent listening, questioning, paraphrasing, empathizing, and supporting).
7. Maintain a professional and supportive relationship that allows for both supervisee and supervisor growth.
8. Apply research on supervision in developing supervisory relationships and in analyzing supervisor and supervisee behaviors.
9. Conduct a supervisor self-assessment to identify strengths as well as areas that need improvement (e.g., interpersonal communication).
10. Use appropriate conflict resolution strategies.

III. Development of the Supervisee's Critical Thinking and Problem-Solving Skills

A. Knowledge Required

1. Understand methods of collecting data to analyze the clinical and supervisory processes.
2. Understand how data can be used to facilitate change in client, clinician, and/or supervisory behaviors.
3. Understand how communication style influences the supervisee's development of critical thinking and problem-solving skills.

4. Understand the use of self-evaluation to promote supervisee growth.

B. Skills Required

1. Assist the supervisee in using a variety of data collection procedures.
2. Assist the supervisee in objectively analyzing and interpreting the data obtained and in understanding how to use it for modification of intervention plans.
3. Assist the supervisee in identifying salient patterns in either clinician or client behavior that facilitate or hinder learning.
4. Use language that fosters independent thinking and assists the supervisee in recognizing and defining problems, and in developing solutions.
5. Assist the supervisee in determining whether the objectives for the client and/or the supervisory experience have been met.

IV. Development of the Supervisee's Clinical Competence in Assessment

A. Knowledge Required

1. Understand and demonstrate best practices, including the application of current research in speech-language pathology, for assessing clients with specific communication and swallowing disorders.
2. Understand principles and techniques for establishing an effective client–clinician relationship.
3. Understand assessment tools and techniques specific to the clients served.
4. Understand the principles of counseling when providing assessment results.
5. Understand and demonstrate alternative assessment procedures for linguistically diverse clients, including the use of interpreters and culture brokers.

B. Skills Required

1. Facilitate the supervisee's use of best practices in assessment, including the application of current research to the assessment process.
2. Facilitate the supervisee's use of verbal and nonverbal behaviors to establish an effective client–clinician relationship.
3. Assist the supervisee in selecting and using assessment tools and techniques specific to the clients served.
4. Assist the supervisee in providing rationales for the selected procedures.
5. Demonstrate how to integrate assessment findings and observations to diagnose and develop appropriate recommendations for intervention and/or management.
6. Provide instruction, modeling, and/or feedback in counseling clients and/or caregivers about assessment results and recommendations in a respectful and sensitive manner.
7. Facilitate the supervisee's ability to use alternative assessment procedures for linguistically diverse clients.

V. Development of the Supervisee's Clinical Competence in Intervention

A. Knowledge Required

1. Understand best practices, including the application of current research in speech-language pathology, for developing a treatment plan for and providing intervention to clients with specific communication and swallowing disorders.

2. Be familiar with intervention materials, procedures, and techniques that are evidence based.
3. Be familiar with methods of data collection to analyze client behaviors and performance.
4. Understand the role of counseling in the therapeutic process.
5. Know when and how to identify and use resources for intervention with linguistically diverse clients.

B. Skills Required

1. Assist the supervisee in developing and prioritizing appropriate treatment goals.
2. Facilitate the supervisee's consideration of evidence in selecting materials, procedures, and techniques, and in providing a rationale for their use.
3. Assist the supervisee in selecting and using a variety of clinical materials and techniques appropriate to the clients served, and in providing a rationale for their use.
4. Demonstrate the use of a variety of data collection procedures appropriate to the specific clinical situation.
5. Assist the supervisee in analyzing the data collected in order to reformulate goals, treatment plans, procedures, and techniques.
6. Facilitate supervisee's effective use of counseling to promote and facilitate change in client and/or caregiver behavior.
7. Facilitate the supervisee's use of alternative intervention materials or techniques for linguistically diverse clients.

VI. Supervisory Conferences or Meetings of Clinical Teaching Teams

A. Knowledge Required

1. Understand the importance of scheduling regular supervisory conferences and/or team meetings.
2. Understand the use of supervisory conferences to address salient issues relevant to the professional growth of both the supervisor and the supervisee.
3. Understand the need to involve the supervisee in jointly establishing the conference agenda (e.g., purpose, content, timing, and rationale).
4. Understand how to facilitate a joint discussion of clinical or supervisory issues.
5. Understand the characteristics of constructive feedback and the strategies for providing such feedback.
6. Understand the importance of data collection and analysis for evaluating the effectiveness of conferences and/or team meetings.
7. Demonstrate collaborative behaviors when functioning as part of a service delivery team.

B. Skills Required

1. Regularly schedule supervisory conferences and/or team meetings.
2. Facilitate planning of supervisory conference agendas in collaboration with the supervisee.
3. Select items for the conference based on saliency, accessibility of patterns for treatment, and the use of data that are appropriate for measuring the accomplishment of clinical and supervisory objectives.

4. Use active listening as well as verbal and nonverbal response behaviors that facilitate the supervisee's active participation in the conference.
5. Ability to use the type of questions that stimulate thinking and promote problem solving by the supervisee.
6. Provide feedback that is descriptive and objective rather than evaluative.
7. Use data collection to analyze the extent to which the content and dynamics of the conference are facilitating goal achievement, desired outcomes, and planned changes.
8. Assist the supervisee in collaborating and functioning effectively as a member of a service delivery team.

VII. Evaluating the Growth of the Supervisee Both as a Clinician and as a Professional

A. Knowledge Required

1. Recognize the significance of the supervisory role in clinical accountability to the clients served and to the growth of the supervisee.
2. Understand the evaluation process as a collaborative activity and facilitate the involvement of the supervisee in this process.
3. Understand the purposes and use of evaluation tools to measure the clinical and professional growth of the supervisee.
4. Understand the differences between subjective and objective aspects of evaluation.
5. Understand strategies that foster self-evaluation.

B. Skills Required

1. Use data collection methods that will assist in analyzing the relationship between client/supervisee behaviors and specific clinical outcomes.
2. Identify and/or develop and appropriately use evaluation tools that measure the clinical and professional growth of the supervisee.
3. Analyze data collected prior to formulating conclusions and evaluating the supervisee's clinical skills.
4. Provide verbal and written feedback that is descriptive and objective in a timely manner.
5. Assist the supervisee in describing and measuring his or her own progress and achievement.

VIII. Diversity (Ability, Race, Ethnicity, Gender, Age, Culture, Language, Class, Experience, and Education)

A. Knowledge Required

1. Understand how differences (e.g., race, culture, gender, age) may influence learning and behavioral styles and how to adjust supervisory style to meet the supervisee's needs.
2. Understand the role culture plays in the way individuals interact with those in positions of authority.
3. Consider cross-cultural differences in determining appropriate feedback mechanisms and modes.
4. Understand impact of assimilation and/or acculturation processes on a person's behavioral response style.
5. Understand impact of culture and language differences on clinician interactions with clients and/or family members.

B. Skills Required

1. Create a learning and work environment that uses the strengths and expertise of all participants.
2. Demonstrate empathy and concern for others as evidenced by behaviors such as active listening, asking questions, and facilitating open and honest communication.
3. Apply culturally appropriate methods for providing feedback to supervisees.
4. Know when to consult someone who can serve as a cultural mediator or advisor concerning effective strategies for culturally appropriate interactions with individuals (clients and supervisees) from specific backgrounds.
5. Demonstrate the effective use of interpreters, translators, and/or culture brokers as appropriate for clients from diverse backgrounds.

IX. The Development and Maintenance of Clinical and Supervisory Documentation

A. Knowledge Required

1. Understand the value of accurate and timely documentation.
2. Understand effective record-keeping systems and practices for clinically related interactions.
3. Understand current regulatory requirements for clinical documentation in different settings (e.g., health care, schools).
4. Be familiar with documentation formats used in different settings.

B. Skills Required

1. Facilitate the supervisee's ability to complete clinical documentation accurately and effectively, and in compliance with accrediting and regulatory agencies and third party funding sources.
2. Assist the supervisee in sharing information collaboratively while adhering to requirements for confidentiality (e.g., HIPAA, FERPA).
3. Assist the supervisee in maintaining documentation regarding supervisory interactions (e.g., Clinical Fellowship requirements).

X. Ethical, Regulatory, and Legal Requirements

A. Knowledge Required

1. Understand current standards for student supervision (Council on Academic Accreditation in Audiology and Speech-Language Pathology, 2004)
2. Understand current standards for mentoring clinical fellows (Council for Clinical Certification in Audiology and Speech-Language Pathology, 2005).
3. Understand current ASHA Code of Ethics rules, particularly regarding supervision, competence, delegation, representation of credentials, and interprofessional and intraprofessional relationships.
4. Understand current state licensure board requirements for supervision.
5. Understand state, national, and setting-specific requirements for confidentiality and privacy, billing, and documentation policies.

B. Skills Required

1. Adhere to all ASHA, state, and facility standards, regulations, and requirements for supervision.

2. Assist the supervisee in adhering to standards, regulations, and setting-specific requirements for documentation, billing, and protection of privacy and confidentiality.
3. Demonstrate ethical behaviors in both interprofessional and intraprofessional relationships.
4. Assist the supervisee in conforming with standards and regulations for professional conduct.
5. Assist the supervisee in developing strategies to remain current with standards and regulations throughout their professional careers.

XI. Principles of Mentoring

A. Knowledge Required

1. Understand the similarities and differences between supervision and mentoring.
2. Understand how the skill level of the supervisee influences the mentoring process (e.g., mentoring is more appropriate with individuals who are approaching the self-supervision stage).
3. Understand how to facilitate the professional and personal growth of supervisees.
4. Understand the key aspects of mentoring, including educating, modeling, consulting, coaching, encouraging, supporting, and counseling.

B. Skills Required

1. Model professional and personal behaviors necessary for maintenance and life-long development of professional competency.
2. Foster a mutually trusting relationship with the supervisee.
3. Communicate in a manner that provides support and encouragement.
4. Provide professional growth opportunities to the supervisee.

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- Council on Academic Accreditation in Audiology and Speech-Language Pathology. (2004). *Standards for accreditation of graduate education programs in audiology and speech-language pathology programs*. Available from www.asha.org/policy.

School Practicum Timelines and Guidelines

Spring Semester: First Year of Graduate School

- Meet with Practicum Coordinators and discuss practicum sites for the next year. This is usually announced and done by appointment and scheduled jointly with Mrs. Breen and Mrs. Givler in January.
- End of Spring Semester and beginning of first summer session, site assignments are made in the form of a letter.

Summer Session

- Each graduate student will need to have a current background check and finger prints. Remember that fingerprints are only good for one year.
- Please update your resume. This should be confined to 2 pages and include all your practicum experiences with the most current listed first. The resume should be given to your site supervisor prior to school start up.
- Some school districts want you to come in prior to school start up to obtain a picture ID and passwords for accessing school computers. In addition some may want to interview or have you go through some type of orientation or specific training. Please ask your site supervisor about this before just showing up!
- Contact your site supervisor and arrange when you will begin your "School Start-Up Experience". (**First 5 days of school**)

Between Summer Session and Fall Semester of Second Year

- Spend 5 days with site supervisor in the schools. The closer to the first days of schools the better to learn how to set up a schedule and learn the many duties that only occur at the beginning of a school year. If you are assigned to fall semester, you will continue on immediately after school start-up.
- The School Practicum Handbook that you will need for your student teaching experience is posted on the web. Supervisors will be sent a copy electronically.
- The forms that you will be using for the school practicum are in the handbook, including the practicum commitment that you will fill out with your site supervisor the first week of the semester, sign and return to the campus supervisor.
- Sign up for school practicum

During School Practicum

- Susan Givler will be doing 2 site visits at your assigned schools over the semester if you are full-time.
- Your site supervisor will be filling out ASHA's competency form at Mid Semester and at the End of the Semester. Both will need signatures from the student, supervisor and from the school practicum coordinator.
- The class will meet on Tuesdays 4:00-4:50 approximately 6 times during the semester. The first class is usually the first Tuesday of the semester. You may need to leave early from your practicum to attend.
- Good attendance is imperative during the school practicum. If you wish to attend any of the conferences coming up, make sure you have clearance from your site supervisor and discuss if this time can be made up.
- Spring break is taken when the school district to which you are assigned takes their spring break week and may not coincide with UC's Spring break. Please check the school calendar at your assigned site.

Spring Semester of Second Year

- During graduate seminar, the UC's Teacher's College will discuss Ohio Department of Education Licensure procedures and paperwork for the schools. She will bring the forms needed in order for you to apply for licensure. We strongly encourage all graduate students to apply for licensure in the schools even if they do not anticipate immediately working in the schools.
- Prior to graduation, after you have completed all the requirements for graduation and educational licensure, the university supervisor notifies the UC certification officer in the Teacher's College that you are eligible to receive your 5-year license as "School Speech-Language Pathologist".

This should be a fun and memorable experience. Enjoy!

Any question or concerns, please contact me at 271-5788 (H) or 558-8508 (O) or 260-5307 (Cell) 558-8500 (Fax) givlersk@ucmail.uc.edu

Susan Givler

Nondiscrimination Statement Language

Electronic Nondiscrimination Statement – Websites and Emailed Publications

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Section 504, ADA, Age Act Coordinator
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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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