NORTH CAROLINA CENTRAL UNIVERSITY

CLINICAL PRACTICUM HANDBOOK

Communication Disorders Program

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# Table of Contents

Introduction................................................................................................................................. 3  
Mission and Visions......................................................................................................................... 3  
Program Learning Outcomes: ......................................................................................................... 4  
Organizational Chart....................................................................................................................... 4  
Section 1: General Practicum Requirements .................................................................................. 5  
1.1 Prerequisites for Enrollment Clinical Practicum................................................................. 5  
1.2 Enrollment in Clinical Practicum........................................................................................... 5  
1.3 Immunizations, Certifications, and Insurance................................................................. 5  
1.4 Observation Hours ................................................................................................................... 6  
1.5 Background Checks & Drug Tests......................................................................................... 6  
Section 2: General Clinical Practicum Guidelines ....................................................................... 7  
2.1 Required clinical practicum clock hours............................................................................... 7  
2.2 Clinical Guidelines.................................................................................................................. 7  
2.3 Off-site Placement .................................................................................................................. 9  
Section 3: POLICIES AND PROCEDURES ............................................................................... 10  
3.1 Grade Policy........................................................................................................................... 10  
3.2 Summary of Clinical Practicum Grading Criteria............................................................. 11  
3.3 Academic Misconduct and Ethics....................................................................................... 12  
3.4 Student Disability Services................................................................................................... 12  
3.5 Confidentiality ....................................................................................................................... 12  
3.6 Health and Safety Guidelines/Universal Precautions ....................................................... 13  
3.7 Adverse Weather.................................................................................................................... 13  
3.8 Attendance Policy.................................................................................................................... 14  
3.9 Cancellation Policy ................................................................................................................ 14  
3.10 Behavior Management.......................................................................................................... 14  
3.11 Technology Services............................................................................................................. 15  
3.11 Immunizations....................................................................................................................... 15  
3.13 Certifications......................................................................................................................... 15  
3.14 HIPAA................................................................................................................................ 15  
3.15 Background Check................................................................................................................. 16  
3.16 Health Insurance................................................................................................................... 16
SECTION IV: CLINICAL PRACTICUM EXPECTATIONS/PROCEDURES ........................................... 18

4.1 Clinical Observations ........................................................................................................ 18
4.2 Clinical Practicum ............................................................................................................... 18
4.3 Clinical Contracts/Affiliations .......................................................................................... 19
4.4 Clinical Assignments .......................................................................................................... 19
4.5 Supervisor and Student Responsibilities .......................................................................... 20
4.6 Competency Levels/Student Ratings ............................................................................... 21
4.7 Grading .............................................................................................................................. 21
4.8 Academic Progress & Conferences ................................................................................. 22
4.9 Student Clinical Evaluation .............................................................................................. 22
4.10 Client Files ....................................................................................................................... 22
4.11 Diagnostic Tests and Materials ....................................................................................... 23
4.12 Graduate Student Clinical Files ...................................................................................... 23

APPENDICES .......................................................................................................................... 24

SAMPLE OF CLINICAL PROGRAMS .................................................................................. 25

CERTIFICATION AND LICENSURE REQUIREMENTS ......................................................... 28

ASHA CERTIFICATION STANDARDS .................................................................................. 28

NORTH CAROLINA BOARD OF EXAMINERS FOR SPEECH-LANGUAGE PATHOLOGISTS AND AUDIOLOGISTS (NCBOESLPA) ........................................................... 28

NC Department of Public Instruction (DPI) ........................................................................... 28

ASHA Code of Ethics .............................................................................................................. 29
Introduction

Welcome to North Carolina Central University and to the Speech and Hearing Clinic. We look forward to participating in your professional preparation in the field of Speech-Language Pathology. This handbook is designed to be a resource—one of many—to provide you with information related to the clinical aspects of our graduate program and to assist you in your pursuit of meeting standards for national certification and state licensure.

It is our responsibility to provide graduate clinicians the opportunity to obtain clinical experience in a supportive but professional environment. Although you are a graduate student, you will have responsibilities and expectations similar to those in professional settings. It is a privilege to serve clients and families in our clinical practicums. They afford our graduate students the opportunity to gain clinical experiences and you will be expected to interact with clients and supervisors in a professional manner at all times.

One of your responsibilities is to closely review this information and use it to guide you in your clinical experiences. You will be held accountable for the information in this handbook. If you have a concern or do not understand a policy/procedure, please contact your clinical supervisor or clinic director immediately. The clinical supervisors are willing and available to discuss your individual clinical cases with you. This clinical handbook and information you have obtained from your academic courses and other clinical experiences should serve as a starting point for your discussions.

Mission and Visions

School of Education Vision:

The School of Education at North Carolina Central University will become an international community of scholars who are culturally responsive educators and practitioners.

School of Education Mission:

The mission of the North Carolina Central University’s School of Education is to prepare educational professionals to serve and inspire excellence in teaching, administration, counseling, communication, technology and other related services. Central to our mission is the development of leaders who promote social justice and dedicate themselves to the well-being of a global community.

Communication Disorders Program Vision:

“Promoting Effective Communication in a Global Society”
**Program Learning Outcomes:**

The Communication Disorders Program will develop speech-language pathologists who:

1. Integrate, analyze, and synthesize evidenced-based information gathered from an array of sources during professional clinical practice at an independent level.
2. Implement culturally appropriate methods of assessment and intervention to diverse populations.
3. Professionally speak, write, and employ alternative forms of communication in formal and informal contexts.
4. Promote the profession in the areas of research, clinical practice, and advocacy through leadership roles and activities.

**Organizational Chart**

- Chair, Department of Allied Professions
- Program Director, Communication Disorders
  - Administrative Assistant
  - Clinical Faculty
  - Academic Faculty
Section 1: General Practicum Requirements

1.1 Prerequisites for Enrollment Clinical Practicum

1.1.1 All students who intend to enroll in EDSH 5790 Practicum in Speech-Language Pathology must satisfactorily meet the following minimum requirements:
   a) A bachelor’s degree from an accredited university
   b) Completion of the following prerequisite coursework or approved equivalents: Anatomy & Physiology, Phonetics, Speech and Hearing Science, Speech and Language Development, and Introduction to Audiology.
   c) At least 25 hours of clinical observation of ASHA certified speech-language pathologists. Appropriate documentation of the observation hours must be filed in the student’s clinical folder prior to enrollment.
   d) Submission of a criminal record/background check.

1.2 Enrollment in Clinical Practicum

1.2.1 Students should enroll in EDSH 5790 Practicum in Speech-Language Pathology each semester they earn client contact hours and must enroll in EDSH 5790 continuously throughout their graduate program.

1.2.2 Students are required to enroll in a minimum of 6 cumulative semester hours of EDSH 5790 and earn a grade of "B" or better in order to meet graduation requirements.

1.2.3 Students are required to attend practicum class generally held on Wednesday afternoons. The class is designed to provide information regarding clinical services and facilitate clinical and professional skills. Students who have off-site clinical practicum assignments which conflict with the course should notify the instructor.

1.2.4 Clinic assignments will be made based on successful completion of graduate courses, grade point average of 3.0 in major courses, recommendation by faculty advisor and demonstration of clinic policies established by the Communication Disorders Program. A student’s clinical placement and/or assigned caseload may vary from semester to semester. The program cannot guarantee a specific clinical placement site or a number of clinical hours.

1.2.5 Students enrolling in EDSH 5790 are required to read and follow ASHA’s and NCBOESLPA’s Code of Ethics.

1.2.6 HIPAA training is required.

1.2.7 Students enrolled in clinical practicum are required to pay a clinic fee by the program’s established deadline. Students who do not pay the clinic fee may not receive a practicum placement. Financial concerns should be directed to the Clinic Coordinator or Program Director.

1.3 Immunizations, Certifications, and Insurance

1.3.1 Proof of immunization must be submitted and cleared through the student health services prior to admittance in the program. Students must provide documentation of their health status and keep it updated on an annual basis while enrolled in the graduate program. Additional immunization and/or proof of immunization may be required prior to
beginning clinical practicum at various sites. In addition, some external sites require a current physical examination (within the past 12 months). Students will be notified of such requirements.

1.3.2 Students must report known exposure to contagious diseases within the 6 months prior to and during assigned practicum to their immediate clinic supervisor(s).

1.3.3 Proof of health insurance or waiver must be presented to Student Health Services at the time of enrollment in the program. In addition, documentation of this coverage is required by a number of external practicum sites and must be provided by the student prior to beginning placement at these sites. A copy of your card will be kept in your clinical file as well as a copy provided to your clinical affiliation (off-site) supervisor.

1.3.3 Students are responsible to maintain copies of all documentation.

1.4 Observation Hours

1.4.1 A total of 25 observation hours are required before enrolling in the clinical practicum course. Observations must be of a licensed Speech Pathologist holding CCC’s from ASHA. Hours obtained should span to include various settings such as schools, hospitals, nursing homes and home health settings.

1.4.2 This requirement should be fulfilled by the end of the first semester in the program. A delay in meeting this requirement may extend a student’s enrollment in the graduate program.

1.4.3 Permission to observe must be obtained prior to observing in the clinic. The clinic instructor for the observation course will coordinate observations to be completed with outside agencies. Clinical observation report forms are available on Blackboard.

1.5 Background Checks & Drug Tests

1.5.1 All admitted students will be subject to a comprehensive criminal background check. Students must satisfactorily complete a criminal background check before enrolling in clinical practicum. NCCU as well as many external clinical practicum sites require proof of a criminal background check. External clinical sites such as hospitals and school settings may require students to complete an additional criminal background check in order to participate in clinical practicum at that site. Students who have concerns should contact the Program Director upon acceptance to the graduate program and prior to enrolling in clinical practicum.

1.5.2 External clinical sites may require students to complete drug testing prior to and during their clinical practicum experience.
Section 2: General Clinical Practicum Guidelines

2.1 Required clinical practicum clock hours

2.1.1 Each student must complete a minimum of 475 clock hours of supervised clinical experience in the practice of speech-language pathology in order to meet the requirements for graduation. Twenty-five hours must be spent in clinical observation and a minimum of 450 hours must be spent in direct client/patient contact. Please note that the CD Program requires higher standards in some areas, including more clock hours, than the minimums stated in the ASHA guidelines. It is expected that students will exceed the minimum 475 clinical clock hours required.

2.1.2 A minimum of 425 of the required 475 clock hours of clinical practicum must be completed at the graduate level. A maximum of 50 clock hours obtained at the undergraduate level or another graduate program from an accredited university under the supervision of a qualified clinical supervisor may be used to satisfy the remainder of the requirement.

2.1.3 Only direct contact time with the client or the client’s family in assessment, management and/or counseling can be counted toward a student’s total clinical hours.

2.1.4 All hours must be obtained under the direct supervision of a qualified clinical supervisor who holds current ASHA certification (throughout duration of supervision).

2.1.5 Clinical practicum experiences must include client populations across the lifespan and from culturally/linguistically diverse backgrounds.

2.1.6 Clinical practicum experiences must include client populations with various types and severities of communication disorders, differences, and disabilities.

2.1.7 A minimum of 50 clinical clock hours must be obtained in at least three distinct clinical settings.

2.1.8 It is expected that students will exceed the minimum 475 clinical clock hours required.

2.1.9 Specific knowledge and skills must be demonstrated in the following nine areas (“BIG 9”):

- Articulation
- Fluency
- Voice and resonance (respiration and phonation)
- Receptive and expressive language
- Hearing, including impact on speech and language
- Swallowing
- Cognitive aspects of communication
- Social aspects of communication
- Communication modalities

2.2 Clinical Guidelines

2.2.1 The NCCU Speech, Language and Hearing Clinic provide speech-language and hearing services to the community. Referral sources include public and private agencies, speech-language pathologists in private practice, current and former clients, family and friends. In keeping with our commitment to excellence, professionalism and service, it is essential
that students who are enrolled in clinical practicum accept and provide service to clients the duration of the semester as assigned.

2.2.2 Special cases of students who incur severe illnesses, family tragedies and deaths (immediate family) will be considered at the discretion of the faculty and staff. However, students who appeal for release from any clinic practicum assignment must provide documentation in support of their request. The appeal and supporting documentation will be reviewed by faculty/staff for determination of release.

2.2.3 **Any student who unilaterally drops from clinical practicum after his/her practicum caseload has been assigned, will not be reassigned clients the remainder of the semester.**

2.2.4 Students enrolled in clinical practicum are expected to be available for clinic hours whenever they are not scheduled for courses. Students are expected to be available and flexible to obtain clock hours in the clinic. **Note:** Availability determines the rate at which a student is able to obtain clinical clock hours. A decrease in availability may impact the total clock hours a student may obtain in a semester. Thus, a delay in completing the clinical clock hour requirement may occur and a student’s graduate program may be extended.

2.2.5 The following guidelines are the minimum expectations of all students enrolled in Clinical Practicum in the NCCU Communication Disorders Program:

a. **Professionalism**
   i. Maintain professionalism at all times when interacting with clients, families, supervisors, professors and with each other. This includes speech, dress (see dress code), timeliness, organization, and attitude.
   ii. Be prompt, prepared and organized for each diagnostic or treatment session conducted.
   iii. Arrive at clinic at least 15 minutes prior to the beginning of the session; however, your clinic supervisor may require you to arrive earlier.
   iv. Arrange a consultation meeting with your supervisor prior to the therapy session if necessary.

b. **Reports**
   i. Diagnostic plans and lesson plans are due by Thursday at 5:00 p.m., prior to the week in which the plans will be implemented.
   ii. SOAP notes are to be written weekly. Include documentation of the progress and performance of both treatment sessions and are due by Thursday at 5:00 p.m.
   iii. Once an evaluation is completed, first evaluation report draft due within 72 hours. It is to be proofread and edited for spelling, grammar, and punctuation before submitting.
   iv. Do not rely on spelling and grammar checks on computer programs.
   v. The second draft of all plans, notes and reports are due back to the supervisor with the corrections no later than 48 hours after it was returned to you.

c. **Forms/Files**
   i. Keep copies of all forms needed for clinic use while in the department (excluding test protocols). Student should be aware of the location of clinical forms including Blackboard and the clinic handbook.
   ii. Review all clinic policies and procedures such as HIPAA during initial meetings with clients.
iii. The following forms are to be kept in the confidential file in the main office at all times:
   a) Diagnostic reports
   b) Treatment plans
   c) Progress notes
   d) Case history
   e) Test protocols
   f) SOAP notes
   g) Other original documents

d. Client files are audited at the midterm and final grading periods and must be complete prior to grades and hours being submitted and signed. A grade of “C” or lower will be earned by the student that does not comply with documentation requirements and clinical hours earned during that semester will not be signed by that supervisor.

e. Client/family confidentiality is an absolute requirement and priority.

f. The student clinician is responsible for maintenance of the client file including the proper order of records and their contents during the semester services are provided.

g. It is recommended that students develop a “clinic kit” which contains a variety of clinical materials for assessment and treatment.

2.3 Off-site Placement

2.3.1 A student’s clinical performance will be evaluated to determine eligibility for off-site placement. Evaluation of performance is based upon academic performance and demonstration of specific clinical skills in the following areas: related professional skills; diagnostics, therapy planning, therapy documentation, administrative skills and other related areas.

2.3.2 Student clinicians will be supervised by a minimum of three faculty supervisors prior to off-site clinical practicum placement.

2.3.3 A minimum of 115 clock hours (in-house clinical practicum) is required before being considered for off-site placement. However, this is not the only requirement and does not guarantee a student will receive an off-site clinic placement.

2.3.4 Students re-entering the program after a year will be required to complete at minimum one semester of in-house clinical rotation with at minimum two clinical supervisors.

2.3.5 The off-site coordinator determines off-site placements. Students will not contact supervisors without permission to pre-determine future sites. Off-site placements will not be negotiated between supervisors and students. A committee consisting of the Program Director, the in-house coordinator, and the off-site coordinator will consider objective and subjective reasons for the adjustment of this policy.

2.3.6 Students may suggest new clinical practicum sites; however, this does not mean that the site will be approved or that the student will be placed at the suggested site.

2.3.7 Supervisor/Student agreements are due within one week of the placement. This is a written commitment between the student and the clinical practicum site.

2.3.8 Off-site clinical placements may require travel in order to provide students with a variety of clinical experiences. The availability of off-site clinical practicums necessitates utilization of facilities at an extended distance (generally less than a 2 hour drive time).
Please be prepared to travel when necessary. Most students, at some point, will drive a long distance to a site. Every effort is made to be fair and equitable. Students are responsible for providing their own transportation to and from assigned practicum sites.

2.3.9 Students enrolled in clinical practicum are expected to be familiar with and practice universal precautions. Students should also determine specific precautions and regulations for each clinical site they are assigned to including the policy regarding immunizations. Most sites require a copy of your immunization record. Typical requirements include proof of tests for the Hepatitis B virus and tuberculosis as well as cardiopulmonary resuscitation (CPR). Students should plan accordingly to meet the requirements for each assigned practicum site prior to beginning of clinical rotation. This is required for the protection of the student and the clients served.

2.3.10 Students must follow the rules and regulations of the clinical practicum sites. Follow the dress code but never appear below standard as set forth by the NCCU Speech and Hearing Clinic guidelines. This also includes the calendar schedule for the site. For example, if the practicum site does not have a fall break, then the student does not have a fall break. Students must attend as scheduled regardless of the university’s schedule. Students must adhere to the practicum sites’ time schedule. Students cannot request to leave earlier than the assigned schedule (during the day or during the semester).

2.3.11 Off-site clinical practicum sites are generally 4-5 days a week. Students cannot reduce their hours or days. If there are any concerns regarding the schedule, please contact the Off-Site Coordinator in an effort to properly review the circumstances. Students should understand that the reduction of days may increase their stay in the program past their anticipated graduation date.

Section 3: POLICIES AND PROCEDURES

3.1 Grade Policy

3.1.1 The faculty and professional staff of the Communication Disorders Program have the responsibility of determining a student’s qualifications to practice as a speech-language pathologist. Students must be able to demonstrate proficiency in managing relationship variables and be able to create a facilitating treatment climate. Personal integrity, initiative, motivation, and a professional attitude are essential attributes of competent and professional speech-language pathologists. Therefore, while the grading of written, oral and technical skills represents the basic means of evaluating students’ performance, the additional factors cited above will also be considered in determining the final grade earned in a practicum course. The additional qualities are minimal requirements for which there are no substitutes.

3.1.2 University policy holds that a graduate student must maintain GPA of 3.0/4.0 across the course of study to qualify for graduation. Letter grades are awarded for completed courses.

3.1.3 Graduate students enrolled in clinical practicum will be evaluated by supervisors using the Student Clinical Evaluation Form. Overall composite scores earned from clinical experiences for the semester will be averaged and a grade assigned accordingly. Grades in the practicum will be entered in the Banner system by a Communication Disorders
Program faculty member following consultation with each of the student’s clinical supervisors for that semester. Graduate students are expected to earn a grade of B or higher in all clinical courses including off-site experiences.

3.1.4 Students’ earning a grade of C by an off-site supervisor is an indication of performance that is below standard and will be reviewed by in-house faculty and administration.

3.1.5 If a student earns a grade of “C” for any semester of the practicum, the student will be placed on probation. Client contact hours obtained the semester the “C” was earned will not count towards the ASHA licensing or Program requirements.

3.1.6 The Grade of I: The grade of “I” is assigned at the discretion of the instructor when a student who is otherwise passing (completed 75% of course work) has not due to circumstances beyond his/her control, completed all the work in the course. The missing work must be completed according to the written and signed agreement between the instructor and the student within the deadline set by the instructor, not to exceed one year from the end of the semester in which the “I” was assigned. The signed written agreement must be filed in the office of the department chair or dean and a copy must also be placed in the instructor’s file at the same time that final grades are due. If the “I” is not removed during the specified time, it will automatically turn into an F or NP.

3.1.7 Students who earn less than 30 hours of clinical practicum in a semester may receive a grade of “I” in EDSH 5790 at the discretion of the instructor. A student who has an “I” should not enroll in EDSH 5790 the following semester for course credit until the requirements have been meet to satisfy the incomplete grade. If a student receives a grade of “I” in EDSH 5790, the student must notify his or her advisor before the add/drop period ends for the subsequent semester. Failure to do so may result in a student not having the six credit hours of EDSH 5790 needed for graduation.

3.1.8 FolioTek elements will be different starting with students who will not graduate by the 2014 Standard Change date of Sept 1, 2014.

3.2 Summary of Clinical Practicum Grading Criteria

3.2.1 The grading scale is included in the student clinical evaluation(s). The student clinical evaluation(s) includes course requirements as well as application of knowledge and skills in the clinical setting.

Supervised Clinical Experience Rating Scale (KASA: Skills Outcomes)

<table>
<thead>
<tr>
<th>Points</th>
<th>Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>The student demonstrated knowledge and skills in this area at an independent level of clinical competency.</td>
</tr>
<tr>
<td>2</td>
<td>The student demonstrated knowledge and skills in this area at an adequate but not yet independent level of competency.</td>
</tr>
<tr>
<td>1</td>
<td>The student demonstrated academic knowledge in this area, with emerging clinical skills in this area.</td>
</tr>
<tr>
<td>0</td>
<td>The student did not demonstrate any academic knowledge or clinical skill in this area.</td>
</tr>
</tbody>
</table>
Clinical Practicum Grading Scale

<table>
<thead>
<tr>
<th>Student Evaluation(s) Overall Composite</th>
<th>Grade</th>
<th>KASA</th>
<th>University Grade Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.5-3.0</td>
<td>A</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>2.0 – 2.49</td>
<td>B</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>1.5 – 1.9</td>
<td>C</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>&lt; 1.5</td>
<td>F</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

3.3 Academic Misconduct and Ethics

3.3.1 In keeping with North Carolina Central University's policy on Academic Integrity found in the Academic Regulations manual, students are expected to be the sole contributor to work bearing their name, except where group projects have been assigned. Students are expected to follow the North Carolina Central University Academic Honor Code, the SOE and CDP Graduate Handbooks, as well as the course policies established by each instructor.

3.3.2 Students enrolled in clinical practicum are required to read, understand, and follow ASHA's and the N.C. Board of Examiners for Speech and Language Pathologists and Audiologists.

3.4 Student Disability Services

Students with disabilities (physical, learning, psychological, chronic medical, etc.) who would like to request accommodations and services are required to register (preferably during the first 2 weeks) with the Office of Student Disability Services in Suite G20 in the Student Services Building. Please contact Kesha Lee, Director at (919)530-6325 or email studentdisabilityservices@nccu.edu. If you are already registered with the office, you are required to return to the office each semester to review your information and receive updated accommodations.

3.5 Confidentiality

Client cases may be utilized for teaching and service purposes. Faculty/supervisors practice under the auspices of HIPAA and ASHA Code of Ethics and are therefore bound to protect the client’s confidentiality. It is considered a breach of confidentiality to discuss an NCCU client with anyone who is not employed by or enrolled in the training program, unless we have written authorization from the client/parent to share information accordingly. The boundary ends with NCCU faculty, supervisors and students.
3.6 Health and Safety Guidelines/Universal Precautions

3.6.1 Graduate clinicians should be aware of the various evacuation routes, medical procedures and other emergency procedures for the program and building. Plans are located on the bulletin boards in hallways of the clinic and should be thoroughly read prior to initiating practicum.

3.6.2 In case of an emergency the graduate clinician should:
- Immediately notify the supervisor/faculty/staff member of the emergency.
- Follow the instruction of the faculty/staff member
- Graduate clinician asked to call for emergency assistance should dial 9-911 and follow instruction of the operator. Be prepared to provide the following information:
  a. Nature of the emergency
  b. The exact name and location of the building
  c. The specific area of the building in which the emergency occurred

3.6.3 If a client has a disclosed medical condition requiring specific medical intervention methodology or treatment, the parent or caregiver must be present during all interactions with the client. Clinic personnel cannot perform medical intervention procedures, which are not within the scope of practice of a speech-language pathologist or audiologist.

3.6.4 Clinicians and clients should remain at home if they have a known contagious illness, fever, rash, or if they are experiencing diarrhea. Individuals should be free from fever and vomiting for 24 hours before returning to the clinic.

3.6.5 Clinicians and clients should exercise frequent hand washing using soap and/or antibacterial products to minimize the spread of infection.

3.6.6 All persons coming in contact with blood must use latex gloves. Proper protocol for handling blood-borne pathogens must be followed and all precautions taken.

3.6.7 Should a client have a toileting accident and his/her clothes must be changed, latex gloves must be worn by the clinician providing the change. Soiled clothes must be properly disposed. Hand washing protocol should be followed after removing latex gloves.

3.6.8 Electrical outlets should be covered when not in use. Caution: Children should not be allowed to plug in equipment or appliances or remove plugs from outlets.

3.6.9 Clinicians should be aware of the dangers of choking and proper protocol for the Heimlich maneuver.

3.6.10 All incidents/accidents must be reported to administration utilizing the programs incident form.

3.7 Adverse Weather

In the event of adverse weather, the NCCU Speech and Hearing Clinic follow the opening and closing operational schedule of the Durham Public School System. All updates regarding status of operation will be announced through WTVD-11 and the NCCU website www.nccu.edu.
3.8 **Attendance Policy**

3.8.1 Graduate clinicians are expected to meet all clinic obligations and responsibilities except in the case of serious illness or emergency. In such case, the clinician must contact his/her supervisor(s) and the clinic coordinator. After notifying and discussing the situation with the supervisor, it is the clinician’s responsibility to contact the client(s). Any student missing practicum due to illness after two days must submit a physician’s letter to the clinic coordinator.

3.8.2 If a graduate clinician must cancel a client session for any other reason, he /she must contact his/her supervisor(s) and clinic coordinator prior to canceling client. Failure to do so will result in lowering of one letter grade for each day of occurrence.

3.9 **Cancellation Policy**

3.9.1 Graduate clinicians are to record client attendance in the client’s confidential file. All clients are to receive a copy of the attendance and cancellation policies. A copy of the signed policies should be placed in the client’s file.

3.9.2 Clients or responsible party should contact the graduate clinicians if they must cancel a session. The student is required to inform the clinic supervisor of the cancellation as soon as possible.

3.9.3 Clients will be discharged if they cancel repeatedly or do not show for their appointments.

3.9.4 Clients under the age of 18 are to be accompanied by an adult. Parents, caretakers and spouses are asked to wait in the lobby during clinic sessions and be available by cell phone or may observe from an adjacent room if available. Note: Clinicians are not required to make up sessions cancelled by clients.

3.10 **Behavior Management**

3.10.1 It is the goal of all NCCU clinical programs to ensure the physical and emotional wellbeing of the clients served in the program. In an effort to minimize the occurrence of problematic behaviors by maintaining low client-clinician ratio and by providing activities that are appropriate to the client’s interests and developmental levels.

3.10.2 Specific guidelines are:

a) Positive approaches to management will be the strategies for first preference, including the use of positive suggestions, redirecting and praise for appropriate behavior.

b) Time-out procedures may be utilized to manage problem behaviors if the approaches above are ineffective. This may involve sitting in a designated time-out place in the classroom or outside of the classroom. Time spent in time-out will be monitored and limited to no more than one minute for each year of the child’s age.
c) No client will be subjected to verbally abusive or degrading comments from the program staff.

d) No physical discipline will be tolerated. A client may be restrained by a trained adult if is deemed necessary to control the client’s behavior to decrease risk to self and others. Removal of the client to another room under adult supervision may also be necessary.

e) Behavior management practices of the clinical programs for clients will be reviewed with parents/caretakers of each client in the program.

f) Behavior management plans may be warranted and will be developed at the discretion of the clinical staff and appropriate professionals (behavioral specialists). Parents/caretakers will be involved in this process.

g) If the clinical faculty/staff determine that behavior is unable to be managed and this behavior presents serious risk of injury to the clients, others enrolled in the program, and/or faculty/staff, then the client may be discharged from the program. In such case, the program supervisor will work with the family and other service providers to locate appropriate intervention resources for the client.

3.11 Technology Services

All students enrolled at the university have an email address and access to e-mail on/offcampus. The NCCU e-mail server can be accessed at http://www.nccu.edu. The Communication Disorders Program web page is also available at http://www.nccu.edu/soe/departments/alliedprofessions/programs/commdis/commdis-index.cfm. All pertinent information regarding clinic can be accessed from that page. Student technology needs can be supported by contacting Information Technology services at 560-7676.

3.11 Immunizations

Proof of immunization must be submitted and cleared through the student health services prior to admittance in the program. Additional immunization and/or proof of immunization may be required prior to beginning clinical practicum at various sites. Students will be notified of such requirements.

3.13 Certifications

In preparation for in-house and off-site practicum placements, students may be required to complete and provide evidence of CPR (American Heart Association), Blood Pathogen and HIPAA (NCCU Communication Disorders Program) trainings.

3.14 HIPAA

All students entering clinical practicum are required to complete training in Health Insurance Portability and Accountability Act’s (HIPAA) Privacy Rule. This training and evidence of
completion must be received by the clinical coordinator prior to engaging in clinical practicum. All clients are to receive the NCCU Speech, Language and Hearing Clinic’s HIPAA disclosure. A signed copy of receipt of this disclosure is to be placed in the client’s confidential file.

3.15 Background Check

3.15.1 Each student is required by the Communication Disorders Program to have a criminal background check. The process for obtaining the background check begins upon indication of attendance to North Carolina Central University Graduate Program in Communication Disorders. Students are required to follow procedures for certifiedbackground.com to obtain the background check. Once background check is obtained, students are required to submit the complete report to the Program Director and Clinic Coordinator of the Communication Disorders Program. A complete report indicating student’s status is required.

3.15.2 Note: A complete background check report with a status of “cleared” is required before the student may engage in clinical practicum. Therefore, this process must be completed prior to the student’s second semester in the graduate program. If a conviction is revealed, the student will be advised of the finding and counseled as to the nature of the offense and possible alternatives regarding program completion and potential for obtaining licensure.

3.16 Health Insurance

Proof of health insurance or waiver must be presented to student health services at the time of enrollment in the program. A copy of your card will be kept in your clinical file as well as a copy provided to your clinical affiliation (off-site) supervisor.

3.17 Student Professional Liability Insurance

Professional liability insurance is provided for students enrolled in clinical practicum by the University and Communication Disorders Program. Students may opt to purchase additional coverage through Marsh Affinity Group, 866-795-9340 or www.ashainsurance.com.

3.18 Name Badges

Must be secured through clinic coordinator and worn with name visible on left (over the heart). Name badge must be worn during all sessions in the clinic (no exceptions).
3.19 Professional Behavior

3.19.1 The Communication Disorders Program Speech and Hearing Clinic provides services to the University faculty and staff and community. It is expected that graduate clinicians will conduct themselves in a professional manner in their service to clients, parents, colleagues and other professionals.

3.19.2 During clinic practicum experiences at the University and off-site externships, students represent the University and the department. Therefore, students should be well groomed, thoroughly prepared for all clinical sessions, maintain a healthy lifestyle, keep current in professional issues and actively participate in professional development and organizations.

3.19.3 Graduate clinicians must attend all scheduled orientation meetings for various clinical programs for which they have been assigned. Students who do not attend the orientation meeting for their specific assignments will not be permitted to begin clinical practicum as scheduled.

3.20 Professional Dress

3.20.1 Students must present themselves in a professional manner at all times when interacting with clients and their families, faculty and supervisors. This includes dressing in a manner that is judged to be professional and appropriate for the clinic setting. The following dress code is to be adhered to strictly.

3.20.2 Unacceptable types of dress:

- Hats, bandanas, scarves are to be worn on the head
- Tattoos
- Jeans
- Halter, tube, cropped, spaghetti strap, sheer and low-cut tops.
- Bare midriffs.
- Underwear (visible underneath clothing).
- Flip-flops, sneakers/tennis shoes, or hiking boots.
- Shorts, skorts or miniskirts.
- Warm-up suits, jogging pants or other athletic wear
- Dirty, soiled, frayed, raveled and excessively worn clothing
- Hair should be neat.
- Distracting jewelry that small children may pull on (i.e. large hoop earrings).
- Excessively long fingernails.
- Perfume or cologne (clients may have allergies and sensitive to scents)
- Tight fitting or loose sagging clothing.
3.20.3 Acceptable types of dress (Note-The supervisor responsible for the case reserves the right to make final decisions concerning appropriate dress.):

1) Dresses
2) Slacks
3) Coordinated skirts and jackets (suits)
4) Collared and button down shirts
5) Short and long-sleeved shirts/tops
6) Closed-toe shoes
7) Sandals and low heeled shoes

SECTION IV: CLINICAL PRACTICUM EXPECTATIONS/PROCEDURES

4.1 Clinical Observations

4.1.1 All first-year students in the Communication Disorders Program are required to observe a minimum of 25 hours of clinical services being rendered by certified speech-language pathologists. Clinical observation is offered as a course and allows the students to observe diagnostics and treatment of children and adults with speech-language disorders. Through this course students gain the opportunity to become familiar with the interactive process of evaluation, treatment, therapy planning and implementation, client-clinician interaction and other service techniques.

4.1.2 Students’ clinical observation sites are coordinated by the course instructor and clinical faculty. An official form for documenting observations is provided and is to be utilized by students enrolled in the course.

4.2 Clinical Practicum

4.2.1 The clinical practicum experience is of vital importance and provides the opportunity for students to practice under the supervision of certified speech-language pathologists and audiologists. It is an opportunity for the graduate student clinician to apply knowledge and skills that have been acquired in coursework.

4.2.2 Students participate in guided learning experiences to ensure the development of specific competencies through active clinical practice. Student clinicians are expected to demonstrate improved competency as they progress through the program. Experiences are provided across the lifespan with adult, adolescent, pediatric and school-aged populations. Practicum placements are arranged in various settings to include the following: community clinics, home health, hospitals, nursing homes, private practice, rehabilitative centers and public schools (includes charter schools).
4.2.3 Clinical clock hours obtained during assigned experiences will be applied toward clock hour requirement (375 hours) by ASHA. All clinical practicum experiences are arranged by the clinical coordinator(s).

4.3 Clinical Contracts/Affiliations

All sites providing graduate clinicians opportunity to gain clinical experience must enter into a contract agreement with the North Carolina Central University Communication Disorders Program. Clinical affiliations are an extension of the Communication Disorders clinical practicum program. Off-site practicum is designed to allow students the opportunity to gain exposure while obtaining additional clinical practice in a specific setting on a full-time basis.

4.4 Clinical Assignments

4.4.1 Graduate clinicians are assigned to a variety of practicum experiences. All sites are to:

- Provide clinical and professional experiences
- Develop specific clinical/professional skills
- Provide client contact hours (consistent with requirements indicated by ASHA, NC Board of Examiner’s for SLP/A and the Communication Disorders Program)

4.4.2 Practicum (On-site): The clinic coordinators are responsible for making all clinical assignments. There are many factors considered when making placements including the following: student performance, clock hour need, previous practicum experiences, student interest in specialty tracts and clinics, location and overall scheduling. There are an array of clinical practicum sites and settings. Student’s clinical practicum experiences will vary among settings and supervisors. All students enrolled in in-house practicum are required to: have been supervised by a minimum of three supervisors before submitting an off-site justification request, obtained 115 clock hours, completed treatment (group and individual) and diagnostics across the lifespan and deemed proficient by the clinical and academic faculty team.

4.4.3 Clinical Affiliations (Off-Site): Students are to submit an Off-Site Justification form to the Off-Site Coordinator during midterm of their second semester of in-house clinical practicum. Students will be notified of their clinical affiliation placement during the final evaluation period. All contact with practicum sites is to be made by the Coordinator of Off-Site Placements. Before a student can be placed at a site, a Student Affiliation Agreement/Contract must be established. The timeline for student’s to begin practicum varies from site to site. Depending on the site, there may be other requirements that have to be completed by student interns prior to the initiation of practicum (i.e. background checks, interviews, orientation, resume, other trainings, etc.). The Off-Site Coordinator will notify students of the specific requirements once contact has been made with the supervising speech-language pathologist of that site.

4.4.3 Note: Individual requests for a specific practicum placement/site will not be the determining factor in assigning placements (in-house and off-site). Once all clinical
practicum assignments/site assignments have been made and/or contracts completed, no changes in the assignment/placement will be made except in extreme circumstances subject to approval of the Clinic Coordinator, Program Director, and administration.

4.4.4 Students re-entering the program after a year will be required to complete at minimum one semester of in-house clinical rotation with at minimum two clinical supervisors.

4.5 Supervisor and Student Responsibilities

4.5.1 Supervisor responsibilities:
- Provide documentation of certifications (ASHA and NC Board of Examiner’s, SLP and A)
- Provide supervision that is effective and objective
- Observe treatment sessions (25%) and diagnostic sessions (50%)
- Provide clinical orientation for student to include his/her responsibilities and clinical expectations.
- Provide student oral and written feedback (within each four week period)
- Provide student written feedback regarding individual treatment and diagnostic sessions utilizing the Observation of Treatment/Diagnostic Session Checklist
- Electronically complete and approve the following via Foliotek on each student supervised per term:
  i. Midterm and final student clinical evaluations.
  ii. Supervised Clinical Experience (verify clinical clock hours)
  iii. NCCU Knowledge and Skills Acquisition Summary
- Notify the Clinical faculty and administration of any serious deficits noted in the ability of the student to progress toward achieving standards and to assist them in the remediation of the deficiencies.

4.5.2 Student responsibilities:
- Attend clinical orientation and adhere to specific information shared regarding clinical assignments.
- Meet with respective supervisor of the assigned experience prior to initiating practicum.
- Present oneself in a professional manner (dress to include student identification badge).
- Be on time and prepared for each clinical session. Preparation will require reading assigned materials, learning to administer various diagnostic tests, planning, developing goals and objectives, etc.
- Provide treatment in a manner that is culturally sensitive.
- Seek Approval from supervisor on all major decisions regarding service delivery to clients.
- Document client performance and after each session and attendance.
- Notify clinical supervisor of any absences.
- Schedule midterm and final conferences with clinical supervisor(s) to gain feedback and review the practicum experience.
- Record all clock hours obtained and submit via Foliotek on the last day of the clinical
experience.
☐ Complete Summary of Clinical Experience and Clinical Supervisor Evaluation Form at the end of each clinical experience.
☐ Attain 50 hours of clinical experience in 3 distinct settings across all clinical experiences.
☐ Arrange additional meetings with supervisor as needed regarding clinical performance.

4.6 Competency Levels/Student Ratings

Students in clinical practicum are rated according to their level of clinical experience. Students are rated utilizing a 0-3 rating scale. Levels of clinical competency and ratings are indicated below.

☐ Semester I (Beginning Level) 0-65 clinical clock hours
☐ Semester II (Intermediate Level) 65-150 clinical clock hours
☐ Semester III & IV (Advanced Level) 150+ clinical clock hours

<table>
<thead>
<tr>
<th>Points</th>
<th>Criteria</th>
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<tbody>
<tr>
<td>3</td>
<td>The student demonstrated knowledge and skills in this area and an independent level of clinical competency.</td>
</tr>
<tr>
<td>2</td>
<td>The student demonstrated knowledge and skills in this area at an adequate level of clinical competency.</td>
</tr>
<tr>
<td>1</td>
<td>The student demonstrated academic knowledge in this area, with emerging clinical skills in this area.</td>
</tr>
<tr>
<td>0</td>
<td>The student did not demonstrate any academic knowledge or clinical skill in this area.</td>
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4.7 Grading

4.7.1 Students enrolled in clinical practicum course will receive a grade expressed as a letter. The Clinical Practicum Grading Scale should be referenced in determining the grade equivalents. The Clinical Practicum Grading Scale indicates the correspondence among overall composite score, letter grade, quality/grade points and KASA equivalent. Overall composite scores are assigned by the clinical faculty based on the final evaluation(s)
completed by the clinical supervisors via Foliotek. Students may access their individual evaluations at www.foliotek.com Note: Username and password required for access.

4.7.2 Students who earn less than 30 hours of approved clinical practicum experience during a semester may receive a grade of Incomplete at the discretion of the clinic supervisor.

4.8 Academic Progress & Conferences

4.8.1 If a student earns a “C” (1.9) or lower in a clinical practicum course, the corresponding quality points will be recorded on the transcript, but the student will not be allowed to count toward the required clinical clock hours. A student electing to withdraw from clinical practicum course must meet with their assigned academic advisor and complete the appropriate “withdrawal process” according to the Office of the Registrar. Graduation will be delayed and additional costs will be incurred.

4.8.2 Each student enrolled in clinical practicum is required to conference with Clinical Supervisor(s) at midterm and end of the semester. The student will be responsible for signing up for an individual conference (30-45 minute appt.). Available times and sign up sheets will be available and posted on the office door of the Clinical Supervisor. Each student should bring:
   a) completed Clinical Supervisor Evaluation Form
   b) a completed Self Evaluation Form and
   c) updated documentation of health insurance card.

4.8.3 The student should also:
   a) Confirm with the supervisor that the final evaluation has been submitted via Foliotek,
   b) have submitted clock hours via Foliotek,
   c) ensure that the clock hours have been electronically approved and signed by the clinical supervisor.

4.8.4 Students not prepared for scheduled final conference with supervisor will need to reschedule. All forms are accessible on the Blackboard and Foliotek websites. Failure to conference with supervisor at end of the semester for non-emergent reasons will result in a grade of “C” for the semester.

4.9 Student Clinical Evaluation

Students are evaluated by their respective supervisors at midterm and final. The Student Clinical Evaluation tool is utilized to assess student performance on clinical standards outlined by ASHA in regards to acquisition and demonstration of knowledge and skill. The student is rated on their performance in clinic and an overall composite score is achieved. This assessment is utilized to provide the student with constructive feedback that serves to facilitate student professional development and growth. The Student Clinical Evaluation can be accessed online at www.foliotek.com.

4.10 Client Files
4.10.1 All client files are kept in the clinic in a secure file room. To ensure confidentiality of client records, no documentation with client’s identifying information indicated is to leave the clinic. All reports must indicate client initials only while being drafted and/or corrected. Final report drafts must be approved for print on letterhead by the supervisor of the clinical experience. Approved final reports should have client names on them and must be filed in the client’s confidential folder immediately. Report copies utilized for models should have all identifying information removed or made illegible.

4.10.2 Any student committing a breach of client confidentiality (including removal and/or possession of client files outside the designated clinic area) will receive an “F” in clinic and be subject to further disciplinary action by the administrative faculty and staff.

4.10.3 Note: Every clinician is personally responsible for reading and abiding by the Code of Ethics of the American Speech-Language-Hearing Association. The ASHA Code of Ethics must be read prior to initial contact with a client and/or parent. This document is available online at www.asha.org.

4.11 Diagnostic Tests and Materials

4.11.1 Diagnostic tests and protocols are located in the DCD clinic, room 1043. All test materials are to remain within the confines of the clinic. All test manuals and materials are to be checked out and checked back in by 5pm daily.

4.11.2 Therapy materials are available for use and are located in Room 1042. Please follow universal precautions and sanitation guidelines upon returning toys to the shelves. Hand sanitizer and disinfecting wipes are available. Additional resources (professional books, journals, therapy materials) are available in the CMC library (located in the H.M. Michaux School of Education, 1st floor) and ATIPP Lending Library. Please adhere to lending/loan policy for use and return of materials.

4.12 Graduate Student Clinical Files

The Clinical Coordinators keep an individual clinical file on each student enrolled in practicum. Contents of this clinical file include: 1) Evidence of HIPAA training, 2) FERPA forms (elective), 3) Observation hours, 4) Certified Background Check, 5) Summaries of Clinical Experiences (clock hours), 6) Midterm and final evaluations, 7) Skills and Outcomes forms, 8) Grade sheets, 9) copy of insurance cards/medical information (optional), 10) additional supporting documents as needed regarding progress in clinical practicum. All files are kept in a secured filing cabinet within a designated office. Students may access their personal file upon request.
APPENDICES
SAMPLE OF CLINICAL PROGRAMS

Healthy Start Academy
Healthy Start Academy is a K-8 Charter School that is dedicated to a rigorous and challenging mathematical and scientific approach to learning. Within this approach, there is a commitment to the improvement of students’ oral and written communication skills. Foundational to the educational program is a keen awareness, understanding, and respect for multicultural issues both nationally and internationally (www.healthystartacademy.com). Graduate students in the Department of Communication Disorders at North Carolina Central University have the opportunity to provide speech-language services to children who need support in the areas of oral and written communication production and usage. As an “in-house” clinical placement, Healthy Start offers a thorough introduction to the Exceptional Children’s Program as well as an opportunity to experience the process of developing and following an Individual Education Plan.

Bilingual Clinic
The Bilingual Clinic is designed to provide assessment and intervention of communication disorders to preschoolers and school aged Spanish speaking clients. These clients are seen in individual and group treatment sessions. Students who have native to near native proficiency in Spanish or have a Bachelor’s Degree in Spanish are considered to participate in ¡HABLEMOS! or provide intervention to individual clients. ¡HABLEMOS! is a therapeutic preschool for Spanish-speaking children that may demonstrate speech and language delays in their native language.

Assistive Technology for Infants and Preschoolers Program (ATIPP)
The Assistive Technology for Infants and Preschoolers Project is an inclusive therapeutic preschool program for children two to five years of age. Assistive technology and augmentative communication systems are incorporated throughout the curriculum to support communication, learning and developmental needs of children from diverse backgrounds with diverse needs. Therapeutic play group and individual treatment sessions apply evidence based practice. Treatment goals support speech, language, pragmatic/social, development, preschool
learning, and literacy skills. ATIPP provides an in-house clinical training experience in AAC, early intervention and culturally responsive family centered service delivery.

**Augmentative and Alternative Communication (AAC)**

**Assessment and Consultation Clinic**

NCCU’s AAC Clinic provides assessment and consultative services to children and adults with complex communication needs requiring alternative modes of expression to support and/or compensate for oral and written communication needs. AAC services are further supported by ATIPP’s Lending Library, which provides an assortment of switches, AAC devices and adapted toys.

**Neurogenic Aphasia Group (NAG)**

NAG is an interaction group for adults with aphasia and other neurogenic conditions. Graduate student clinicians and adult participants will work together to achieve therapeutic goals. Group therapy will provide opportunities for communicative and social exchanges in a safe “speaker friendly” environment. By incorporating group therapy, clients are able to communicate, relate to one another socially, and continue their reintegration into the community.

**Sports Talk Program©**

Sports Talk is a program that provides collegiate athletes opportunities for development and enhancement of communication skills through speech, language and accent and dialect modification services.

**Accessible Therapy: Playing, Learning, And You (AT: PLAY)**

AT: PLAY is a preschool program established for children diagnosed with autism. The primary focus of the program is to develop social language skills and promote play. The program utilizes an integrated approach, incorporating the family systems and the child engagement models. AT:PLAY contains 60 minutes of group therapy/activities and 60 minutes of individual therapy. Children also gain exposure to a number of pre-academic skills. If a child has received prior speech language therapy, graduate student clinicians may utilize those goals to ensure generalization of skill.
SPECIALTY TRACKS

Culturally Responsive Early Intervention in Assistive Technology Training

(CREATT)

Culturally Responsive Early Intervention and Assistive Technology Training (CREATT) is an innovative graduate specialization track in speech-language pathology offered by NCCU’s Communication Disorders Program. CREATT provides coursework and practica experiences in early intervention (EI), augmentative and alternative communication and cultural and linguistic diversity. CREATT’s academic training and clinical practicum training are research driven and aligned with the expanding job requirements critical to effectively serve increasingly diverse and complex populations.

Graduates completing CREATT training receive a certificate of specialization in Augmentative and Alternative Communication and Cultural/Linguistic Diversity in Early Intervention.

La Conexion Bilingue/ The Bilingual Connection

Graduate student clinicians who speak native to near-native proficiency in Spanish are eligible to become specialists in the assessment and treatment of monolingual/bilingual children and adults. The track provides a combination of specialized coursework and practicum training to address the needs to serve Hispanic children and adults with communication disorders.
CERTIFICATION AND LICENSURE REQUIREMENTS

Students should note that NCCU Communication Disorders Program requires more clinical practicum hours than the minimum standards set by ASHA and the state of North Carolina. A student must meet the clinical practicum standards of the CD Program in order to fulfill the requirements for graduation and a master’s degree.

ASHA CERTIFICATION STANDARDS

Students who apply for the Certificate of Clinical Competence in Speech-language Pathology (CCC-SLP) prior to September 1, 2014 are evaluated against the 2005 Standards for Certification in Speech-Language Pathology. These standards can be found on the ASHA website at: http://www.asha.org/certification/slp_standards/.

Students who apply for the Certificate of Clinical Competence in Speech-language Pathology (CCC-SLP) on or after September 1, 2014 are evaluated against the 2014 Standards for Certification in Speech-Language Pathology. These standards can be found on the ASHA website at: http://www.asha.org/Certification/2014-Speech-Language-Pathology-Certification-Standards/.

NORTH CAROLINA BOARD OF EXAMINERS FOR SPEECH-LANGUAGE PATHOLOGISTS AND AUDIOLOGISTS (NCBOESLPA)

The (NCBOESLPA) is the state regulatory body over individuals offering speech and language pathology and audiology services to the public. Students should visit the website for the board (www.ncboeslpa.org) regarding the application process and a comprehensive discussion of the requirements for state licensure. Students should note that the NCBOESLPA requires the following minimal clinical practicum hours in each area as well as other requirements:

<table>
<thead>
<tr>
<th>Evaluation</th>
<th>Children</th>
<th>Adults</th>
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<tbody>
<tr>
<td>Speech</td>
<td>20 hrs</td>
<td>20 hrs</td>
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<tr>
<td>Language</td>
<td>20 hrs</td>
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<tr>
<td>Treatment</td>
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<tr>
<td>Speech</td>
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<tr>
<td>Language</td>
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NC Department of Public Instruction (DPI)

Effective July 1, 2011 the North Carolina State Board of Education will accept only a current valid state NCBOESLPA license as the qualifying credential for service in public schools. Once the speech-language pathologist has a NCBOESLPA license, they may apply to the Licensure Section of DPI.
ASHA Code of Ethics

Preamble

The preservation of the highest standards of integrity and ethical principles is vital to the responsible discharge of obligations by speech-language pathologists, audiologists, and speech, language, and hearing scientists. This Code of Ethics sets forth the fundamental principles and rules considered essential to this purpose.

Every individual who is (a) a member of the American Speech-Language-Hearing Association, whether certified or not, (b) a nonmember holding the Certificate of Clinical Competence from the Association, (c) an applicant for membership or certification, or (d) a Clinical Fellow seeking to fulfill standards for certification shall abide by this Code of Ethics.

Any violation of the spirit and purpose of this Code shall be considered unethical. Failure to specify any particular responsibility or practice in this Code of Ethics shall not be construed as denial of the existence of such responsibilities or practices.

The fundamentals of ethical conduct are described by Principles of Ethics and by Rules of Ethics as they relate to the responsibility to persons served, the public, speech-language pathologists, audiologists, and speech, language, and hearing scientists, and to the conduct of research and scholarly activities.

Principles of Ethics, aspirational and inspirational in nature, form the underlying moral basis for the Code of Ethics. Individuals shall observe these principles as affirmative obligations under all conditions of professional activity.

Rules of Ethics are specific statements of minimally acceptable professional conduct or of prohibitions and are applicable to all individuals.

Principle of Ethics I

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

Rules of Ethics

A. Individuals shall provide all services competently.

B. Individuals shall use every resource, including referral when appropriate, to ensure that high-quality service is provided.

C. Individuals shall not discriminate in the delivery of professional services or the conduct of research and scholarly activities on the basis of race or ethnicity, gender, gender identity/gender expression, age, religion, national origin, sexual orientation, or disability.
D. Individuals shall not misrepresent the credentials of assistants, technicians, support personnel, students, Clinical Fellows, or any others under their supervision, and they shall inform those they serve professionally of the name and professional credentials of persons providing services.

E. Individuals who hold the Certificate of Clinical Competence shall not delegate tasks that require the unique skills, knowledge, and judgment that are within the scope of their profession to assistants, technicians, support personnel, or any nonprofessionals over whom they have supervisory responsibility.

F. Individuals who hold the Certificate of Clinical Competence may delegate tasks related to provision of clinical services to assistants, technicians, support personnel, or any other persons only if those services are appropriately supervised, realizing that the responsibility for client welfare remains with the certified individual.

G. Individuals who hold the Certificate of Clinical Competence may delegate tasks related to provision of clinical services that require the unique skills, knowledge, and judgment that are within the scope of practice of their profession to students only if those services are appropriately supervised. The responsibility for client welfare remains with the certified individual.

H. Individuals shall fully inform the persons they serve of the nature and possible effects of services rendered and products dispensed, and they shall inform participants in research about the possible effects of their participation in research conducted.

I. Individuals shall evaluate the effectiveness of services rendered and of products dispensed, and they shall provide services or dispense products only when benefit can reasonably be expected.

J. Individuals shall not guarantee the results of any treatment or procedure, directly or by implication; however, they may make a reasonable statement of prognosis.

K. Individuals shall not provide clinical services solely by correspondence.

L. Individuals may practice by telecommunication (e.g., telehealth/e-health), where not prohibited by law.

M. Individuals shall adequately maintain and appropriately secure records of professional services rendered, research and scholarly activities conducted, and products dispensed, and they shall allow access to these records only when authorized or when required by law.

N. Individuals shall not reveal, without authorization, any professional or personal information about identified persons served professionally or identified participants involved in research and scholarly activities unless doing so is necessary to protect the welfare of the person or of the community or is otherwise required by law.

O. Individuals shall not charge for services not rendered, nor shall they misrepresent services rendered, products dispensed, or research and scholarly activities conducted.
P. Individuals shall enroll and include persons as participants in research or teaching demonstrations only if their participation is voluntary, without coercion, and with their informed consent.

Q. Individuals whose professional services are adversely affected by substance abuse or other health-related conditions shall seek professional assistance and, where appropriate, withdraw from the affected areas of practice.

R. Individuals shall not discontinue service to those they are serving without providing reasonable notice.

Principle of Ethics II

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

Rules of Ethics

A. Individuals shall engage in the provision of clinical services only when they hold the appropriate Certificate of Clinical Competence or when they are in the certification process and are supervised by an individual who holds the appropriate Certificate of Clinical Competence.

B. Individuals shall engage in only those aspects of the professions that are within the scope of their professional practice and competence, considering their level of education, training, and experience.

C. Individuals shall engage in lifelong learning to maintain and enhance professional competence and performance.

D. Individuals shall not require or permit their professional staff to provide services or conduct research activities that exceed the staff member's competence, level of education, training, and experience.

E. Individuals shall ensure that all equipment used to provide services or to conduct research and scholarly activities is in proper working order and is properly calibrated.

Principle of Ethics III

Individuals shall honor their responsibility to the public by promoting public understanding of the professions, by supporting the development of services designed to fulfill the unmet needs of the public, and by providing accurate information in all communications involving any aspect of the professions, including the dissemination of research findings and scholarly activities, and the promotion, marketing, and advertising of products and services.
Rules of Ethics
A. Individuals shall not misrepresent their credentials, competence, education, training, experience, or scholarly or research contributions.

B. Individuals shall not participate in professional activities that constitute a conflict of interest.

C. Individuals shall refer those served professionally solely on the basis of the interest of those being referred and not on any personal interest, financial or otherwise.

D. Individuals shall not misrepresent research, diagnostic information, services rendered, results of services rendered, products dispensed, or the effects of products dispensed.

E. Individuals shall not defraud or engage in any scheme to defraud in connection with obtaining payment, reimbursement, or grants for services rendered, research conducted, or products dispensed.

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

G. Individuals' statements to the public when advertising, announcing, and marketing their professional services; reporting research results; and promoting products shall adhere to professional standards and shall not contain misrepresentations.

Principle of Ethics IV
Individuals shall honor their responsibilities to the professions and their relationships with colleagues, students, and members of other professions and disciplines.

Rules of Ethics
A. Individuals shall uphold the dignity and autonomy of the professions, maintain harmonious interprofessional and intraprofessional relationships, and accept the professions' self-imposed standards.

B. Individuals shall prohibit anyone under their supervision from engaging in any practice that violates the Code of Ethics.

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

D. Individuals shall not engage in any form of unlawful harassment, including sexual harassment or power abuse.

E. Individuals shall not engage in any other form of conduct that adversely reflects on the professions or on the individual's fitness to serve persons professionally.
F. Individuals shall not engage in sexual activities with clients, students, or research participants over whom they exercise professional authority or power.

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

H. Individuals shall reference the source when using other persons' ideas, research, presentations, or products in written, oral, or any other media presentation or summary.

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

J. Individuals shall not provide professional services without exercising independent professional judgment, regardless of referral source or prescription.

K. Individuals shall not discriminate in their relationships with colleagues, students, and members of other professions and disciplines on the basis of race or ethnicity, gender, gender identity/gender expression, age, religion, national origin, sexual orientation, or disability.

L. Individuals shall not file or encourage others to file complaints that disregard or ignore facts that would disprove the allegation, nor should the Code of Ethics be used for personal reprisal, as a means of addressing personal animosity, or as a vehicle for retaliation.

M. Individuals who have reason to believe that the Code of Ethics has been violated shall inform the Board of Ethics.

N. Individuals shall comply fully with the policies of the Board of Ethics in its consideration and adjudication of complaints of violations of the Code of Ethics.