SPEECH-LANGUAGE PATHOLOGY CLINICAL HANDBOOK

Updated August 2022

Audiology & Speech-Language Pathology Clinic
Department of Speech and Hearing Science
University of Illinois at Urbana-Champaign
Accreditation
The master’s M.A. education program in speech-language pathology at the University of Illinois at Urbana-Champaign is accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association, 2200 Research Boulevard, #310, Rockville, MD 20850, 800-498-2071 or 301-296-5700.

Professional Ethics
Faculty and clinical personnel in the Department of Speech and Hearing Science adhere to the ASHA Code of Ethics and to the University of Illinois procedures. We welcome you to our clinic and invite you to learn and practice ASHA's Code of Ethics found at https://www.asha.org/Code-of-Ethics/ and the University of Illinois policy found at https://www.uillinois.edu/about/policies.

Information in This Handbook
The information contained in this handbook is for guidance on matters of interest to faculty, staff, and students in the Department of Speech and Hearing Science at the University of Illinois at Urbana-Champaign. The handbook sometimes summarizes campus and university policies as a convenient reference tool. However, information on campus and university policies contained herein is for informational purposes only and is subject to change without notice. For the most current information, please see the official campus/university versions of these policies as posted on official web sites. These can be accessed through the Campus Policies and Procedures home page at the following URL: https://www.uillinois.edu/about/policies

Please note: The clinical programs in audiology and speech-language pathology adopted the CALIPSO program for tracking clinical experiences and records beginning January 2019 for the Au.D program class of 2022 and the MA-SLP program class of 2020. Additionally, the conversion to electronic medical records for the Audiology & Speech Language Pathology Clinics was initiated May 2020. Some information in this handbook is subject to change upon conversion to the electronic medical records system.
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*NOTE: All forms referenced in the Handbook are available in the MA-SLP Program Informational Forms folder on Box.*
Section I

Introduction
AUDIOLOGY & SPEECH-LANGUAGE PATHOLOGY CLINIC

The Audiology & Speech-Language Pathology Clinic is part of the Department of Speech and Hearing Science in the College of Applied Health Sciences at the University of Illinois at Urbana-Champaign. The purpose of the clinic is to train students to diagnose and treat communication disorders. Within the clinic, students in the Master of Arts in Speech-Language Pathology Program work with patients and their families under the direct supervision of an individual who holds a State of Illinois license to practice Speech-Language Pathology and an American Speech-Language-Hearing Association (ASHA) Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP). The Department of Speech and Hearing Science organizational chart is shown below.

A. Organizational Chart of Administration
Mission Statement: Enhancing communication across the lifespan by integrating research and clinical practice from the biological, behavioral, and social sciences.


The research, teaching, and service programs of the Department of Speech and Hearing Science are committed to furthering understanding of the entire spectrum of communication. The undergraduate curriculum offers a broad background in the theoretical, basic, and applied aspects of biological, behavioral, linguistic, and social foundations of human communication to educate students who intend to pursue careers and/or graduate studies in many fields related to communication, health, and medicine. The graduate program focuses on research and clinical education in communication, its disabilities, and the treatment and prevention of communicative disorders. To these ends, the department:

- Educates the students of the state, nation, and world regarding the nature of communication and communication differences and disabilities;
- Investigates health, development and aging, and disability related to speech, language, deglutition, and hearing across the life span;
- Develops methods to prevent, identify, assess, and treat disabilities of human communication;
- Prepares students to investigate communication and its disabilities as scientists and educators; and
- Prepares students to prevent and treat communicative disabilities as speech-language pathologists and audiologists.
B. Clinical Priorities

Students in the Department of Speech and Hearing Science MA-SLP Program are expected to complete academic and clinical coursework during their enrollment at the University of Illinois at Urbana-Champaign so that they will be fully prepared for licensure and certification. Due to the number of clinical hours needed for certification, and the diversity of our scope of practice, students will need to exercise flexibility in their scheduling. Academic classes take priority during the week. Clinic is scheduled to avoid conflict with classes. Clinic scheduling has second priority. In order for the patients to be scheduled to meet the students' needs, work schedules must be considered last, including T.A. /R.A. assignments. It is often difficult to coordinate work with clinic. Clinic scheduling is completed prior to the beginning of each semester.

C. Clinical Practicum Privileges

Faculty supervising students in the Audiology & Speech-Language Pathology Clinic are ethically bound to protect the welfare of the patients in the clinic. This is paramount when any decisions are made that may affect patients. This includes decisions about student participation in clinical activities. Therefore, student participation in clinical practicum is a privilege rather than a right.

All graduate students are required to review the document entitled Supporting Student Success in SHS Professional Programs. The purpose of this document is to describe department and campus-wide resources to support student success and outline the essential functions routinely performed by Audiologists and Speech-Language Pathologists (SLPs). All students entering the Master of Arts in Speech-Language Pathology Program are encouraged strongly to read this document and consider their potential for participating in these essential professional functions. Students who anticipate difficulty learning in either classroom or clinical settings are encouraged to contact the Director of Graduate Studies in SHS as soon as possible, as well as seek out other campus resources, such as Disability Resources & Educational Services (DRES), as appropriate.

Clinical faculty will meet at least twice each semester to review the clinical performance of every student enrolled in the MA program. If a student's overall grade point average drops below 3.0 or if the student exhibits any behavioral or performance characteristics that are determined by consensus of the faculty to be inconsistent with the standards represented on the SLP Assessment Practicum Form for Clinical Competences /Formative Assessment (see Section VI), the student will be counseled by the appropriate faculty. This counseling will inform the student that he/she may require an intervention plan to ensure success in meeting the standards required of the program. Refer to the Supervision Section of this Handbook (see Section VI) for further details about Intervention Plans. In some circumstances, the student's participation in clinical practicum may be terminated immediately for just cause.
Section II

Clinical Facilities
A. Main Clinic Office

The main office is located at 2001 S. Oak St, Suite B, Champaign, IL 61801. The Office Support Assistant, who handles patient telephone calls and clinic fees, is housed in the main office. If a student receives a phone message from a patient or manufacturer, the student will be sent an email or provided a message in their mailbox. The Audiology & Speech-Language Pathology Clinic is open Monday through Friday. The Office Support Assistant is available from 8:00 A.M. to 4:30 P.M.

B. Faculty/Staff

The Department Head, Administrative Aide, Business Support Specialist and Graduate Secretary are housed in the Administrative Suite on the first floor of the Speech and Hearing Building located at 901 South Sixth Street, Champaign, IL 61820. All tenure-track faculty, including the Director of Graduate Studies have offices in the Speech and Hearing Building. The Audiology & Speech-Language Pathology Clinic is located at 2001 South Oak, Suite B, Champaign, IL 61820. Clinical faculty offices are in the Motorcycle Safety Program Building located at 4 Gerty Drive, Champaign, IL 61820.

C. Client/Patient Waiting Area

The waiting area for audiology and speech-language pathology services is located in the lobby of the Clinic. Students should meet their patients in the waiting room prior to each session/appointment. Conferences should not take place in the waiting area. If important information needs to be exchanged with patients or parents, it should be discussed in the privacy of the clinic rooms per privacy policy. When greeting a patient, per privacy rules, you may greet them by their first name or title and last name, but not both.

Temperature checks for clients and caregivers will be done on daily arrival.

D. Clinic Rooms

Students are responsible for keeping all clinical rooms and the patient waiting areas presentable, maintaining infection controls, and returning materials when finished using them. All clinic rooms will be maintained at the end of each session using infection control cleaning protocol implementation.

E. Clinic Chart/Work Room

The student workroom in the clinic has two computers that students, clinical staff or clinical faculty may use to complete their clinical work. Masks should be worn at all times and the infection control cleaning protocols implemented when tasks are completed in this space.
F. Clinical Faculty Office

Clinical faculty utilize Room 1020 for office activities while at the clinic. Please knock before entering.

G. Student Workroom

The student workroom has all clinical faculty and MA student mailboxes, printers, a computer, and office supplies. Two portable audiometers are located in the student workroom.

H. Therapy Rooms

Room 1017 houses the Computerized Speech Lab (CSL). Rooms 1005, 1013 and 1016 have additional therapy equipment (e.g. toys). Children’s books are located in room 1013.

I. Clinic Computers

The computers for word processing are located in Rooms 1018 and 1019. See Section VII HIPAA for policies and procedures for properly maintaining confidentiality for all clinic patient information.

J. Keys

Students will use their iCard to enter the Clinic and the ColLab during non-business hours.

K. Patient Parking

Patient parking is located in front of the Clinic. **Students may not park in the clinic parking area during the hours of 6 AM-6:15 PM M-F.** Student parking is available directly across the street from the Clinic.

L. Building Emergency Plan

All clinical students must familiarize themselves with the Building Emergency Plan. In case of a weather event, the NOAA weather radio will signal loudly. Please ask clinical faculty or staff to address the notifications on the radio and await further instruction. If a student is at the clinic after hours, and the weather radio signals, press snooze once and listen to the instructions. In the case of a tornado warning, all individuals should relocate to Room 1005. If you believe that you might require assistance during a building evacuation, please let the Clinic Director know as soon as possible so that this accommodation may be included in the building emergency plan.
Section III

Clinical Practicum
The Master of Arts in Speech-Language Pathology Program in the Department of Speech and Hearing Science is accredited by the Council on Academic Accreditation (https://caa.asha.org/). The program’s curriculum is structured to allow students to meet the Council for Clinical Certification in Audiology and Speech-Language Pathology (CFCC) SLP standards for both academic/knowledge and clinical/performance competencies (https://www.asha.org/Certification/2020-SLP-Certification-Standards/).

The objective of the program is to provide students with the knowledge base as well as the quantity and quality of clinical experiences that will lead them to become competent professionals.

A. ASHA and Departmental Requirements

The CFCC requires applicants for certification to complete a program of study that includes academic course work and diverse practicum experiences. Students in the MA program must attain a minimum of 375 clock hours and 25 observation hours while a student in order to qualify for licensure and ASHA certification. Clinical experiences must be sufficient in depth and breadth to achieve the knowledge and skill outcomes stipulated in Standard V of the 2020 Standards and Implementation Procedures for the Certificate of Clinical Competence in Speech-Language Pathology. In addition, the curriculum should include appropriate research opportunities, consistent with the specified mission and goals of the program, and institutional expectations for doctoral programs.

The department requires students to obtain 25 observation hours in speech-language pathology before the end of their first semester in the program. In most cases, these observation hours will be obtained prior to beginning the MA degree. However, exceptions can be made in a case-by-case basis. Please note that not completing observation hours in a timely manner may delay completion of the program.

Clinical clock hours are defined as direct client contact time involving assessment and/or intervention. In addition, students may obtain up to 75 hours via alternative methods, such as clinical simulations. Clinical practicum is defined as direct patient contact, consultation, record keeping, and administrative duties relevant to audiology service delivery. Clinical practicum experiences will occur throughout the program. The program must provide sufficient breadth and depth of opportunities for students to obtain a variety of clinical practicum experiences in different work settings, with different populations, and with appropriate resources and equipment in order to demonstrate skills across the scope of practice in speech-language pathology and that are sufficient to enter independent professional practice.

Students in the MA-SLP Program register for at least one clinical practicum course each semester. These include SHS 477 for fall 1 & spring 1, SHS 577 for summer 1 and fall 2, SHS 576 and SHS 577 for spring 2, and SHS 577 for summer 2. Credit for all clinical practicum courses is variable, ranging from 1 to 4 hours. Students are required to provide quality services and meet the department policy for minimum performance in the clinic. Minimum performance corresponds to a letter grade of B- or above. Therefore, the clinical instructor will not sign for clinical hours for earned grades of C+ or lower in any clinical practicum course; these hours will not count toward ASHA certification. In addition, participation in all practicum courses adheres
to SHS Department and Graduate College policies. If minimal performance is not achieved, continuation in clinic will be according to an intervention plan as described in Section VI, Supervision.

B. Criminal Background Check

The MA-SLP Program requires practicum experiences in which students work directly with clients in the department clinic and community settings. Graduate students will be required to complete a criminal background check annually. The student will be responsible for any fees associated with the background check.

The SHS departmental policy on background checks is that any convictions will be reviewed for compatibility with placement in clinical practicum. Certain convictions, such as those that are a bar to employment with a school district or are cause for denial of a professional license, may prohibit a student from participating in practicum. These convictions are fully set out in the Illinois School Code, 105 ILCS 5/10-21.9, as amended (https://codes.findlaw.com/il/chapter-105-schools/il-st-sect-105-5-10-21-9.html). Convictions that are grounds for denial of a professional license are set forth in Illinois Speech-Language Pathology and Audiology Practice Act 225 ILCS 110/16 (http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=1325&ChapterID=24).

Castle Branch Procedure

- Go to: https://portal.castlebranch.com/UH74 for Speech and Hearing Science
- Select + Please Select
- Select + Speech & Hearing Science
- Select from the following as it pertains to your placements:
  - UH74addition: Illinois CANTS Search and Nationwide Healthcare Fraud & Abuse Scan: covers and includes a check of sex offender registries as well as the OIG, SAM, SDN exclusions lists check (completed as needed per external placement)
  - UH74bg: Background check (initial background check with Castle Branch which is completed prior to start of the Graduate Program)
  - UH74dt: Drug Test (completed annually)
  - UH74re: Background Check (the yearly recheck; if the ped abuse scans are needed, you would use this package & the UH74 addition)
- 1-3 day turnaround time, not expected to be more than 5

In addition to the background check, some external placement sites may have other requirements that must be completed before a student is allowed to be placed at the site. These requirements may include but are not limited to immunizations, drug testing or additional training (e.g. HIPAA, CPR training/certification). The student will be responsible for fees associated with any required testing or training by an external placement site. Information about site requirements is retained on CALIPSO and is updated annually.
C. SLP Clinic Meeting

MA students will meet weekly during the semester for Fall 1 and Spring 2. Additionally, students may have small team meetings with their supervising clinical faculty. Student attendance at the meetings is mandatory.

D. Submitting Schedules

Prior to the end of each semester, students are required to complete a schedule of availability for the following semester indicating availability (and lack thereof) for participation in clinical activities. This Practicum Schedule should include information pertaining to the times courses are being taken and work assignments. All forms must be up-to-date and all changes should be given to the appropriate clinical faculty as soon as they occur.

E. Scheduling

The clinical faculty and staff complete scheduling before the beginning of each semester. It is the responsibility of the student, clinical instructors, and the External Rotation Coordinator to ensure that each student receives a variety of clinical experiences. Due to the nature of clinical work, clients may be added or dismissed during the course of the semester. Students are asked to be flexible with changes to their clinical caseload, as this reflects the realities of clinical work.

F. Clinic Assignments

Clinical assignments are provided to the students prior to the beginning of the semester, with the exception of the first semester of enrollment. If there are questions or conflicts, the student is to see the appropriate clinical faculty or staff member or the External Rotation Coordinator immediately. Students are required to see their clients through the end of finals week each semester. In-house clinic follows the University Calendar. Students in external rotations, especially SHS 576 and SHS 577 in summer 2 will need to follow the calendar associated with their clinical rotation (e.g., in SHS 576, the student will follow the spring break of the school district, not of the University of Illinois). Students will be told the number of practicum credit hours to register for prior to each semester of practicum. Students will keep track of their clinic patient contact hours and scope of experiences using CALIPSO.
G. External Rotations

The External Rotation Coordinator will assign external rotations and will consult with the Clinic Director as needed. Some facilities may require an interview prior to approval for the rotation. Students may request a rotation facility, but the final decision will be made by the External Rotation Coordinator and external rotation personnel. If the student objects to an assigned rotation this should be discussed with the External Rotation Coordinator and the Clinic Director. However, if changes cannot be made, or it is felt that changes should not be made, the student’s rotation site for that semester will remain as scheduled. See Section I, Clinical Practicum Privileges for further information. **Refusal of any clinical rotation may prolong the duration of your clinical program.**

It is important to submit paperwork/documentation for external rotations in a timely manner; failure to do so may jeopardize a student’s ability to attend that rotation and delay graduation.

A list of possible external rotation facilities is found in Calipso. To maximize experiences and take full advantage of the diverse training opportunities at external facilities, you may be required to have access to reliable transportation for 45-60 miles.

Students may not cancel any assigned time block/session in-house or day at an external rotation during the semester without preapproval of the External Rotation Coordinator and the instructor at the external rotation. Students enrolled at an external rotation facility will be required to complete the External Placement Survey form on CALIPSO at the end of each semester.

H. Absence/Professional Behavior Policy

Although the majority of graduate students achieve nearly perfect attendance, some do not. Therefore, it has been necessary to develop an absence policy so that clinic patients experience consistent, quality services. This system applies to absences due to emergencies, such as funerals and other life events.

Interviews that occur at any time during the MA program for external rotations or for employment must be scheduled on days when the student is not committed to a clinical assignment or the student will receive a Notice of Absence.

Each time a student misses an assigned in-house clinic session or an external rotation day, the student will receive a Notice of Absence from the appropriate instructor. If a student receives three Notices of Absence and/or Professional Behavior Reminders for in-house or external rotations in one semester, the clinic grade for either in-house clinic or for the external rotation may be dropped by one letter grade. This may also trigger an intervention plan (see Section VI). Missing an external rotation assignment that occurs on one day would result in one Notice of Absence and/or Professional Behavior Reminder. If an external rotation is missed on two assigned days, this will result in the student receiving two Notices of Absence and/or Professional Behavior Notices.
Receiving a Notice of Absence form does not necessarily mean that the student has demonstrated unprofessional behavior. It may be necessary for a student to miss an assigned time block or meeting due to illness, a personal emergency, a job/rotation interview or a convention/workshop/conference. This is simply a way to keep track of the number of absences that have occurred. Absence must be handled in a professional manner as outlined below. If not, the semester grade in the Professional Protocol section of the Clinical Competencies Formative Assessment will be reduced.

If an emergency/absence occurs and a student must miss an assigned clinic time block at an external rotation, he/she is required to contact the external rotation supervisor and then immediately contact the External Rotation Coordinator at the university. When possible, the External Rotation Coordinator should be contacted at least 12-to-24 hours prior to the clinic time slot in question. Students are required to make up missed time blocks at rotation sites at the discretion of the external clinical supervisor.

Should a personal emergency arise, the Student Assistance Center in the Office of the Dean of Students serves as the first point of contact for students requesting assistance for personal emergencies—students may drop in or make an appointment. Assistant Deans help students understand university policies and procedures, guide them in connecting to other campus resources, and support students in crisis. The Student Assistance Center can assist students with a broad range of issues that may be affecting their academic and/or clinical performance, including issues related to physical and mental health, course attendance, accessing various campus services, and options for withdrawing from the university.

If the student is going to miss in-house clinic the student should contact their immediate clinical instructor. At that time, the student and clinical instructor will decide if coverage is needed for the time block and if so, how the student will arrange for the coverage. When a student is absent from clinic, the student must arrange for another student to cover the scheduled time slot.

Failure to follow the Absence Policy as described will result in the student receiving a Professional Behavior Notice.

I. Clinical Participants

Undergraduates may enroll in SHS 475 (Pre-practicum in SHS). Your clinical instructor will provide you more information as required. This opportunity to mentor undergraduate students can provide you with initial experiences in supervisory behavior as required by the ASHA 2020 standards.

J. Dress Code:

All students in the Audiology & Speech-Language Pathology Clinic are expected to dress in a manner consistent with the professional role they are assuming. Professional appearance can help promote authority and respect as a healthcare professional in training. Clothing should be neat and well maintained with regular laundering/cleaning/ironing. The clinical faculty reserve the right to request that a student change her/his clothing and/or accessories if they the clinical
faculty concerns that it will negatively affect patient care. Nametags must be worn in the Clinic. Please discuss with your clinical instructor about nametag protocol. When at an external site, students must adhere to the dress code of that particular site. This may require purchasing additional clothing at the expense of the student (e.g. scrubs, lab coat). It is expected that students comply with dress code during telepractice activities. The guidelines for dress are as follows:

- **Hair, earrings and facial jewelry:** Consider how you will be interacting with your patient when styling your hair. For example, if you are working with a young child or an individual with dementia, wearing the hair down might be tempting for the patient to pull. Additionally, if you are doing a procedure that requires gloves, will you be frequently tucking your hair behind your ear? Earrings can be a distraction to young children. Facial jewelry may need to be covered at the discretion of the clinical instructor as it may be a distraction or a hazard.

- **Tops & Blouses:** Students often do not realize how much bending occurs in clinical work. Check in a mirror to ensure that when you bend forward, the top does not reveal cleavage or skin, and that the shirt does not ride up in the back. This is especially important when working with young children or when doing tasks like assisting with headphones. The following are not allowed: sweatshirts, sleeveless or halter style shirts/dresses, graphic tees, or spaghetti strap shirts/dresses. Sleeveless blouses are permitted provided they do not reveal too much skin (be sure to check under the armpits when lifting your arms). It is recommended that you keep a cardigan handy, just in case. Midriffs and see-through styles are not permitted. If you have any doubts, ask.

- **Pants, Trousers and Skirts:** Shorts are not allowed. Leggings are not considered pants, unless worn with a tunic style shirt/dress that is no shorter than 3” above the knee. Skirts and dresses should be no shorter than 2” above the knee. Consider the length of the skirt and leg positioning when sitting. No black, blue or distressed denim is allowed.

- **Shoes:** Closed-toed shoes are recommended. No flip-flops, snow boots, or original Crocs. Clean sneakers are permitted.

- **Jewelry & Tattoos:** Jewelry should be conservative and safe. Do not try to draw attention to yourself; if you are questioning it, do not wear it. Your clinical faculty will ask you to cover tattoos if they are perceived to distract from patient care. A wristwatch is highly recommended, as students may not use their cellphones as a clock when delivering patient care.

- **Fingernails:** Nails should be clean, appear professional and be an appropriate length. Artificial nails or nails longer than fingertip length are not permitted. Avoid distracting nail designs. Nail polish should not be chipped, pealing, or otherwise not well kept. Fingernails are a common cause of infection in healthcare settings.

- **Perfume & Scents:** Heavy cologne/perfume should not be worn. Scented body splashes should be used in moderation.
• **Illini Fridays:** Students may participate in Illini Fridays. This may include University of Illinois themed gear and jeans. Students may not wear attire that features the Chief or that is pejorative toward other universities. Jeans must be clean, not ripped, and not jeggings.

If a clinical instructor requests that you change your attire, an explanation will be provided to help you understand the rationale. The professional dress guidelines are not intended to stifle expression or creativity, but to best prepare you for clinical care. If you are in the clinic during business hours, and you are not seeing clients/patients, avoid patient care spaces unless you are abiding by the dress code.

**K. Professional Behaviors**

Developing good professional behaviors is one of the key elements to being a successful clinician. Throughout practicum assignments, graduate students will have the opportunity to develop clinical skills in a variety of business and professional settings such as in the Audiology & Speech-Language Pathology Clinic, schools, hospitals and other external rotations. In addition to learning about the patients and evaluation procedures, students will be learning how to manage themselves as professionals. The following is a list of behaviors that are consistent with developing professional skills.

**External Sites:** Graduate students must learn the requirements of their external rotation sites. The following are suggestions:

- Learn the paperwork requirements for the setting such as release forms, census logs, billing sheets, insurance forms, scheduling sheets and other documentation. When filling out these forms make sure they are completed thoroughly.
- Become familiar with the goals and missions for the site (i.e., what are the priorities for who is seen for services, what other services does the setting provide).
- Become familiar with the rules and procedures of the site (e.g., parking, keys, hours, use of equipment).
- Read through the latest policy and procedure manuals for the site (if available).

**Punctuality:** Graduate students should develop the good habit of being punctual:

- Keep a calendar of all appointments, meetings, and important deadlines. This calendar should be accessible to the student at all times. Information in the calendar should include time and date, names and phone numbers of contact people.
- Be on time to all meetings and appointments; early is on time. If you are unable to make a scheduled meeting, you are required to let your clinical instructor know at least one day in advance.
- Communicate with staff and colleagues regarding all changes in scheduling.
- All deadlines must be met. If a student is not able to meet a given deadline, your grade may be lowered. Please work with your individual clinical instructor for more guidance on this issue.
• It is recommended that you arrive at least 15 minutes prior to your scheduled client to ensure smooth transitions for clients (to include any infection control procedures needed; room set up; check in with clinical instructor, etc.). Your clinical instructor may set this time differently as needed.

Professional Communication: Graduate students should develop good professional communication skills:

• Check email at least once a day. Timely responses (within 24 hours) to email messages are crucial to good professional communication. Students should read emails promptly, transfer all important information to their calendars, and respond to anyone as needed.
• All correspondence should convey a professional and respectful tone, whether to patients, other professionals, or the community (see also Essential Functions).
• Understand your clinical instructor’s preferences for when to email, text, or meet in person. The following generally applies: use text messaging for emergencies; to notify CI of email sent that needs immediate attention; and to coordinate with other students/CIs. Email all other inquiries. Please allow 24 hours for CI to respond; if no response within that timeframe, please feel free to contact again.

Preparation: Graduate students should be prepared and follow through:

• Prepare for all meetings. Prior to meetings about a patient, familiarize yourself with the patient’s chart and prepare points to make or questions to ask.
• Learn to say "yes" appropriately and respectfully. Follow through on any agreement made to do something. Your stewardship in the program is expected.
• Anticipate problems before they arise and when they do come up, start to problem solve possible solutions. Be prepared to discuss solutions with the clinical instructor in an appropriate and professional manner. Request a time with your clinical instructor (vs. “dropping by”) to meet to discuss clients, questions, and treatment plans.

Confidentiality: Students have access to personal information about patients. It is the student’s responsibility to maintain confidentiality as stipulated by ASHA’s Code of Ethics and federal law. Abide by institutional and Health Insurance and Portability Accountability Act (HIPAA) regulations that pertain to confidentiality (e.g., not giving patients' names out for research without releases, not taking patient folders off the premises, not discussing the patient in any manner in which he/she could be identified). All clinical students are required to undergo annual HIPAA training. HIPAA training will go into privacy rules and regulations in significant detail. To ensure patient privacy, students are not permitted to bring their cellphones into treatment rooms while providing patient care. If students record voice samples on a clinic iPad or recording device, the sample must be immediately deleted after the clinical session. Client PHI must never be saved on personal computers or flash drives. The above examples are not comprehensive. Privacy violations are extremely serious and may be associated with lowering of grades, failure to meet CFCC standards, intervention plans, termination from the program, and/or legal fines or prosecution. (See also Confidentiality Agreement form.) HIPAA and confidentiality rules and regulations apply to both in-person and telepractice sessions.
Section IV

Clinic Procedures
A. Preparation for the Evaluation

When evaluating a client for the first time, whether the client is new to the Audiology & Speech-Language Pathology Clinic or new to the graduate clinician, the MA student should discuss with the clinical faculty member or instructor the assessment procedures to be utilized for the evaluation (e.g. case history, dynamic assessment, patient-reported measures). Depending on the patient’s suspected diagnosis, and/or medical complexity, as well as the student’s level of clinical experience and current or former class experience, students will be given a level of guidance/support commiserate with their current skill level. Students are responsible for reviewing any material in the chart that may inform decisions about patient care. Patients may not be seen outside of scheduled times without the approval of the clinical instructor.

Initial evaluation appointments are scheduled for 60 minutes. In many situations, it will require more than one visit to complete the initial evaluation. The Office Support Assistant will discuss initial fees with the patient when appointments are made. Students work with their clinical faculty or instructor and the Office Support Assistant to schedule follow up appointments. Only office staff and the clinical faculty or instructors should schedule appointments.

No personal student food or drink other than water may be in the room during patient care. Food and beverages for therapeutic purposes are acceptable. Students should bring as few books, papers, backpacks, coats, purses, etc. as possible with them to clinic. Patient folders and other patient materials should not be left on the tables or counters in any clinic area.

B. Location of the Patient Appointment Schedule and Charts

Active patient charts are maintained in the file cabinet next to the Office Support Assistant’s desk. Students may only access charts on a need-to-know basis. Patient charts are kept in the file cabinet except when actively in use. Charts may only be taken to the treatment rooms or student work area. Charts may only be out for short periods and cannot be taken out of the building.

C. Legal Release and Permission to Receive Evaluation/Therapy

This form will be given to the patient at the front desk upon arrival to the clinic. It should be signed and dated by the patient and student or clinical instructor prior to evaluation or treatment.

D. Health Insurance Portability and Accountability Act (HIPAA) Notice of Privacy Practices Policy

All patients should be offered a copy of the Privacy Practices Policy form (See Section VIII) during their initial appointment. If a patient has already been seen at this facility, it should be confirmed that he/she has already received the Policy form and signed the receipt and consent noted in the section below.
E. Patient Consent for Use and Disclosure of Protected Health Information/Receipt of Notice of Privacy Practices Written Acknowledgment Form

Patients should be asked to sign the first section of this form so they can be contacted by mail, telephone or email. Please give them an opportunity to ask questions about the document. This information is used to contact a patient about an appointment or inquire about insurance information.

The patient should also sign the second section of the form that documents that she/he received the HIPAA Policy form.

F. Consent for Disclosure of Confidential Information

The consent form should be used when confidential information (e.g. reports, test results, progress notes) is requested by the patient for their own use or if the patient requests information be sent to an outside facility or professional. All blanks on the form should be completed prior to having the patient sign the form. Be specific when indicating what is being released and for what purpose. Include the expiration date. This facility cannot send results to a requesting agency unless this form has been signed by the patient. In accordance with the referral policy, all referring parties will be sent a report unless specifically asked by the patient not to do so. The Consent for Disclosure of Confidential Information form should be completed and signed for this purpose.

G. Log to Track Disclosure of Personal Health Information (PHI)

Disclosure of PHI should be completed in Clinic Note each time PHI information is released even if it released to the patient.

H. Fee Schedules and Billing

Your clinical instructor will provide you with information about the current procedural terminology (CPT) and International Classification of Diseases, 10th-revision (ICD-10) codes are associated with the services provided to the client.

I. Third Party Payment Procedures

In-Network: The patient will work with the Office Support Assistant and if needed, the clinical faculty, to determine eligibility for services. Once that is determined, the patient will be responsible for any associated co-pays and deductibles.

Out-of-Network: The following describes procedures that are followed for most health insurance companies that patients may want to use for benefits. Patients will pay for services
provided and products dispensed at the time of service, even if they are covered by an insurance company. The Audiology & Speech-Language Pathology Clinic policy requires the patient to pay the bill in full at the time of the service. If the patient wishes to file a claim with the insurance company for reimbursement, the patient must provide this facility with the appropriate insurance forms and/or insurance card. If the patient brings an insurance form, the patient should sign the form, if required, and complete the necessary patient sections (such as, insurance number and/or group number) before leaving the form to be completed by the clinic. The applicable portions of insurance forms will be completed by this facility. The Office Support Assistant will offer to submit the claim on behalf of the patient. Reimbursement from the company will be sent directly to the patient.

J. Patient Response Questionnaire Evaluation

The patient should be asked to complete the Patient Response Questionnaire (see Forms) at the conclusion of the semester or therapy period. Ask the patient to drop the form off at the front desk. The results of these evaluations are discussed at least once a semester with the students and clinical faculty for quality assurance.

K. Reports

Any patient contact (e.g. phone call, walk-in) must be documented in electronic form via the Contact Note feature in Clinic Note (EMR).

L. Patient Appointment Changes/Cancellations/Absences

Students cannot change or add patient appointments without the approval of the clinical faculty or instructor either verbally or within Clinic Note. The student should notify the clinic’s Office Support Assistant and the appropriate clinical faculty or instructor if the patient fails to make the appointment and this should be documented in Clinic Note by the clinical instructor or the Office Support Assistant. The Audiology & Speech-Language Pathology Clinic’s attendance policy is that if a client misses two appointments without notification within a calendar year, their appointment time may be given to another client.

M. Cleaning and Care of Equipment and Facilities

It is the responsibility of the students to leave the treatment rooms in a clean, neat condition and to replace all equipment to proper locations following test procedures. All therapy materials must be cleaned and returned for re-use. Malfunctioning equipment should immediately be reported to a clinical faculty member or instructor. Infection control cleaning protocol implementation will be utilized after each use of equipment and treatment rooms.
SECTION V
SLP Charts & Documentation
A. Report Writing

The style, content and length of a report are determined by the complexity of the individual cases, or type of evaluation (e.g. standardized aphasia assessment or a speech sound assessment). Your clinical instructor will provide you with a recommended format based on your particular clinic cases. Reports are written for an initial or beginning of the semester evaluation, at midterm during the fall and spring semesters, at the end of the semester (spring, summer, and fall) and/or as the school district or insurance plan require. Patients should be seen for a minimum of four appointments to qualify for a midterm or final report.

All reports should reflect impressions and recommendations, as this is indicative of the skilled care needed by a therapist. The information should include details that the next follow-up professionals can find useful in working with the patient.

The clinical faculty or instructor and the student will determine when the first draft and subsequent drafts are due. Drafts of reports should be completed using Clinic Note. Once the clinical instructor has approved the final version, the clinical instructor will sign the document electronically and this will be saved to the electronic medical record system (Clinic Note). The document will be mailed or presented to the client/caregiver in person.

B. Lesson Plans

Students are required to submit weekly lesson plans for all therapy sessions. These are uploaded on HIPAA Box. The clinical instructor and the student will meet at the beginning of the semester to determine the weekly due date for the lesson plans.

C. SOAP Notes:

SOAP notes are required for every scheduled therapy appointment, even if the patient is a no show/late cancellation. SOAP notes are completed on Clinic Note and submitted to the Clinical educator for feedback and revisions. Multiple submissions may occur via Clinic Note and the SOAP note is not considered final until the Clinical educator signs and saves this document.

The clinical educator and the student will determine at the beginning of the semester when first drafts of SOAPS are due. SOAP notes are not shared with patients unless they are requested. This can be done through the patient portal of ClinicNote.
D. Order of Forms in the Chart

On occasion, clinicians may need to obtain information from one of the Clinic’s paper-based charts. When that occurs, please maintain the following order for chart organization:

- The permanent client chart contains four sections:

<table>
<thead>
<tr>
<th>Section A:</th>
<th>Section B:</th>
<th>Section C:</th>
<th>Section D:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Front Inside</td>
<td>Brown Flap facing right</td>
<td>Brown Flap facing left</td>
<td>Back Side</td>
</tr>
</tbody>
</table>

All sections are filled in the following order, with the **most recent date on top**.

- **Section A**
  - Contact sheet (on top!)
  - SOAP Notes
  - Homework
  - Copies of emails

- **Section B**
  - Fee slips (on top!)
  - Log of Disclosure
  - Health Insurance Information (if applicable)
  - Emergency contact
  - HIPAA release form
  - Permission form

- **Section C**
  - Test protocols (on top!)
  - Case history
- **Section D (Chronological Order for all below)**
  - Letters
  - Reports
  - Treatment plans
  - Medical/Educational Records

**Other information of note:**

**File Number** = **File Number** is the first two digits (e.g., 09) is the year in which the client started (e.g., 2009) the rest of the numbers represent the nth client of that year (e.g., 09-30 = the 30th client to join us in 2009). The “S” at the end represents speech client or “A” for audiology patient.
Section VI
Supervision
SUPERVISION

A. Direct Supervision Procedures

Graduate students may be assigned to one or more clinical instructors during each semester of in-house or external rotation practicum. Clinical educators are responsible for educating and helping to develop students’ clinical skills. Clinical educators are the licensed and certified individuals who are also responsible for the well-being of patients and clients.

In keeping with the Council for Clinical Certification (CFCC), standards (see https://www.asha.org/Certification/2020-SLP-Certification-Standards/), the program provides at least 25% direct supervision of student-provided clinical diagnostic and treatment services. The clinical educator will determine the amount of additional supervision that is required based on factors including, but not limited to student prior clinical and classroom experience, the medical complexity of the case, and insurance regulations. External rotations may have institutional policies in addition to the standards of the CFCC.

Efforts are made to assign students to clinical cases that correspond with their previous or concurrent coursework. In situations where students may be assigned to a case which they have not yet had coursework, the clinical instructor will provide additional supervision time and relevant readings and resources to increase students’ knowledge and skills.

B. Grievances

Students are encouraged to bring their concerns or complaints to faculty. In all cases, it is best to bring concerns to the faculty member directly involved. If that does not result in a mutually acceptable resolution, the student can bring the matter to the attention of department administrators. Concerns regarding clinical rotations or supervision should be brought to the attention of the Clinic Director. Concerns regarding academic coursework should be brought to the attention of the Director of Graduate Studies. If concerns cannot be addressed by these individuals, the next level is the Program Director and Head (see Organizational Chart on page 7 of this Handbook.) If a mutually acceptable resolution to a complaint cannot be achieved informally, students may file a formal complaint, or grievance, with either the College of Applied Health Sciences or the Graduate College following the grievance procedures of the respective units. The grievance procedures are available on the University web site at http://www.grad.illinois.edu/grievpolicies/principles.

The processing of grievances are also subject to College of Applied Health Sciences and University guidelines:
https://studentcode.illinois.edu/
https://www.vpaa.uillinois.edu/resources/policies/grievance_guidelines
https://grad.illinois.edu/gradhandbook/2/chapter9/academic-conflict
https://provost.illinois.edu/student-consumer-information/student-complaint-process/

(See also Section VI.J Policies and Procedures for Equitable Treatment and VI.K Student Complaints.)
C. Clinical Instructor-Student Conferences

Each clinical instructor and student will at minimum meet at mid-term and at the end of the semester to discuss the student’s strengths and weaknesses. Suggestions will be made for improvement to support clinical growth. Estimated grades will be discussed at mid-term, and the final grade will be discussed at the final evaluation. Additional conferences may be held at either the student's or the clinical instructor’s request.

D. Professional Protocol and Evaluations Procedures

The Formative Assessment of Clinical Competencies form was designed to inform the student about their professional and clinical competence. The clinical instructor and/or student will complete the appropriate sections of the form before the conferences to determine a rating that reflects the student’s professionalism and clinical competence during this practicum. The Session Evaluation form is used to give weekly feedback to the student during practicum at the University clinic facility.

The external rotation clinical instructor and graduate student will meet at mid-term and at the end of the semester to discuss the student's progress and performance. Written feedback to the student and the department will be provided based on the Formative Assessment of Clinical Competencies.

The Master of Arts in Speech-Language Pathology Program includes clinical experiences at multiple facilities off campus. Communication regarding students’ academic and clinical progress at these facilities is necessary throughout the program. This communication will include performance assessment, evaluation and grade information between representatives of the Department of Speech and Hearing Science and the external clinical facilities. Email, fax, telephone, US mail, and written or spoken communication may be used. Each graduate student will be given a form that explains these communications and acknowledges understanding of such.

E. Evaluation of Clinical Instructors

Students are invited to evaluate their practicum clinical faculty or instructor for in-house clinical practicum at the end of each semester using CALIPSO and the University of Illinois at Urbana-Champaign Instructor & Course Evaluation System (ICES) Forms. Evaluations for external clinical instructors should be made via CALIPSO.

F. Log of Clinical Hours

All students must track the number of clinical clock hours they have obtained each semester as well as how much of that time was under the supervision of clinical faculty or instructors. Students will be required to submit their hours for approval in CALIPSO four times during spring and fall semester and twice during the summer semester.
G. Intervention Plans

ASHA Certification requires students to:
- Complete a graduate degree at a CAA accredited program
- Meet Pre-Service Knowledge and Skills Standards (KASA) set by ASHA for Audiologists or Speech-Language Pathologists

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- Complete a graduate degree at a CAA accredited program
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Minimum Grade Point Average (GPA)
The Graduate College at the University of Illinois at Urbana-Champaign specifies that graduate students must maintain a minimum GPA and make satisfactory progress in all other aspects of their degree programs in order to continue as students. Students in the Department of Speech and Hearing Science must maintain an overall GPA of 3.0. For information on Graduate College policies regarding academic standing, please refer to the Graduate College Handbook (see https://grad.illinois.edu/gradhandbook/2/chapter3/academic-standing#programGPAs)

Successfully Displaying Competency in All KASA Standards
With regard to CFCC knowledge standards in a didactic (clinical) course, at-risk students are identified as being at minimal risk if they did not meet all knowledge standards designated for a course; and are identified as in need of intervention if during a semester they are failing to meet multiple knowledge standards in a course. A student at minimal risk will have other courses in the curriculum where she or he can meet the standards of concern.

A student in need of intervention in a course will be notified by the course instructor, who will work with the student, and if needed, the student’s academic advisor and the Director of Graduate Studies to provide opportunities during the course or elsewhere in the curriculum to meet the standards of concern.

With regard to CFCC skills standards in a clinical practicum, at-risk students are identified as being at minimal risk if they received a rating of "2" for any CFCC skills standards during clinical practicum; and are identified as in need of intervention if at mid-semester they are failing to meet any skills standards (i.e., received a rating of "1") during clinical practicum.

A student may also be identified as being in need of intervention if they receive a “not met” for any of the 4 professional expectations at the bottom of the Calipso evaluation form on a Calipso final evaluation (Professional “met/not met” categories include: Displays organization and preparedness for all clinical sessions, Assumes a professional level of responsibility and initiative in completing requirements, Demonstrates openness and responsiveness to clinical
supervision and suggestions, and Personal appearance is professional and in accordance with the policy for the clinic setting).

- A formal intervention plan is not warranted for a student at minimal risk; however, the clinical instructor will meet with the student to discuss how to improve performance on the standard. The clinical instructor, who will simultaneously notify the Clinic Director, will notify a student in need of intervention during clinical practicum. A formal individualized intervention plan will be then be created by the clinical instructor, the student’s academic advisor (serving as an advocate for the student), the Clinic Director, the Director of Graduate Studies, and the Program Director, to guide the student in meeting the standards of concern. Students will have 16 weeks to meet the standards, after which the student will be formally advised by the faculty who created the plan about the student’s success in meeting the standards and what, if any, further actions should be taken.

**Resolutions for students at risk will take three forms:**
· Successfully support student in completing: 1) Degree requirements, and 2) displaying competency in all standards
· Successfully completing degree requirements for academic master’s degree; counseling student out of the clinical program.
· Counseling student out of the graduate program, leaving w/out degree.

**I. Student Learning Outcomes Assessment**

Mastery of the Council for Clinical Certification standards required for the Certificate of Clinical Competence (CCC) will be assessed for each student for behaviorally defined learning outcomes at multiple points in the program. The standards are assessed in each academic course and clinical practicum. There are multiple opportunities to meet each standard across the curriculum. Various locally designed forms of qualitative and quantitative assessments will be used, e.g., examinations, research papers, abstracts, reaction papers, mini-papers, individual and group projects, evaluation and reflection, etc. The course or practicum instructor determines whether the student has met or not met each standard designated for that course. Each student’s learning outcomes are tracked via a formative assessment that is accessible to the student via Calipso. At least once per semester, students receive feedback from their academic advisor indicating the current level of competence for the learning outcomes. If additional opportunities are needed to meet any standard, a plan will be developed with the academic advisor. Faculty meet annually in the spring semester to assess overall student progress in the program and students receive feedback from their academic advisor. During the student’s final semester, the Clinic Director and the Director of Graduate Studies conduct an audit to determine that an acceptable level of competence has been achieved for each behaviorally defined standard. The student must also pass the national standardized Praxis examination.

**J. Accommodations**

**Accommodating Disabilities**
The University of Illinois is committed to ensuring that qualified persons with disabilities are not denied admissions or subjected to discrimination throughout their program. Any prospective
A student may request accommodations for academic or clinical settings by contacting their instructors, advisors, and The Division of Disability Resources & Educational Services (DRES). DRES provides supports for undergraduate and graduate students across campus. Students are encouraged to contact DRES to proactively arrange accommodations early in each semester. DRES counselors will help students in developing reasonable accommodation plans with our department for both academic coursework and practical experiences in clinical settings.

**Accommodating Personal Emergencies**

The **Student Assistance Center** in the Office of the Dean of Students serves as the first point of contact for students requesting assistance for personal emergencies—students may drop in or make an appointment. Assistant Deans help students understand university policies and procedures, guide them in connecting to other campus resources, and support students in crisis. The Student Assistance Center can assist students with a broad range of issues that may be affecting their academic and/or clinical performance, including issues related to physical and mental health, course attendance, accessing various campus services, and options for withdrawing from the university.

**Accommodating Religious Observances**

University policy and state law require that all academic and clinical instructors reasonably accommodate conflicts and work requirements resulting from a student’s religious beliefs, observance and practices. Students are required to submit the **Request for Accommodation for Religious Observances Form (.doc)** to their instructors and the Office of the Dean of Students to request accommodation by the end of the second week of the course.

**K. Policies and Procedures for Equitable Treatment**

The following is the **Official Notice of the Nondiscrimination Statement of the University of Illinois at Urbana-Champaign**. It can be found on the University of Illinois Office of Access and Equity Website. [https://oae.illinois.edu/discrimination-and-harrassment-prevention.html](https://oae.illinois.edu/discrimination-and-harrassment-prevention.html)

Following university complaint and grievance procedures, inquiries or complaints of equitable treatment may be addressed to the Director and Assistant Chancellor, Office of Equal Opportunity and Access, 601 E. John Street, Swanlund Administration Building, (217) 333-0885, fax (217) 244-9136, TTY (217) 244-9850 or the Associate Provost and Director, Academic Human Resources, Henry Administration Building, (217) 333-6747, fax (217) 244-5584. For other University of Illinois information, contact University Directory Assistance at 333-1000.

Policies and procedures for problem solving and grievance filing on matters related to discrimination and harassment are established within the University. Vice Chancellors, deans, directors, and department heads share the responsibility for procedures within their units, subject to oversight by the Office of the Provost that has the lead responsibility for overseeing all aspects of the policy and procedures. Each college-level unit has an appointed intake specialist, and procedures take the form of informal problem-solving and formal filing of grievance, with the possibility for appeal. These policies and procedures encourage and require all to make a sincere and sustained effort to create an environment where everyone feels welcomed and valued.
L. Student Complaints

Students are encouraged to bring their concerns or complaints to faculty. In all cases, it is best to bring concerns to the faculty member directly involved. If that does not result in a mutually acceptable resolution, the student can bring the matter to the attention of department administrators. Concerns regarding clinical rotations or supervision should be brought to the attention of the Clinic Director. Concerns regarding academic coursework should be brought to the attention of the Director of Graduate Studies. If concerns cannot be addressed by these individuals, the next level is the Program Director and Head (see Organizational Chart on page 7 of this Handbook.) If a mutually acceptable resolution to a complaint cannot be achieved informally, students may file a formal complaint, or grievance, with either the College of Applied Health Sciences or the Graduate College following the grievance procedures of the respective units. The grievance procedures are available on the University web site at [http://www.grad.illinois.edu/grievepolicies/principles](http://www.grad.illinois.edu/grievepolicies/principles). (See also Section VI Supervision)

A complaint concerning the program's compliance with the CAA Standards may be submitted to the Council on Academic Accreditation by any student, faculty member, speech-language pathologist, audiologist, and/or member of the public. Criteria for complaints and submission requirements can be found at [caa.asha.org/?s=complaints](http://caa.asha.org/?s=complaints).

The Speech-Language Pathology Certification Standards and the Standards for Accreditation in Audiology and Speech-Language Pathology by the Council on Academic Accreditation may be obtained by contacting the CAA Office at ASHA, 2200 Research Boulevard, Rockville, Maryland 20850, calling ASHA’s Action Center at 1-800-498-2071, or accessing the documents on ASHA’s Web site at [https://www.asha.org/certification/2020-slp-certification-standards/](https://www.asha.org/certification/2020-slp-certification-standards/) and [http://asha.org/academic/accreditation](http://asha.org/academic/accreditation).

Comments should be submitted to the following address:

Chair, Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA)
American Speech-Language-Hearing Association
2200 Research Boulevard #310
Rockville, MD 20850

M. Campus Student Support Services

The University provides a variety of support services to students. There is a University web site dedicated to student support services: [http://www.grad.illinois.edu/current/health](http://www.grad.illinois.edu/current/health)
Section VII
Professional Organizations
A. The American Speech-Language-Hearing Association (ASHA)

ASHA is the national professional association for speech-language pathologists, audiologists, and speech-language and hearing scientists concerned with communication behavior and disorders. The Certificate of Clinical Competence in Speech-Language Pathology or Audiology is offered by ASHA. Graduate students are urged to become familiar with ASHA’s goals, its programs, and its publications (see https://www.asha.org/).

B. The National Student Speech-Language-Hearing Association (NSSLHA)

NSSLHA is the national organization for students interested in the study of normal and disordered communication behavior (see https://www.nsslha.org/). It is affiliated with ASHA. Membership is open to undergraduate and graduate students. Many universities, including the University of Illinois at Urbana-Champaign, maintain active chapters that meet regularly during the academic year. Faculty in the Department of Speech and Hearing Science serve as Advisors to the local chapter.

Our NSSLHA Chapter encourages student membership and support of its activities. Through University of Illinois Chapter programs, students will learn more about the opportunities that can result from professional training, more about the national NSSLHA Chapter, and about the workings of ASHA. Each clinical trainee is encouraged to become a member of the University of Illinois NSSLHA Chapter.
Section VIII
Health Insurance Portability and Accountability Act (HIPAA)
The Audiology & Speech-Language Pathology Clinic will comply with the regulations of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and applicable updates.

A. Training
The University of Illinois policy on HIPAA training can be found at https://hipaa.uillinois.edu/training/

Training of clinical graduate students will occur at the beginning of the first semester of the program and subsequently will be completed annually. Students will be enrolled in the HIPAA training approved by the University of Illinois. Students will be required to upload their compliance documentation to CALIPSO by the date required by the Clinic Director or Business Specialist. Training will occur as needed when new policies or protocol modifications occur.

B. Records
Graduate students will complete and sign forms to document the completion of HIPAA training and to acknowledge agreement to abide by security and confidentiality requirements. These forms will be uploaded by the student into their CALIPSO portal.

C. Clinic Protocol
The Audiology & Speech-Language Pathology Clinic guidelines for adherence to HIPAA regulations are as listed below.

- All current and new patients are given a copy the University Audiology Clinic’s Notice of Privacy Practices and asked to sign a Receipt of Notice of Privacy Practices Written Acknowledgment Form to acknowledge that they received a copy of the Speech-Language Clinic and Audiology Clinic privacy policy.

- Patient information cannot be left on answering machines/voicemail or in email messages without the patient’s consent. In order to do this a patient needs to sign and date a Patient Consent for Use and Disclosure of Protected Health Information form. Within this form, the term USE means sharing, employment, application, utilization, examination or analysis of PHI within the clinic. The term DISCLOSURE means the release, transfer, giving access to or divulging in any other manner of PHI to anyone outside of the clinic.

- Before any PHI is released from the Audiology & Speech-Language Clinic’s records to an outside agency/facility/person, a patient must sign and date the Consent for Disclosure of Confidential Information form. All sections of the form must be completed thoroughly to indicate the agency/facility/person involved, the specific information (PHI) involved, and the time period for which the form is in effect. This form does not need to be completed and signed by the patient if the PHI to be released is being given to the patient herself/himself.

- For clinical reports, reports and letters:
Students and clinical faculty or instructors will not use the patient’s name or other identifying information in the drafts of reports, reports, or letters. The draft can include names of the graduate audiologists and instructors as well as appointment dates. The patient’s first and last initials are used to identify the patient. All other information (including patient’s clinic number, address, date of birth, hearing aid serial numbers, employee numbers, etc.) is classified as Protected Health Information (PHI) and should not be included in drafts.

All files contain a Log to Track Disclosures of PHI (HIPAA Log) Any time patient information is sent from this facility or given in person to the patient, an entry must be made in the log. If a report, letter or copies of an audiogram are to be sent out or given to the patient or another agency, entries should be completed in the Log to Track Disclosures of PHI (HIPAA Log). Each report or letter (with its enclosures) that is sent out or given to the patient should be entered on a separate line of the log. Information regarding the date, information being sent or given, who requested the release of information, and to whom it is being sent to or given to should be completed.

The clinical faculty or instructor will edit student drafts of patient reports and the accompanying as needed.

When the contact sheet, report, or letter have been approved by the clinical instructor, the student will complete the final document including the patient’s identifying information. The documents may then be printed and signed by the student. Letters should be printed on Department of Speech and Hearing Science letterhead. All final documentation will be placed in the patient’s chart.

The clinical faculty or instructor will sign the contact sheet, report or letter. She/he will also initial the HIPAA Log for each completed entry tracking the information to be released.

All paper containing any patient identifiable information that is not part of the patient’s record must be shredded. Shredders are located in the room front office and in room 1010.

Paperwork with identifying information should be placed in a folder in the student or clinical instructor’s mailbox.

Oral communication with or about a patient should be kept private by moving to a private area or keeping voice levels low.

Cases and patients should not be discussed in the hallway, waiting room, or any other public area.

An approved network server is set up for the purpose of accessing, creating or editing documents relative to patient cases. This server will be accessible to Au.D.
and MA graduate students via individual passwords. Each graduate student will have access to the server and her/his own folder on that server. Access rights and passwords will be updated each semester by the appointed college AHS-IT consultant.

- No patient data, information or documents from the server should be saved to the specific computer (department, clinic or personal) being used. Patient data should not be downloaded to any personal storage media, including hard drives, even for temporary editing or printing. Printing of documents from the server should be completed using clinic printers only.
- While working on clinic paperwork and patient information on the server, computer screens should be turned inward so that people passing by cannot read patient information. While the server is open, the computer in use should not be left unattended. Patient information should not be left on the computer printer.

- In the Audiology & Speech-Language Pathology Clinic, the clinic computer screens for NOAH should not be left on or unattended for extended periods of time to prevent patient information from being viewed by others.

- Patient charts should only be used in private areas in the Audiology & Speech-Language Pathology Clinic. This would include clinic rooms and the student work area (if in a private area). Files should not be in public areas.

- The clinic email and fax sheets include a confidentiality clause at the bottom of the page. The clause states that the information is confidential, privileged and protected from disclosure. It states that if the reader has received the material in error that she/he should notify the sender immediately.

- When greeting a patient in the waiting room prior to an appointment, the patient should be called by either her/his first or last name, not by the complete name (first and last together).
Section IX
Infection Control
INFECTION CONTROL

The Audiology & Speech-Language Pathology Clinic will follow the Unit Exposure Control Plan as posted on the University of Illinois at Urbana-Champaign Compass2g web site (SHS Clinical Programs Resources for Students). A paper copy of the plan is located in the Audiology & Speech-Language Pathology Clinic (Room 1010).

A. Training

Training for graduate students and clinic personnel will be organized/presented by the Clinic Director, or another clinical faculty member who has completed the required training to educate students and other faculty/staff members on infection control procedures.

This initial training will occur at the beginning of the student’s first semester in the program, and will be renewed annually. Annual retraining will occur at the beginning of each fall semester for all second and third year graduate students and clinic personnel. Annual retraining will be completed using materials provided by the University of Illinois Division of Safety Research Training (Bloodborne Pathogens program). Annual retraining in the policy, plan and procedures of the Clinic will also occur at the beginning of each fall semester for second and third year graduate students and clinic personnel.

Students are instructed to arrive at the Clinic wearing a mask. All PPE supplies are onsite. Temperature checks for faculty, students and staff will be done on daily arrival. Face shields may be used by the service provider when directly interacting with clients.

Training for new policies or policy modifications will occur for all clinic personnel and Clinical graduate students as needed.

B. Records

Forms documenting Exposure Classification, Hepatitis B Vaccination Declination or Request, Infection Control Training (initial, annual retraining, modification), and Report of Exposure to Blood or Other Potentially Infectious Materials will be placed in individual graduate folders and will be maintained on CALIPSO.

All students are required to be fully vaccinated for COVID as directed by the University of Illinois in order to have access to Speech and Hearing Sciences buildings and Audiology & Speech Language Pathology Clinic. Documentation of vaccination should be sent to McKinley Health Center. Students are required to test for COVID as directed by the University of Illinois if they are unable to be vaccinated. Students are required to test for COVID as directed by the University of Illinois if they are unable to be vaccinated; this will be maintained via the Safer Illinois application for mobile technology.