



University of
Pittsburgh

Department of Communication
Science and Disorders

School of Health and Rehabilitation Sciences

SLP PROGRAM ACADEMIC & CLINICAL HANDBOOK:

for

**SLP MA/MS Degree Students
in Communication Science and Disorders**

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Academic Year 2025-2026

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LINKS TO SUPPLEMENTAL MATERIALS -- SLP

- [Clinical Education Action Plan](#)
- Assessment of Clinical Skills Forms
 1. [Formative Assessment of Clinical Skills: SLP](#)
 2. [Hours Log: SLP Case Log Form](#)
 3. [Simulation Hours Log Form](#)
 4. [Evaluation of Clinical Teaching Form](#)
 5. [Summary of Clinical Hours \(SLP\)](#)
 6. [Placement Expectation Worksheet](#)
 7. Core Clinical Skill Form
- Professional Information and Materials
 1. [2020 Standards and Implementation for the Certificate of Clinical competency in Speech/Language Pathology.](#)
 2. [Scope of Practice in Speech-Language Pathology](#)
 3. [Code of Ethics \(American Speech Language Hearing Association\)](#)

Part 1: Academic and Clinical Handbook

Welcome!

This handbook is for students entering the Master of Arts (MA) and Master of Science (MS) in Communication Science and Disorders with a concentration in Speech-Language Pathology in the Department of Communication Science and Disorders (CSD) during the Fall Semester of 2025. This handbook contains information about the *academic* and *clinical* requirements. This academic handbook is organized into sections:

- Part 1 – Core Handbook
 - **Section I** contains general information (e.g., policies on academic integrity, advising, financial aid).
 - **Section II** includes information about the MA/MS programs in Speech-Language Pathology.
- Part 2 – Clinical Education Handbook
 - **Section III** includes policies, requirements and other overview information about education pertaining to clinical placements.
 - **Section IV** includes information on the documentation and software systems we use to track progress in clinical placements.
 - **Section V** includes further information regarding Clinic 1 Placements

Please read this handbook carefully. **Students are responsible for all information contained herein.** To ensure your familiarity with this information, **students must complete the survey in the Canvas Course to document that they have read the Handbooks** within the first 2 weeks of your first semester in the program.

Students also should become familiar with information in the following additional resources:

- The School of Health and Rehabilitation Sciences (SHRS) Graduate & Professional Catalog
- The SHRS Graduate Student Handbook (<https://www.shrs.pitt.edu/current-students/student-handbooks>)
- Course Descriptions (https://catalog.upp.pitt.edu/content.php?catoid=226&navoid=23585&filter%5Bitem_type%5D=3&filter%5Bonly_active%5D=1&filter%5B3%5D=1&filter%5Bcpage%5D=11)
- The University Calendar and Schedule of Classes (<https://www.registrar.pitt.edu/calendars>)
- The University Guidelines on Academic Integrity (https://www.provost.pitt.edu/sites/default/files/academic_integrity_guidelines.pdf)
- The page of the American Speech-Language-Hearing Association (ASHA) Speech-Language Pathology: (<https://www.asha.org/certification/slpcertification/>)

In addition to offering these degrees, the Department of Communication Science and Disorders provides the opportunity for students to meet the academic and clinical training requirements for:

- ASHA's Certificate of Clinical Competence (CCC) in Speech-Language Pathology (CCC-SLP) and Audiology (CCC-A) (<https://www.asha.org/certification/>)
- Pennsylvania Department of Educational Certification: Speech-Language Impaired (<https://www.education.pa.gov/Educators/Certification/Pages/default.aspx>)
- Pennsylvania State Licensure in Speech-Language Pathology (<https://www.dos.pa.gov/ProfessionalLicensing/BoardsCommissions/Speech-Language%20Pathology%20and%20Audiology/Pages/default.aspx>).

Each of these credentials has separate standards and requirements, and **students are responsible for monitoring and documenting their progress** toward meeting these standards. Please see the relevant sections of this handbook devoted to these credentials for more information about them.

The Department of Communication Science and Disorders reserves the right to make changes and

corrections to this document as necessary. If students have questions about the information contained in this handbook, *they should consult their academic advisor.*

Mission and Vision of the Department of Communication Science and Disorders

Mission Statement

Our mission is to be a model program driving the generation, dissemination, and application of knowledge in the science and practice of audiology and speech-language pathology.

Vision Statement

We are a nationally and internationally recognized program in the training of audiologists, speech-language pathologists, and speech and hearing scientists and provide opportunities for trainees to become leaders in clinical service, education, research, and service to the professions.

Equity, Justice, and Inclusion (EJI) in Pitt CSD

Our EJI mission

The Equity, Justice, and Inclusion (EJI) Working Group at the University of Pittsburgh (Pitt) Department of Communication Science and Disorders (CSD) was established in May of 2020. Members of that group defined the following EJI mission for Pitt CSD:

To create and nurture a culture of equity, justice, and inclusion that will permeate every corner of our department. Our community will become known for our willingness and ability to:

- Celebrate the diversity of communication that exists in the world, including and especially within groups of people with communication difficulties.*
- Recognize and challenge mechanisms that impact equity, diversity and inclusion in practice, policy, research, and education.*
- Center and amplify the voices of disenfranchised and marginalized groups.*
- Act as knowledgeable and strategic contributors for dismantling systems of oppression.*
- Promote thoughtful reflection and inspection of both self and systems in their institution(s).*

Our mission is well-aligned with the commitment of the University of Pittsburgh to protect against all forms of discrimination, harassment, or retaliation based on disability, race, color, religion, national origin, ancestry, genetic information, marital status, familial status, sex, age, sexual orientation, veteran status, or gender identity or other factors, as stated in the University's Title IX policies and procedures. The University is committed to taking prompt action to end a hostile environment that interferes with the University's mission. Within Pitt CSD, students should expect to engage in discussions about how program content and the fields of Speech-Language Pathology and Audiology intersect with issues of EJI. These discussions may be initiated by anyone. Students are invited to raise their own questions and provide feedback of relevance to topics of EJI and the materials and settings of their respective program.

Co-Creating a Healthy Culture of EJI in Pitt CSD

Conversations about EJI in our field will inevitably overlap with political and social issues and can often feel uncomfortable and challenging. In these moments of opportunity to share and receive differing viewpoints, everyone involved in the discussion will be asked to communicate as thoughtfully and respectfully as possible. We seek to create a culture of humility in which all stakeholders are committed to actively promoting EJI in Pitt CSD. This will often require that individuals self-reflect and self-inspect to identify (and then dismantle) their biases that might harm others. We also seek to create a culture in which each EJI-committed stakeholder is met and supported wherever they are on their own personal EJI journey, while also being held accountable for any words and deeds that have the potential to cause harm. As such, we will try to "call people in" rather than "calling them out" or "cancelling them," as much as possible. Sometimes this will require that others step

in to help promote healthy dialogue. Because interpersonal problems are often best solved with interpersonal solutions, we encourage students to ask for support from others to ensure that space is held for them to voice or respond to concerns. Any of the below individuals (see next section) may be called in to help facilitate these conversations.

Communicating Concerns in the Domain of EJI

Our faculty and staff will do their best to moderate discussions related to EJI as appropriate, but some issues might need greater support and several avenues are available to students. If you have concerns or complaints about how a conversation was managed or how the learning environment is being maintained, consider the following options.

- Students are encouraged to connect directly with the relevant parties. You can address the issue in the moment if you feel comfortable doing so, you can ask the individual(s) to touch base immediately following class or during an upcoming break in the lecture, you can request a private meeting, or you can share your concerns via email.
- Students can also share their observations with a CSD Student Representative for Equity, Justice, and Inclusion (SREJI), with or without a request that the concern be communicated up to the faculty level. The SREJI email address is PittCSD_SREJI@groups.pitt.edu. SREJIs are volunteers who self-select to engage in this form of departmental service. All students committed to upholding EJI in Pitt CSD are welcome to serve as SREJIs.
- Students are invited to communicate with Dr. Leah Helou (she/her), whose major departmental service role is centered on supporting healthy evolution of the EJI mission.
- If your concern relates to biased incidents of harassment, discrimination, or sexual misconduct, you may report the incident directly to the university's [Office of Compliance, Investigations and Ethics](#).
- If you have concerns you would like to formally address that do not meet Title IX standards (or you don't wish to take that route), the optimal "chain of command" is as follows. As noted above, it may be ideal to address the issue directly with the party(-ies) involved. You may alternatively/also raise your concerns to the attention of the Director of the program you attend (e.g., Audiology, Speech-Language Pathology, Undergraduate, or PhD Program). Next, the concern would be raised to the Vice-Chair of Clinical Education or the Vice-Chair of Academic Affairs depending on the context of the issue (i.e., in clinical instruction or classroom instruction). The next step would be to meet with the Department Chairperson. Please note that while faculty and staff are not generally required to report bias incidents shared with them, they *are* required to report disclosures of sexual misconduct having affected a university community member.
- If you wish to maintain complete confidentiality and would like some support as you process your experiences, you may contact the University Counseling Center (412-648-7930).

Please also refer to the EJI-specific page on our departmental website for resources. <https://www.shrs.pitt.edu/csd/about/csd-inclusion-initiative> No student will be penalized for voicing any concerns or complaints. We hope to honor the spirit of our EJI mission as well as the essence of our field as communication specialists by engaging in healthy community-based dialogue. We thank you for helping to co-create a healthy environment for all community members.

One of our goals is to provide resources so you will feel included in the Pitt Community and for you to find the connections, affinity groups and community that will support your time here at Pitt. We have highlighted a few below. If you come across resources that we should share, please let us know and we'll include them.

University-level supports: See <https://www.studentaffairs.pitt.edu/inclusion-and-belonging> for details on identity-based student groups.

SHRS-level supports: In SHRS, Student Affinity Groups (<https://www.shrs.pitt.edu/student-activities/shrs-affinity-groups/>) exist with the goal of increasing social support amongst underrepresented graduate students in SHRS.

Goals of the Professional Degree Programs

The CSD Department's objective is to help students acquire the knowledge and skills of their discipline through in-depth academic content, sequential structured clinical education experiences, and learning assignments. The goal is to prepare clinicians who demonstrate strengths in the following:

- The ability to analyze and synthesize information from a broad base of knowledge in communication science and disorders
- A problem-solving attitude of inquiry and decision-making using evidence-based practice
- Clinical competency in prevention, screening, evaluation, diagnosis, and treatment of patients with varied communication and swallowing disorders
- The ability to communicate effectively and professionally
- Self-evaluation skills resulting in active steps to develop/refine clinical competencies & extend their knowledge base
- Ethical and responsible professional conduct
- Skills to work in interprofessional settings

Section I: General Information

Academic Integrity

According to the SHRS Academic Policies Manual (posted on the SHRS website):

“Students have the responsibility to be honest and to conduct themselves in an ethical manner while pursuing academic studies. Students have the right to be treated by faculty in a fair and conscientious manner in accordance with the ethical standards generally recognized within the academic community (as well as those recognized within the profession). Should a student be accused of a breach of academic integrity or have questions regarding faculty responsibilities, procedural safeguards including provisions of due process have been designed to protect student rights. These may be found in the SHRS *Guidelines on Academic Integrity: Student and Faculty Obligations and Hearing Procedures*.”

It is every student's obligation to know and abide by the University of Pittsburgh's code for academic integrity, which can be found at https://www.provost.pitt.edu/sites/default/files/academic_integrity_guidelines.pdf, and *the* CSD adds an additional requirement: *Students should not submit for credit any work previously or concurrently submitted for credit in another course without prior consent of the instructor.*

Students found in violation of this code will be subject to disciplinary action, in accordance with the policies and procedures stated in the SHRS *Guidelines on Academic Integrity: Student and Faculty Obligations and Hearing Procedures* (<http://www.shrs.pitt.edu/student.aspx?id=3513T&sbp=4088>)

Academic Probation and Dismissal Policy

Adapted from the SHRS *Graduate & Professional Studies Catalog* ([University of Pittsburgh Catalog - Academic Regulations](#))

Graduate students who have completed at least 9 credits and whose cumulative GPA falls below a 3.000 will be placed on academic probation and/or suspension and will receive written notification of this status. At this point, *it is the student's responsibility* to meet with their advisor and/or program director

To be removed from academic probation, the student will need to achieve a cumulative GPA of 3.000 within their next two terms of study. Failure to do so may subject the student to recommendation for immediate dismissal from the program by the Department Chair, in collaboration with the Associate Dean of Graduate Studies.

Students who fail to demonstrate progress toward meeting graduation requirements in a timely manner may be placed on academic probation or recommended for dismissal from the program by the Department Chair, in collaboration with the Associate Dean of Graduate Studies. SHRS reserves the right to terminate a student at any time for academic or other reasons. Additional information about minimum passing grade requirements can be found under “grading policies” in this handbook.

Graduate students must have a 3.000 cumulative GPA to be eligible to graduate. Students on probation are not eligible to graduate, defend thesis projects, or take comprehensive examinations.

Dismissal from the program is at the discretion of the SHRS Dean. Notwithstanding the foregoing, in the event it is not mathematically possible for a student to remediate their cumulative program GPA within their next two terms of study the student may be immediately dismissed. A student may appeal their dismissal with the University of Pittsburgh Provost office.

Advising

Students are co-advised by two primary academic advisors in the MA/MS SLP program supported by clinical advising from the clinical education team. Students are assigned an academic advisor when they enter the department – though multiple advisors may support the student. The academic advisor is responsible for assisting their advisee as they monitor their progress through the program. Other faculty and staff in the department communicate regularly with the academic advisors, to ensure that the advisors are aware of their advisees’ performance in classes or clinical assignments. As described under “Annual Review,” student performance also will be discussed by faculty and staff during a specially designated department meeting to ensure that all students are receiving the support they need in the program. Notes from such meetings will be documented in advising files by the academic advisors.

Students should contact their academic advisors at any time if they encounter problems or have questions about any aspect of the program.

Academic advisors are assigned to each student to support them throughout the program. Academic advisors hold large group, small group, and individual advising sessions (as needed) throughout each semester. Academic advisors also track any discussions and meetings (which may include departmental and clinical correspondence) with their advisees in an electronic advising system, accessible only to staff and faculty in the program. Additional documentation will be conducted during any additional advising meetings that the student and academic advisor may schedule. Other faculty may also enter information into the electronic student advising system. Students will be notified of their assigned advisor at the beginning of the program. Their advisor may change in future years of the program.

Student Support Specialist

The Student Support Specialist role is broad, and their support is complementary to your academic advisor's role. They provide referrals to on and off campus resources and help students navigate personal difficulties that arise. Their office also serves as a quiet space for when a break or recharge is needed. If students are having an issue and are not sure where to begin, asking the Student Support Specialist is a great place to start. They can guide you to the proper person or resource to get things resolved. They can be reached via email, teams chat, or in Forbes Tower (5071B).

Annual Review

CSD faculty and staff conduct a yearly review of all graduate students. The purposes of this review are (a) to verify each student's progress toward the degree, (b) to identify students who are experiencing difficulty, and (c) to discuss supports to ensure student success. Additional reviews will be conducted as necessary if the faculty identifies concerns. The speech-language pathology clinical education team also review student performance on an ongoing basis as needed.

Appeals

If a student has a concern with a faculty or staff member or with another student, they are encouraged to address this concern with that individual directly. If the concern remains unresolved, the student should speak first with their faculty advisor, their program director, the appropriate Vice-Chair (e.g., Academic Affairs or Clinical Education) and then, if needed the Department Chair. The student also may consult with the SHRS Ombudsman for graduate students. Policies for this, and further appeals, are described in the "SHRS Graduate Student Handbook" available in the SHRS Student Resources Hub (Pitt Passport Required).

Attendance

Students are expected to attend all classroom and clinical obligations throughout their programs. Missing classes or clinic should be a rare instance. Attendance is managed individually by course instructors per the syllabus. If a student must miss a class, they must notify the course instructor, program director, and their academic advisor – the program director and advisor advisors can be notified via the online *SLP Program Absence Form*. This notification should be provided as soon as the student has information about a potential absence. Notifying faculty and staff does not result automatically in the absence being counted as excused. We understand that emergencies occur. If a student suddenly needs to miss a class, they are expected to notify the instructor, program director, and academic advisor as soon as possible. The student is responsible for obtaining information and notes from missed classes, and all assignments must be completed on time unless the instructor makes accommodations. Excessive absences may result in a failing grade in the course even if the student's performance in the class would otherwise indicate a passing grade.

Students should follow the policy and procedures outlined in the Clinical Education Section of the Handbook for absences from their clinical placement. **It is not permissible for students to miss clinic to prepare for assignments or projects in any other course at any time during their program.** Excessive absences may be cause for earning a failing grade in the clinical practicum experience.

Awards

There is an award available to second-year MA/MS students in speech-language pathology and second-year students in the Doctor of Audiology (AuD) program.

- The *Emeritus Award* was established in 2002 from an endowment funded by an emeritus CSD faculty member. This award recognizes outstanding *academic* achievement.
- Once per year, usually during the Fall term, faculty nominate students for this award by submitting letters of support outlining nominees' accomplishments and contributions during their graduate school careers. Faculty then vote to select the recipient from this pool of nominees. Up to two awards are provided each year. The recipient of each award receives a letter of acknowledgment and a monetary award. The recipients' names are also inscribed on a plaque that is displayed in the main Department office.

The *Audrey Holland Endowed Award* was established to support undergraduate and graduate students to

design and conduct research in CSD and is open to all CSD students. The awardee may use the award for research-related supplies and equipment, subject participation, statistical support, travel to present research findings, and other related items. Students conducting or planning to conduct research may self-nominate for the award. For detailed application procedures, see Appendix A. The Award amount will be announced each year based on available funds. Awardees are honored at the University Honors Convocation.

The American Speech-Language-Hearing Association has competitive awards available for students pursuing graduate clinical education. See their respective websites for details and deadlines.

Certification

American Speech-Language-Hearing Association (ASHA) Certificate of Clinical Competence (CCC)

The Certificate of Clinical Competence (CCC), offered by the American Speech-Language-Hearing Association (ASHA), indicates professional certification in Speech-Language Pathology or Audiology. **Students apply for the CCC after graduation, though they should learn about the CCC application process and requirements before graduating.**

For information, see ASHA's Membership and Certification Handbook Questions about ASHA's requirements for the CCC may be addressed to the ASHA Telephone Hotline (1-800-498-2071) or consult the ASHA website (<https://www.asha.org/certification/>) for more information. Students should be sure to use the correct form for the standards under which they are applying.

Apply for the Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP) online at: <https://www.asha.org/certification/>

Council on Academic Accreditation (CAA) – Student Appeals

The clinical entry degree programs in Speech/Language Pathology (MA and clinical MS in SLP) are accredited by the Council on Academic Accreditation (CAA). CAA provides oversight of clinical entry-level degree programs to ensure that they allow students to meet the requirements for the Certificate of Clinical Competence (CCC).

Students, faculty, staff and members of the public who feel that a clinical program is not in compliance with CAA standards may submit a complaint to CAA. (See instructions for filing complaints a <https://caa.asha.org/programs/complaints/>). CAA may be reached by phone at 800-498-2071 or 301-296-5700. Written communication can also be mailed to:

Chair, Council on Academic Accreditation in Audiology and Speech Language Pathology
ASHA

2200 Research Blvd #310
Rockville, MD 20850
accreditation@asha.org

Disability Accommodation

Students who are or may be requesting accommodation for a disability should contact their course instructors and the Office of Disability Resources and Services (DRS) at 140 William Pitt Union, 412-648-7890 or 412-383-7355 (TTY) (<http://www.drs.pitt.edu/>) as early as possible each term. DRS will verify the disability and determine reasonable accommodations for each course.

Email Communication

All students are required to check their University of Pittsburgh email accounts regularly for communication from the department or school. While students may forward their mail to other accounts, faculty and staff are permitted to use only students' official University of Pittsburgh email addresses. Students should check frequently to ensure that mail is not blocked due to full mailboxes or misdirected forwarding addresses. **Students are responsible for all requests, deadlines, and information that are sent to their Pitt email accounts. The SHRS Graduate Handbook contains information regarding a failure to communicate and students should familiarize themselves with this information in the Student Information Hub (Pitt Passport Required).**

SLP students receive a weekly **Newsletter: SLP Update** sent each Friday. These newsletters contain information that requires your action. You need to open this communication (newsletter) weekly and review all of the material. The newsletters were created to put important information into one location each week rather than sending you many different emails with various instructions. It is your responsibility to make use of the information in the newsletters each week.

To be consistent with Health Sciences Professional Programs, if students choose to indicate their area of study in their email signature line or in other correspondence, they should indicate "Speech-Language Pathology Student." There should be no reference to the degree being pursued.

Faculty and Staff

CSD faculty members are available to assist students with any aspect of their academic and clinical training. Current biographical sketches can be found on the CSD Department website.

Financial Aid

The CSD policy statement on financial aid states that departmental aid will reward academic merit. Thus, students with the strongest academic credentials and highest rankings within their programs have the most opportunities for aid. The CSD Director of Student Financial Aid and Awards (Dr. Kendrea Garand) will provide all CSD students with information about funding opportunities. As new information is received, it is sent via email to all groups of students that meet the award's eligibility criteria, and information about recurring awards can be found at: <https://www.shrs.pitt.edu/academics/csd/slp/cost/>. The Pitt Office of Admissions and Financial Aid provides information about student loans (412-624-7488; <https://financialaid.pitt.edu/>) and other resources may be found online (e.g., <http://www.fastweb.com>, <http://www.finaid.org>). Students may want to investigate programs for student loan forgiveness based on 10 years of work for a 501c3 (non-profit).

<https://www.equaljusticeworks.org/law-students/student-debt-resources/>

<https://www.asha.org/students/student-loan-and-refinancing-information/>

Forbes Tower

You can find gender neutral bathrooms available on the third floor of Forbes Tower, which all students can access via elevator without special permission.

Forbes Tower Room 4058 is reserved as a lactation room. Faculty, staff, and students have access to this room. It is unlocked every morning and there is signage that you can use to indicate that the room is in use.

Grading Policy

The minimum required passing grade in any course taken in a graduate program is a C. Any course in

which a graduate student receives a grade of C- or lower will *not* count toward degree requirements. Students receiving such a grade in a required course (undergraduate or graduate) must repeat the course and achieve a higher grade. In keeping with SHRS policies, there is a limit on the number of times a student may repeat a course; **failure to receive an acceptable grade after the second opportunity to complete a required course may result in the student being dismissed from the program and SHRS.** The full regulations can be found in the SHRS Graduate Student Handbook: [SHRS Catalog - Policies](#)

Note that **it is possible for a student to achieve a non-passing grade (C- or below) even if the scoring of points for the class indicates a higher grade.** Such situations may occur when a student has an excessive number of unexcused absences, fails to complete an assigned remediation demonstrating acquisition of intended knowledge and skills, or does not complete all assignments. Thus, the mathematical calculation of a final score for a class *can be overridden* by faculty to reflect whether a student has met all of the goals outlined in the class syllabus. **A passing grade of C or above is available only to those students who have achieved the intended knowledge and skills, regardless of the numerical score that might be attained.**

Review all course syllabi for policies and requirements regarding grading.

Graduation

At the **beginning** of the term in which a student plans to graduate, the student **must** file an Application for Graduation which is completed online. The School of Health and Rehabilitation Sciences Student Services Office will provide you with the information you need to complete this process. Students also must be certain to indicate the degree designator they are seeking. For example, students in the clinical master's program typically would receive an MA, though students who have completed a thesis would instead receive a MS.

Reminders may not be issued; it is the students' responsibility to remember this requirement when nearing graduation!

Students must be registered for at least 1 credit during the term in which they plan to graduate, and they must have been registered for a minimum of 3 credits during the 12 months preceding their graduation month. Thus, if a student has completed all coursework and clinic requirements but has not yet passed the SLP-SAP, they must register for at least one credit of examination (or other legitimate credit) in the term in which the examination is taken to graduate that term.

Before a student can graduate, their academic advisor must (a) verify that the student has met the academic requirements for the degree program (including passing all required classes and completing the minimum number of credits); (b) certify that any courses having grades of "G" (work incomplete for reasons beyond student's control), "I" (work incomplete for academic reasons), or "NC" (unsatisfactory) are not required for the degree. **All "I," "G," or "NC" grades must be removed before graduation if they were received in classes that are required for the degree;** and (c) have a minimum overall GPA of 3.0.

Before graduation:

- the Program Director will confirm that students have completed all academic degree requirements
- the thesis advisor will verify completion of the thesis (if the student has completed a thesis)
- the Director of Clinical Education, verifying completion of all clinic requirements and ASHA clinical requirements (if the student has completed a clinical program). The Director of Clinical Education also oversees documentation of requirements toward PDE Certification for SLP students.

Students who are graduating sometimes need letters verifying that they have graduated; that letter

verifying graduation must come from the SHRS Registrar, currently Ms. Kellie Beach. You must send Ms. Beach an email (and copy your Program Director) to ask for a letter of verification. No letter will be provided until all grades are submitted and your file has been certified for graduation. If you need a letter before that, it will state that you are expected to graduate.

Laptops and Tablets

Students are permitted to use devices to take notes in class, provided that their participation in class—and the participation of their classmates—is not adversely affected. Individual faculty may place limitations or restrictions on device use in their classes. These will be announced to students in class or described in the course syllabus.

Organizations Specific to Speech and Hearing. Professional and Student

National Student Speech, Language and Hearing Association (NSSLHA)

The University of Pittsburgh Chapter of the National Student Speech, Language and Hearing Association (NSSLHA) is open to all CSD graduate and undergraduate students. NSSLHA is responsive to students' professional and social needs and is an active and integral part of the department. Information about the Pitt chapter NSSLHA meetings, along with other announcements of coming events, will be communicated electronically.

The National Black Association of Speech-Language and Hearing (NBASLH)

This affiliate chapter was formally created During the 2022-2023 academic year. It is an inclusive student-led organization that includes three Pittsburgh Universities (Carlow University, Duquesne University, and the University of Pittsburgh). Its purpose is to address diversity in Audiology and Speech-Language Pathology, create a safe space for marginalized students, and provide a creative space for professional networking. The contact for this group is Dr. Nancy Gauvin (Nancy.Guavin@pitt.edu, faculty advisor). Please reach out if you are interested and look for announcements about meetings and activities.

LGBTQ+ CSD Student Association

This organization offers growing academic and professional support services, including a mentorship program that pairs student mentees with LGBTQ+ clinicians. They also plan to curate and disseminate accurate, timely information ranging from LGBTQ+ friendliness ratings of campuses to educational, anti-discrimination resources covering issues affecting our community and marginalized populations.

<https://lgbtqcstdsa.org/>

Prerequisite Courses

Prior to enrolling in required courses for the MA/MS SLP degree program, students must complete several prerequisite courses that are required for ASHA certification. This includes courses in biological sciences, physical sciences, social/behavioral sciences, and statistics.

Typically, these prerequisites are completed as part of an undergraduate or post-Baccalaureate program prior to admission into one of the Communication Science and Disorders graduate programs. Completion of these pre-requisites is verified at the initial advising meeting.

To apply for clinical certification, students must document the completion of 12 prerequisite undergraduate credits (3 each in the areas of biological science, physical science, social/behavioral science, and statistics).

Registration and Tuition

The speech-language graduate program uses a flat rate tuition. Students are not permitted to register for more than 15 graduate credits in a term without written permission from the Dean of the academic center

in which the student is pursuing a degree. Students should recognize that such permission is extremely difficult to obtain and almost never granted. Graduate students who are granted permission to register for more than 15 credits will be billed for each additional credit that exceeds their typical flat rate. Individual schools and departments may restrict the maximum load of their graduate students.

Registration Procedures

The University of Pittsburgh uses an online registration system for course selection. Each semester, students will receive an email indicating when registration for the following term is available and which courses they should register for. The department will register students for the majority of their courses, but some variable scheduled courses (e.g., clinical courses), students must schedule on their own. Questions about registration should be directed to SHRS Student Services. More information about SHRS Student Services can be found in the SHRS Student Resources Hub (Pitt Passport required).

Research Projects

All graduate students are strongly encouraged to contact individual faculty members to learn about opportunities to participate in research projects within the department. Information on research opportunities is available on the department's website.

Sexual Misconduct, Required Reporting, and Title IX

The University is committed to combatting sexual misconduct. As a result, you should know that University faculty and staff members are required to report any instances of sexual misconduct, including harassment and sexual violence, to the University's Title IX office so that the victim may be provided appropriate resources and support options. What this means is that your professors are required to report any incidents of sexual misconduct that are directly reported to them, or of which they are somehow made aware. See <https://www.wellbeing.pitt.edu/civil-rights-title-ix> to learn more about Title IX reporting.

Be aware, there are two important exceptions to this requirement:

A list of the designated University employees who, as counselors and medical professionals, do not have this reporting responsibility and can maintain confidentiality, can be found here: <https://www.studentaffairs.pitt.edu/care-and-resources/care-advocates>

An important exception to the reporting requirement exists for academic work. Disclosures about sexual misconduct that are shared as part of an academic project, classroom discussion, or course assignment, are not required to be disclosed to the University's Title IX office.

If you are the victim of sexual misconduct, Pitt encourages you to reach out to these resources:

- Title IX Office: 412-648-7860
- SHARE @ the University Counseling Center: 412-648-7930 (8:30AM TO 5PM M-F) and 412-648-7856 (AFTER BUSINESS HOURS)

If you have a safety concern, please contact the University of Pittsburgh Police, 412-624-2121.

Other reporting information is available here: <https://report.pitt.edu/>

Social Media Policy

Social media is rapidly expanding, and new outlets are created every day. Professional organizations and ethical codes are often outdated given the rapid expansion of social media. It is essential that students and faculty remain aware and vigilant regarding the social media ethical challenges facing health professionals, clients, patients, and students. Students are responsible for maintaining a professional social media presence

related to any SHRS education activities. Some students may find it helpful to create separate professional and personal social media accounts.

We recommend that students consider the following prior to posting or transmitting on social media:

- Consider the audience and potential impact of your post prior to transmission.
- Assume anything that you post or transmit on social media can be made or viewed by the public.
- An electronic post or transmission is often traceable, without an opportunity for removal.
- Employers often search social media to learn more about you prior to interviews or offered employment.
- Clients/patients often search social media to learn more about you. Proximity based apps and social media pose new challenges to maintaining professional boundaries between health professionals and clients or patients.

SHRS students must:

- Respect the ethical standards of the profession in carrying out their academic assignments.
- Comply with HIPAA's social media rules.
- Read, review, and follow the social media policy of your practicum or internship placement.
- Comply with School and University academic integrity guidelines.
- Do not post or transmit *any* information or reference about your work with clients/patients.
- Do not post clinical encounters, clinical experiences, or information that pertains to working with clients/patients.

Please note that boundaries on social media are no longer as simple as not 'friending' a client/patient, professor, or colleague on Facebook. It is difficult to predict the latest ethical problem or boundary that will arise with social media. Therefore, please remain aware and consult with faculty or supervisors on these important issues. Faculty may have to act upon any material that does not comply with current academic integrity guidelines, professional ethical standards, or HIPAA policies.

SLP Summative Assessment Project (SLP-SAP)

CSD graduate students seeking clinical degrees must pass a culminating experience, typically addressed through a SLP summative assessment project. The SLP summative assessment assesses students' ability to think critically, to communicate their thoughts to others in written and oral form, and to demonstrate their grasp of the major academic and clinical content provided in their graduate program. Additional information can be found in the sections on *Summative Assessment Project* in the portion of this handbook describing each degree program.

SLP students who complete a master's thesis are exempt from the SAP requirement and will be awarded a Master of Science degree

SHRS Impaired Student Policy

The School of Health and Rehabilitation Sciences (SHRS) has the responsibility to educate students to be responsible professionals prepared to provide quality services. Whether in the classroom, the clinical setting, or a research setting, students are expected to demonstrate professional behaviors aligned with respective Scopes of Practice, Codes of Ethics, and Core Functions.

Safety is a critical component in the classroom, the clinical setting, and the research setting. The utmost responsibility of the University, the School, and the faculty is the protection and well-being of individuals in the classroom, the clinical setting, and in research, all of which supersede the educational needs of the student to participate in a degree program.

When a student's psychological and/or physical condition has impaired their ability to participate and perform in the classroom, clinical setting, and/or research, the student will be asked to leave the area. As discussed below, the student will be given the opportunity to hear the reasons for the removal, to discuss the incident with a representative from the school, and to participate in a treatment plan if appropriate. Any expenses incurred because of assessment, treatment, transportation, and monitoring are solely the responsibility of the student.

The existence of a health or personal problem for a student is NOT synonymous with impairment under this policy.

In addition to this, the Care Resources/Division of Student Affairs is available for students:

<https://www.studentaffairs.pitt.edu/care-and-resources/care-managers/care-resources>

When a partner site has a policy regarding fitness for duty, that policy will be followed in addition to the School of Health and Rehabilitation Sciences policy.

Purpose

This policy is designed to:

- Identify and adequately address the needs of students with impairment
- Enhance awareness among faculty and students of the typical characteristics of an impaired student to identify students in need of help
- Protect patients from risks associated with care given by an impaired student
- Promote educational programs and other methods of primary prevention of impairment of all students
- Provide a mechanism for a fair, reasonable and confidential assessment of a student who is suspected of being impaired, including the development of a plan to address the student's academic progress
- Take administrative actions as necessary

Definitions

For the purposes of this policy, impairment is defined as a physical or mental condition, substance abuse, chemical dependence or any other circumstances that interferes with the student's ability to engage safely in patient care or clinical practice.

Reporting Possible Impairment

- a. Self-reporting - Any student who is concerned that they might be impaired or likely to become impaired should contact their respective Program Director to formulate a plan of action to secure appropriate assistance and resources.
- b. Report by others - Any person (e.g., student, faculty, staff, clinical partner, or administrator) who has reasonable cause to suspect that the ability of a student to safely perform their clinical duties may be impaired shall, in good faith, report the student to the respective Program Director.
- c. If a report is determined to be made in bad faith or malicious, the reporting party will be identified to the Dean and may be subject to action under applicable institutional policies and/or laws and regulations.

Process

- a. When there is concern that a student is impaired, a faculty member may remove the student from the applicable area. The student shall be informed of temporary suspension from clinical practice. If warranted by the student's condition, the clinical instructor, campus security, or a representative from the school may accompany the student to the nearest healthcare facility for emergency treatment.
- b. When there is concern that a student poses a risk of harm, an immediate referral will be made to an

- appropriate service provider. If the behavior has occurred in the classroom, clinic, or research setting, the student will be temporarily removed from that setting.
- c. Faculty involved in the identification of a possible impaired student must initially meet with the student and/or person who is reporting the student.
 - d. A subsequent meeting(s) will occur between the student, faculty involved in the identification of the problem, and Program Director. The documented and observable evidence of impaired performance will be reviewed with the student, and the student will have an opportunity to provide an explanation.
 - e. One representative from the University community chosen by the student may accompany the student to any meeting but they may not stand in place of the student during the discussions. Such representative may not be legal counsel.
 - f. During the meeting(s) an individualized plan will be discussed and developed with the student that considers the impact of the student's behavior on the safety of the environment. During the meetings(s) the student may be asked to sign an Authorization for the Disclosure of Protected Health Information and may submit relevant medical records from their treating physician. If the student agrees with the recommended plan, the student will proceed with implementation.
 - g. If agreed to, the student must seek and select a treatment provider when recommended by the Program Director in a timely manner (not more than 2 weeks). Costs of treatment will be the student's responsibility.
 - h. If the student has been referred for treatment, the student will be permitted to return to practice only on the specific recommendation of an appropriate treatment provider that the student is capable of safe and skilled performance in accordance with School or Programs Scopes of Practice, Codes of Ethics, and Core Functions.
 - i. The student has the right to refuse this assessment, treatment, and further monitoring. In which case the student may file an appeal [see link below].
 - j. The school may not permit a student to return to practice without certification from a recognized healthcare provider that they have completed treatment, is undergoing treatment, or does not need treatment, and is fit for duty.

Monitoring

- a. The student successfully completing the treatment period will be monitored by the Program Director or faculty designee for progression in the degree program.

Leave of Absence and Re-entry

- a. An impaired student will be allowed a leave-of-absence in accordance with the policy outlined in the SHRS Student Handbooks.
- b. If the student requests a medical leave-of-absence, procedures for the leave and re-entry will be followed as outlined in the SHRS Student Handbooks.

Unresponsiveness to Intervention

- a. If the student does not responsibly cooperate or respond to the plan created by the Program Director or faculty designee, the student may be required to take a leave of absence, be suspended, or be dismissed. Students can appeal this decision using the [SHRS appeals process](#)

Confidentiality

- a. Confidentiality for every student is to be maintained throughout the process consistent with the University's FERPA Policy and Procedure.

File

- a. All files will be kept by the student's respective department/program after the student graduates in accordance with university policy.

In addition to this policy, the University of Pittsburgh has developed resources to assist faculty and staff with distressed students. The Faculty and Staff Guide to Helping Distressed Students is available as well as this a whole variety of links and options for assisting distressed students in the Student Wellness section of the SHRS Student Resources Hub (Pitt Passport required).

When a partner site has a policy regarding fitness for duty, that policy will be followed in addition to the School of Health and Rehabilitation Sciences policy.

Substitution of Courses/Course Equivalency

Students who believe that they have fulfilled the requirements of a graduate course through a different course may request review of that course by the current instructor of the course for which they are requesting substitution. The student should bring all relevant materials available about the content and scope of the course that they have completed (e.g., the course syllabus, the textbook used, class notes, examinations, papers, projects) to the current course instructor to determine whether the courses are equivalent. **The current course instructor has the sole responsibility and authority to make this determination.** If the instructor approves the course equivalency, they will place a signed and dated letter in the student's departmental academic file. *Approval of course a substitution or equivalence does not reduce the number of required credits for the degree.*

Core Functions

To acquire requisite knowledge and skills to practice as a speech-language pathologist, graduate students must be able to function in a broad variety of clinical situations and provide a wide spectrum of patient care. Students must possess certain skills and abilities to successfully complete both the academic and clinical components of the curriculum with or without reasonable accommodations for disabilities.

These skills and abilities are divided into five areas: *communication, motor, sensory, intellectual-cognitive, interpersonal and cultural responsiveness*. Students must be able to undertake all curricular requirements to the satisfaction of faculty to become competent and reliable practitioners. To this end, the Faculty of the Department of Communication Science & Disorders has established the non-academic criteria (Core Functions) that graduate students must possess to enroll in and to continue in academic courses and clinical placements required for the MA/MS SLP degree.

These Core Functions are shown as samples in Appendix B or Speech-Language Pathology. **All students must carefully review the specific core functions for their program and are encouraged to review these documents each semester while enrolled in the program (Speech-Language Pathology).** All students' confirmations that they meet the core functions are kept electronically.

Section II: Speech-Language Pathology Degree Programs

Overview

Graduate students in Speech-Language Pathology may pursue one of the master's degree options described below (MA or MS in Speech-Language Pathology). This section of the handbook describes requirements for the SLP Master's programs only.

Master's Degrees in CSD with a Concentration in Speech-Language Pathology

Two options are available to students seeking a master's degree in Speech-Language Pathology:

- Students who wish to become **licensed and certified Speech-Language Pathologists (SLPs)** must successfully complete the coursework and clinical practicum requirements listed below, in addition to either the SLP Summative Assessment Project (SLP-SAP) or a master's thesis (both described below). Those completing the SLP-SAP will be awarded the Master of Arts degree; those completing a thesis will be awarded the Master of Science degree.
- Students interested in **master's-level research preparation** rather than clinical practice in Speech-Language Pathology are required to meet with their advisor to develop a plan that is approved within the department. Master's level research preparation requires that the student complete all of the academic coursework listed below. In place of credits of clinical practicum, students in the "research track" may complete coursework in statistics or research design approved by their academic advisor, and a thesis.

Non-Clinical Master's Degree in CSD with a Concentration in Speech-Language Pathology

Students who do not complete the clinical training will be required to complete a thesis and receive the Master of Science degree; they will not be eligible to seek clinical licensure or certification in Speech-Language Pathology upon graduation. Students who complete *both* the clinical requirements and the thesis will receive the Master of Science degree *and* be eligible for licensure and certification in Speech-Language Pathology.

Statute of Limitations

All requirements for MA and MS degrees must be completed within a period of four consecutive calendar years from the student's initial registration for graduate study; all professional masters within five years (includes both full time and part time students). <https://catalog.upp.pitt.edu/index.php>

Required Coursework

Following is a *sample* schedule listing the required courses for the clinical Speech-Language Pathology Master's degree. Due to scheduling changes or individualization, a student's actual program may not match this sample exactly, though the sample lists all coursework required at the time that this handbook was prepared. Students will be provided with the Plan of Study at the beginning of their program for review.

Courses	Course #	Credits
Fall-1 Coursework		
Proseminar	2060	0
Intro to Clinical Decision-Making	2064	3
Clinic Practicum 1	2065	1
Clinical Skills Simulation Lab 1	2030	1
Speech Sound Production Disorders	2070	3
Child Language Disorders 1	2071	3
Dysphagia	2076	3
Pediatric Feeding and Swallowing	2079	1
TOTAL		15
Spring-1 Coursework		
Proseminar	2060	0
Motor Speech Disorders	2039	3
Clinic Practicum 1	2065	1
Clinical Skills Simulation Lab 2	2030	1
Stuttering	2072	3
Neurogenic Language & Cognitive Communication Disorders 1	2130	3
Professional Issues 1	2082	1
Child Language Disorders 2	2250	3
TOTAL		15

Courses	Course #	Credits
Summer-1 Coursework		
Clinic 1 Practicum (remediation)	2065	1-2
Clinic 2 Practicum: Healthcare	2066	1-4
Clinic 2 Practicum: Education	2067	
Autism	2028	1
Clinical Service Delivery	2735	1
Educational Service Delivery	2514	1
Professional Issues 2	2083	1
Integrated Cases 1 (or FA or SP)	2525	1
Summative Assessment Project (or FA or SP)	2069	1
Research and Thesis Master's Degree	2000*	1
Fall-2 Coursework		
Clinic 2 Practicum: Healthcare	2066	1-4
Clinic 2 Practicum: Education	2067	
Augmentative Communication	2077	3
Research Strategies & Tactics	2081	3
Neurogenic Language & Cognitive-Communication Disorders 2	2230	3
Summative Assessment Project**	2069	1
Integrated Cases 1**	2525	1
Research and Thesis Master's Degree	2000*	1-3
TOTAL (academic only to max)		9-14
Spring-2 Coursework		
Clinic 2 Practicum: Healthcare	2066	1-4
Clinic 2 Practicum: Education	2067	
Voice Disorders	2073	3
Aural Rehab Across the Lifespan	2121	3
Counseling for Communication Disorders	2162	2
Summative Assessment Project**	2069	1
Integrated Cases 1**	2525	1
Research and Thesis Master's Degree	2000*	1-3
TOTAL (academic only to max)		8-12
Summer-2 Coursework (if needed) (2027)		
Healthcare Practicum,	2066	1-4
Education Practicum,	2067	

*CSD 2000 (Research and Thesis Master's Degree) is optional, and may be taken instead of SLP-SAP.

*CSD 2069 and CSD 2525 will be taken only once in either the fall, spring, or summer semester.

Students must complete a total of **60** graduate credits in the master's program to receive the master's degree in Communication Science and Disorders. Of these, at least **10** will be required clinical credits. Note that students generally take more than the minimum number of required credits, with 62 to 63 credits being common to allow for optional classes and to ensure that the requisite number of clinical hours are achieved.

Clinical Practicum Credits

As part of the required coursework, students seeking clinical certification must take at least 10 credits of clinic practicum (CSD 2065/2066/2067).

Intro to Clinical Decision-Making

Introduction to Clinical Decision-Making is a course taken within the first semester. This course is a prerequisite for any future clinical practicum experiences in Clinic Practicum 1 and Clinic Practicum 2 and future academic courses. That is, students must pass this course before enrolling in any future courses. This may result in a delay in a student's program.

ProSeminar (CSD 2060)

The ProSeminar exposes students to a variety of content, issues, and perspectives from CSD and related fields. To meet the ProSeminar requirement, students must attend presentations with scientific, clinical, or professional relevance to the discipline on the following schedule:

- SLP students register each fall and spring during the first year of their program.
- There is no ProSeminar requirement in the summer.

Qualifying presentations include Pitt SLP Speaker Series; colloquia in CSD and other departments; lectures at Pitt or other universities; Matthews-Rubin lectures or other presentations; professional meetings; clinical forums; etc. Because of the broad nature of the assignment and the vast array of acceptable presentations, **there is no need to verify that a session qualifies, as long as it is related to the field in a meaningful way.** Lectures and videos available on the internet also can be counted as meeting the requirements for the ProSeminar experience.

Key Reminders about the ProSeminar Requirement

- Students do not need to obtain approval for presentations they attend if the presentations are related to the field of Communication Science and Disorders in a meaningful way.
- If a student attends more than one session at a state or national convention or other multi-session event, all of the sessions attended can be counted toward the ProSeminar requirement, provided that the student writes each session up separately as described in the documentation section.
- The department will share information about upcoming presentations via the newsletter. Other presentations may be announced on Canvas as they are brought to the faculty's attention. Students can post a note to the ProSeminar discussion board if they learn of any other presentations.
- Students will record three ProSeminar activities for each semester they are registered in the Canvas course associated with this activity.

SLP Summative Assessment Project (SAP)

The Summative Assessment Project for SLP Master's degree students consists of a 1-credit course (CSD 2069), taken one of the last three semesters of the program. This project includes the development of a presentation or written paper, based on a clinically relevant treatment question, that culminates in a presentation, evaluated by faculty. The goal of the SAP is to provide students with a clinically meaningful opportunity to demonstrate their ability to integrate academic knowledge and clinical problem solving through Evidence-Based Practice and Practice-Based Evidence, at an entry-level of performance.

Requirements for passing the SAP course are provided in the course syllabus. Students who do not pass the summative assessment during their last semester of study may be required to register for an additional semester to graduate. Specific details about the course and the final presentation are provided during the course.

Note: Students do NOT need to do any preparation in advance of the SAP course. Specifically, they do not need to gather information about clients in clinical practicum experiences, take notes on testing results, or identify cases for their SAP in advance. All of the work necessary for successful completion of the SAP will be done within the term that the student takes the course.

Master's Thesis Option

The Master's thesis gives students the opportunity to conduct a semi-independent research project in which they systematically consider a question of scientific interest. The process begins with a student identifying a broad area of interest and initiating discussion with a relevant faculty member to explore the possibilities for completing a thesis. Occasionally the student knows only that they want to engage in research but has no identified area of interest. It is appropriate to talk with any faculty member to see if they have ideas for research that would be appropriate for a thesis. All students are encouraged to become engaged in research, and the thesis is one option to do so.

The Typical Candidate

The thesis is an important undertaking requiring dedication from both the student and faculty. Students who complete a thesis typically are in good standing throughout their master's degree program, successfully balancing the requirements of the didactic and (if applicable) clinical education. Students are encouraged to communicate their interest in completing a thesis with their academic advisor to discuss the process and, as with all graduate students, should maintain good communication with their academic advisor throughout their program.

The Typical Project

The thesis project should address a theoretical or clinical question through the collection and analysis of data, or through the analysis of previously collected data or philosophical works that are appropriate for the question being investigated. The thesis research does not have to be an independently completed project. Students will work with their thesis advisor to identify an appropriate topic and scope for the thesis.

The Thesis Committee

The thesis committee will consist of at least three University of Pittsburgh faculty members. The thesis advisor must have a faculty appointment within the Department of Communication Science and Disorders and have expertise and research experience in the area of investigative study. If the thesis advisor is an adjunct member of the Department, they would be a co-advisor with a regular CSD faculty member. In consultation with the thesis advisor, the student selects at least two other University faculty members to serve on the thesis committee. At least two committee members must be from within CSD; the third committee member may be from within CSD, SHRS, or the University. At least one member of the committee must be a regular (not adjunct) member of the SHRS Graduate Faculty. Members from outside the University are allowed (serving as non-voting members), but not required, and would be in addition to the three University of Pittsburgh faculty members.

The Master's thesis committee approval process involves the following steps. First, your advisor will notify the academic administrator of your intent regarding your thesis. They will send the names and emails of the committee members to the academic administrator who will then send out the Thesis Committee Approval Form via DocuSign to you, your thesis advisor, program director, and all committee members. The completed form would then be submitted to the SHRS Dean's Office. Submission of this form serves as notification to the SHRS Registrar for the degree designator to be changed from Master of Arts to Master of Science. If the student decides not to complete the thesis, they must notify the SHRS Registrar, program director, and academic administrator, so that the degree designation is reverted to Master of Arts.

Enrollment/Credit Requirement

Students who complete a master's thesis (in either the clinical track or the non-clinical track) are exempt from the SLP Summative Assessment Project (CSD 2069) and will be awarded a Master of Science degree.

Students must enroll in **at least one research credit** (CSD 2000) during their program if they elect to

undertake a thesis and are encouraged to enroll in at least one credit of CSD 2000 during each semester that they are working on the thesis (as credit load allows; not to exceed 15 credits). **Students must be registered in graduate courses in the semester during which the thesis defense is scheduled.**

No later than the end of their first Fall term, students should confirm with their thesis advisor, the program director, and director of clinical education when they plan to enroll in the Integrated Cases course and not be enrolled in a clinical placement. If students plan to be out of area during the summer semester, they should follow that timeline as outlined in the clinical education section. Students will typically enroll in a thesis credit during the semester they are enrolled in the Clinical Integration course.

Thesis Prospectus Meeting

After developing a research question and protocol under the mentoring of the thesis advisor, the student will prepare a written prospectus that describes the background, aims, research question(s), significance, and detailed methods, procedures and projected analyses necessary to answer the question(s). Once approved by the thesis advisor, this prospectus should be submitted to the thesis committee at least two weeks prior to the scheduled Thesis Prospectus Meeting. Committee approval of the written document is necessary to move forward with the prospectus meeting (note that changes to the written document may be required as a result of the meeting).

The prospectus meeting is up to two hours in length with a short formal presentation (typically no longer than 20 minutes) and most of the meeting is devoted to discussion of the proposed research project. During the meeting, the student should be able to discuss their research proposal and related topics. Students should be aware that the meeting might result in changes to the proposed study and the prospectus document.

The thesis advisor will direct the prospectus meeting. All members of the committee should be present for the prospectus defense either in person or virtually. Other faculty or students may be present for the prospectus meeting. At the conclusion of a successful prospectus meeting, during which both the written document and oral defense are approved, the *Master's Thesis Prospectus Approval* form (Appendix G) is completed using the Docusign procedure and then submitted to the SHRS Dean's Office upon completion of all committee member signatures. The student and thesis advisor will also receive a copy of the signed form.

Scientific Review and Approval

In addition to approval from the thesis committee, any investigative study involving human subjects also must be approved by the scientific review committee/officer within the student's home department/program and then by the University of Pittsburgh Human Research Protection Office (HRPO). Students should refer to the University's HRPO website at <http://www.irb.pitt.edu/student-research> for submission information. Due to the time required to prepare the proposal and the approval process itself, the process of obtaining HRPO approval should be started as early as possible. HRPO approval is not needed for theses that do not involve the collection of data from humans (e.g., model building or theory development). All investigators and key personnel involved in Human Subject Research (including thesis advisors) are required to complete specific research ethic courses using the CITI training program. Detailed information about the required research courses is available at <http://www.irb.pitt.edu/training>.

Thesis Defense

Once approved by the thesis advisor, this thesis should be submitted to the committee at least two weeks prior to the scheduled Thesis Defense date. Committee approval of the written document is necessary to move forward with the oral defense of the thesis (note that changes to the written document may be required as a result of the defense). Students are responsible for working with the CSD Administrator to schedule a room for the defense, if necessary. Additionally, students must submit the Creating Your Announcement form (<https://www.shrs.pitt.edu/etd-electronic-thesis-and-dissertation>) with the details of the defense to the SHRS Administrator of Students Services at least two weeks prior to the defense.

The thesis defense is led by a moderator who is not a member of the thesis committee but is a member of the SHRS faculty. Following procedures approved for dissertation and thesis defenses in SHRS, the moderator will introduce the defense, describe the process, direct the questioning sequence and time the process. After the introduction by the moderator, the student will be given 20 minutes to present the study, followed by questions from the general audience, graduate faculty and then the thesis committee. At the conclusion of the defense, the thesis committee will deliberate and determine if the student has successfully defended the thesis and if further work is required. SHRS defenses are public, and all members of the University community and the general public are welcome. No food or beverages will be provided by the student, committee members, or general audience for consumption by the group during the defense proceedings.

Electronic Thesis and Dissertation (ETD) System

Following the successful defense of the thesis, the *Electronic Theses and Dissertation (ETD) Approval Form* (https://etd.pitt.edu/sites/default/files/Approval_Form.pdf) must be signed by all members of the committee and submitted to the SHRS Administrator of Student Services, with copies retained by the thesis advisor and the student. This procedure will be completed using DocuSign after the thesis advisor notifies the academic administrator of the student passing.

The final master's thesis must be submitted electronically through the Electronic Thesis and Dissertation (ETD) system. The ETD process has numerous requirements and deadlines for submission of forms (including signatures on final documents). Additionally, ETD submission may require multiple revisions prior to approval. Students should contact the SHRS Administrator of Student Services to obtain the electronic ETD information packet. This packet contains deadlines for defending and submitting the ETD, instructions and forms. **It is the students' responsibility to ensure that all requirements are met prior to the indicated deadlines. Graduation will be denied if the ETD is not approved.** Additional information regarding Master's theses can be found in the SHRS Student Information Hub (Pitt Passport required).

Students are strongly encouraged to start writing their thesis document in the ETD format at the beginning of their studies.

The Typical Timetable

A Master's thesis is a time-intensive endeavor; an acceptable thesis is unlikely to be completed in less than three semesters. Therefore, students who are contemplating the thesis option should meet with their potential thesis advisor as early as possible, but no later than the spring term of their first year in the program. The thesis planning should be well underway by the first summer term. The thesis defense should occur at least one month prior to the end of the students' last term in the program to allow sufficient time for any necessary revisions to be completed and paperwork to be filed. The Master's degree cannot be awarded until the thesis has been accepted, even if all other credits and requirements have been fulfilled. The completion of the master's degree is required for students in the clinical program to pursue certification. A sample timeline may be found in Appendix H.

SLP Clinical Fellowship (CF) Requirement

SLP Master's degree students who have completed all of the academic and practicum requirements for Certificate of Clinical Competence (CCC) may begin their Clinical Fellowship (CF). The CSD Department does not manage CF positions. Rather, students apply and interview for such positions on their own. Announcements for potential CF positions are sent out via email to all graduating students. For additional information on CF requirements, see ASHA's current Membership and Certification Handbook or the ASHA website (<http://www.asha.org>).

Part 2: Clinical Education

Introduction to Clinical Education

The CSD M.A./M.S-SLP program provides opportunities for students to meet clinical education requirements for:

- ASHA Clinical Certification: (www.asha.org)
- Pennsylvania State Licensure: (<https://www.pa.gov/agencies/dos/department-and-offices/bpoa/boards-commissions/speech-language-pathology-and-audiology>)
- Pennsylvania Department of Educational Certification: Speech-Language Impaired (<https://www.education.pa.gov/Educators/Certification/Pages/default.aspx>)

Students should monitor their progress toward completion of the above requirements by periodically checking the content on the above web sites. Students are also encouraged to consult the Director of Clinical Education, Clinical Coordinators, Program Director, or Academic Advisors if they have questions.

Note that all policies, guidelines, and forms in this handbook are subject to modification during enrollment in the CSD programs. Students will be informed of any such modifications. Questions or concerns about the information contained in this manual should be directed to the Director of Clinical Education and/or the Vice Chair of Clinical Education.

Section III: Overview of Clinical Education

Directors of Clinical Education and Clinical Coordinators

In the CSD Department the following persons oversee clinical practicum:

Erin Lundblom **412-383-6623** lundblom@pitt.edu
Director of SLP Clinical Education
Coordinator for Pennsylvania Educational Certification
Clinical Placement Coordinator for Clinic 1 Practicum
Director of Leadership Education in Neurodevelopmental Disorders (LEND)

Ashley Kreiger **412-383-0976** aak95@pitt.edu
Clinical Placement Coordinator for Clinic 2 Practicum in Education

Heather Geiger hag87@pitt.edu
Clinical Placement Coordinator for Clinic 2 Practicum in Healthcare

The Director and Coordinators for SLP Clinical Education are available for clinical advising sessions each term and by appointment. The Director and Coordinators for SLP Clinical Education work to develop a clinical education program of the highest quality to meet the needs of all clinical graduate students. Input from students helps to ensure that the clinical education experiences are effective and optimal. Students are encouraged to communicate on a frequent basis to convey requests, concerns, suggestions, questions, or compliments. Note that student input is always welcome, however, not every request can be accommodated.

CSD Department Clinical Leadership Team

Clinical education outcomes, procedures and issues are overseen by the Vice Chair of Clinical Education. The Clinical Education Team interacts through regular meetings with the Vice Chair of Clinical Education. When new guidelines, processes or activities related to clinical education are developed, suggested changes are discussed with the Program

Director then shared with the Department Chair.

Philosophy of Clinical Education

The objective of the CSD Department is to help students acquire the knowledge and skills of their discipline through in-depth academic content and sequential structured clinical education experiences. Clinical education is viewed as a dynamic process in which students actively participate in learning to apply knowledge to clinical practice while working with patients who have varied communication disorders. The goal is to prepare clinicians who demonstrate strengths in the following:

- the ability to analyze and synthesize information from a broad base of knowledge in communication science and disorders
- a problem-solving attitude of inquiry guided by evidence-based approaches
- clinical decision-making supported by sound critical thinking skills
- clinical competency in prevention, screening, evaluation, diagnosis, and treatment of patients with varied communication disorders
- the ability to communicate effectively and professionally
- self-evaluation skills resulting in active steps to develop/refine clinical competencies and extend knowledge base
- ethical and responsible professional conduct
- skills to work in interprofessional settings

The long-term goal of clinical education is to give students a solid foundation to succeed in diverse and changing educational, healthcare, and rehabilitation environments.

Student Role in Clinical Education

When transitioning from undergraduate education to graduate education with a clinical training component, it is critical to understand that **students are responsible for their own learning**. Faculty, staff, and SLP clinical instructors help to facilitate students' successful completion of all academic, clinical education, and professional requirements for degree completion.

Students must:

- be active participants in their learning by taking initiative to gather and apply information
- ask relevant questions of faculty, staff, and SLP clinical instructors to deepen their understanding
- independently transfer knowledge from courses to clinical practice
- focus on understanding why and how clinical decisions are made
- demonstrate how to communicate clinical reasoning to others in an accessible manner
- refine their self-evaluation skills so that they have:
 - an accurate awareness of what they know and what they don't know
 - strategies for obtaining information and developing clinical skills needed

The overarching goal for students is to acquire the knowledge and skills to transition from a student to an entry-level practitioner who can provide competent clinical services to patients who have varying communication disorders. When students have difficulty in graduate education, they should contact the Director of Clinical Education, Clinical Coordinators, Program Director, or Academic Advisors to discuss their concerns. Early discussions help prevent later difficulties.

Council for Clinical Certification in Audiology and Speech-Language Pathology

The class entering graduate study in the Fall of 2025 have the opportunity to meet the requirements outlined by the Council for Clinical Certification in Audiology and Speech-Language Pathology (CFCC) standards. The CFCC defines the standards for **clinical certification**. Copies of the current standards for Speech-Language Pathology and Audiology are available on the ASHA website at: <https://www.asha.org/certification/>

Students should become familiar with these standards. Throughout the graduate program, students should review the CFCC/ASHA standards to monitor their progress toward achieving the requirements set forth by these standards. Students should work closely with the Director of Clinical Education, Clinical Coordinators, Program Director, or Academic Advisors to meet the CFCC/ASHA standards.

Sequence of Clinical Education Experiences

The sequence of clinical education experiences in the CSD Department provides opportunities for students to develop beginning clinical skills in Clinic 1, refine and advance clinical skills in Clinic 2, and to document entry-level clinical skills if they complete the graduate program.

In clinical education, students learn how to apply information learned from academic courses to clinical practice, and how various communication disorders manifest. As students acquire and refine clinical competencies, they move from highly structured and supervised experiences to environments where they must demonstrate increased independence in clinical thinking.

Clinic 1 Practicum

During initial practicum experiences students receive scaffolded clinical instruction with their assigned Speech Language Pathologist Clinical Instructor(s) (SLP CI) at a community-based clinical practice setting. SLP CIs work closely with each student, providing direct instruction, modeling clinical behaviors, suggesting resources, and developing learning activities.

Students typically attend their Clinic 1 Practicum one half to a full day per week. Schedules vary based on the caseload and setting. Students complete two Clinic 1 Practicum placements in Year 1. One placement is completed in the fall and one in the spring. Clinic 1 Practicum focuses on the underlying structure of the clinical processes involved in evaluation and treatment as well as the foundation for clinical decision-making. Instruction focuses on helping students develop and master ***Beginning Clinical Skills*** and ***Network Core Clinical Skills*** (see SECTION V: Clinic 1 Practicum).

Extended Clinic 1 Practicum

Occasionally a student does not meet the requirements to transition from Clinic 1 Practicum to Clinic 2 Practicum or has remedial education needs in specific aspects of clinical performance. Those students may participate in an Extended Clinic 1 Practicum. Typically, Extended Clinic 1 Practicum is completed in the summer. Extended Clinic 1 Practicum was designed to provide an interim level of clinical education between Clinic 1 Practicum and Clinic 2 Practicum while providing structured support like Clinic 1 Practicum. In Extended Clinic 1 Practicum, students register for Clinic 1 Practicum. As students demonstrate independence in clinical skills and require less instructional support, the Clinical Instructor decreases instructional support.

Students who do not meet expectations in Clinic 2 Practicum may also be recommended to participate in Extended Clinic 1 Practicum.

The recommendation for a student to participate in an Extended Clinic 1 Practicum can be initiated by the student, the current SLP CI, Program Director, Academic Advisor, Director of Clinical Education, and/or Clinical Coordinator. The Director of Clinical Education and the Vice Chair of Clinical Education approve all Clinic 1 Practicum placements with input from the student. The Program Director and Academic Advisor are informed when a student is assigned to an

Extended Clinic 1 Practicum.

Students may complete one Extended Clinic 1 Practicum. *After one Extended Clinic 1 Practicum, the student must transition to Clinic 2 or discontinue clinical practicum placements.*

Clinic 2 Practicum

Once students have met Clinic 1 Practicum requirements, they may participate in Clinic 2 Practicum. Students complete two Clinic 2 Practicums in community-based clinic practice settings. One Clinic 2 Practicum is in a healthcare setting. One Clinic 2 Practicum is in an education setting. Students typically attend their Clinic 2 Practicum three to four full days per week.

Direct clinical instruction is significantly reduced in Clinic 2 Practicum. SLP CIs help students better understand the intricacies of service delivery in their setting with a range of different patients.

Students can complete up to 3 clinical placements in Clinic 2 Practicum. After 3 clinical placements in Clinic 2 Practicum, the student must meet programmatic clinical education requirements for graduation or discontinue clinical practicum placements.

Assessment of Clinical Skills

Clinical education in the CSD Department facilitates the acquisition of the knowledge, skills, and professional attributes needed for professional practice. Consistent with the current CFCC standards, the following broad competency areas are measured during clinical practicum:

- Professional Responsibilities
 - Interpersonal Skills
 - Communication Proficiencies: verbal, nonverbal, and written
 - Self-Evaluation Skills
- Assessment Competencies (planning, implementing, post-session)
- Treatment Competencies (planning, implementing, post-session)

A variety of mechanisms are used to describe and track students' development of clinical competencies throughout the graduate program. The following evidence is used to demonstrate that students graduating from the CSD Department M.S./M.S.-SLP program have achieved the knowledge and skills required for entry-level professional work:

- *Core Clinical Skills* forms completed on an ongoing basis
- *Formative Assessment of Clinical Skills* forms completed at midterm and final by SLP CIs for each Clinic 1 Practicum placement and Clinic 2 Practicum placement.
- Student self-evaluations completed at midterm and final each semester for each Clinic 1 Practicum placement and Clinic 2 Practicum placement.
- An electronic portfolio developed by the student that includes artifacts from each Clinic 1 Practicum placement and Clinic 2 Practicum placement.
- Electronic case logs of clinical observation and patient-contact time.

SLP CIs, Program Director, Director of Clinical Education, Clinical Coordinators, Academic Advisors, and faculty can help a student take steps to develop or improve clinical skills, but it is each student's responsibility to ensure that they can implement the professional skills at an entry-level before exiting the graduate program.

Clinical Education Requirements

The sections below describe requirements which must be met prior to and throughout participation in clinical education coursework and clinical practicums.

Communication Skills

When participating in Clinic 1 Practicum and Clinic 2 Practicum, students must be able to comprehend and communicate intelligibly and effectively in English.

1. Students must be able to comprehend English language expressed orally and in written form.
2. Students must demonstrate English writing that is grammatically correct and technically appropriate (e.g., contains proper punctuation and capitalization) to write clinical reports to capture clinical observations, evaluation and treatment information, and outcomes.
3. Students must demonstrate oral English speech and language production that is readily understandable by persons and families served in clinical settings.
4. Students must be able to appropriately model articulation, voice, fluency, vocabulary, and grammar of the English language.
5. Students' speech and language must be intelligible and comprehensible enough for administration of speech, language, and hearing screening/assessment techniques and intervention strategies, in a reliable and valid manner.

Students who do not meet the communication skills outlined above will not be able to participate in Clinic 1 Practicum and Clinic 2 Practicum placements. Any concerns regarding a student's communication skills should initially be brought to the Director of Clinical Education and Program Director. A student may initiate discussion regarding their own communication skills. SLP CIs, Clinical Coordinators, Academic Advisors, and faculty/staff may also identify students who are not demonstrating adequate communication skills in one or more areas above. The Vice Chair of Clinical Education will determine when adequacy of English language skills is demonstrated to support a Clinic 1 Practicum and Clinic 2 Practicum placement, based on documentation of current performance.

Observation Requirements

Observations of certified professionals providing clinical services help students develop an understanding of disorders, clinical processes, and the professional's role. Before starting Clinic 1 Practicum, SLP students must complete at least 10 hours of guided observation within the field of speech language pathology. Observation hours completed previously such as in an undergraduate program can count toward the required observations if the hours were guided and completed with an ASHA certified speech language pathologist. Documentation of the guided observation hours must be uploaded to Typhon.

Students who have not met the minimum observation requirements prior to the start of the SLP Program must meet with the Director of Clinical Education or Clinical Coordinator to develop a plan to complete guided observation hours during Clinic Practicum 1 and Clinic Practicum 2. When observation hours are accrued during the SLP Program, students log the observation hours and record and upload the hours to Typhon.

Note: Students often participate in guided observation experiences before participating in patient-contact time at the start of each new Clinic Practicum 1 and Clinic Practicum 2. Observations may occur at other times throughout clinical training activities.

Training Requirements

Note: Students may also be required by clinical practice sites to complete additional agency-specific training.

HIPAA & Bloodborne Pathogens

Prior to participating in clinical education or observation activities in the graduate program, students must complete two University of Pittsburgh Medical Center (UPMC) trainings. The first is a [HIPAA training](#) on privacy protection and the second is related to [Bloodborne Pathogen training](#). Students receive information on how to access the web-based training before starting the SLP Program. After successful completion of each training, students upload the certificates to Exxat for review and approval. Students may need to provide evidence of the HIPAA and Bloodborne pathogen training completion at clinical training sites.

Mandated Reporting Child Abuse/Neglect

Protecting children from abuse and neglect in Pennsylvania is a shared responsibility. Pennsylvania state law requires that students and professionals who work with children ages 16 years and younger are required to complete a Pennsylvania training module on [Mandated Reporting of Child Abuse/Neglect](#). The University of Pittsburgh houses a training module that is used by professionals in Pennsylvania (to meet Act 31 (of 2014) and Act 126 (of 2013) requirements. Students receive information on how to access the web-based training before starting the SLP Program. After successful completion of the training, students upload the certificates to Exxat for review and approval. Students may need to provide evidence of the training completion at clinical training sites.

Basic Life Support (BLS) Training*

All students must have valid American Heart Association (AHA) Basic Life Support (BLS) certification on file to participate in clinical education. The training must include a hands-on skill demonstration on a manikin. Students should complete an AHA course “Basic Life Support for Healthcare Providers” (BLS), which is designed to train professionals to respond to cardiac and breathing emergencies for adult, child, and infant victims.

Consistent with the 2020 AHA Guidelines for CPR/ECC, BLS is the foundational CPR/AED program typically required for healthcare providers and public safety professionals. Upon successful completion of the course, learners will receive a 2-year “Basic Life Support for Healthcare Providers” digital certificate with anytime, anywhere access to certificate and training history. After successful completion of the training, students upload the certificates to Exxat for review and approval. Students may need to provide evidence of the training completion at clinical training sites.

Clearance Requirements

The School of Health & Rehabilitation Sciences (SHRS) requires that students in community-based clinical practice settings meet the background checks and clearances required by the state and for the clinical site(s) where they participate in clinical education.

In the Commonwealth of Pennsylvania anyone working with children or the elderly must complete a Pennsylvania criminal background and child-abuse check (Act 33/34 respectively).

The Commonwealth of Pennsylvania (effective April 1, 2007) requires anyone who works/volunteers/engages in interaction in a school setting (public &/or private school settings) or childcare facility to have current FBI background checks on file, as does the Office of Children, Youth, and Families and the Office of Long-Term Living. All CSD students are required to have current FBI checks. There are several versions of the FBI check that Pennsylvania offers. Students should initially complete the Department of Human Services (DHS)-FBI

check, because it is required by commonly used Network clinical education sites (i.e., UPMC and UPMC Children's Hospital of Pittsburgh). Depending on subsequent site assignments, individual students may be required to obtain FBI clearance through the Department of Education, in addition to the DHS FBI check. The FBI checks can take up to 8-10 weeks to be completed the first time.

Students should retain the original clearance and upload a copy to Exxat.

Note: That the FBI documentation indicates that it is an “unofficial copy”, as official copies are housed electronically. **Clearances must be current within the last 3 years of the start date of a clinical education placement.**

Changes in a student's status during the year (e.g., change in criminal history) should be reported by the student to the Director of Clinical Education immediately. **The University does not guarantee a student's clinical education requirements can be met if their background check precludes them from participating in placements in required settings.** Students should be aware that in most employment settings for speech language pathologists, background clearances are required.

Medical Clearances

All students participating in practicum through SHRS must have a medical examination by a physician including blood work and appropriate immunizations. The CSD department uses an adaptation of the **SHRS Annual Health** Appraisal Form. There is one version of the CSD-SHRS form for the initial physical (used when you begin the program) and one for subsequent annual physicals. Physical exams and TB Mantoux (two-step) test series must be done annually. The QuantiFERON TB Gold is an approved TB test. Health forms should be completed by a physician. Students retain original forms; some clinical training sites will ask the student to provide this documentation. Students must upload a copy of their medical forms to Exxat.

Annual Flu Vaccination

All students are required to receive a flu shot annually. Documentation or attestation of the annual flu shot is required by October 15th each year the student is enrolled in clinical education.

COVID-19

Many SHRS clinical partners require employees, trainees and students to be compliant with a COVID-19 vaccination requirement. This includes providing proof of vaccination or exemption to the clinical site. Failure to comply with this requirement for clinical partners may preclude the student from completing the clinical requirements of this program. Some of our clinical partners will not permit students to complete clinical rotations without proof of vaccination and will not accept exemptions.

Drug Screenings

An increasing number of sites have additional health requirements, such as drug testing (some 5-panel, some 10-panel and some within a specified time frame). Students should inquire directly with their clinical site to determine if the site requires a drug screen. Clinical sites will inform the student whether a drug screen is required in response to the student's inquiry. If you are assigned to a site that requires drug screening you will need to complete the measure according to the requirements of the site. Drug testing may be available through the site or may need to be obtained via Exxat. To initiate a drug screening, log into Exxat and click on the “Compliance” button. Next, select “Get Started” under “Universal-Drug Screening”. Be sure to bring to the drug screening any prescription medications you take to prevent delays in the review process.

Expiration Dates for Required Documentation

The School of Health and Rehabilitation Sciences has guidelines on renewal of required documentation for clinic participation.

HIPAA, Bloodborne Pathogens & Mandated Reporter: expires 3 years from date of completion

BLS certification: expires 2 years from date of completion*

Act 33 (Child Abuse), 34 (Criminal History) & 73 (FBI): 3 years from date of clearance*

Physical Exam and TB test: expires 1 year from date of signed form

Clinical sites may have specific requirements that require additional or more frequent clearances. **Some students may need to update or obtain a different FBI check to meet the requirements of individual sites.** If the student does not complete the additional requirements, he/she will forfeit the clinical education placement. *An alternative clinical education placement may not be available and in such situations is not guaranteed.*

Some practicum training sites (e.g., some skilled nursing facilities; all school settings) require the student to provide documentation of background/identity clearances, health status, and training certificates. It is the student's responsibility to release documentation to each clinical site. Occasionally the request information may be made to the SLP Program. The SLP Program will ask students to complete a release of information form to share required information to sites.

The above items are maintained and approved in Exxat (explained later). These health, clearance, and training requirements are outlined in the contractual agreements (called affiliation agreements) made with each external clinical site. These items are non-negotiable meaning the completion of the requirements is mandatory to meet contractual obligations to permit student access to clinical practice settings. Further, completion of the health, clearance, and training requirements items by identified submission dates or expirations dates is also critical to the process of securing clinical placements. Each semester the program secures the number of clinical placements needed based on the number of students who have completed the identified requirements outlined above as based on contractual agreements and those students' specific and individual clinical education needs. **When items are not submitted by the deadline or expired, the SLP program cannot guarantee a clinical placement, which could impact the duration of your program.**

Students may not attend Clinic Practicum 1 or Clinical Practicum 2 placements unless all health, clearance, and training forms required are current, approved, and accessible in Exxat.

All students participating in clinical experiences must upload current documentation (i.e., health, clearance, and training requirements) to EXXAT by **5:00 PM, two (2) business days** prior to expiration. This ensures adequate time for administrative review and verification of documentation to ensure compliance with contractual agreements with external clinical sites. Students should track expiration dates in EXXAT, schedule and complete steps for renewals with adequate lead time, upload completed documentation by the specified deadlines, and verify successful uploads of documentation in EXXAT. In rare circumstances involving documented emergencies or technical system failures, students should contact the Clinical Education Team immediately.

Deadline

- **Required Upload Time:** 5:00 PM, two (2) business days before clinical start date.
- **Business Days Definition:** Monday through Friday, excluding university holidays. Documentation will be reviewed between 8:00 AM - 5:00 PM on business days only. No documentation review will occur on evenings, weekends, or holidays.

Professional Liability Insurance

All student clinicians carry malpractice insurance through a policy written for the University. If a student needs confirmation of insurance, contact your Director of Clinical Education.

The Office of Risk Management purchases a "blanket" policy that provides malpractice/medical and professional liability coverage for all students. These policies provide medical professional liability insurance for activities related to studies under the University's direction and within our curriculum. The coverage does not require individual student's names, because it is "blanket" and covers all students.

No direct fees are billed to students for this coverage.

See general coverage information below:

Insurance Company:

Tri-Century Insurance Company

c/o Captive and Corporate Insurance UST 01 59 01

US Steel Bldg., 600 Grant Street Pittsburgh, PA 15219

Coverage Type: Occurrence

Current Year Policy #: TRI 1843

Limits: \$1,000,000 per medical incident; \$3,000,000 aggregate

Confidentiality

Confidentiality of personal patient information is critical. NO DOCUMENT CONTAINING INFORMATION IDENTIFYING A PATIENT SHOULD EVER BE REMOVED FROM A CLINIC SITE. **Violation of HIPAA constitutes grounds for removal and discontinuation of a Clinic Practicum 1 or Clinica Practicum 2 placement.** An alternative clinical education placement may not be available, which would extend the length of a student's program.

Students should not discuss clients by name or with other identifying information in any public areas (e.g., hallways, elevators, restaurants, student lounges, waiting room areas, etc.). If a patient is discussed in a class, do not convey information related to their identity. Students should never discuss patient related issues or experiences in online sites.

In documents or presentations like portfolio items, summative assessment project cases, clinic case presentations, or clinical preparation, information related to specific clients must always be de-identified, so that the following items are modified or removed at a minimum:

- **NAMES** of people including client/patient, parents/spouse/family members, supervising clinician, physician's name.
- **ADDRESSES/PHONE NUMBERS** of client/patient, agency, physician, referral sources or where copies of the report were mailed.
- **AGENCY NAME** where client/patient was seen. Do not include letterhead stationery on artifacts, remove name of agency and refer instead to the type of setting in which the client/patient was seen (e.g., outpatient clinic; hospital; private practice; school).
- **DATE** of service
 - Remove and replace with year only (e.g., 2015; 2016)

- Any other information that could potentially allow someone to identify the patient/client (e.g., date of birth; name of school attending; name of specific referral source)

Additional confidentiality considerations:

- Students should follow the confidentiality guidelines of individual clinical sites.
- Files on your personal computer should be purged of confidential information.
- Be aware of confidentiality issues when photocopying client information.
- Student clinicians are not permitted to contact patients, family members, or professionals without receiving permission from their SLP CI.
- Release of information authorization must be obtained before any clinical information is shared. This includes permission to discuss the patient on the phone with other professionals or to send written information.

Email Communication

SLP students should ONLY use their University of Pittsburgh email account for communication related to academic and clinical education. All email communication between the CSD faculty/staff, Program Director, Director of Clinical Education, Clinical Coordinators, SLP CIs, and students must occur via the Pitt email system. Students are expected to check their student email accounts regularly and respond in a timely manner (i.e., 24 to 48 hours) to communication sent by faculty/staff.

Social Media

Students should take caution in posting comments related to clinical education on social media sites or any other public communication venues. HIPAA guidelines must always be followed, and patients should never be discussed. Potential employers often search social media platforms prior to hiring, so a student's professionalism may be judged by others.

Artificial Intelligence

Some opportunities in clinical education may present use of generative artificial intelligence (AI) tools, such as ChatGPT, Bard, Claude, and others. The use of AI tools for clinical education purposes necessitates the application of ethical and responsible practices. Students are expected to use AI tools responsibly by ensuring transparency about the use of AI tools. For example, when used in the writing process, students should cite whole sentences or paragraphs written by an AI-assisted writing tool that are integrated into one's writing, just as if using content from any other source. While we all continue to better understand and evaluate the evolving use of AI-assisted tools, the use of these new innovative tools may come with some challenges, which we will continue to navigate.

Appearance Policy

Students are expected to present a professional image when representing the Department of CSD, the School of Health & Rehabilitation Sciences, and the University of Pittsburgh. The guidelines below are written to promote a positive public image and to ensure infection control and safety.

It should be noted that **individual clinical facilities may have additional clothing and appearance guidelines.** Students are expected to learn about the dress code *before* beginning a placement and to follow the guidelines of

each site. When students initially contact a Clinical Instructor, they should ask the Clinical Instructor about the dress guidelines at the facility.

The purpose of considering how we present to others is to support our ability to effectively perform within our scope of practice and to cultivate an environment of mutual respect. According to this, the questions below should be considered in decisions about personal presentation:

- Will my personal presentation support the perception of a clean and sanitary clinical environment?
- Will my clothing allow for safe and easy range of movement needed in my scope of practice?
- Will my personal presentation support positive rapport with my clients/patients?
- Will anything on my person communicate disrespect for a historically marginalized population?
- Will anything in my bodily presentation distract me or my clients/patients from working effectively?
- Have you considered potential allergies or sensitivities that might be present in persons with respiratory and/or sensory compromise (such as scented lotions, perfume, cologne)?

For the health and well-being of others, we ask that you refrain from wearing any scented products while in a clinical/professional environment. If at any time your preceptor clinical instructor has questions or concerns regarding your appearance or dress, these questions will be used to facilitate a discussion to ensure the safety and comfort of yourself, your preceptor, clinical instructor your peers and your clients.

Students can purchase Pitt-Branded scrubs through our partner vendor, American Discount Uniform in-store or online.

For online ordering go to: <https://americandiscountuniform.net> . Once you reach the site click on GROUP SIGN-IN and enter code: PITTSPEECH. In-store locations can be accessed here: Locations - American Discount Uniform

Note: The Pitt SLP logo will NOT appear on the website.

Name/Identification Badge Policy

Students are ALWAYS expected to wear an ID badge at clinical sites. The badge should be worn chest high to be clearly readable. State licensure and title registration requires that student clinicians wear an ID badge that stipulates professional status as a student, rather than a licensed professional.

All students receive a CSD Department identification badge with their photo, name, and University of Pittsburgh affiliation at the beginning of their graduate program. Students will be provided with agency identification badges at some clinic sites and should wear the agency badge at those sites. When students participate in any clinical activities in the community which are part of their graduate clinical education program (e.g., clinical practicum, observations; community screenings; health fairs) they should always wear their CSD Department ID badge.

Clinic Practicum Attendance Policy

Students are expected to be in attendance for all courses and clinical placements. Attendance exceptions are made for predictable and unpredictable absences. For any absence from an academic course or a clinical placement, students must complete the online SLP Program Absence Form.

1. Student clinicians are expected to attend clinical placements on all scheduled dates.
2. For any student absence from a clinical placement, students must complete the *SLP Program Absence Form* online. **This includes clinic-initiated cancellations or Clinical Instructor absences.**
3. It is the policy of the Department of Communication Science and Disorders that the *SLP Program Absence Form* must be completed and submitted within 3 days of the absence. **Failure to submit the *SLP Program Absence Form* can result in a non-satisfactory course grade for a clinical practicum.** Note: Clinical hours accrued during a failed clinic term cannot be counted towards requirements for graduation or certification
4. When an excused absence is known in advance, for example a scheduled event such as the observance of a religious holiday or professional conference presentation, the student must request approval in advance from the Director of Clinical Education **as soon as the absence is known.**
 - a. The student should complete the *SLP Program Absence Form*. If approved by the Director of Clinical Education, the request can be presented to the Clinical Instructor. The Clinical Instructor will accept or decline the request.
5. When an absence is not known in advance, such as an illness, family emergency, or death of a family member (i.e., student's spouse, parent, child, sibling, mother/father-in-law, brother/sister-in-law, son/daughter-in-law, grandchild or grandparent.) The student must contact the Clinical Instructor and the Director of Clinical Education prior to the beginning of the day and inform them verbally of their absence. Upon returning to the site, the student completes the *SLP Program Absence Form* to document the absence.
6. During any given semester students accruing more than 4 clinic absences due to illness must provide signed medical documentation.
 - a. In the absence of medical documentation, inconsistent attendance in clinic can result in a failing grade. Note: Clinical hours accrued during a failed clinic term cannot be counted towards requirements for graduation or certification
7. Students enrolled in Clinic 2 are provided with personal/sick leave days that can be used for clinical absences and not required to be made up during the semester. See the policy below.
8. When a student is absent from the clinical placement in Clinic Practicum 1 and beyond the allotted personal/sick days in Clinic Practicum 2, students should develop a plan with the Clinical Instructor to make up the absence.
9. Clinic Practicum 2 students are expected to follow the calendar at their assigned site for attendance as opposed to the University of Pittsburgh calendar.
 - a. This specifically relates to holiday breaks (i.e., spring break, Thanksgiving break, etc.). If the clinical placement is open with supervisor present, the student clinician is expected to be at their site unless the student uses personal/sick leave.

Clinic Practicum 2: Personal/Sick Leave

As students transition into Clinic Practicum 2, there are slight adjustments to the attendance policy due to the implementation of personal/sick leave. The guidelines below are for each clinical placement. At maximum, students have a total of 4 personal/sick days each semester. **Students completing Clinic Practicum 2 should carefully consider program/certification requirements in conjunction with length of term (i.e., 12 weeks) when considering the use of personal/sick leave.**

- For those students completing 4 days per week at a clinical placement, you have 4 personal/sick days that you may use throughout the semester. These days are not required to be made-up.
- For those students completing 3 days per week at a clinical placement, you have 3 personal/sick days that you may use throughout the semester. These days are not required to be made-up

- For those students completing 2 days per week at a clinical placement, you have 2 personal/sick days that you may use throughout the semester. These days are not required to be made-up.
- For those students completing 1 day a week at a clinical placement, you have 1 personal/sick days that you may use throughout the semester. This day is not required to be made-up

When a student uses a personal/sick day, the student should clearly communicate with the Clinical Instructor that they are using a personal/sick day. (Example: I am not feeling well today, so I am going to use Personal/Sick Day #1). If a student has a known or planned absence, students should communicate clearly and early with the Clinical Instructor. (Example: I am using Personal/Sick Day #2 for a wedding.)

Students are responsible for tracking personal/sick days throughout the semester. **Any absence(s) above the allotted allowances must be made up.** Students **must** always complete the *SLP Program Absence Form* online reporting form for **any** absence from their clinical placement to alert program faculty/staff. Refer to the policy and directions above for reporting predictable and unpredictable absences.

Inclement Weather Policy

In situations of extreme inclement weather, students should communicate with their Clinical Instructor (and site) to determine whether clinical services are being offered. If the University of Pittsburgh closes, the student should follow the guidelines of their clinical site. At all times, students should use their own judgment regarding the safety of traveling in adverse conditions and keep their Clinical Instructor and Director of Clinical Education/Coordinator informed.

Health & Safety Procedures

Universal Precautions

These procedures are designed to protect both the student and the client from transmission of communicable diseases. To minimize risk of transmission of disease, ***assume that blood and all body fluids from all clients are potentially infected.*** All clinics will have specific Universal Precaution Guidelines. It is the responsibility of the student clinician to familiarize themselves with the clinic site's policies at the beginning of each term.

Routine Hand Washing

The simplest way to control the spread of infection is by thorough hand washing.

The following websites are excellent resources for learning details regarding optimal hand washing:

New England Medical Journal: <http://www.nejm.org/doi/full/10.1056/NEJMvcm0903599?emp=marcom>
Centers for Disease Control and Prevention: <https://www.cdc.gov/handwashing/index.html>

It is recommended that you wash your hands with soap and hot water for at least 20 seconds:

- Before and after each client session
- After sneezing, coughing or wiping a nose
- After using the toilet
- After handling soiled items such as a diaper, used tissues or dirty toys
- After touching garbage
- Before and after treating a cut or wound
- Before, during, and after preparing or eating food

Personal Protective Equipment

Personal protective equipment, commonly referred to as "PPE", is equipment worn to minimize exposure to illnesses by creating a barrier to reduce the risk of transmittance of infectious agents. Examples of PPE used in the provision of clinical services include gloves, goggles, face shields, masks, gowns, respirators, shoe covers and more.

During clinical contact, the use of PPE is based on a risk assessment of potential exposure to blood/body fluids/infectious agents. Students receive instruction on the correct use and disposal of PPE at clinical sites, and in a required online module. It is critical that you follow your clinical site guidelines regarding PPE.

Clinic Environment

Clinical workspaces should be clean and organized. Clinic materials should be returned to the correct location daily. Workspaces should always be left in their original condition *or better*. The way you leave the workspace is the way the next users (i.e., clinician and client) will find it; take the time to ensure the best possible working environment. Any potentially contaminated surface or object requires disinfection. For example:

- Tabletops used by clients should be wiped with disinfectant after each session.
- Objects/toys should be wiped with disinfectant after each use.
- Mouthed objects should be disinfected immediately. If soiled with blood, feces, or urine objects should be disinfected or discarded.
- Earphone cushions should be wiped off with disinfectant after each use.

Student Injuries

If a student is injured at their clinical setting, the student should seek immediate medical attention as needed. The Clinical Instructor AND the Director of Clinical Education should be informed about the event as soon as possible, for minor as well as major injurious conditions. It is University policy that injuries which occur within the context of University of Pittsburgh educational activities will be reported to the Vice Chair for Clinical Education and to other required University offices.

Student Clinical Materials

Students may check out clinical tools that are used for graduate student training for both academic and clinical education coursework. Items can be checked out during designated hours in the 5012. The check-out and check-in hours are shared and posted each term.

Students are given a unique barcode to adhere to their University of Pittsburgh ID card. The barcode will be scanned to check items out. **IMPORTANT:** The materials **CANNOT** leave the building (without prior approval from a Director of Clinical Education). The barcode will be scanned again to return items.

Students should take special care when using clinical tools to protect these items for damage. If an item is damaged, please alert personnel when you return the item. The Director of Clinical Education will determine any costs associated with damage to the clinical tool. If a clinical tool is lost, students should contact the appropriate Director of Clinical Education, who will determine the replacement cost of the item.

Suggestions for the acquisition of new materials are welcome. Submit to the Program Director and Director of Clinical Education.

Student Clinical Laboratory Fee

Students are billed a clinic laboratory fee at the beginning of each term in which they are registered for a clinical education practicum course. These fees are paid through registration in the course. The clinical fees are applicable to both speech-language pathology and audiology students. Fees are used to replenish consumables and purchase clinical tools used for graduate student training.

Clinical Education Processes and Guidelines

National Certification Requirements

Clinical education requirements meet the current ASHA/CFCC standards. The ASHA Certificate of Clinical Competence (CCC) is a voluntary credential. Students should be familiar with the certification standards to ensure that they meet those standards by the end of their program. The Typhon tracking system provides students with an ongoing mechanism to track their progress towards meeting requirements.

Note That the requirements represent a minimum level goal. Students should work towards exceeding these requirements and obtaining a collection of clinical education experiences that will prepare them to be a professional in the field of speech-language pathology.

1. A **minimum of 375** supervised hours of direct client contact and a minimum of 25 observation hours are required by ASHA/CFCC.
 - a. The current definition of contact hours does not include time spent in preparation, post-session analysis, documentation, or conferences with Clinical Instructors or other professionals.
2. Clinical education experiences must include experiences with:
 - a. Persons across the lifespan such as infants, toddlers, children, adolescents, adults, and geriatrics;
 - b. a range of communication disorders across the scope of practice; and
 - c. a range of severity levels.
3. Students must demonstrate skill in providing prevention, screening, evaluation, and treatment.
4. Students must demonstrate how to work with populations from varied backgrounds to provide person and family centered service.

Supervised Clinical Practicum Options	Minimum Toward the 400 Hours	Maximum
Guided Clinical Observations	25	25
On-Site and In-Person Direct Contact Hours	250	No maximum
Undergraduate Hours	0	50
Clinical Simulations	0	75
Telepractice	0	125

PA Educational Certification for School-Based SLP

Educational certification is valuable for students who are interested in working as a speech-language pathologist with children who have communication disorders in educational settings. Educational certification is required in Pennsylvania for professionals serving as speech-language pathologists in school settings and is highly recommended for students who have an interest in working with pediatric populations during their careers. The Department of Communication Sciences and Disorders Department (CSD) offers **two** options for educational certification: (a) *Instructional 1 Special Education: Speech/Language Impaired PK-12* and (b) *Educational Specialist Certificate for School Speech-Language Pathologist PK-12*.

Students should be aware that requirements for educational certification in Pennsylvania can change based on

Pennsylvania regulations. All students complete a tracking form regardless of whether they plan to seek educational certification in Pennsylvania or not. This provides a mechanism for documenting which requirements were in place when the student was in the program and whether each requirement was met. Those interested in practicing as an SLP in the schools in another state should contact the state education departments directly, as standards vary from state to state.

Different requirements exist between the routes to educational certification as captured below:

PA Educational Certification

INSTRUCTIONAL 1 (9265)	EDUCATIONAL SPECIALIST (1883)
Passing score on SLP Exam (#5331)	Passing score on SLP Exam (#5331)
Passing score on Content Knowledge (#5511)	
CSD 2514: Educational Service Delivery (Pitt CSD course)	CSD 2514: Educational Service Delivery (Pitt CSD course)
Academic prerequisites	
School field experience with at least 1 child with an IFSP/IEP and completion of PDE Form 430 two times. (22 Pa. Code §354.25(d)&(f))	Practicum experience with PreK-21 population from culturally/linguistically diverse background with a variety of communication and related disorders, differences, and disabilities to document competencies.

PA State Licensure

To engage in clinical practice as a healthcare professional in Pennsylvania, graduates must obtain a valid Pennsylvania State License. The Pennsylvania Licensure Act 106 of 2014 was approved and implemented in 2017, which includes a requirement for a Provisional License to SLP and AuD graduates prior to them completing full licensure requirements. Provisional Licensure is required before beginning one's first year of employment.

Determination of Practicum Assignments

(Clinic Practicum 1 & Clinic Practicum 2)

The Director of Clinical Education and Clinical Coordinators work to ensure that all graduate students are provided with a range of clinical education experiences across their program to meet program, Council for Clinical Certification (CFCC)/ASHA, and Pennsylvania licensure/certification requirements. The Director of Clinical Education and Clinical Coordinators collaborate with individual students to ensure that the needs of individual students and the group of all graduate student clinicians are met within the context of the opportunities available each term.

Students meet with the appropriate Director of Clinical Education and Clinical Coordinators:

1. To develop a plan of possible Clinic 1 Practicum and Clinic 2 Practicum experiences.
 - a. Guidance regarding optimal sites for an individual's needs and goals will be discussed. Directors/Coordinators have a history of working with sites and can often provide insights on the viability of a placement or type of clinical practice setting.
2. To share clinical practicum interests.
 - a. Students are supported to consider a broad range of factors including clinical practice settings, type of hours required, types of communication disorders, and career goals.

Students submit via Typhon a written description of their needs as discussed in the clinical advising meeting. Director of Clinical Education and Clinical Coordinators make clinical assignments based on the following

weighted factors:

1. Students' accrual of clinical requirements
2. Availability of clinical sites
3. Student interest and preferences

All clinical assignments are arranged by the appropriate Director of Clinical Education and Clinical Coordinators. The Director/Coordinators manage placements for all students in the program, and individual requests cannot always be accommodated. Attempts are made to meet student requests as possible while also meeting the needs of the entire group of current graduate student clinicians. ***Students may NOT make arrangements for personal clinical placements.*** Coordination of affiliation contracts is managed by SHRS staff in conjunction with Director/Coordinators.

Transportation

Students are required to provide their own transportation to clinical practicum sites. Across a student's graduate program, they should be prepared to have some placements that require a longer commute. When possible, placements for students who rely solely on public transportation will be arranged at sites that are reachable by Pittsburgh Regional Transit (PRT) but may require extended commute times and/or walking.

Students who do not have access to a vehicle may be limited in the types of clinical practice settings and the specific sites where they can participate in Clinic Practicum 1 and Clinic Practicum 2. Public transportation can be used reasonably during Clinic Practicum 1. As students transition to Clinic Practicum 2, car transportation allows for access to a wider array of clinical practice setting options.

Enrollment in Clinical Practicum

Only graduate students in speech language pathology are eligible to enroll in Clinic Practicum 1 and Clinic Practicum 2: CSD 2065, 2066, or 2067.

1. CSD 2065 Clinic Practicum 1: Foundations in Assessment and Treatment in Speech Language Pathology
2. CSD 2066 Clinic Practicum 2: Speech Language Pathology in Healthcare
3. CSD 2067 Clinic Practicum 2: Speech Language Pathology in Education

Students register for the number of credits appropriate for Clinic Practicum 1 and Clinic Practicum 2.

Clinic 1 Practicum Registration

1. Students typically register for 1 credit of CSD 2065 Clinic Practicum 1: Foundations in Assessment and Treatment in Speech Language Pathology
 - a. 1 credit typically represents 1 placement.
 - b. The day/time of each Clinic 1 Practicum placement varies in relation to the SLP Clinical Instructor's caseload and setting, with placements ranging between ½ to 1 day per week.
 - c. The Director/Coordinator provides students with appropriate registration information each term.
 - i. It is the student's responsibility to ensure that they are registered for the appropriate clinic course, section, and credits prior to the add/drop period each term.
 - ii. Registration errors can lead to an "I" grade (incomplete) or missing grades, resulting in possible graduation delay and/or extra expense.
2. All graduate students participate in *screenings* as part of CSD 2065 Clinic Practicum 1: Foundations in Assessment and Treatment, in the fall and spring term of the first year of study. Students will individually sign up to attend a set number of screening opportunities.

- a. Additional screening opportunities will be periodically announced for students to participate in the community. **Students typically have more flexibility in their schedules to complete such screening experiences during their first year in the graduate program.**

Clinic 2 Practicum Registration

1. Students typically register for 4 credits of CSD 2066 Clinic Practicum 2: Speech Language Pathology in Healthcare and 4 credits of CSD 2067 Clinic Practicum 2: Speech Language Pathology in Education
 - a. 1 credit typically represents 1 day at the placement with 4 credits representing a full-time clinical placement.
 - b. The day/time of each Clinic 2 Practicum placement varies in relation to the SLP Clinical Instructor's caseload and setting, with full-time clinical placements ranging between 3 to 4 days per week.
2. Course registration information will be listed in Typhon.
 - a. It is the student's responsibility to ensure that they are registered for the appropriate clinic course, section, and credits prior to the add/drop period each term.
 - b. Registration errors can lead to an "I" grade (incomplete) or missing grades, resulting in possible graduation delay and/or extra expense.

Enrollment in Clinic Practicum 1 and Clinic Practicum 2 is dependent on the successful completion (letter grade of **C**, or a grade of **S** – satisfactory in a S/U (unsatisfactory)) of coursework and Clinic Practicum 1 and Clinic Practicum 2 in the prior semester. An unsatisfactory grade in a Clinic Practicum 1 and Clinic Practicum 2 prevents the student from participating in the next semester Clinic Practicum 1 and Clinic Practicum without a Clinic Support Plan. Failure to achieve a passing grade in foundational courses also precludes a student's participation in Clinic Practicum 1 and Clinic Practicum 2. Deficits in performance on professional expectations, including unexcused attendance, can also result in removal from clinical practicum. Clinic Support Plans and/or restrictions from practicum are made at the discretion of the Director/Vice Chair of Clinical Education.

According to academic guidelines set forth by the University, School, and the Department of CSD, successful completion of a practicum requires a S- grade (Satisfactory) using a S/U grade option. In cases of a U (Unsatisfactory) grade:

1. Neither the credit, nor the contact hours obtained from a U (Unsatisfactory) grade associated with a clinical course, may be counted toward degree or ASHA requirements.
2. A student receiving a U (Unsatisfactory) grade may be required to successfully complete a placement before participating in Clinic 2.
3. A Clinic Support Plan will be developed by the student and their Director of Clinical Education to help the student work towards improving areas of concern.
4. A U (Unsatisfactory) grade may also be assigned if required paperwork is not completed, if there is a serious breach in confidentiality, or significant, reoccurring concerns with professionalism.

Students who earn a U (Unsatisfactory) grade in any two clinical courses (CSD 2065, 2066, or 2067) are no longer be permitted to participate in clinical courses (CSD 2065, 2066, or 2067).

General Clinical Procedures

Students engaged in clinic at our partner clinical sites should consider themselves **guests** in the clinical environment. Clinical sites will often have their own *Policies and Procedures Guidelines* which students are expected to follow. Check with your SLP Clinical Instructor when you confirm your placement to determine requirements that you may need to complete before beginning the placement.

Defining Placement Expectations: Students & Clinical Instructors

Each student clinician is required to contact their SLP Clinical Instructor before the start of their practicum assignment. At the initial meeting between the student and Clinical Instructor the following information should be shared and reviewed.

1. Share background with each other.
 - a. SLP Clinical Instructor will share professional and student training background.
 - b. Student clinician will explain past clinical experiences. Student clinicians may include perceived clinical strengths and clinical skills in need of development.
2. Review the clinical opportunities that can be provided at the site.
 - a. Develop a plan for the initial weeks of training (e.g., observational time, beginning of patient contact experiences, and progression of clinical training experiences for the term).
 - b. Discuss caseload expectations and supplemental assignments/experiences.
3. Complete the *Placement Expectations Worksheet* form (See Supplemental Materials) to define clear expectations for both the student clinician and clinical instructor.
 - a. Phone numbers and contact information should be verified, and a plan made for communicating with one another in the event of an emergency (e.g., sudden illness; inclement weather conditions).
4. Clarify the schedule for the clinic assignment.
 - a. Discuss expectations regarding arrival/departure times.
 - b. Review the University and clinic education calendar and site requirements regarding holidays. Discuss schedule expectations for the term.
5. Review facility requirements. Determine how/when the facility orientation procedures (if any) can be completed.

Clinical Instruction/Supervision

When participating in Clinic Practicum 1, a SLP Clinical Instructor is available with the student close to 100% of the time. In Clinic Practicum 2, an assigned Clinical Instructor must always be present in the building and a student must receive the level of supervision “needed” for their experience, knowledge, and skill level, while meeting the specifications for supervision at the clinical site. Students should never provide services to clients if they are uncomfortable or feel that they are not capable of providing appropriate services. Students should discuss concerns immediately with their SLP Clinical Instructor. If problems continue contact the Director of Clinical Education/Clinical Coordinator.

SLP Clinical Instructors must provide direct and active clinical instruction while providing the appropriate level of support and independence in relation to the patient/client needs and the student clinician’s individual needs/wants. The amount of direct supervision must be commensurate with the student’s knowledge, skills, and experience; **must not be less than 25% of the student's total contact with each client/patient**; and must take place periodically throughout the practicum. **Supervision must be sufficient to ensure the welfare of the individual receiving services.**

Clinical Grading Procedures

The purpose of clinical grading is to evaluate and document progress toward attainment of *Clinical Skills* and *Professional Responsibilities*. Students are formally evaluated in writing at least twice per term (mid-term and end- of-term). Clinical grades provide formative measures of student performance across their clinical education program in meeting requirements.

Formative Assessment

1. Typhon is used to administer the Clinical Formative Assessments of student clinician performance at midterm and end of term to measure **Professional Expectations** and **Clinical Skills**.
2. At **midterm** and **end of term**, clinical instructors and students hold a meeting to discuss student progress and to define goals.
 - a. Students are scored only on clinical skills that they have had a chance to implement a few times across the last 2 to 4 weeks of the grading period; skills not implemented should not be rated.
3. The student's clinic grade is determined by the Director of Clinical Education who converts the end of term overall percentage score into a grade. The grade conversion scale uses mean and standard deviation scores, developed from past student clinician data. There are separate grade conversion scales for each level of Clinic Practicum.
4. If a student is assigned to more than 1 practicum site in a term, the grade for Clinic Practicum is calculated by averaging the Formative Assessment scores from each site. In some terms, it is possible to register for different course sections (i.e., Summer II – 6-week term; Summer 12-week term) for different clinic assignments allowing for separate grading for each practicum assignment.
5. Practicum grades will not be submitted until all **documentation required by the student** has been submitted. Missing paperwork will result in an "I" (incomplete) grade for clinic.

SLP Clinical Instructor's Responsibility

One of the primary responsibilities of SLP Clinical Instructors is to provide accurate feedback to the student clinician on the quality and level of independence with which the student has performed. Clinical Instructors complete the Clinical Formative Assessment at midterm and end of term to measure **Professional Expectations** and **Clinical Skills** including each relevant sub-competency.

The web-based formative assessment forms in Typhon calculate the student's mean score across the items rated and yield a percentage score for the term. The percentage score is converted by the Director of Clinical Education into a grade. SLP Clinical Instructors do not have access to the grade conversion scales. This procedure allows SLP Clinical Instructors to focus exclusively on describing the student's skill level by considering their level of independence, the quality of the skills performed, and the level of SLP Clinical Instructor support/instruction provided.

Students' Responsibility

Students are encouraged to review their end of term forms to identify areas of growth and areas to develop further in upcoming terms. Note that a student's performance may vary from term to term due to factors such as the type of setting, type of disorders, severity of the client communication disorders, service type (treatment vs. diagnostic), and clinical instructor characteristics. Students need to monitor their own performance and track their performance both in terms of the range of scores within a skill area and the average score. Typhon System reports will be used to help students monitor their progress. This allows students and Director/Clinical Coordinators a pathway for viewing progress across the program at any time.

Evaluation of Clinical Teaching

Students are encouraged to maintain open channels of communication with their SLP Clinical Instructor throughout the term. They should talk to the instructor about their clinical skill development needs and learning preferences. Students should keep the SLP Clinical Instructor informed about strategies which are and are not facilitating learning. While in the graduate program it is important for students to develop and practice techniques for discussing their concerns in an open and professional manner with SLP Clinical Instructors and Director of Clinical Education/Clinical Coordinators.

At the end of each semester students will anonymously complete the *Evaluation of Clinical Teaching* form via Typhon to provide feedback on the clinical experience provided at each site. It is critical that it is turned in before your end-of-term wrap-up meeting with your clinical instructor occurs.

The information you include on the form provides valuable input to the CSD clinical education program for improving the quality of clinical education that students receive. **The Clinical Instructor Evaluation form will be made available to the Clinical Instructor via Typhon 1 to 2 semesters after the term ends after clinical grades have been assigned.**

Students always have the option of providing their Director of Clinical Education/Clinical Coordinators or the Vice Chair of Clinical Education with confidential information regarding a clinical education experience in writing or through a meeting. Students who are not comfortable providing details on the form should discuss their concerns with the Director/Coordinator/Vice Chair of Clinical Education. Such information is confidential but could influence our use of an instructor/site in practicum for future students. The Clinic Director/Coordinator and/or Vice Chair need to be aware of any issues affecting the clinical education of CSD students. They are also available to help you develop strategies for working more effectively with the Clinical Instructors.

Clinical Action Plans

Occasionally, a student or Clinical Instructor identifies a problem in a clinical practicum experience. This could be related to the student's current level of performance (diagnostic skills, treatment skills, communication skills, self-evaluation skills), professional behaviors, rate of progress, and/or the instructional relationship.

Students are recommended to contact their Director of Clinical Education immediately when there are any concerns (even minor ones) and to seek input on ways to work with and communicate effectively with their SLP Clinical Instructor. Waiting until the end of a semester to discuss concerns can result in an ineffective practicum experience, whereas early support and mediation from the Director of Clinical Education can result in improving the situation before the effects are too serious to repair.

The following procedures were developed to identify problems and steps to move towards a resolution of the problem during the clinical placement. These procedures help to ensure equitable treatment of students in the problem-solving process. **As soon as a student or SLP Clinical Instructor feels that a problem exists, the following procedures should be implemented:**

Step 1. Student and SLP Clinical Instructor discuss the concern.

- Define the concern in behavioral terms and provide examples of the behavior(s).
- Identify how the concerns are impacting the practicum experience, the patient services, and the student clinician and clinical instructor.
- Discuss the concern by addressing information about the learning/teaching styles which may be beneficial in changing the behavior of concern.

Note: Contact the Director of Clinical Education to inform them of any issues of concern and when you need guidance in determining how to present or resolve a problem. The Director of Clinical Education is available to attend discussions if the student or instructor request attendance.

Step 2. If needed after Step 1, develop a *Clinical Action Plan* to address areas of concern (see *Clinical Action Plan Form* in Supplemental Materials). The Director of Clinical Education, clinical instructor and the student

clinician will meet. The Director of Clinical Education will serve as a facilitator to create the *Clinical Action Plan* with input from the clinical instructor and student.

The plan should include the following components:

- Identification of current strengths of the student clinician.
- Identification of the problem in written format.
- Identification of steps to be met along with a timeline for completion.
- Explanation of how progress will be determined/measured.
- Plan for a follow-up meeting (date/time) between Director of Clinical Education, clinical instructor and the student clinician.

Failure to meet steps/objectives as developed in the *Clinical Action Plan* may result in a range of possible outcomes such as those suggested below. Other outcomes are possible as well.

- Co-supervision by an additional SLP Clinical Instructor on site
- A repeated/extended placement at the same clinical site
- Removal from the placement with substitution of a new placement (as possible)
- Removal from the placement with an incomplete grade
- Removal from the placement with an unsatisfactory grade
- Development and implementation of a Clinical Support Plan

Clinic Support Plan

When a student does not perform satisfactorily (based on grading) in Clinic 1 or Clinic 2 practicum a ***Clinic Support Plan*** is developed. The Clinic Support Plan is a written document that includes a description of the areas in need of improvement, specific objectives that need to be met, and mechanisms for assisting the student to achieve the objectives (e.g., specific experiences, support, or learning assignments). Difficulties may be in one area of performance or may include several areas. For example, difficulties may include deficits in clinical skills (diagnostic skills, treatment skills, communication skills, self-evaluation skills), rate of development, documentation procedures, and/or not meeting professional responsibilities.

The nature of the Clinic Support Plan is individually determined and defined largely by the needs that a student presents. The Clinic Support Plan may focus intensively on one aspect of clinical work or maybe more general, focusing on a broad set of concerns. The student will meet with the Director of Clinical Education to develop and/or review the Clinic Support Plan goals, objectives, and requirements. The previous SLP Clinical Instructor may be asked to contribute to and/or review the plan. The Program Director and academic adviser may be involved in the support process; they will be kept informed of the student's progress throughout the term. The student is encouraged to discuss the Clinic Support Plan with their current Clinical Instructor(s), so that they can help develop learning experiences to assist the student to improve performance. In some cases, members of the Clinical Education Leadership Team and/or CSD Faculty may be asked to review and contribute to the Clinic Support Plan.

Once the plan has been developed by the student with the Director of Clinical Education, the student must successfully meet the goals of the Clinical Support Plan to obtain a satisfactory clinical course grade, participate in subsequent practicum experiences, and resume the regular sequence of clinical education practicum. If the student is participating in clinical education courses (i.e., Clinic 1 Practicum; Clinic 2 Practicum) the student's performance in clinic is evaluated by their SLP Clinical Instructor using the Formative Assessment form in Typhon. Their performance on the Clinic Support Plan will be determined by the Director of Clinical Education/Clinical Coordinator based on the measures defined in the Support Plan. -

When a student is participating in a Clinic Support Plan, their grade for the practicum course is determined as follows:

1. If the student does not meet the criterion level outlined in the Clinic Support Plan, the student receives an unsatisfactory grade (regardless of their performance on the Formative Assessment).
2. If the student meets the criterion level outlined in the Clinic Support Plan, the student's grade is determined by their score on the Formative Assessment and clinical course requirements.

Across a student's graduate education program, the student is permitted no more than 2 Clinic Support Plans. Failure to meet the requirements outlined in a Clinical Support Plan after 2 attempts is grounds for dismissal from clinical education.

Note: Significant concerns regarding a student's accuracy and timeliness in completing documentation requirements may result in the development of a Clinic Support Plan and/or a failing grade in practicum.

SECTION IV: CLINICAL DOCUMENTATION

MICROSOFT TEAMS / SHAREPOINT

A shared folder is created for each student in Microsoft Teams/SharePoint to house electronic versions of clinical education documentation. An electronic copy of all clinical documentation across the program will be maintained in this location. This folder will be accessible to the Director of Clinical Education, Clinical Coordinators, CSD Student Data Manager and Clinical Education Administrator. Examples of items to be maintained include but are not limited to observation logs, case log forms, core clinical skills forms, and more. Directions are shared with students at the conclusion of each semester and throughout the program to maintain and update clinical documentation in this location.

TYPHON

The CSD Department uses the Typhon Group web-based system for clinic administration and tracking of clinical education. Students pay fees for Typhon use across their entire graduate program and 5 years post-graduation. The Typhon system is used for many different purposes described below.

Clinic Administration Tools

Current Contact Information

The Typhon system is used as the primary data base of student contact for current and alumni students in the MA/MS-SLP programs. It is critical that students keep their contact information up to date in Typhon during the program and post-graduation.

- Contact information including current address, phone numbers, and alternate email addresses should be correct at all times.
- Students should periodically go to the >Your Account >Modify Account Information Section on the right side of their Typhon home page and check/update all contact information fields.
- Be sure to include your alternate email address, which will be used for communicating post-graduation information to you.

Clinical Site Directory & Clinical Instructor Directory

Typhon has a current directory of SLP Clinical Instructors and Clinical Sites.

Recording Client Contact Time

Students are required to record contact time with each individual patient and have their SLP Clinical Instructor confirm the contact time.

Direct contact time refers to:

- Time spent in active engagement of face-to-face interactions with a patient or group of patients to:
 - Screen or assess communication skills;
 - Treat communication disorders; and,
 - Convey clinical information including counseling, interviewing, and educating.
- Time spent programming a device for a specific client's needs. This includes programming of AAC devices, assistive listening devices, hearing aids, etc.

For SLP students, contact time is **not** allowed for planning sessions, analyzing session data, or documentation activities.

Tracking Contact Time

Students use the CSD Case Hours Log forms to document all direct patient contact time. Contact time should be recorded **DAILY IN INK** (not pencil) and confirm the contact time for each patient seen with their SLP Clinical Instructor. Documentation forms can be printed using a link in the Canvas website and/or obtained from the CSD office. ***Case log forms MUST be maintained for verification of hours.***

The case log form is used to enter contact time and related patient data into Typhon Case Logs creating an electronic record. SLP students code the characteristics of each patient clinical encounter. ***These logs ensure that confidentiality and HIPAA standards are met.***

The Typhon system allows entry of case log data up to 7 days from the date of service. Students should enter the case logs into Typhon in the same order in which they appear on the hard copy logs. For individual sessions, the client's initials should be recorded into the notes section. (Note: Clients seen multiple times can be linked allowing some of the identifying information to be pre-populated by Typhon and decreasing data entry time.)

At the start of each term/clinical placement, students can define the default settings in Typhon by going to the **>Your Account** section of their main Typhon page and clicking on **Setup Default Choices**. Then each time the student enters a case log for the term those fields will pre-populate.

Other fields in Typhon cannot be pre-populated. Within each case log entry, data is entered regarding demographics for each client on the following aspects:

- Client ID: Client initials
- Course & Term
- Site & Instructor
- ICD-10 Codes
- Time: total time with client; time with instructor (teaching/consultation time)
- Client Background: Sex, age, severity; race; primary language; impairment type
- Setting of Service (and for SLP cases also *context of service*)
- Contact time by relevant categories (SLP; AuD)
- Clinical Skills

The "Notes" section provides a field where students can document a variety of aspects of the case, while maintaining client confidentiality. **Students should always record client initials in the Notes field.**

In the Typhon Case Logs (see *Tracking Client Contact Time* section), students self-report their participation in key skills on a case-by-case basis in the Procedures/Skills section.

- The major heading categories for competencies in speech/language pathology and audiology are listed on the right-hand side of the electronic Case Log forms.
- Students should click on the broad category names relevant to each case and indicate which sub-skills they have *observed*, *assisted*, or *performed independently*.

SLP students are required to accurately record at least 3 relevant clinical skills per case for all cases logged.

Typhon automatically calculates total values in each required category, allowing one to track progress on hours requirements. When students are in Clinic 2 settings, it is particularly important to keep electronic hours logs current, so that they can monitor progress toward meeting hour requirements. Data entered in Typhon is monitored for accuracy by the CSD Student Data Manager.

1. If a student does not enter electronic logs within the 7-day time frame those hours will be lost. **That is, they will not be added into the student's case logs and will not count towards CSD and ASHA clinical education requirements.**
2. Students should remember to enter all pre-approved "extra" contact time experiences (i.e., community screenings) within the 7-day window as well.
3. The case logs can be modified/corrected after entry for up to 21 days; however, once approved by the clinical instructor, case logs become locked.
4. It is the student's responsibility to ensure that case logs are accurate and up to date at all times.
5. Students and clinic administrators can track progress on meeting graduation benchmarks re: contact time by running "Graphical Summaries" in Typhon, and then filtering those hours by adult-only, and pediatric-only filters.
6. Electronic Tracking of **clinical skills** is also done via Typhon Case Logs in the Clinical Competencies drop down menu sections where students indicate activities they have *observed*, *assisted*, or *performed*. Formative Evaluation measures at midterm/end of term provide a depiction of clinical skill acquisition supplementing student recording of clinical skills in case logs.

SLP students also complete a spreadsheet *Clinical Hours Tracking Form* to provide a quick summary to track their progress toward meeting contact time requirements for the program, certification and licensure.

1. During Clinic 1 Practicum students should focus on learning and acquiring *Beginning Clinical Skills* and *Core Clinical Skills* while accumulating ~25 hours each term.
2. During Clinic 2 Practicum, students should frequently monitor contact time/hours aiming to accrue ~150 to 200 hours each placement. While accruing hours, it is critical to also focus on developing and refining clinical skills and becoming more independent in clinical service delivery.
3. If there are challenges gaining hours, students should talk to the Director of Clinical Education/Coordinator and their Clinical Instructor to see what steps can be taken to ensure that they meet the hour requirements.

EASI Survey System

Another Typhon feature used frequently by students is the EASI section of Typhon. It provides a mechanism for conducting a variety of survey instruments including the following:

- To provide information about Clinic 1 and Clinic 2 Practicum for upcoming term(s)
- To evaluate Clinical Instructors (*Evaluation of Clinical Teaching form*)
- To complete required Self-Evaluations of clinical performance two times each term

Students receive information from the Director of Clinical Education/Coordinator with instructions for survey tasks including the deadline for completion. Students access the appropriate form through the **>My Evaluations & Surveys** section of their Typhon home page. For each of these forms, students must remember the following features of Typhon:

- Save the form before exiting Typhon if it is only partially completed.
- Click the "submit" button immediately after completing the form – otherwise the data entered will not be saved.
- Print a hardcopy of the form immediately after submitting it. For some surveys, students cannot re-access the form once submitted.

Formative Assessment.

1. The EASI component of Typhon is used to administer the Formative Assessments of student clinician performance at midterm and end of term.
2. Clinical Instructors access the appropriate forms via the web.
3. Students access self-evaluation forms via the EASI link in their Typhon home page.
4. Across a student's program their self-evaluations and clinical instructor's evaluation forms are housed in Typhon allowing students to monitor their progress across the program on key clinical skills.
 - a. These forms are not accessible after program completion.

ASHA/CAA Nine Communication Disorder Categories (SLP)

BROAD AREA	DISORDER TYPE	EXAMPLES (applies to diagnostic & treatment services)
SPEECH	Speech Sounds	Production of phonemes or word forms Strategies to improve motor speech production Reducing rule-based errors to increase intelligibility Accent modification
	Fluency	Reactions to stuttering or cluttering behaviors Fluency shaping strategies Decrease rate of production
	Voice & Resonance including respiration & phonation	Targets related to: loudness level, pitch, intonation variation, breath groups, nasality Vocal hygiene techniques Electro-larynx treatment
	Swallowing: oral, pharyngeal, esophageal, related functions including oral function for feeding, orofacial myofunction.	Bedside swallow examinations Video fluoroscopy measures / FEES Strategies to decrease aspiration Feeding & swallowing strategies
LANGUAGE	Receptive & Expressive Language (phonology, morphology, syntax, semantics, & pragmatics) in speaking, listening, reading, writing & manual modalities	Increasing length & complexity of utterances Expanding expressive/receptive vocabulary Improving communication effectiveness (e.g., through clarifying when assistance is needed)
	Cognitive Aspects of Communication (attention, memory, sequencing, problem-solving, executive functioning)	Compensatory approaches -- cognitive notebook use to improve access of long-term memory about family Word retrieval strategies Symbolic play skills Executive functioning strategies for written language
	Social aspects of Communication including challenging behavior, ineffective social skills, lack of communication opportunities	Behavior management techniques to increase socially appropriate communicative responses Developing more effective peer interaction patterns Pragmatic skills instruction Social skills groups
	Communication Modalities including oral, manual AAC techniques & assistive technology	Identifying appropriate AAC devices & strategies Increasing use of effectiveness of AAC techniques Programming AAC device or strategy for an individual client
AURAL REHAB	Hearing impact on speech & language. Aural rehabilitation	Hearing aid trouble shooting Speech reading skills Speech/voice production as influenced by hearing Language deficits as influenced by hearing
SCREENING	Hearing screening Speech/Language/Swallowing screening	Pure tone hearing screenings Speech/Language screening in Headstart program Informal observations on fluency, voice, and cognitive areas suggesting normal skills.
PREVENTION	Prevention of a possible hearing, speech, language, swallowing disorder	Treatment activities that are not on a client's treatment plan (i.e., phonological awareness as part of speech production) Training or education tasks related to a communication or swallowing disorder (e.g., guidelines to help prevent aspiration developed for family members or other professionals; vocal abuse reduction guidelines for teachers)
	Diminishing the effects of a potential hearing/communication/swallowing disorder	

Exxat Approve: Tracking of Clinical Education Requirements

The CSD Department uses Exxat Approve for clinic administration. Students pay an annual fee for use of the Exxat compliance management system.

Login link: <https://steps.exxat.com/account/login>

Document review related questions from students: approve@exxat.com

The Exxat Approve system is used to store, monitor, and evaluate/approve required student documentation for compliance and immunizations including but not limited to health forms, TB tests/results, flu shot verification, background clearances (PA Criminal; PA Child Abuse; FBI Clearance), trainings (e.g., HIPAA, Blood Borne Pathogens, COVID-19 vaccine), BLS certification, and more. **These documents must always be current when participating in clinical education activities.** The date recorded for each requirement indicates the last date when the paperwork is considered “current”.

After admissions, students receive an email from Exxat with information related to initiating your Exxat Approve account. Where applicable, instructions, copies of documents and links will be available in Exxat, so that students can identify what needs to be completed and uploaded. Click on "Get Started" for each requirement in Exxat to review instructions and document guidelines.

Of critical importance, one form--the Initial Health Form--will be utilized for documenting several health-related components. This form must be completed carefully and in its entirety by a healthcare provider prior to signing.

Staff from Exxat review and approve uploaded documents, or notify students if changes need to be made. **Students should keep a copy (i.e., paper and electronic) of all required documentation as you may be asked to supply or carry documentation of required items while at your clinical site.**

For students –

1. How to request Universal Drug Screenings in V4 – [Instruction guide](#)
2. How to request Universal Background check in V4 - [Instruction guide](#)
3. How to complete student profile in V4 – [Instruction guide](#)
4. How to upload documents - [Instruction guide](#)

Exxat alerts students via email as the expiration date approaches for any documents. The warnings alert you to take the necessary steps to maintain the currency of compliance documentation. This allows you to remain in clinical education placements across the program. **STUDENTS WILL NOT BE PERMITTED TO PARTICIPATE IN CLINICAL PRACTICUMS WHEN THEIR COMPLIANCE DOCUMENTATION IS NOT CURRENT AND COMPLETE.**

NOTE: If your documentation has expired then you cannot participate at your clinic placement, absences will be considered **unexcused**. This may result in extending a student’s program. **Additionally, a student’s score can be lowered if they are unable to attend their clinical placement, because they did not ensure that compliance requirements were always current and complete. This circumstance puts students at risk for receiving a failing grade.**

Electronic Clinical Portfolio

Students develop an electronic clinical portfolio that provides formative evidence of their acquisition of clinical competencies across the program. At the end of the program student course records and the Typhon clinical tracking reports contribute to evidence that students have achieved the knowledge and skills required by the

program and for certification and licensure. The clinical portfolio provides qualitative evidence of achievement of clinical competence and can better illustrate the scope and depth of growth achieved across the graduate program.

1. All students create an electronic portfolio to document the achievement of clinical skills across the SLP program.
2. SLP students are required to create 1 artifact in Clinic 1 Practicum and 3 artifacts each in Clinic 2 Practicum.
 - a. Artifacts should demonstrate significant areas of growth/accomplishment in practicum experiences that term.
 - b. All files should be in PDF format.
 - c. Artifacts should be shown to the Clinical Instructor at the end of the term with items de-identified in terms of client, Clinical Instructor, Facility/Logos and site identification to ensure that HIPAA guidelines are followed. **All clinical portfolio items must be de-identified. Again, only use PDFs.**
3. Example of a suggested Table of Contents for the portfolio is listed in Table 9.

Electronic portfolio items are reviewed at the end of each term when uploaded to Canvas. At the end of the program the portfolio will be compiled with a final Table of Contents and reviewed as part of the clinic check-out process.

Client-Related Information. Any client-related information from practicum experiences that a student considers for possible use outside of their clinical setting must be modified by the student to ensure that client confidentiality and HIPAA guidelines are STRICTLY met.

The following steps will be taken when considering use of client-related information:

1. First check with your Clinical Instructor to determine whether an artifact may be used in a portfolio/presentation and determine the agency-specific requirements of its use. If approval is provided, move to the next steps. If approval is not given, a student may NOT use client related information from that site. Note that some sites/Clinical Instructors may require review of the final draft of the artifact before it is filed in the portfolio. Please check with your Clinical Instructor.
2. Prepare information following the guidelines given earlier in this handbook.

Example Table of Contents for Clinical Portfolio	
CONTENT	EXAMPLES
Resume	<ul style="list-style-type: none"> • Resume
Caseload	<ul style="list-style-type: none"> • Typhon Graphical Summary (PDF) of overall experiences (PDF updated each term) • Excel spread sheet: Clinical Hours tracking form (PDF updated each term)
Practicum Artifacts Fall Clinic 1 Spring Clinic 1 Clinical Skill + Simulation Lab	<ul style="list-style-type: none"> • Sample Dx reports (de-identified) for adults and children • Self-Rating Summary of Diagnostic Tools: summary of Dx tools administered (adults; pediatrics) and self-rating on competency level with each tool • Sample progress notes/reports (de-identified) for adults and children • Sample lesson plan for collection of target areas • Sample cueing hierarchies developed for working with children with autism • Description/Listing of treatment techniques used with various populations
Clinic 2: Education Clinic 2: Healthcare	<ul style="list-style-type: none"> • Sample ER and IEP goals. (Not entire IEP document.) • Sample group treatment lesson • Sample data collection form for group treatment • Curriculum-based lesson plan for teaching target vocabulary for science lesson on planets (3rd grade level) • Visual schedule system (used in classroom for children with autism)

SECTION V: Clinic Practicum 1

Background Regarding Clinic Practicum 1

Clinic Practicum 1 are initial or beginning practicum experiences. In Clinic Practicum 1, the goal is to facilitate understanding the structure of clinical processes and to promote the development of clinical decision-making skills. Clinical Instructors include expert clinicians who provide clinical education through structured instructional support. Clinical Instructors help students understand the clinical processes involved in providing screening, prevention, assessment, and intervention services to develop evidence-based practice patterns while developing *Beginning and Core Clinical Skills*. Student clinicians apply clinical skills through participation in direct contact time with patients under the direction of their Clinical Instructor. Clinic Practicum 1 placements include opportunities for screening, evaluation, treatment, and management of varied communication/swallowing disorders across the lifespan in a variety of clinical practice settings. Direct supervision is available close to 100% of the time and students receive mentoring and support to help establish a foundation of clinical skills.

Clinic Practicum 1 Learning Activities & Requirements

Beginning Clinical Skills

Beginning Clinical Skills are the initial skills that students work to develop in Clinic Practicum 1, because these skills can be achieved in initial practicum experiences, and/or are considered critical skills that must be developed and maintained by a student before they transition to Clinic Practicum 2 in healthcare and educational settings.

These skills were defined after reviewing the current ASHA/CFCC standards. *Beginning Clinical Skills* include a collection of specific skills that provide a foundation for building advanced clinical skills required for professional practice. The *Beginning Clinical Skills* are identified by * on the *Formative Assessment of Clinical Competency* in Typhon (See Appendix.)

Clinical Instructors focus on the *Beginning Clinical Skills* that can be targeted in their practicum setting. Because Clinic Practicum 1 experiences include varied types of settings and communication disorders, students may have an opportunity to work on different sets of the *Beginning Clinical Skills* in each Clinic Practicum 1 placement. For example, some Clinic Practicum 1 placements include intervention services while other Clinic Practicum 1 placements focus on diagnostic services. Some students are assigned to Clinic Practicum 1 practicum with adults while other students are assigned to work with pediatrics. Various clinical practice settings give students the opportunity to work on different *Beginning Clinical Skills* in each Clinic Practicum 1 placement across 2 terms.

Clinical Instructors work with students to develop realistic clinical education goals that are formally defined in the first weeks of the term and reviewed approximately every few weeks. Goals are developed and modified several times across the term to facilitate student acquisition of *Beginning Clinical Skills*. At midterm and end-of-term *Formative Assessment* forms are completed by the Clinical Instructor using Typhon, to provide the student with written evaluative feedback about *Beginning Clinical Skills*. During the Clinical Practicum 1 experience, students can expect a variety of supports from their Clinical Instructor (as outlined above), including additional readings, supportive conversations, specific clinical instruction, and other methods to ensure learning.

Core Clinical Skills

Clinic Practicum 1 also focuses on providing opportunities for students to learn, practice, and demonstrate *Core Clinical Skills*. ***Core Clinical Skills* focus on skills that a student must demonstrate capability or mastery.** SLP students are required to demonstrate skill on each item at a 3 or better level of competency ***on at least two separate occasions***, as measured by the *CSD Network Scoring System*.

In each Clinic Practicum 1 placement the graduate student and the Clinical Instructor work together to develop opportunities for the student to focus on possible *Core Clinical Skills*. Actual performance/demonstration of *Core Clinical Skills* usually occurs during the second half of the term.

Note: A student's level in implementing a *Core Clinical Skill* is measured at a specific point in time; it is an **EVENT MEASUREMENT** documented at the time that the student demonstrates the skill. That is, the student prearranges to demonstrate the skill and asks the Clinical Instructor to score their performance. A student's performance level may be demonstrated and scored multiple times, providing formative measures of their development, attainment, and maintenance of the Core Clinical Skill. The same instructor may sign off on both occasions of demonstrating a *Core Clinical Skill*, however, the scoring of the skill must occur on two separate occasions (e.g., they could occur on the same day with different patients). Note that Core Clinical Skills can be demonstrated, and signed off, in clinic, class, and lab settings.

It is the student's responsibility to plan with Clinical Instructors to demonstrate and be scored on a *Core Clinical Skill*. The student must also ensure that the instructor scores the demonstrated skill and provides their signature on the student's *Core Clinical Skills* form on the day of the demonstration. It is the student's responsibility to ensure that they have achieved all *Core Clinical Skills* twice before Clinic Practicum 2 begins.

SLP Core Clinical Skills
<ol style="list-style-type: none"> Greet and introduce self to patients, caregiver/family, and/or professionals. Engage in age-appropriate discourse to establish a connection with a patient and/or caregiver/family. Demonstrate awareness of limitations in experience and knowledge and asks for help when appropriate
<ol style="list-style-type: none"> Diagnostic Skills Review a case and summarize relevant information. Identify areas within the Scope of Practice that require more data and explain why. Complete a comprehensive patient and/or family/caregiver interview. Perform an oral-facial examination to detect abnormalities and relate observations to a diagnosis. Administer, score, and interpret a standardized test and/or authentic assessment method (i.e., communication sample, bedside swallow, auditory perceptual scale, etc.). Make an appropriate behavioral observation within the Scope of Practice and relate to a diagnosis. Make a recommendation for clinical management and explain why.
<ol style="list-style-type: none"> Treatment Skills Write a behavioral objective for one treatment target and create an associated prompt hierarchy. Identify an approach/strategy/technique to support one treatment target and explain why. Plan and implement an appropriate activity for one treatment target. Record data accurately for one treatment target. Interpret data for one treatment target to explain progress. Share the session results for one treatment target with a patient and/or caregiver/family. Write a complete and accurate treatment note for one treatment target.

Required Clinical Learning Activities

A standard set of learning activities are required to be implemented by all Clinical Instructors and students in Clinic Practicum 1. All students must complete the activities listed below. The required activities have been developed to ensure continuity in clinical education across Clinic Practicum 1 placements and clinical instructors. Questions regarding these requirements can be addressed to the Director of Clinical Education.

1. Written Clinical Documentation Activities

Across each semester, students in Clinic Practicum 1 should complete 8 or more written documentation activities/assignments. The type and style of the written documentation activities is flexible in Clinic Practicum 1. Clinical Instructors can adapt the documentation activities to their specific caseload/site expectations. When possible, students should have an opportunity to practice various types of written documentation each term (e.g., SOAP note format; monthly progress report; consultation report; and/or diagnostic report).

Although each Clinic Practicum 1 placement uses specific guidelines to accomplish clinical documentation, students will acquire skills in clinical writing from seeing the common threads in the various clinical writing activities across their practicum experiences and in classes.

Diagnostic Writing Components

- A. History
- B. Client's report of symptoms, communication and other related problems.
- C. Clinical/informal/non-instrumental assessment data gathered
- D. Diagnostic/formal/instrumental assessment data gathered
- E. Formation of diagnostic impressions, diagnosis, prognosis
- F. Recommendations

Treatment/Intervention Settings Writing Components

- A. Updated case history including history of prior treatment/intervention
- B. Brief description of client current communication and related behaviors
- C. Quantitative measures of performance or change during session or over treatment period
- D. Formal statement of impressions based on assessment of data gathered and analyzed
- E. Recommendations and/or referrals for further treatment.

Clinical instructors are expected to provide feedback to students on the documentation activities to promote the development of clinical competencies in client management.

2. Reflective Journals

Students in the Clinic Practicum 1 will complete Reflective Journals focusing on their observations, concerns, and questions related to Practicum experiences. **Students will be required to complete 8 or more reflective journal entries per semester** (with at least 4 entries before the midterm and 4 after the midterm).

3. Self-Evaluations

Students are required to complete a written self-evaluation at least **two** times per term (Midterm & End of term) using the appropriate *Formative Assessment* form accessed via Typhon. Clinical Instructors also have the option of defining additional alternative methods for completing self-evaluation steps (e.g., a written summary of strengths and areas to improve; summary of major achievements).

4. Hours Logs

Hours Log Forms have been developed by the department to help students and Directors of Clinical Education track student progress toward ASHA and department clinical education requirements. SLP students code the characteristics of each patient experience along a range of variables. **These codes are used to ensure that patient confidentiality and HIPAA standards are adhered to and that student progress in meeting program requirements can be tracked and met.**

SLP Clinic Integration Presentations

While enrolled in Clinical Practicum 1 students have an opportunity to participate in *Clinic Integration Presentation (CIP)* experiences. CIP sessions are arranged by the Director of Clinical Education and consist of an oral presentation by each student to a group of CSD faculty members. At times, Clinical Instructors are invited to attend or participate in CIP sessions. Clinical Instructors do not sit in on their own student's CIP session; instead, SLP students present to clinical faculty who are unfamiliar with their placement.

The overall goals of the CIP experiences are as follows:

- To provide students with a formal opportunity to reflect on their clinical education experience;
- To provide students with a formal opportunity to practice oral communication skills including presentation of information and answering of questions posed by Clinical Instructors;
- To provide clinical faculty members with an opportunity to be more familiar with the range of clinical education experiences within the Clinic Practicum 1; and

CIP experiences provide an opportunity for graduate students to begin to develop professional oral communication skills including the ability to discuss clinical cases, engage in clinical problem-solving, and answer questions related to clinical education experiences. Students are organized into groups for the CIP experience providing peer feedback to each other. Written feedback is also provided by clinical instructors/faculty) to each presenter.

Clinical Practicum 1 Handbook

A separate handbook exists to further explain Clinic Practicum 1 – ***Clinic Practicum 1 Handbook***—and it is intended for graduate student clinicians and Clinical Instructors. The handbook provides suggestions and procedures for optimizing the quality of the clinical teaching experience in Clinic Practicum 1 practice settings. It also includes a description of expectations for Clinic Practicum 1. Graduate student clinicians enrolling in Clinic Practicum 1 should read the ***Clinic Practicum 1 Handbook*** before they begin their first clinical experience. It is available in Canvas for students, and a copy of the handbook is sent to each clinical instructor before the student begins the placement.

SECTION VI: Clinic Practicum 2

When students have met the requirements of Clinic Practicum 1 outlined below, they may participate in Clinic Practicum 2: Healthcare and Clinic Practicum 2: Education.

Requirements for Enrollment in Clinic Practicum 2

Prior to enrollment in Clinic Practicum 2, graduate students participate in a minimum of two Clinic 1 Practicums and two CSD 2030: Clinical Skill Simulation Labs. Graduate students meet several requirements to demonstrate readiness before transitioning to Clinic 2 Practicum.

1. Accrue 50 hours of direct contact time across CSD 2065: Clinic 1 and CSD 2030: Clinical Skill Simulations.
2. Receive a course grade of Satisfactory across two CSD 20265: Clinic 1 Practicums.
3. Receive a course grade of Satisfactory across two CSD 2030: Clinical Skill Simulations.
4. Receive a “passing” course grade in all academic coursework completed.
5. Feel prepared to participate in clinical activities without the support of extensive clinical instruction (i.e., > 90% supervision).
 - Student clinicians should approach clinical responsibilities with a level of independence in planning, implementing, documenting and self-evaluating.
6. Perform at an emerging to proficient level (indicated by a score of 3 or higher) on most of the Beginning Clinical Skills on the Typhon Formative Assessment form completed at the end of each Clinic 1 Practicum. Students are expected to maintain this level of performance.
7. Demonstrate most Core Clinical Skills at an emerging to proficient level (indicated by a score of 3 or higher on 2 instances) as documented on the Core Clinical Skill form. Students are expected to maintain this level of performance.
8. Demonstrate a professional level of oral and written communication skills in the English language evidenced in clinical and academic coursework.
9. Receive a recommendation from the SLP Clinical Instructor on the *Readiness for Clinic Practicum 2* form.

Note: The Director / Coordinators must all support a student for Clinic 2. If the SLP Clinical Instructor indicate a recommendation of “No” or “Yes, with reservations” on the *Readiness for Clinic Practicum 2* form, the Director of Clinical Education determines readiness for Clinic 2 based on the above list of criteria. If the Director of Clinical Education does not support a transition to Clinic 2, an Extended Clinic 1 Practicum is recommended. The Vice Chair of Clinical Education is notified, and the student can request a meeting with the Director / Vice Chair.

The following is a summary of the student characteristics indicating that the student is “ready” for Clinic 2 Practicum as compared to student behaviors suggesting the need to remain in a Clinic 1 Practicum.

Behaviors associated with readiness for Clinic 2	Behaviors associated with Clinic 1 levels of support
<ul style="list-style-type: none"> • Shows <u>initiative</u> in clinical planning and decisions (e.g., Student gives suggestions of recommendations for a client; proposes possible changes in a treatment, some of which are appropriate; assumes extra responsibilities/tasks without being asked; brings relevant resources to their cases without being asked) • Provides a rationale for clinical ideas/decisions based on clinical experiences and information learned in courses. While rationales might not always be correct, the student is able to describe why. • The student's self-evaluation skills are strong, and they do <u>not</u> overestimate or underestimate their ability level (i.e., they know what they know and know what they don't know) • The student can identify strengths in clinical skills and areas to improve that are not based merely on what the SLP Clinical Instructor has told them. • Communication skills are strong. The student "appears" comfortable talking to patients, family members, and other professionals. • The student meets clinical responsibilities and professional expectations without reminders. • The student brings in content learned in their courses to share the information and ask the SLP Clinical Instructor about the information. 	<ul style="list-style-type: none"> • The student needs moderate instruction or support for clinical learning. The student can follow directions but may not demonstrate independent and critical thinking skills on a consistent basis. • The following examples are characteristics of a student who would remain in Clinic 1: <ul style="list-style-type: none"> ○ Relies on direct instructions and/or modeling of skills/behaviors most of the time. ○ Utilizes thinking and problem-solving skills that are concrete in nature much of the time. ○ Only occasionally gives their own ideas/suggestions regarding clinical cases (e.g., recommendations; changes in treatment plan; ideas from courses/readings). ○ Waits to be told what to do most of the time. ○ <u>Appears</u> somewhat timid and/or unconfident when talking with patients, professionals, and/or family members ○ Does not take initiative in clinical responsibilities most of the time. ○ Demonstrates rate of skill acquisition that is slower than other students at the same level. ○ Uses professional communication skills which are often ineffective or undeveloped. ○ Only occasionally discusses content learned in coursework in relation to clinical work. ○ Only occasionally applies content from courses/readings to their cases. ○ Tends to do what is required, but nothing extra.

Note: The behaviors above are considered examples. A student would not need to exhibit all the behaviors within a category. Instead, readiness is indicated by a student exhibiting several behaviors.

Clinic 2 Practicum (2nd year SLP)

Clinic 2 Practicum is designed to facilitate application of principles and procedures gained through academic coursework and previous clinical practicums to provide a supportive and challenging learning environment for graduate student clinicians to acquire knowledge and skills to work effectively with

patients who have varied communication disorders. Students gradually develop the clinical problem-solving skills required for prevention, screening, assessment, and intervention to work with a range of communication differences and disorders across the Scope of Practice as an independent practitioner at entry level.

Students complete two placements for Clinic 2 Practicum. One is focused on a healthcare setting (CSD 2066: SLP in Healthcare) and the other an educational setting (CSD 2067: SLP in Education). These placements occur in the summer, fall, and/or spring of Year 2. During the fall and spring terms of Year 2, Clinic 2 Practicum occur in the Pittsburgh region which offers a variety of clinic practice settings in both educational settings and healthcare settings (e.g., acute care hospitals, rehabilitation facilities, extended care facilities, private practice, etc.). During the summer term *only*, students may complete a Clinic 2 Practicum in a healthcare setting, and this Clinic 2 Practicum in a healthcare setting may also occur outside the Pittsburgh region.

Students can view information about current Clinic 2 opportunities online via the Typhon *Clinical Site Directory*. Of importance to summer Clinic 2 Practicum, new clinical practice settings can be recruited for Clinic 2 by the Director/Coordinators as directed by student interest, location, and need. Please refer to the previous section on the Determination of Clinical Practicum. This process is initiated by the Director / Coordinators. ***Students may NOT make individual arrangements for personal clinical placements.*** An affiliation agreement must be completed through the SHRS/University. Coordination of affiliation agreements is managed by SHRS staff in conjunction with Director/Coordinators.

The Director of Clinical Education/Coordinators work to ensure that all graduate students are provided with a range of clinical education experiences across their program to meet departmental, CAA, CFCC/ASHA CCC, and Pennsylvania licensure/certification requirements. Clinic Education Directors/Coordinators collaborate with individual students to ensure that the needs of individual students and the group of all graduate student clinicians are met, within the context of the opportunities available each term with Clinic 2 Practicum facilities.

To prepare for Clinic 2 Practicums, students meet with the appropriate Clinical Education Director/Coordinator:

1. To learn about clinical practice setting types and clinical service opportunities (i.e., assessment; treatment, population) available in Clinic 2 Practicum.
2. To review their individualized plan of possible and optimal Clinic 2 practicum experiences.
3. Upon request, students may also submit an additional Clinic 2 Practicum Interest form via Typhon to provide a written description of their needs and preferences as discussed in individual clinical advising meetings.

Student responsibilities during each Clinic 2 Practicum are determined based on the following:

1. Clinical services provided at the site;
2. Student's level of competence;
3. Clinical Instructor's guidelines;
4. Guidelines set by the Council on Academic Accreditation (CAA) and the American Speech-Language-Hearing Association (ASHA); and,
5. Guidelines/policies of the facility where the student is placed.

Clinical 2 Practicum Handbook

A separate handbook exists to further explain Clinic 2 Practicum. The ***Clinic 2 Practicum Handbook*** is intended for graduate student clinicians and SLP Clinical Instructors. The handbook provides suggestions and procedures for optimizing the quality of the clinical teaching experience in Clinic 2 Practicum settings. It also includes a description of expectations for Clinic 2 Practicum. Graduate student clinicians enrolling in Clinic 2 Practicum should read the ***Clinic 2 Practicum Handbook*** before they begin their first Clinic 2 Practicum experience. It is

available in Canvas, and a copy of the handbook is sent to each SLP Clinical Instructor before the student begins the placement.

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Appendix A: Audrey Holland Endowed Award

Audrey Holland Endowed Award

The Audrey Holland Endowed Award has been established to support undergraduate and graduate students to design and conduct research in the Department of Communication Science and Disorders. The awardee may use the award for research related supplies and equipment, subject participation, statistical support, travel to present research findings, and other related items.

How to compete for this award

The award is competitive and all CSD students are eligible. Students conducting or planning to conduct research may self-nominate. **The award amount will be announced each year.**

ELIGIBILITY

- CSD undergraduate or graduate student
- Research for which the award is being sought must meet one of the following criteria:
 - Human subjects research (full board review, expedited review or exempt status) approved by the University of Pittsburgh Institutional Review Board (IRB)
 - An active and approved IRB number will be required in the application
 - Human subjects research (full board review, expedited review or exempt status) that is sufficiently complete in its design as to be ready for IRB submission. The committee will judge the application's readiness for IRB submission.
 - A design that does not involve human subjects and therefore does not require IRB approval. Examples include systematic review or meta-analysis
- Student researcher-applicant must have a faculty mentor actively involved in the research, who will indicate their support of the research with their signature on the application.
- Applications must be submitted one week before the Thanksgiving break (actual date will be announced when the award is announced annually)

APPLICATION PROCEDURES

Download and complete the application electronically (available at https://www.shrs.pitt.edu/csd_funding) for the Audrey Holland Endowed Award following all instructions. The application packet includes

- the project title,
- list of supplies/equipment/subject payments and other items for which the award is being requested and their approximate cost,
- a brief narrative of the research including need, purpose, specific aims, methods, and a brief literature review (5 pages or less)
- the student applicant's bio sketch including undergraduate and graduate grade point average, degree program currently enrolled in, and year and milestone in the degree program. Some examples include the following: "M.A. SLP program, second year student, thesis project" or "Ph.D. third year student, predissertation project", or "undergraduate Honors project for B.Phil. degree", or "Ph.D. student, second year, research practicum"

All application and supporting materials are due on the Wednesday preceding the first day of the University's official Thanksgiving Break (typically the second-to-last Wednesday of each November). The actual due date will be announced with the call for applications.

Applications must be submitted electronically by email (please compile all materials into a single Word or PDF document) to the CSD Director of Awards (Dr. Kendrea Garand via kgarand@pitt.edu) before noon EST on the due date.

SELECTION COMMITTEE

The award recipient will be determined by a faculty committee consisting of the directors of the five-degree programs in the Department of Communication Sciences and Disorders: CSD Undergraduate, Master's Degree Program in SLP, Doctor of Audiology (AuD) Program, Doctor of Clinical Science in Speech Language Pathology Program (CScD), and CSD Doctor of Philosophy (Ph.D.) Program.

- Committee members serving as research mentors for submitted applications for the Audrey Holland Endowed Award will recuse themselves from the selection committee.
- The committee members will assign scores according to the following scoring rubric, to each of the following criteria. The application receiving the highest number of total points will receive the award.
- Applicant
 - Is the applicant's academic record of high quality?
 - Does the applicant have the potential for, and commitment to, becoming an important contributor to biomedical, behavioral or clinical science as a clinician-scientist?
 - Is there a good match between the proposed project and the applicant's education, experience, and reasons for doing the research (as gleaned from the bio sketch)?
 - Has the applicant had any prior research experience or publications? Does the applicant have a questioning mind?
- Purpose, specific aims, literature review, significance of project, importance of project
 - Is the proposed research plan of high scientific quality, and does it relate to the applicant's education, experience, and reasons for doing the research (per the bio sketch)?
 - Is the research plan consistent with the applicant's stage of research development?
 - Will the research plan provide the applicant with individualized and supervised experiences that will develop research skills needed for their independent and productive research career?
 - Will the research plan provide the applicant with individualized and supervised experiences that will help develop research skills needed for participation in future research, scholarly, and/or clinical investigative activities?

Scoring Rubric

Score	Descriptor	Comments on Strengths/Weaknesses
1	Exceptional	Exceptionally strong with essentially no weaknesses
2	Outstanding	Extremely strong with negligible weaknesses
3	Excellent	Very strong with only some minor weaknesses
4	Very Good	Strong with numerous minor weaknesses
5	Good	Strong but with at least one moderate weakness
6	Satisfactory	Some strengths but also some moderate weaknesses
7	Fair	Some strengths with at least one major weakness
8	Marginal	A few strengths and a few major weaknesses
9	Poor	Very few strengths and numerous major weaknesses

- In the event of a tie vote, the Department of Communication Science and Disorders Director of Student Financial Aid and Awards will give the tiebreaking vote.
 - If the director is serving as research mentor for any submitted applications, the Chair of the Department of Communication Science and Disorders will serve as the tiebreaker vote.
 - Next in line to generate the tiebreaker vote is the CSD Department Vice Chair of Research.

AUDREY HOLLAND ENDOWED FUND
Application Form

Student Last Name: _____
Student First Name: _____
Middle Initial: _____
Credentials (indicate current highest earned degree): _____
Address: Number & Street _____
City, State, Zip Code: _____
Phone number including area code: _____
Applicant is a (check all that apply):
☐ CSD undergraduate student
☐ CSD MA/MS-SLP student
☐ CSD AuD student
☐ CSD CScD student
☐ CSD PhD student

TITLE OF PROJECT:

LIST OF ITEMS FOR WHICH THE AWARD WILL BE USED: Indicate item (see instructions above) and approximate cost. Please use the form below. A sample list is attached to the application. Include in the Project Narrative, where each item fits into the research plan (see next paragraph).

PROJECT NARRATIVE (5 PAGES OR LESS): include purpose of research and plan of execution. Please insert the information in the following outline modeled after the University of Pittsburgh IRB application, or create a separate document using this outline. Please add a "Project Narrative" header to each page of the Narrative.

1. Project Title, Principal Investigator's Name
2. Objective: What is the overall purpose of this research study? (Limit response to 1-2 sentences.)
3. Specific Aims: List the goals of the proposed study (e.g., describe the relevant hypotheses or the specific problems or issues that will be addressed by the study).
4. Background: Briefly describe previous findings or observations that provide the background leading to this proposal.
5. Significance: Why is it important that this research be conducted? What gap in existing information or knowledge is this research intended to fill?
6. Innovation: Indicate any innovative aspects of your research proposal or design.

BIOSKETCH OF THE STUDENT APPLICANT. Highlight your education and experience which enable you to do this research, your motivation for embarking on this research, and reasons for doing the research. Include your undergraduate and graduate grade point average, degree program and level/year, and milestone in the degree program (see instructions above). Please add a “Biosketch” header to the biosketch.

CURRICULUM VITAE OF THE STUDENT APPLICANT. Please add a “Curriculum Vitae” header to each page of the CV.

AUDREY HOLLAND ENDOWED AWARD

LIST OF SUPPLIES, EQUIPMENT, SUBJECT PAYMENTS FOR WHICH AWARD IS SOUGHT

(Please copy this table and paste into your application document)

ITEM	COST
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

PLEASE ADD ROWS TO THIS TABLE AS NECESSARY



Appendix B:
Core Functions for the Speech-Language Pathology Program

This document identifies the core functions that individuals are expected to employ in didactic and clinical experiences to acquire the knowledge and demonstrate the competencies that will lead to graduation and entry into professional practice. The term “core functions” refers to behavioral or cognitive functions that an individual must be able to perform with or without accommodations to practice as a speech-language pathologist or audiologist in a broad variety of clinical situations.

The CSD Department uses this guiding document in the following ways:

- *informing individuals* about the core functions associated with the professions of audiology and speech-language pathology
- *empowering students* to make informed choices regarding their pursuit of professions in audiology and speech-language pathology
- *initiating discussions* with students regarding student success
- assisting students in *identifying and advocating* for appropriate resources and accommodations, which can be accessed via the Disability Resources and Services Office.
 - The degree to which accommodations are determined is under the governance of the Americans with Disabilities Act, Section 504 of the Rehabilitation Act of 1973. It is the responsibility of the Disability Resources and Services Office and the individual to work together to identify possible services and accommodations.
- *advancing* the professions of audiology and speech-language pathology through the lens of justice, diversity, equity, and inclusion.

Communication

Statements in this section acknowledge that audiologists and speech-language pathologists must communicate in a way that is understood by their clients/patients and others. It is recognized that linguistic, paralinguistic, stylistic, and pragmatic variations are part of every culture, and accent, dialects, idiolects, and communication styles can differ from general American English expectations.

- Employ oral, written, auditory, and non-verbal communication at a level sufficient to meet academic and clinical competencies.
 - Example: Appropriately model communication for clients/patients.
- Adapt communication style to effectively interact with colleagues, clients, patients, caregivers, and invested parties of diverse backgrounds in various modes such as in person, over the phone, and in electronic format.

Communication may occur in different modalities depending on the joint needs of involved parties and may be supported through various accommodations as deemed reasonable and appropriate to client/patient needs. Some examples of these accommodations include augmentative and alternative communication (AAC) devices, written

displays, voice amplification, attendant-supported communication, oral translators, assistive listening devices, sign interpreters, and other non-verbal communication modes.

Motor

Statements in this section acknowledge that clinical practice by audiologists and speech-language pathologists involves a variety of tasks that require manipulation of items and environments.

- Engage in physical activities at a level required to accurately implement classroom and clinical responsibilities (e.g., manipulating testing and therapeutic equipment and technology, client/patient equipment, and practice management technology) while retaining the integrity of the process.
- Respond in a manner that ensures the safety of clients and others.

It is recognized that this may be accomplished through a variety of means, including, but not limited to, independent motor movement, assistive technology, attendant support, or other accommodations/modifications as deemed reasonable to offer and appropriate to client/patient needs.

Sensory

Statements in this section acknowledge that audiologists and speech-language pathologists use auditory, visual, tactile, and olfactory information to guide clinical practice.

- Access sensory information to differentiate functional and disordered auditory, oral, written, and visual communication.
- Access sensory information to correctly differentiate anatomical structures and diagnostic imaging findings.
- Access sensory information to correctly differentiate and discriminate text, numbers, tables, and graphs associated with diagnostic instruments and tests.

It is recognized that such information may be accessed through a variety of means, including direct sensory perception and /or adaptive strategies. Some examples of these strategies include visual translation displays, text readers, assistive listening devices, and perceptual descriptions by clinical assistants.

Intellectual/Cognitive

Statements in this section acknowledge that audiologists and speech-language pathologists must engage in critical thinking, reasoning, and comprehension and retention of information required in clinical practice.

- Retain, analyze, synthesize, evaluate, and apply auditory, written, and oral information at a level sufficient to meet curricular and clinical competencies.
- Employ informed critical thinking and ethical reasoning to formulate a differential diagnosis and create, implement, and adjust evaluation and treatment plans as appropriate for the client/patient's needs.
- Engage in ongoing self-reflection and evaluation of one's existing knowledge and skills.
- Critically examine and apply evidence-based judgment in keeping with best practices for client/patient care.

It is recognized that such skills may be fostered through a variety of means, including assistive technology and /or accommodations/modifications as deemed reasonable and appropriate to client/patient needs.

Interpersonal

Statements in this section acknowledge that audiologists and speech-language pathologists must interact with a diverse community of individuals in a manner that is safe, ethical, and supportive.

- Display compassion, respect, and concern for others during all academic and clinical interactions.
- Adhere to all aspects of relevant professional codes of ethics, privacy, and information management policies.
- Take personal responsibility for maintaining physical and mental health at a level that ensures safe, respectful, and successful participation in didactic and clinical activities.
- Demonstrate awareness of personal and professional abilities through self-reflective practices to facilitate growth in didactic and clinical competencies.

It is recognized that personal interaction styles may vary by individuals and cultures and that good clinical practice honors such diversity while meeting this obligation.

Cultural Responsiveness

Statements in this section acknowledge that audiologists and speech-language pathologists have an obligation to practice in a manner responsive to individuals from different cultures, linguistic communities, social identities, beliefs, values, and worldviews.

- Engage in ongoing learning about cultures and belief systems different from one's own and the impacts of these on healthcare and educational disparities to foster effective provision of services.
- Demonstrate the application of culturally responsive evidence-based decisions to guide clinical practice.

This includes people representing a variety of abilities, ages, cultures, dialects, disabilities, ethnicities, genders, gender identities or expressions, languages, national/regional origins, races, religions, sexes, sexual orientations, socioeconomic statuses, and lived experiences.

Core Functions Statement

I have read the document: Core Functions for the SLP Masters and AuD Programs. I understand that if I feel that I need accommodations to meet the core functions, it is my responsibility to initiate contact with the University of Pittsburgh Disability Resources and Services Office (412-648-7890) for an assessment of my eligibility for and the reasonableness of accommodations.

If I am unable to meet the Core Functions with or without reasonable accommodation now or in the future, I understand that I may not be able to continue advancing in academic and/or clinical components of the program.

Please Print Name

Signature

Date

Appendix C: Resources for Disabled Students

Office of Institutional Engagement and Wellbeing

Disability Resources & Services

The University of Pittsburgh is committed to an inclusive and accessible campus environment. It is the mission of Disability Resources & Services (DRS) to fulfill this commitment by partnering with individuals with disabilities and the University community to provide equal access to employment, classes, programs, and activities.

Website: <https://www.wellbeing.pitt.edu/disability-access/disability-resources-services>

DRS Reception:

Email: drsrecep@pitt.edu

Phone: 412-648-7890

Contact form: <https://www.wellbeing.pitt.edu/disability-access/disability-resources-services>

Civil Rights & Title IX

The University of Pittsburgh, as an educational institution and as an employer, values equality of opportunity, human dignity, and racial/ethnic and cultural diversity. Accordingly, the University prohibits and will not engage in discrimination or harassment on the basis of race, color, religion, national origin, ancestry, sex, age, marital status, familial status, sexual orientation, gender identity and expression, disability, or status as a disabled veteran or a veteran of the Vietnam era. Further, the University will continue to take affirmative steps to support and advance these values consistent with the University's mission. This policy applies to admissions, employment, access to and treatment in University programs and activities. This is a commitment made by the University and is in accordance with federal, state, and/or local laws and regulations.

For information on University equal opportunity and affirmative action programs and complaint/grievance procedures, please use this website: <https://www.wellbeing.pitt.edu/civil-rights-title-ix>

University of Pittsburgh, Office of Health Sciences Diversity

Carl Lawson, Associate Vice Chancellor, Health Sciences Diversity, Equity, and Inclusion

Phone: 412-648-2066

Fax: 412-383-5728

diversity@hs.pitt.edu

<p>Vanessa Love</p> <p>Director, Civil Rights and Title IX 31st Floor, Cathedral of Learning, 4200 Fifth Ave, Pittsburgh, PA 15260 vc117@pitt.edu 412-648-7860</p> <p>Handles and coordinates responses to inquiries regarding discrimination, harassment, or retaliation based on sex, sexual orientation, gender, and gender identity or expression.</p>	<p>Leigh Culley</p> <p>Director, Disability Resources and Services 140 William Pitt Union, 3959 Fifth Ave, Pittsburgh, PA 15260 lculley@pitt.edu 412-648-7890</p> <p>Handles and coordinates responses to inquiries regarding discrimination, harassment, or retaliation based on disability, race, color, religion, national origin, ancestry, genetic information, marital status, age, and veteran status.</p>	<p>Yvonne Powers,</p> <p>Director, Employee and Labor Relations 518 Craig Hall, 200 S Craig St, Pittsburgh, PA 15260 ytp2@pitt.edu 412-624-6801</p> <p>Handles and coordinates responses to inquiries regarding discrimination, harassment, or retaliation based on disability, race, color, religion, national origin, ancestry, genetic information, marital status, age, and veteran status, for cases involving staff members.</p>
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Appendix D: Master's Thesis Committee Approval

Completed via DocuSign by contacting Laura Martin

Student name _____ People Soft # _____ Pitt email address _____

Proposed Master's Thesis Title:

Committee members should be selected early in the formulation of the thesis project. The student should contact the proposed committee members, discuss the thesis topic, and obtain their consent to serve on the committee.

Committee Advisor/Chair:

In consultation with an academic advisor, the student will need to select a research mentor to serve as the Thesis Committee Advisor/Chair. The Advisor/Chair must have a faculty appointment within the Department and have expertise and research experience in the area of investigative study. If the Advisor/Chair is an adjunct member of the Department, they would be a co-advisor with a regular Department faculty member.

Committee Members: The committee will consist of University of Pittsburgh faculty members, the # of members depend on the department.

In consultation with the Thesis Advisor/Chair, the student selects 2 members (3 for CSD):

- At least 1 (2 for CSD) member(s) must be a SHRS faculty member from within the student's department.
- At least 1 committee member must be a regular (not adjunct) member of the SHRS Graduate Faculty.
- If required a 3rd committee member may be from within the department, SHRS or the University.
- Additional members from outside the University are allowed (serving as non-voting members), but not required, and would be in addition to the 2 or 3 University of Pittsburgh faculty members (names can be added on back of form)

Committee Members (by signing this you are agreeing to be a part of this committee)

Thesis Advisor/Chair (printed name and signature)	Date	Dept/Affiliation	SHRS Grad Faculty? (Y/N)
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Member (printed name and signature)	Date	Dept/Affiliation	SHRS Grad Faculty? (Y/N)
-------------------------------------	------	------------------	--------------------------

Member (printed name and signature)	Date	Dept/Affiliation	SHRS Grad Faculty? (Y/N)
-------------------------------------	------	------------------	--------------------------

Member (printed name and signature)	Date	Dept/Affiliation	SHRS Grad Faculty? (Y/N)
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The thesis committee listed above is approved and the student may proceed to prepare and defend the master's Thesis Prospectus.

Department Chair

Date

Submit this completed form to Laura Martin (CSD Department), thesis advisor, and MA SLP Program Director. Copies should be retained by the Thesis Advisor and the student.

Updated June 3 2025



Completed via DocuSign by contacting Laura Martin

Appendix E: Master's Thesis Prospectus Approval

Student name _____ People Soft # _____ Pitt email address _____

Proposed Master's Thesis Title:

Committee Members

Thesis Advisor (printed name and signature)	Date	Dept./Affiliation
--	------	-------------------

Member (printed name and signature)	Date	Dept./Affiliation
--	------	-------------------

Member (printed name and signature)	Date	Dept./Affiliation
--	------	-------------------

Member (printed name and signature)	Date	Dept./Affiliation
--	------	-------------------

The thesis committee listed above has approved the prospectus and the student may proceed with their project.

Submit this completed form to Laura Martin (CSD Department), thesis advisor, and MA SLP Program Director. Copies should be retained by the Thesis Advisor and the student.

Appendix F: Sample Timeline for Completing a Master's Thesis

The table below has typical dates for students who plan to complete their thesis by the end of their spring or summer term of the second year. Students should set deadlines with their thesis advisor to meet their graduation goals.

Term	Date	Action
Fall Year 1		Meet with potential thesis advisor with three research questions: <ul style="list-style-type: none"> • What do you want to know? (What is your general research question?) • Why do you want to know it? (What background makes your question important?) • How are you going to do it? (What method will answer your question?)
	End of Term	Complete CITI responsible conduct of research training and an OSIRIS account if appropriate
	End of Term (or earlier)	No later than the end of their first Fall term, students should confirm with their thesis advisor, the program director, and director of clinical education when they plan to enroll in the Integrated Cases course and not be enrolled in a clinical placement. If students plan to be out of area during the summer semester, they should follow that timeline as outline in the clinical education section. Students will typically enroll in a thesis credit during the semester they are enrolled in the Clinical Integration course.
Spring Year 1	Mid-January	Work with your thesis advisor, select remainder of your committee and describe project to them.
	End-January	Gain Department Chair approval for thesis committee
	Mid-February	Working with your thesis advisor, prepare an overview document answering the following questions in detail <ul style="list-style-type: none"> • What do you want to know? • Why do you want to know it? • How are you going to do it?
	Early April	Complete ETD training (check on ETD deadlines for Spring Graduation)
Summer Year 1	Early June	Written prospectus completed. This will require an iterative process (several versions) between the thesis advisor and the student to produce the prospectus.
	Early/Mid-July	At least two weeks before the Thesis Prospectus Meeting the written prospectus must be sent to the committee.
	End of July	Successfully complete the Thesis Prospectus Meeting
Fall Year 2		Data collection started Ideally completed by end of term
		Data analysis started
Spring Year 2		Data collection complete
		Data analysis ideally complete
		Possible oral defense
Summer Year 2		Data analysis complete
		Possible oral defense

Appendix G: Key Elements Often Included in a Thesis Paper

This document is designed for students and thesis advisors to use as a guide while developing their final paper.

- Title
 - Clear and specific title that highlights the importance of your project
- Background
 - Literature review of the topic that synthesizes what is known about the topic
 - Your literature review should lead the reader to your research questions (becoming increasingly more focused).
 - Clear research question(s) & literature or data-based hypotheses
- Methods
 - Keep in mind the importance of replication of your study. That is, someone should be able to read your methods and reasonably replicate them.
 - Human subject projects often include comprehensive descriptions of participants (e.g., age, diagnosis)
 - Typically, methods will include materials (tools) used for the study.
 - Typically, methods will include procedures (step by step the techniques that were used).
 - Data and/or statistical analysis should be included in the methods as a subheading.
 - If your study is part of a larger study or an existing data set, be sure to explain the purpose of that project and/or the purpose for which those data were collected.
 - If others assisted with your project, be clear about your role (as well as their roles) in all project steps.
- Results
 - Present outcomes from your data analysis (not interpretation).
 - Will likely include some graphical representation of your results.
- Discussion
 - Interpretation of your results, connections to other literature, future directions, limitations, and a conclusion paragraph or section.
- References
 - List references in APA format. Be sure these are in the accurate form (Purdue Online Writing (OWL) Lab: <https://owl.purdue.edu>).

Other considerations

For some projects, it may make sense to combine results and discussion – but the elements of each still need to be included.