

1994

Communication Sciences and Disorders Internship Policies and Procedures

Nova Southeastern University

Follow this and additional works at: https://nsuworks.nova.edu/abe_pgcoursecatalogs



Part of the [Education Commons](#)

NSUWorks Citation

Nova Southeastern University, "Communication Sciences and Disorders Internship Policies and Procedures" (1994). *Fischler Postgraduate Course Catalogs*. 319.
https://nsuworks.nova.edu/abe_pgcoursecatalogs/319

This Student Handbook is brought to you for free and open access by the NSU Course Catalogs and Course Descriptions at NSUWorks. It has been accepted for inclusion in Fischler Postgraduate Course Catalogs by an authorized administrator of NSUWorks. For more information, please contact nsuworks@nova.edu.

INTERNSHIP
POLICIES
AND PROCEDURES

STUDENTS'
HANDBOOK

Programs In
Communication Sciences
and Disorders

NOVA
SOUTHEASTERN
UNIVERSITY

FISCHLER GRADUATE SCHOOL OF
EDUCATION AND HUMAN SERVICES
1750 NE 167th Street
North Miami Beach, Florida 33162-3017
www.nova.edu

TABLE OF CONTENTS

Introduction	1
Student Eligibility Requirements and Registration Information	2
Internship Placement Procedures	3
Internship Application	5
Calculation of Clinical Clock Hours	6
Sample Resume	7
Sample List of Graduate-Level Course Work.....	8
Out-of-State Internship Form	9
Supervisor's Role and Responsibilities	10
Student's Role and Responsibilities	11
Terms of Internship Form	13
Internship Evaluation	14
ASHA Requirements	21
Interpretation on Clinical Practicum	22
Evaluation Procedures and Clinical Contact Hours	23
Acknowledgment Form	25
Faculty and Staff	26
Internship Sites	27
Code of Ethics	30

INTRODUCTION

Welcome to Nova Southeastern University's Internship Program for off-campus practicum in the "real world." As graduate students completing your degree, you know the critical nature of this experience. This is your opportunity to integrate the information you have learned in the classroom into clinical working knowledge. It is an exciting and rewarding time.

The internship supervisors you will work with are some of the finest clinicians in the field. They will help you to expand and refine the clinical skills you began to acquire during the semesters of Diagnostics 11 and Clinic Lab, on campus. These supervisors have agreed to accept student interns because they are interested in having a hand in shaping budding professionals in the field. They do not receive compensation for this assignment, other than your "thank you" and the satisfaction of knowing that they have made a difference in the future of speech-language pathology services in the community.

While interning off campus, you will be given the chance to explore a few different types of employment settings and obtain a realistic picture of a speech-language pathologist's role in day-to-day work with clients. You will also be accruing the clinical contact hours necessary for your ASHA certification, state licensure, and Department of Education (DOE) certification, while broadening your clinical skills. Many of you will find that you will identify a specific area of interest during your internship, and that you will pursue this interest when seeking future employment. You will also be making many contacts and establishing your reputation within the community. These contacts may assist you in seeking employment upon graduation—you are beginning to make your professional reputation during your internships.

We are hoping that the information contained within this manual will help you understand the internship program. Please read through it carefully, and hold onto it as a resource to refer back to during the internships. **You must read and sign page 25 and return it during your individual internship meeting.**

We wish you good luck as you enter this final phase of your training. We want this to be an enjoyable and valuable experience for you.

Lanee Friedel, M.S., CCC-A/SLP
Internship Coordinator
262-7735

Fran Spigel, M.S., CCC-SLP
Internship Supervisor
262-7759

Terry Butterweck, M.S., CCC-SLP
Internship Supervisor
262-7753

STUDENT ELIGIBILITY REQUIREMENTS AND REGISTRATION INFORMATION

A graduate student is eligible for placement in an off-campus internship site if all of the following conditions have been met:

1. Successful completion of Diagnostics II, Clinic Lab I and II, with an evaluation grade indicating at least a B level of performance.
2. Accumulation of a minimum of 60 clinical contact hours in Clinic Lab I and II.
3. Faculty approval to enroll in internship.
4. Proof of continued professional liability insurance coverage on file in the program office. A student will be removed from internship if liability insurance lapses. It is the student's responsibility to renew his/her policy at the appropriate time, and to supply a copy of the coverage to the program office.

Registration will take place on campus, during the months of November (for winter semester), March (for spring/summer semester) and July (for fall semester). When you are no longer around campus on a daily basis, it is easy to forget to register. It is your responsibility to remember to register on time, and you will be assessed a late registration fee should you miss the designated time. When registering, keep the following in mind:

1. When you are doing an internship in a school setting, you register for SLP 6120. This does not mean the same thing as doing an internship in a pediatric setting. This course number specifically refers to schools.
2. For all internships other than school settings, you will register for SLP 6110. If it is your first non-school internship, you will be in section AW2. If it is your second non-school internship, you will register in section AW3. Doing this correctly now will save you from the hassle of "Drop-Add" later.
3. In addition to the tuition for a two-credit course, you will be assessed a lab fee per internship.
4. If you are interning out-of-state, you will pay an additional \$1,200 out-of-state, or \$400 out-of-area, internship fee. This is a one-time fee, regardless of whether you are doing one or both internships out-of-state or out-of-the-area. It is due at the time of registration for the first out-of-state or out-of-area internship. You must sign the out-of-state internship form in this handbook.

INTERNSHIP PLACEMENT PROCEDURES

1. Approximately one month into your Clinic Lab II semester, a mandatory "Orientation to Internship Meeting" will be announced. This meeting is not optional, and failure to attend will jeopardize your placement in an off-campus internship for that semester. At this meeting, general information regarding internship requirements will be shared.
2. You will make an individual appointment with one of the three internship supervisors to discuss plans for internship. You and the supervisor will calculate your clinical hours accrued to date. **Bring your time sheets and records of hours to this meeting.**
3. Prior to this meeting, read this handbook, sign the form on page 25, and hand it in at the meeting. We will not proceed with your placement until we have the signed form stating that you have read and understand the rules.
4. The faculty is responsible for making the placements in the internship sites. Students are not to contact any off-campus sites without permission from the internship supervisors. You will automatically forfeit the opportunity for placement by making unauthorized contact with an internship site.
5. You will be notified of your internship assignment through written notice placed in your student mailbox or mailed to your home, or you will be called at home. It is your responsibility to check your mailbox frequently, and to make certain we have your correct, current mailing address.
6. You will be advised to call your prospective site and arrange for a personal interview. A resume and list of graduate course work you have taken should be prepared and proofread by one of us before you go on the interview.
7. The interview gives you the opportunity to meet the supervisor and ask for any suggestions to help prepare yourself for the start of the internship. Some sites do conduct competitive interviews, and may decide you are not the best fit for their setting. An interview at a site does not mean that you are automatically going to be an intern at that site. Should you find yourself in that situation, we will find an alternative placement site for you.
8. You cannot refuse a placement to which you have been assigned.
9. You must sign a terms of internship agreement with your new supervisor to avoid misunderstanding once the internship is under way. If you do not have this agreement signed, we will side with the off-campus supervisor in such cases.

10. **Full-time internship placements span a 14-week semester. Full time is considered to be 35–40 hours per work week.** See discussion of part-time internships below.
11. Spring/Summer semester contains a one-week break for intersession classes. If you are taking a weeklong course during that break, you must notify the internship supervisor at your interview. You will have to make up that week, and will end that internship when the semester ends in August.
12. If you are not taking a one-week course, your internship will end one week prior to the end of the spring/summer semester, when 14 weeks have been completed.
13. Part-time internships are in very limited supply. They will not be done in any hospital settings, which will restrict your choices, and may necessitate travel to distant sites. Part-time internships are not available on weekends and will take longer than one semester to complete. See schedule below:
14. If you are interning half-time or less (defined as less than 20 hours per week) it will take you two semesters to complete an internship.
15. If you are interning less than full time but more than 20 hours per week, the length of your internship will be calculated proportionately. (For example: if you are interning 26–30 hours per week, it will take you 18 weeks to complete an internship.)
16. The entire internship commitment must be fulfilled, even if the required clinical contact hours are finished during the first few weeks of the internship placement.
17. Out-of-state internships will be arranged by the internship supervisors and must be planned at least 12 months in advance of the starting date. Arrangements will not be considered final until the Student Review Committee has reviewed and approved the arrangements during your Clinic Lab II semester.

INTERNSHIP APPLICATION

Date: _____

I am applying for internships for the _____ and _____ semesters.

Name: _____

Current mailing address: _____

Mailing address next semester: _____

Home phone # Current (____) _____ Next semester (____) _____

During internship, I will be available _____ full time _____ part time.

If part time was checked, please be specific about days and times available:

Please initial next to one of the two following statements.:

I would like to do an internship in a public school setting in _____ County.

I do not want to do an internship in a public school setting. _____

Do you have any special circumstances we should know about when making your internship arrangements?

Clock hours completed at Nova Southeastern University: (Total from page 6)

Clock hours accrued as an undergraduate student:

Total clinical clock hours:

Have you taken the dysphagia course at Nova Southeastern University? _____

If yes, which semester? _____

CALCULATION OF CLINICAL CLOCK HOURS

CHILDREN

ADULTS

SPEECH THERAPY HOURS

(20)

(20)

SPEECH EVALUATION HOURS

(20)

(20)

LANGUAGE THERAPY HOURS

(20)

(20)

LANGUAGE EVAL. HOURS

(20)

(20)

AUDIOLOGY HOURS

Combined total of at least
20 hours for audiology
and aural rehab.

AURAL REHAB. HOURS

SAMPLE RESUME FORMAT

Name
Address
Phone Number

Objective: Seeking an internship position in speech-language pathology that will provide opportunities to gain experience with a diverse population in a public school setting.

Education:

August 1999 (expected) Master of Science in Speech-Language Pathology
Nova Southeastern University

June 1995 Bachelor of Science in Elementary Education
Boston University, Boston, Massachusetts

Clinical Practicum:

April–December 1998 Clinic Lab I and II at Nova Southeastern University.
Experience providing speech-language therapy to a variety of clients with voice disorders, autism, language delay, and hearing impairment and aphasia.

January–April 1998 Diagnostics II at Nova Southeastern University.
Experience using the TOLD P-2, the Goldman Fristoe Test of Articulation Disorders, the Kahn Lewis Phonological Analysis Procedure, the OSME-R, and the Visi-Pitch to perform diagnostic evaluations in the university's clinic.

Employment History:

September 1995– Third grade teacher, Patriot Elementary School, Boston, Mass.

June 1995

1991–92 Salesperson, Waylan's Department Store, Sharon, Mass.

Professional Certificates and Affiliations:

1995–present Teaching Certificate in Massachusetts and Florida
Elementary Education

1996–present NSSLHA member, national and local chapter

1996–present FLASHA student member

SAMPLE LIST OF GRADUATE-LEVEL COURSE WORK

Name
Address
Phone Number

Below is a list of the graduate-level course work I have taken and anticipate completing in the area of speech-language pathology:

Diagnostics I	Winter 1998
Audiology	Winter 1998
Fluency Disorders	Winter 1998
Seminar in Professional Issues	Spring 1999
Language Disorders in Adults	Spring 1999
Audiology Lab	Spring 1998
Language Disorders in Children	Fall 1997
Voice Disorders	Fall 1997
Phonological Disorders	Fall 1997
Aural Rehabilitation	Winter 1997
Motor Speech Disorders	Winter 1997
Research Methods	Winter 1997
Diagnostics II	Spring 1998
Clinical Methods	Spring 1998
Counseling	Spring 1998
Dysphagia	Fall 1998
Clinical Lab I	Fall 1998
Clinical Lab II	Winter 1998
Augmentative Communication	Winter 1998
Internship I	Spring 2000
Internship II	Fall 2000

OUT-OF-STATE INTERNSHIP FORM

I am requesting placement for internship in the state of _____ for the 20____ semester(s). I understand that arrangements for this placement must be made well in advance of my proposed starting date (at least 6 to 12 months). These advance arrangements do not guarantee that I will be approved to leave the local Fort Lauderdale area for my internships, and that the Student Review Committee will be reviewing my request during the semester prior to my expected starting date. The Committee will look at my academic and clinical record while enrolled in this program, and will consider my professional attitude and behavior when considering my request for an out-of-state placement.

I understand that I will be required to pay an additional \$1,200 out-of-state internship fee, in addition to the cost of tuition and lab fees. This \$1,200 is due at the time of registration for the out-of-state internship.

I understand that I am committed to these arrangements once they have been made. I will not be able to change my mind and decide to stay in Florida or move to yet another state or city.

Student's signature and date

Internship supervisor's signature and date

SUPERVISOR'S ROLE AND RESPONSIBILITIES

Students must understand that the supervisor in an off-campus site has his/her primary responsibilities to the clients on caseload. He/she has agreed to supervise your clinical practicum, but is not expected to teach you basic academics. If you need to brush up on some content areas, you must do outside reading and studying after work hours.

The supervisor is responsible for:

1. orientation to the facility's rules, including dress code, rules of confidentiality, procedures for handling patients, etc.
2. assignment of duties to the student
3. adherence to ASHA's guideline for supervised observation of the student's diagnostic hours (minimum 50 percent of each evaluation) and therapy hours (minimum 25 percent)
4. guidance for establishing goals and implementing treatment plans for clients
5. ongoing feedback and direction designed to facilitate professional and personal growth. Feedback can be delivered verbally and/or in written form, but should be constructive and frequent.
6. direction for writing reports and documentation according to the procedures required at each individual site
7. facilitation of the student's independence, through gradual decrease in dependence on the supervisor for input. The student should be encouraged to problem solve and be increasingly self-reliant.
8. completion of formal midterm and final evaluations, which will be supplied by the university. The information contained in the evaluation must be shared with the student and used to give constructive feedback. The evaluations should be mailed to the university or can be hand-delivered by the student.
9. contacting the university should any difficulties arise during the internship

STUDENT'S ROLE AND RESPONSIBILITIES

1. Guidelines for professional conduct vary for individual sites. You must become familiar with rules and regulations at your internship site. Ask for their policy manual so you can learn what is expected regarding dress code, attending meetings, calling in sick, etc. Discuss these things with your on-site supervisor. Don't assume the rules are the same as they were during Clinic Lab on campus.
2. Fill out the terms of internship agreement form with the on-site supervisor at the beginning of the internship.
3. Your calendar and work schedule follow the site's schedule, not the university's. You should not plan to take off on university holidays, or to study for exams or to conduct personal business. (For example, many sites work on Thanksgiving, and you may have to as well.) More than four days of absence during each internship will have to be made up at the end of the semester.
4. You may have to provide proof of immunization or medical clearance for things like TB. Check with your site supervisor well in advance of your starting date so that you will have time to get the necessary tests, shots, or paperwork.
5. In most cases, you will assume responsibility for your own transportation, parking, meals, lab coats, and name badges.
6. You must abide by the ASHA Code of Ethics. It is your responsibility to read it, and become familiar with its contents.
7. You must maintain confidentiality of not only client information, but information about goings-on at your internship site. Do not discuss information about your site elsewhere.
8. You will be expected to read client records prior to initiating an evaluation or treatment session, and to note any changes in a client's status.
9. You should expect to do some observation of your supervisor until the supervisor believes you are ready to begin working with the clients. Don't forget that you do not count observation hours as clinical contact hours.
10. You will be expected to seek information you need to do an evaluation or plan a therapy program. This includes outside research and reading, and/or specific assignments given to you by the supervisor.

11. You must become familiar with the documentation procedures used at your site. This is very variable between sites. Some use long reports and others use weekly SOAP notes. Find out what is required of you.
12. You will be expected to participate in related activities at the site. Team conferences, staffings, family meetings, grand rounds, etc., all provide you with wonderful learning opportunities. Take advantage and attend everything you are permitted to attend. The more experiences you have at your internship site, the better prepared you will be for your first job.
13. You must make it a priority to establish a harmonious working relationship with the other people working at that site. They also have a lot to teach you. Working with OTs, PTs, teachers, nurses, doctors, dieticians, etc., will add to your skills as a speech-language pathologist. Take advantage of the opportunities to learn from them when you have time.
14. You must keep track of the clinical contact hours you are accruing. Keep a daily record of the clients you see, the disorder, and the length of time you are providing SLP services. This information should be totaled and transferred to the ASHA form you used in clinic. You can use the same form or start a new one. At the conclusion of the internship, your supervisor must sign the form, including his/her ASHA certification number. You must turn this form in at your exit interview. Keep a photocopy for yourself.
15. Don't forget to register for next semester if you need to. You will be assessed a late fee if you miss it.
16. It is your responsibility to take care of your exit procedures:
 - a. Make sure you have taken your NESPA exam. You need it to graduate.
 - b. Call to schedule an exit interview.
 - c. Make sure all your grades for internship are turned in.
 - d. Have all your hours signed, with ASHA numbers.
 - e. If you are planning to work in another state, get a copy of their licensure rules and application. They could be different from ours.
 - f. If you are interning out-of-state, be sure to leave us a way to contact you.
 - g. Update your address and phone numbers with the internship coordinator.
17. If any problems arise, get in touch with us. Don't wait until problems compound before you ask for help.

TERMS OF INTERNSHIP FORM

Student's name:

Supervisor's name:

Site:

Site coordinator:

(May be the same as the site supervisor)

Start date: _____

*Anticipated end date: _____

Total number of hours per week: _____

Work schedule:

(Days of the week and hours)

*This is the targeted end date, however, if hours accrued or skill level has not met the requirements for ASHA or for the successful completion of this internship, the end date may be adjusted.

Student's signature and date

Supervisor's signature and date

Internship coordinator's signature and date

THE PROGRAMS IN COMMUNICATION SCIENCES AND DISORDERS
NOVA SOUTHEASTERN UNIVERSITY
3301 COLLEGE AVENUE
FORT LAUDERDALE, FLORIDA 33314-7796

INTERNSHIP EVALUATION

Midterm _____ Final _____

Student _____ Supervisor(s) _____

Evaluation covering period from _____ to _____

Facility _____ Date of Evaluation _____

Signature and ASHA # of Supervisor _____

Signature of Student _____

This grading system assumes that students new to a clinical setting and/or type of disorder will require more guidance and supervision at the beginning of the internship. They are expected to move toward increasing proficiency and independence as the internship progresses, and therefore need less supervision. Please keep in mind that ASHA requires that even the most self-sufficient students must be supervised a minimum of 25 percent of the evaluation and treatment sessions with clients.

RATING SCALE

- 0 - Not applicable to this setting or this student
- 1 - 100% direct supervision is required *
- 2 - 75% direct supervision is required *
- 3 - 50% direct supervision is required *
- 4 - 25% direct supervision is required *
- 5 - The student demonstrates the ability to work without supervision in this area

* Direct supervision is defined as a supervisor assuming a dominant role in diagnostic evaluation and therapy management by providing input on diagnostic interpretation, goal formulation, perception of strengths and weaknesses. The supervisor also will be demonstrating techniques prior to implementation.

SECTION I

The competencies evaluated in this section are largely demonstrated outside of the therapy room and relate to the development and planning of goals, analysis of sessions, documentation of clients' behaviors, and communication with staff. You should evaluate the student's performance on dependence-independence scale, as described on page 1. At the beginning of the internship, or with a client or disorder never worked with before, the student is expected to need more input from the supervisor. As the student progresses, it is expected that the amount of supervisory input needed will decrease.

1. Ability to extract and interpret information from clients' charts or records

0 1 2 3 4 5

2. Ability to choose appropriate diagnostic instruments

0 1 2 3 4 5

3. Ability to interpret test results accurately (includes the ability to translate information into a diagnostic statement)

0 1 2 3 4 5

4. Ability to develop appropriate long-term goals

0 1 2 3 4 5

5. Ability to write goals which are precisely defined, clearly stated, and related to specific behavioral objectives

0 1 2 3 4 5

6. Ability to plan activities for therapy sessions which are clearly related to stated goals

0 1 2 3 4 5

7. Ability to devise and/or adapt procedures and materials for the specific needs of the clients

0 1 2 3 4 5

8. Ability to plan sessions which are realistic in terms of the amount and pace of work to be accomplished

0 1 2 3 4 5

9. Ability to accurately and constructively analyze sessions and use the analysis as a basis for planning subsequent sessions

0 1 2 3 4 5

10. Ability to analyze own clinical behaviors with respect to impact on clients' behavior

0 1 2 3 4 5

11. Ability to accurately collect data and document progress

0 1 2 3 4 5

12. Ability to write in a concise, grammatically correct manner

0 1 2 3 4 5

13. Ability to deliver verbal reports in a manner appropriate to other staff members

0 1 2 3 4 5

COMMENTS:

SECTION II

The competencies evaluated in this section relate to the student's direct contact with clients, performance in therapy sessions and counseling. Evaluate the students on the dependence-independence continuum, as described on page 1.

1. Ability to administer formal tests according to published guidelines

0 1 2 3 4 5

2. Ability to administer an informal diagnostic assessment when commercially available tests are not appropriate

0 1 2 3 4 5

3. Ability to establish rapport with patients, leading to an effective therapeutic relationship

0 1 2 3 4 5

4. Ability to perceive and interpret clients' verbal and nonverbal behaviors relating to motivation and therapeutic interaction

0 1 2 3 4 5

5. Ability to select and use appropriate cueing and prompting techniques

0 1 2 3 4 5

6. Ability to appropriately reinforce desired behaviors and responses

0 1 2 3 4 5

7. Ability to increase or decrease difficulty of tasks within a session, when indicated

0 1 2 3 4 5

8. Ability to give clear, precise instructions when presenting procedures and materials
- 0 1 2 3 4 5
9. Ability to modify complexity of language to meet clients' needs
- 0 1 2 3 4 5
10. Ability to pace sessions realistically in terms of stated goals, clients' behavior, and time limitations
- 0 1 2 3 4 5
11. Ability to quickly, skillfully, and effectively set limits in a nonthreatening manner when necessary
- 0 1 2 3 4 5
12. Ability to work effectively to increase clients' level of motivation
- 0 1 2 3 4 5
13. Ability to utilize unexpected opportunities to achieve stated therapy goals
- 0 1 2 3 4 5
14. Ability to modify complexity of technical information to effectively communicate with adult clients, parents of child clients, or other family members or caregivers, regarding therapy goals, progress, and prognosis
- 0 1 2 3 4 5
15. Ability to convey information to parents, other family members or caregivers regarding their role in facilitating carryover and/or generalization outside the therapy session
- 0 1 2 3 4 5

COMMENTS:

SECTION III PROFESSIONAL BEHAVIORS

For the professional behaviors described in this section, it is expected that students will demonstrate good performance from the very first day of the internship, regardless of the level of experience. Please evaluate performance for each item carefully, selecting one of the following descriptive terms. Ratings below G are of serious concern, and will result in lowering the overall grade for the internship.

U - Unacceptable behavior/performance

NI - Needs Improvement in this behavior/performance

G - Good

E - Excellent, or unusually fine performance

1. Attendance is reliable and punctual	U	NI	G	E
2. Maintains clients' records accurately and neatly	U	NI	G	E
3. Respects client confidentiality	U	NI	G	E
4. Provides appropriate speech-language model for clients	U	NI	G	E
5. Prepares materials and equipment in advance of session	U	NI	G	E
6. Shows initiative in researching areas needing further information or study	U	NI	G	E
7. Asks relevant questions and contributes ideas during supervisory conferences	U	NI	G	E
8. Responds to supervisor's comments and suggestions in open, nondefensive manner	U	NI	G	E
9. Implements supervisor's suggestions and follows through on recommendations for clients	U	NI	G	E
10. Maintains harmonious working relationship with other staff and fellow students	U	NI	G	E
11. Demonstrates cultural sensitivity	U	NI	G	E
12. Completes tasks in a timely manner	U	NI	G	E

CALCULATING THE GRADE
(PLEASE MAIL FINAL GRADE TO LANE FRIEDEL ASAP.)

Add all of the # 1, 2, 3, 4, and 5s in sections I and II. This will be the student's total score.

Disregard any question in Sections I or II which you circled 0 as the score.

How many items out of the possible 28 did you use? This will be the total number of applicable items.

Divide the total score by the total number of applicable items, to arrive at the mean rating of clinical performance.

$$\frac{\text{TOTAL SCORE}}{\text{TOTAL \# OF APPLICABLE ITEMS}} = \text{MEAN RATING OF CLINICAL PERFORMANCE}$$

Any Item in Section III that is graded with an NI will result in an automatic lowering of the mean rating of 0.25 points. Any item in section III which is graded with a U will result in an automatic lowering of the Mean Rating of a 0.5 point.

This score will be translated into a letter grade as follows:

A mean rating of 4.5 – 5.0	A
A mean rating of 3.5 – 4.49	B
A mean rating of 2.5 – 3.49	C

A grade of C or below is not considered to be a passing grade for a clinical course in the Programs in Communication Sciences and Disorders of Nova Southeastern University.

ADDITIONAL COMMENTS OF SUPERVISOR:

PLEASE DON'T FORGET TO INCLUDE YOUR ASHA CERTIFICATION NUMBER ON THIS FORM.

ASHA REQUIREMENTS FOR CLINICAL PRACTICUM (Effective as of 1/1/93)

Supervised clinical observation and clinical practicum required for the master's degree is a total of 375 clinical hours (c.h.).

A. Clinical Observation = 25 c.h., which must be completed prior to beginning clinical practicum.

B. Clinical Practicum = 350 c.h. total. **Only direct client contact time may be counted toward this requirement.**

- 250 c.h. must be obtained at the graduate level in the area in which the CCC is sought (SLP.D. or Au.D.).
- At least 50 c.h. must be obtained in three different clinical settings.
- Students must obtain a **minimum** of the following number of c.h. in each of the following eight categories:

- 1) 20 c.h. in evaluation of speech disorders in children
- 2) 20 c.h. in evaluation of speech disorders in adults
- 3) 20 c.h. in evaluation of language disorders in children
- 4) 20 c.h. in evaluation of language disorders in adults
- 5) 20 c.h. in treatment of speech disorders in children
- 6) 20 c.h. in treatment of speech disorders in adults
- 7) 20 c.h. in treatment of language disorders in children
- 8) 20 c.h. in treatment of language disorders in adults

- Speech disorders include disorders of articulation, voice, fluency, and dysphagia.
- Up to 20 c.h. in the major professional area may be in related disorders.
- 20 c.h. must be obtained in audiology as follows:

Any combination of audiology, and/or aural rehab hours, which must be direct contact time with clients, must total at least 20 clinical hours.

CLINICAL CERTIFICATION BOARD INTERPRETATION ON CLINICAL PRACTICUM - FROM ASHA

1. Persons holding CCC in speech-language pathology may supervise:
 - a. All speech-language pathology evaluation and treatment services
 - b. Nondiagnostic audiologic 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
 - c. Aural habilitative and rehabilitative services

2. Persons holding CCC in audiology may supervise:
 - a. Audiologic evaluation
 - b. Amplification selection and management
 - c. Speech and or language screening for the purpose of initial identification of individuals with other communication disorders
 - d. Aural habilitative and rehabilitative services

3. Only direct client contact time may be counted as clinical practicum hours. Time spent in writing lesson plans, scoring tests, transcribing language samples, preparing activities, receiving in-service training, and writing reports may not be counted.

4. Evaluation refers to those hours in screening, assessment, and diagnosis that are accomplished prior to the initiation of a treatment program. Hours to be counted in the evaluation category may also include reevaluation. Periodic assessments during treatment are to be considered treatment.

5. Time spent with either the client or a family member engaging in information seeking, information giving, counseling, or training for a home program may be counted as clinical clock hours (provided the activity is directly related to evaluation or treatment).

6. Time spent in a multidisciplinary staffing, educational appraisal, and review or in meetings with professional persons regarding diagnosis and treatment of a given client may not be counted. Conference time with supervisors is not counted.

7. If a client presents communication disorders in two or more of the diagnostic categories, accumulated clock hours should be distributed among these categories according to the amount of treatment time spent on each. Students working with groups cannot count the entire group time for each group member.

EVALUATION PROCEDURES AND CLINICAL CONTACT HOURS

1. The supervisors at the internship sites will grade the students at the midpoint and at the end of the internship. The midterm grade is only used to give feedback to the student, and will not be calculated into the final grade.
2. A copy of the internship evaluation is included in this handbook. Look it over so that you know the areas on which you will be graded.
3. The grading system assumes that students are new to a clinical setting and will require more guidance and direct supervision at the beginning of the internship. Students are expected to move toward increased clinical proficiency and therefore should require less direct supervision and demonstration as the internship progresses.
4. The internship coordinator is responsible for assigning the final grade.
5. The internship supervisor is asked to submit the final evaluation as close to the conclusion of the internship as possible. The student may bring the form to the university and turn it in to the internship coordinator. A grade of incomplete (I) will be assigned if the grade is received late, and a change of grade will be made when the grade is received. A grade of A or B is needed to "pass" each internship. **Grades will only be issued at the conclusion of the semester.**
6. The students must satisfy the ASHA requirements for clinical clock hours. They are outlined on page 10 of this handbook.
7. ASHA does not accept hours spent scoring tests, writing reports, planning treatment, etc., toward the clinical clock hours requirement. **Only direct client contact time may be counted toward the requirements set forth by ASHA.**
8. Within the state of Florida, a license from the Agency for Health Care Administration is required to practice speech-language pathology anywhere but within the public school system. If you have satisfied ASHA's requirements for the master's degree, including the clinical clock hours required, you will meet the requirements for licensure within this state. Rules vary in other states.
9. At the present time, the licensure board meets once every other month. There is usually a delay between the granting of your degree and the approval of your provisional license because of this meeting schedule. You cannot begin working until you have your provisional license. Be prepared to wait for several weeks.

10. If a student is removed from an internship before the conclusion of the semester, for nonprofessional behavior or poor clinical performance, a grade of F will be received for that internship. The student will be automatically placed on academic probation. The student must, reregister, and repay the tuition, to retake the internship. The F will no longer be figured into the GPA if the repeated internship is successfully completed.

11. Students will not earn clinical contact hours they have accrued during an internship if they earn a grade lower than B, or if a student is removed from an internship for nonprofessional behavior or poor clinical performance.

ACKNOWLEDGMENT FORM

You must read and sign this form before we will proceed with your internship assignment. Present it at your internship meeting.

1. I have read through this handbook and understand that I am bound by its contents during my two internships.
2. I understand that I am not allowed to alter the internship arrangements as they have been made, without going through the internship coordinator.
3. I understand that a request for a particular internship site, or even type of internship, may not be granted.
4. I understand that internship arrangements within the public school system must be made in October for the following January, and in April for the following September. If I miss the deadline, nothing can be done about it.
5. I understand that the university has no say in the specific school sites or site supervisors chosen for internships within the public schools.
6. I understand that if I elect to intern on a part-time basis, I will have to extend the internship beyond a single semester, depending on the number of hours per week I can commit to interning.
7. I understand that I must accept the internship assignment I am given, or else wait until the following semester to be reassigned.
8. I understand that internships begin when the semester begins, and end when the semester ends. The only exceptions will be for part-time interns.
9. I understand that I will have to do outside reading and research during my internship and that I am responsible for reading about and researching things I don't know.
10. I understand that I must take responsibility for the experience I have during my internship. If I am having problems, I need to seek solutions, not blame others.

YOUR SIGNATURE AND TODAY'S DATE

Faculty and Staff of the Programs in Communication Science and Disorders

Jamie Arango, B.S.

Coordinator of Administration Operations

Celia Barrerio-Blanco, M.S., CCC-SLP

Program Instructor

Elaine Bloom, M.A., CCC-SLP

Coordinator of Student Services

Kathleen Borgeson, M.S., CCC-SLP

Program Instructor

Terry Butterweck, M.S., CCC-SLP

Program Instructor and Internship Supervisor

Lucas Doyle, M.S., CCC-A

Program Instructor

Marlene Eisenberg, M.A., CCC-SLP

Program Instructor

Helene Fisher, M.S., CCC-SLP

Program Instructor

Barry Freeman, Ph.D., CCC-A

Program Dean

Lanee Friedel, M.S., CCC-A/SLP

Coordinator of Internships

Erica Friedland, M.S., CCC-A

Program Instructor

Kathleen Geier, Au.D. CCC-A

Program Professor

Joseph Gonzalez, Ph.D., CCC-SLP

Program Professor

Teri Hamill, Ph.D., CCC-A

Program Professor

Yvette Hanna, M.S., CCC-SLP

Program Instructor

Brian Humphrey, M.A., CCC-SLP

Program Instructor

Shelley Kirchenbaum, M.A., CCC-SLP

Program Instructor

Charles Lonegan, Ph.D., CCC-SLP

Program Professor

Diane McDaniel, M.S., CCC-SLP

Program Instructor

Sandra Mecca, M.A., CCC-SLP

Program Instructor

Alissa Miltenberg-Vertes, M.S., CCC-SLP

Program Instructor

Wren Newman, M.S., CCC-SLP

Director of Clinical Services

Barbara Packer, Ed.D., CCC-A

Director of Doctoral Studies

Robin Parker, M.S., CCC-SLP

Program Instructor

Rhoda Pileslsky, M.S., CCC-SLP

Program Instructor

Elizabeth Roberts, Ph.D., CCC-SLP

Program Professor

Patricia Saccone, M.S., CCC-A

Program Instructor

Fran Spigel, M.S., CCC-SLP

Internship Supervisor

Shelly Victor, Ed.D, CCC-SLP

Associate Dean

Kristy Weissling, M.S., CCC-SLP

Program Instructor

Carole Zangari, Ph.D., CCC-SLP

Program Professor

Barbara Zucker, M.A., CCC-SLP

Coordinator of Clinical Services

INTERNSHIP SITES

Adele Kates, M.Ed. & Associates
Alachua County Public Schools
Alexandria County Public Schools
All Children's Hospital
• New Port Richey
• Sarasota
• St. Petersburg
Allegheny University Hospitals
Ambi-Lingual Associates
Angel Care Rehabilitation
Ann Stork Center
Anne-Marie Fitzgibbons, S.L.P.
Arbors at Melbourne Rehabilitation Center
Association for Retard Citizens (ARC)
Bacarach Rehabilitation Hospital
Baptist Hospital of Miami
Bartley Health Care
Battle Creek Neuro Rehabilitation Center
Bayfront Medical Center
Beaumont Hospital
Beaumont Rehabilitation and Health Center
Bert Fish Hospital
Bethesda Memorial Hospital
Beverly Manor of Margate
Biscayne Rehabilitation Institute
Boca Raton Community Hospital
Boca Raton Rehabilitation Center
Boca Raton Speech and Language Center
Boca Speech and Language Center
Bon Secours Hospital/Villa Maria Nursing Center
Bon-Secours/St. Joseph's Hospital
Boulevard Manor Rehabilitation Center
Cape Coral Hospital
Cardinal Hill Rehabilitation Center
Center for Bilingual Speech and Language Disorders, Inc.
Center for Pediatric Therapy, Inc.
• Coral Gables
• Miami
Center for Rehabilitation
Center for Speech and Language
Center for Speech and Language, Treasure Coast
• Port St. Lucie
• Jensen Beach
Central Florida Speech and Hearing Center
Central Jersey Rehabilitative Services
Central Maryland Rehabilitation Center
Cerebral Palsy Association of Middlesex County
Chario School
Charlotte Regional Public Schools
Charlotte Regional Medical Center
Cheshire Public Schools
Child Development Center
Children's Hospital of Michigan
Child Development Center at St. Mary's Medical Center
Children's Out-Patient North
Children's Rehab Network
Children's Seashore Hospital
Children's Specialized Hospital
Children's Therapy Services
City Wide Speech Services
Clawson, Lorraine, S.L.P.
Cleveland Clinic Hospital, Rehabilitation Unit
Clines, Sharon, S.L.P.
Clinton Public Schools
Clove Lakes Health Care and Rehabilitation Center
Cohen, Harriet, S.L.P.
Collier County Public School
Colonial Oaks Rehabilitation Center
Colonial School District
Colts Neck Township Schools
Columbia Specialty Hospital Jacksonville
Commons at Orlando/Lutheran Towers
Coral Springs Speech and Language Center, Inc.
Cranston Public School System
CRF Rehab Associates at Wilson Memorial Hospital
Rehab Center for Children and Adults, Inc.
Crown Nursing Home
Cuyahoga County Board of MRDD
Cypress-Fairbanks Independent School District
Dade County Public Schools
Danbury Schools System
Davies Medical Center
Debbie School/University of Miami
DeKalb General Hospital
Denver Public Schools
Devereux Center
Devereux Florida treatment Network
Dimensions Speech, Language, and Learning Services
Diversified Rehabilitation Services
Driscoll Children's Rehabilitation Center of South Texas
Duval County Public Schools
Duval County Private Schools
East Lansing Schools
Easter Seal Centers
Tampa
Broward
Miami-Dade
Sarasota
Volusia
Flagler
Eastern North Carolina School for the Deaf
Eden Center of Florida
Egleston Children's Healthy Care System
Evanston Hospital
Evanston Public Schools
Fairview University Medical Center
Fawcett Memorial Hospital
Flagler Institute of Rehabilitation
Florida C.O.R.F.
Florida Hospital
Florida Institute for Neurologic Rehabilitation, Inc.
Florida Medical Center
Focus Rehabilitation
Franklin Lakes School District
Fulton County Public Schools
Gaylord Hospital
Genesis Rehabilitation Hospital and Center
Golden State Rehabilitation Center

Goldwater Memorial Hospital
 Good Samaritan Hospital
 Good Samaritan Hospital Medical Center
 Grand Valley Health Center
 I-S at Green Briar Rehabilitation Hospital
 Gulf Coast Center
 Gulf Coast Hospital
 Gwinnett County Schools
 Hackensack Medical Center
 Halifax Hospital
 Hampton City Schools
 Harbor Beach Rehabilitation Center
 Hardee Physical therapy and rehab Services
 Hartford Hospital
 Hazlet Public Schools
 H.B.A. Rehabilitation
 H.C.A. L.W. Blake Hospital Rehabilitation Center
 HCR of Sunrise
 Health South Hospitals

- Houston
- Miami
- Largo
- Vero Beach
- Baltimore

 Hearing and Speech Center of Florida, Inc.
 Hearthstone Nursing and Rehabilitation Center
 Heartland Healthcare Center of Grand Rapid's
 Heartland of Tamarac
 Hendry County District School
 Hennepin County Medical Center
 Henry Ford Hospital
 Highlands County School Board
 Hillsborough County Public Schools
 Hollywood Medical Center
 Hollywood Memorial Hospital
 Holmes Regional Medical Center
 Holy Cross Hospital
 Hospital for Special Care
 Humana Hospital of Biscayne
 HIS of St. Petersburg
 Impact, Inc.
 Indian River County Schools
 InterLINK Rehab Services
 Integrated Health Services of the Palm Beaches
 Intercoastal Healthcare Systems, Inc.
 Jackson Memorial Hospital
 Jewish Home and Hospital
 JFK Medical Center
 JFK Center for Developmental Disabilities
 Johns Hopkins Bayview Medical Center
 Jonas Therapy Associates
 Jupiter Medical Center Pavilion
 Kendall Speech and Language Center
 Kessler Institute for Rehabilitation, Inc.
 Kimball Medical Center
 Lake Center for Rehabilitation
 Lakeshore Rehabilitation at Carraway Methodist Medical Center
 Lampeter-Strausburg School District
 Lamphere Schools Special Services Division
 Landmark Learning Center
 Lankanau Hospital
 Lawrence Hospital
 Lee Convalescent Center
 Lee County School District
 Leon County Schools
 Lenkey, Laura, S.L.P.
 Lifelines Rehabilitation Services
 Lowell Public School
 Lowes Rehabilitation
 Mailman Center for Child Development
 Manatee County District Schools
 Manor Care Health Center of Plantation
 Marin County Office of Education
 Mariner Health of Port Orange
 Mariner Rehabilitation
 Marlboro Township Public Schools
 Martin County Schools
 Martin Nursing and Restorative Center
 Mary Free Bed Hospital and Rehabilitation Center
 Maryland Institute of Stoke Trauma
 Massapequa Public Schools
 Meadowland Springs Speech and Language Camp
 Medical Center Hospital
 Mediciana Nursing Center
 Mediplex Rehab
 Meeting Street Center
 Memorial Sloan – Kettering Cancer Center
 Mercy Medical Center
 Meridia Euclid Hospital
 Metro Health Center Rehabilitation
 Miami Fluency Clinic
 Mid-Peninsula Speech and Language Clinic
 Milestone Health Care
 Millard Fillmore Hospitals
 Mills-Peninsula Hospital
 Moffitt Cancer Center and Research Institute
 Monroe County Schools
 Morristown Memorial Hospital
 Morton Plant Mease Health Care
 Moss Rehab
 Mount Dora Health Care Center
 Mount Sinai Medical Center
 Mount Sinai - NY
 Mount Washington Pediatric Hospital, Inc.
 M.P. Rehabilitative Services
 Naples Center for Voice, Speech, and Swallowing .
 Naples Community Hospital
 National Health Corporation
 New Milford Hospital
 Newport Language, Speech and Audiology Center
 New York Schools Districts
 North Broward Hospital District
 North Broward Medical Center
 North Collier Hospital
 North Merrick Union Free School District
 Northeast Rehabilitation Hospital
 North Miami Nursing and Rehab Center
 Northport School District
 Northshore Medical Center
 Northwest Regional Hospital
 NOVA Care
 NRH

Orange County Public Schools
Orlando Regional Healthcare System(Arnold Palmer)
Our Lady of Victory Hospital
Palm Beach County Schools
Paragon, Inc.
Parkview Memorial Hospital
Parkway regional Medical Center
Partners in Speech
Patricia Neal Rehab Center
Pediatric Therapy Associates
Pediatric Therapy Group
Pinecrest Rehabilitation Hospital
Pinellas County Schools
Pompano Beach Medical Center
Portland Public Schools
Port Orchard Schools
Pottsgrove School District
Presbyterian Homes
Professional Health Care Services
Progressive Therapy Services
Project Thrive
Providence Hospital
Quality Care professional Rehab
Queens Medical Center
Raleigh Pediatric Therapy
Ramapo Central School District
Reading Rehabilitation Hospital
Rehabilitation Center for Children and Adults
Rehabilitation Center of the Palm Beaches
Rehabilitation Institute of Sarasota
Rehab Plus
Rehab Works of Florida
Retberg Child Center
Rhode Island Hospital
River Ridge
Riverside Medical Center
Rockland Community College
Rusk Institute of Rehabilitation Medicine
Sabal Palms Health Care Center
Saint Charles Hospital
Saint Joseph Health Services of Rhode Island
Saint Joseph's Hospital, Rehab Services
Saint Lucie Schools
Saint Mary's Hospital
Saints Memorial Medical Center
Sarasota Memorial Hospital
Sarasota Public Schools
Scottish Rite – Children's Medical Center
SeaPines Rehabilitation Hospital
Sheree Syden Speech Rehab
South Brunswick Board of Education
South Miami Hospital
South Orangetown School District
Southwest Allen County Schools
Southwest Florida Regional Medical Center
Sparrow Hospital
Specialized Speech Center
Speech and Hearing Associates
Speech, Language and Hearing Rehabilitation
Speech and Language Pathology of South Florida
Speech Learning Associates

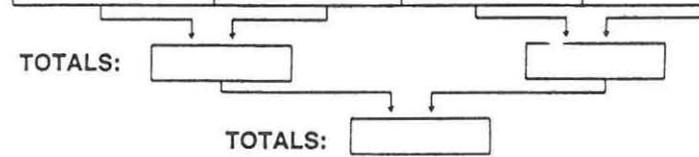
Speech Pathology Consultant Group, Inc.
Speech Pathology and Education Center (SPEC)
Speech Talk
Spohn Shoreline Hospital
Starting Early DDI
Staten Island University Hospital
Step by Step
Sun Coast Hospital
Sunhouse of the Palm Beaches
Sunrise Health Center
Sunrise Rehabilitation Hospital
Sun Spectrum Rehabilitation
Tampa General Rehabilitation Center
Terre Vista Rehab and Health Care Center
Therapeutic Integration Services
Torres, Laurie, S.L.P.
Treasure Coast Rehabilitation Hospital
Tri-Cities Children's Center
United Cerebral Palsy Children's Center
United Cerebral Palsy of Queens
United Hearing and Deaf Services
University of Colorado – University Hospital
University of Florida Medical Center
University of Michigan Hospital
University of Pennsylvania Health Center
Ursel, Davis, S.L.P.
Valley Children's Hospital
Vanderbilt Rehab Center at Newport Hospital
Vencare Health Services
Vencor Hospital
Venice Hospital
Veteran's Administration Medical Centers
 Bay Pines
 Miami
 West Palm Beach
Volusia County Schools
Drs. Volts and Amato
Washington County Schools
Washington Manor
Waterford Public Schools
Wayne General Hospital
Westchester Assisted Living Residences
West Gables Rehab Hospital and Health Center
Winter Haven Hospital
Woodbridge Nursing and Rehabilitation Center
Y.A.I. National Institute for People with Disabilities
Y.A.I. Grammercy School

(20) Clinical Practicum in Audiology (for majors in speech-language pathology)

Applicant's Full Name _____

Print or Type

Supervisor's Full Name (Inc. Maiden & Middle)	University Listing	Supervisor's ASHA Account Number	Supervisor's CCC Area	Practicum Site	Practicum Completion Date	Record hours under areas in which they were obtained.			
						Evaluation		Treatment	
						Screening	Audiologic Evaluation	Amplification (Hearing Aid Selection, Treatment)	Treatment of Communication Handicaps of the Hearing Impaired
TOTALS:									



SUMMARY OF CLINICAL PRACTICUM HOURS

Observation Total Clock Hours: _____ Clinical Practicum Total Clock Hours: _____

Hours In Speech-Language Pathology: _____ Hours In Audiology: _____

Speech-Language Pathology Hours at Graduate Level: _____ Date All Hours Were Completed: _____

I verify that all practicum information completed at _____ listed above was completed according to all ASHA practicum requirements.
name of university

program director's signature date

Code of Ethics

Revised January 1, 1994

American Speech-Language-Hearing Association

Preamble

The preservation of the highest standards of integrity and ethical principles is vital to the responsible discharge of obligations in the professions of speech-language pathology and audiology. 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 action that violates 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 responsibility to persons served, to the public, and to the professions of speech-language pathology and audiology.

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.

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 on the basis of race or ethnicity, gender, age, religion, national origin, sexual orientation, or disability.

- D. Individuals shall fully inform the persons they serve of the nature and possible effects of services rendered and products dispensed.
- E. Individuals shall evaluate the effectiveness of services rendered and of products dispensed and shall provide services or dispense products only when benefit can reasonably be expected.
- F. Individuals shall not guarantee the results of any treatment or procedure, directly or by implication; however, they may make a reasonable statement of prognosis.
- G. Individuals shall not evaluate or treat speech, language, or hearing disorders solely by correspondence.
- H. Individuals shall maintain adequate records of professional services rendered and products dispensed and shall allow access to these records when appropriately authorized.
- I. Individuals shall not reveal, without authorization, any professional or personal information about the person served professionally, unless required by law to do so, or unless doing so is necessary to protect the welfare of the person or of the community.
- J. Individuals shall not charge for services not rendered, nor shall they misrepresent,¹ in any fashion, services rendered or products dispensed.
- K. Individuals shall use persons in research or as subjects of teaching demonstrations only with their informed consent.
- L. 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.

¹For purposes of this Code of Ethics, misrepresentation includes any untrue statements or statements that are likely to mislead. Misrepresentation also includes the failure to state any information that is material and that ought, in fairness, to be considered.

Reference this material as follows:

American Speech-Language-Hearing Association (1994). Code of ethics. *Asha*, 36 (March, Suppl. 13), pp. 1-2.

Principle of Ethics II

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

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 competence, considering their level of education, training, and experience.
- C. Individuals shall continue their professional development throughout their careers.
- D. Individuals shall delegate the provision of clinical services only to persons who are certified or to persons in the education or certification process who are appropriately supervised. The provision of support services may be delegated to persons who are neither certified nor in the certification process only when a certificate holder provides appropriate supervision.
- E. Individuals shall prohibit any of their professional staff from providing services that exceed the staff member's competence, considering the staff member's level of education, training, and experience.
- F. Individuals shall ensure that all equipment used in the provision of services 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.

Rules of Ethics

- A. Individuals shall not misrepresent their credentials, competence, education, training, or experience.
- B. Individuals shall not participate in professional activities that constitute a conflict of interest.
- C. Individuals shall not misrepresent diagnostic information, services rendered, or products dispensed or engage in any scheme or artifice to defraud in connection with obtaining payment or reimbursement for such services or products.

- D. Individuals' statements to the public shall provide accurate information about the nature and management of communication disorders, about the professions, and about professional services.
- E. Individuals' statements to the public—advertising, announcing, and marketing their professional services, reporting research results, and promoting products—shall adhere to prevailing 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 allied professions. Individuals shall uphold the dignity and autonomy of the professions, maintain harmonious interprofessional and intraprofessional relationships, and accept the professions' self-imposed standards.

Rules of Ethics

- A. Individuals shall prohibit anyone under their supervision from engaging in any practice that violates the Code of Ethics.
- B. Individuals shall not engage in dishonesty, fraud, deceit, misrepresentation, or any form of conduct that adversely reflects on the professions or on the individual's fitness to serve persons professionally.
- C. 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.
- D. Individuals' statements to colleagues about professional services, research results, and products shall adhere to prevailing professional standards and shall contain no misrepresentations.
- E. Individuals shall not provide professional services without exercising independent professional judgment, regardless of referral source or prescription.
- F. Individuals shall not discriminate in their relationships with colleagues, students, and members of allied professions on the basis of race or ethnicity, gender, age, religion, national origin, sexual orientation, or disability.
- G. Individuals who have reason to believe that the Code of Ethics has been violated shall inform the Ethical Practice Board.
- H. Individuals shall cooperate fully with the Ethical Practice Board in its investigation and adjudication of matters related to this Code of Ethics.

Fees for Clinical Service Provided by Students

*Ethical Practice Board
American Speech-Language-Hearing Association*

Issues In Ethics Statements: Definition

From time to time, the Ethical Practice Board or the Council on Professional Ethics determines that members and certificate holders can benefit from additional analysis and instruction concerning a specific issue of ethical conduct. Issues in Ethics statements are intended to heighten sensitivity and increase awareness. They are illustrative of the Code of Ethics and intended to promote thoughtful consideration of ethical issues. They may assist members and certificate holders in engaging in self-guided ethical decision-making. These statements do not absolutely prohibit or require specified activity. The facts and circumstances surrounding a matter of concern will determine whether the activity is ethical.

The Ethical Practice Board (EPB) has been asked to review the policy involved when clinical services, for which fees are charged, are provided by students in training under the supervision of certified members. The specific question presented by the inquirers is whether such fees may be legitimately charged when the work is being done by individuals who are not yet fully trained or certified.

Clinical services are provided by students under supervision in such diverse settings as university clinics, schools, and agencies. Principle of Ethics II, Rule A of the Code of Ethics recognizes the professional acceptability of appropriately supervised clinical practice by students in training. Hence, the EPB has concluded that it has no basis for suggesting or requiring that such fees be fixed at any specific level or differ in any manner or proportion from the fees normally charged for services. Though performed by students, such services are actually "provided" by the certified clinicians supervising the work.

However, there are other ethical issues inherent in this situation. The key concern is the nature, type, and quality of the supervision, rather than the fee schedule. The supervised services provided should meet professional standards. If they do, the fees charged are justified; if they do not, there is something fundamentally wrong with the service offered, and the fee level is immaterial in view of Principle of Ethics I of the Code, which obligates members to "honor their responsibility to hold paramount the welfare of persons they serve professionally."

The second issue involved concerns the client's right to be fully informed of the professional qualifications of the service provider. Principle of Ethics III, Rule A of the Code instructs that members "shall not misrepresent their credentials, competence, education, training, or experience." In a separate statement, the EPB has articulated the principle that members must avoid misrepresentation by implying that a communication aide possesses professional training and experience at a level meeting ASHA certification standards. EPB believes that members must observe the same principle in relation to student clinicians to honor their responsibility to the persons they serve professionally.

Effective May 1978.

Reference this material as follows:

American Speech-Language-Hearing Association. (1994). Fees for clinical service provided by students. *Asha*, 36 (March, Suppl. 13), p. 26.

Supervision of Student Clinicians

*Ethical Practice Board
American Speech-Language-Hearing Association*

Issues In Ethics Statements: Definition

From time to time, the Ethical Practice Board or the Council on Professional Ethics determines that members and certificate holders can benefit from additional analysis and instruction concerning a specific issue of ethical conduct. Issues in Ethics statements are intended to heighten sensitivity and increase awareness. They are illustrative of the Code of Ethics and intended to promote thoughtful consideration of ethical issues. They may assist members and certificate holders in engaging in self-guided ethical decision-making. These statements do not absolutely prohibit or require specified activity. The facts and circumstances surrounding a matter of concern will determine whether the activity is ethical.

American Speech-Language-Hearing Association (ASHA) members and certificate holders are employed in a variety of work settings and are required by their employers, by their states, and by governmental agencies, as well as by ASHA, to comply with prescribed personnel standards. The specific standards of these groups can and do differ. However, under the Code of Ethics, individuals delivering or supervising clinical services must hold the appropriate ASHA certification regardless of the work setting, state, or jurisdiction in which they are employed.

Supervision of "student clinicians" (as defined by the Educational Standards Board to refer to both undergraduate and graduate students) is one situation in which discrepancies may exist among state requirements for teacher certification in speech-language pathology and audiology, state licensure in the professions, and ASHA certification standards.

In states where credential requirements or state licensure requirements differ from ASHA certification standards, supervised clinical experiences (including "student teaching") will satisfy ASHA certification (CCC) requirements for only those practicum hours supervised by ASHA-certified personnel.

It has come to the attention of the Ethical Practice Board (EPB) that ASHA-certified personnel have signed for clinical practicum experiences that were actually supervised by non-ASHA-certified individuals. It is unethical for certificate holders to approve or sign for clinical hours for which they did not provide supervision.

ASHA members and certificate holders engaged in the preparation, placement, and supervision of student clinicians must make every reasonable effort to ensure that direct practicum supervision is provided only by professionals holding the appropriate CCC. They must inform students who engage in student teaching or other clinical practice under a non-ASHA-certified supervisor that these experiences cannot be applied to ASHA certification.

The EPB cites and interprets the following sections of the Code of Ethics that pertain to this issue:

Principle of Ethics I: Individuals shall honor their responsibility to hold paramount the welfare of persons they serve professionally.

Principle of Ethics II, Rule 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.

Principle of Ethics II, Rule D: Individuals shall delegate the provision of clinical services only to persons who are certified or to persons in the education or certification process who are appropriately supervised. The provision of support services may be delegated to persons who are neither certified nor in the certification process only when a certificate holder provides appropriate supervision.

Principle of Ethics IV, Rule B: Individuals shall not engage in dishonesty, fraud, deceit, misrepresentation, or any form of conduct that adversely reflects on the professions or on the individual's fitness to serve persons professionally.

Effective June 1991.

Reference this material as follows:

American Speech-Language-Hearing Association (1994).
Supervision of student clinicians. *Asha*, 36 (March, Suppl. 13), pp. 13-14.

Individuals who hold only the CCC-SLP shall limit judgments and descriptive statements about the results of hearing screening procedures to a determination as to whether the person has passed or failed the screening. Persons who fail the hearing screening should be referred to a certified audiologist.

Individuals who hold either the CCC-A or the CCC-SLP may provide aural rehabilitation services in compliance with ASHA policies.¹

Services related to evaluating, selecting, fitting, or dispensing hearing aids and other amplification devices shall be provided only by individuals who hold the CCC-A. Services related to the evaluating, selecting,

¹The Association has developed Guidelines and Position Statements that offer detailed additional direction for clinical practice in both audiology and speech-language pathology.

adapting, or dispensing of devices intended to augment speech or language production shall be provided only by Individuals who hold the CCC-SLP.

Except as set forth above, an individual shall not provide clinical services in the profession for which he or she is not certified. Certificate holders in one profession may, however, provide support services in the other profession under appropriate supervision. Such services shall comply with Association guidelines regarding the use of support personnel. Because there exists in such situations a reasonable likelihood of confusion concerning the limited nature of the service provided, the certificate holder shall not use the Certificate of Clinical Competence (CCC-A or CCC-SLP) in any way when functioning as support personnel.

Effective December 1991.

