



UNIVERSITY OF
OREGON

COMMUNICATION DISORDERS AND SCIENCES

MASTER'S STUDENT HANDBOOK 2021-2022

Department of Special Education and Clinical Sciences
(SPECS)
College of Education

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Section I – General Information

INTRODUCTION

This program handbook is designed to serve two purposes. The first is to assist students in accomplishing their educational and clinical objectives within the Communication Disorders and Sciences program. The second is to provide students and faculty with a common frame of reference relative to program philosophy, objectives, policies, and procedures. Due to Covid-19 and unpredictability in educational and healthcare settings, the CDS program may make temporary changes to the activities described in the handbook.

PROGRAM PHILOSOPHY

The University of Oregon values inclusion and social justice. These core values are embraced within the CDS program. UO prohibits discrimination on the basis of race, color, sex, national or ethnic origin, age, religion, marital status, disability, veteran status, sexual orientation, gender identity, and gender expression in all programs, activities and employment practices as required by Title IX, other applicable laws, and policies.

PROGRAM MISSION STATEMENT

The mission of the University of Oregon Communication Disorders and Sciences Program is to prepare students to understand, assess, and treat individuals across diverse ethnic, cultural, linguistic, social and economic backgrounds experiencing challenges in speech, language, literacy, communication, cognition and swallowing. The program is dedicated to achieving excellence in student preparation via the integration of clinical and classroom education, the generation and application of research, and the provision of community outreach. Our vision is to train leaders in the field in an environment that encourages inclusion, critical thinking, freedom of inquiry, and social justice.

PROGRAM OVERVIEW

The primary purpose of the Communication Disorders and Sciences (CDS) Program at the University of Oregon (UO) is to prepare speech language pathologists to be scientific practitioners who can manage communication disorders that affect individuals with diverse backgrounds across the life span.

The master's degree (MA/MS) program in speech-language pathology at the University of Oregon is accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) of the American Speech-Language-Hearing Association. The program is accredited through 2028. If a community member or student has a concern or complaint about the program, they may submit a complaint to the Executive Committee of the CAA. Please, follow the procedures outlined on this website:

<http://www.asha.org/academic/accreditation/accredmanual/section8.htm>

The profession of speech language pathology is built upon a solid knowledge base, which encompasses the scientific study of basic communication processes, professional issues, and the application of this knowledge to clinical practice. These three areas have been

mandated and delineated by the American Speech Language Hearing Association (ASHA). Please refer to the ASHA Certification information page on the ASHA website: <http://www.asha.org/certification/AboutCertificationGenInfo/>

Students obtain knowledge of basic communication processes and professional issues through coursework and clinical experience and meets requirements of the 2020 ASHA Certification Standards. The application of scientific knowledge to clinical practice in the CDS program takes place primarily through clinical practicum and completion of an evidence-based project or master's thesis. Students in the program engage in supervised clinical practice with clients who have a variety of communication, cognitive, and/or swallowing disorders. During practice, students collect and analyze data, make appropriate recommendations and design, implement, and critically evaluate treatment plans. As they progress through the program students are expected to demonstrate increasing levels of competence, independence, creativity, and self-evaluation.

Communication and Technology

EMAIL

All students are required to obtain a university e-mail account with two step authentication via DUO and must use this account for all official university correspondence, including all communications with CDS faculty and staff. Students should check their university email at least once a day for announcements, etc. and are responsible for notifying academic and clinic coordinators in the event of an e-mail address change. UO email may not be forwarded to outside email accounts.

COMPUTER ACCESS

Wireless access is available throughout the HEDCO building.

Computers are available in HEDCO Room 184 for therapy preparation purposes only. Students are able to complete clinic paperwork and print clinic documents from these computers.

Computers are also available in the HEDCO Learning Commons (Room 112) for work not requiring confidentiality (e.g., coursework). Information about Learning Commons time/hours of operation can be found at:

<https://learningcommons.uoregon.edu/>

For other technology resources, please use the following link:

<https://www.uoregon.edu/onestop#technology>

STUDENT MAILBOXES

Each student registered for Practicum will be assigned a mailbox folder located in the HEDCO clinic. Students should check their mailboxes daily upon arrival at the building.

Clinic supervisors and the clinic director have mailboxes in the HEDCO clinic and on the second floor of the HEDCO building. Use the mailboxes in the HEDCO clinic for all client-related/ confidential information. **If you put something in a supervisor's mailbox, please send an email to the supervisor letting him or her know it is there.**

InfoCDS

[InfoCDS](#) is an online forum for CDS students, faculty, and staff to share information. It includes policies and procedures, intervention protocols, clinic forms, resources for clinical practicum, references to research studies, course syllabi, and class notes. A subscription is required to access this resource. All master's level students have access to this resource (use your UO username and password to log in).

CALIPSO

The CDS program uses CALIPSO, a web-based application, to track students' knowledge and skills acquisition (often referred to as KASA) and completion of supervised clinical practicum hours. Acquisition of knowledge and skills will be met through a combination of academic coursework, clinical practicum, and lab sessions – see the CALIPSO website for course-by-course learning objectives (log in to CALIPSO, click on: Student, Information, KASA. CALIPSO Instructions for Students: https://uoregon.sharepoint.com/:b:/r/sites/O365_InfoCDS)

MAINTANENCE OF RECORDS

Records of student clinical hours are maintained in CALIPSO for 7 years after graduation. Observation hours are not tracked or kept by the program. Students are responsible for keeping records for future licensing, certification, or employment needs.

PROGRAM PLAN

The master's program is a full-time, 2-year program. Students seeking a master's degree from the University of Oregon in CDS must complete required academic and practica requirements within the program core (please refer to current course requirements for master's students entering the program in 2021).

Planned Sequence of Classes for Master's Students

2021-2023

***Note: In addition to the following courses, ASHA requires coursework in statistics, biological sciences, physical sciences (chemistry or physics), behavioral/social sciences, and basic communication processes. See Academic Advising Checklist.*

Term	1st year Courses (credits)	2nd Year Courses (credits)
Fall	CDS 611 Clinical Methods (1) CDS 621 Practicum I (2) CDS 652 Speech Sound Disorders (4) CDS 665 Lang Disorders in Young Children (4) EDUC 611 Surv Educ Res Methods (3) CFT 609 Prac Micro Counseling (2)	CDS 620 Evidence-Based Practice Project (1) CDS 622 Practicum II (6) CDS 649 Swallowing (4) CDS 656 Voice Science and Disorders (3)
	16 Credits	14 Credits
Winter	CDS 621 Practicum I (4) CDS 627 Fluency Disorders (2) CDS 651 School Age Language (4) CDS 663 Management of Acquired Cog Disorders (4)	CHOOSE ONE TRACK MED EXTERNSHIP CDS 620 Evidence-Based Practice Project (1) CDS 624 Medical Externship (15) STUDENT TEACHING CDS 620 Evidence-Based Practice Project (1) CDS 625 Final Full Time Practicum (15)
	14 Credits	16 Credits each
Spring	CDS 621 Practicum I (5) CDS 631 Cultural-Linguistic Diversity for Clinicians (3) (INICIO students take CDS 631 for 1 credit) CDS 654 Management of Adult Language Disorders (4) CDS 660 Motor Speech (3)	CHOOSE ONE TRACK MED EXTERNSHIP CDS 620 Evidence-Based Practice Project (1) CDS 624 Medical Externship (15) STUDENT TEACHING CDS 620 Evidence-Based Practice Project (1) CDS 625 Final Full Time Practicum (15)
	15 Credits	16 Credits each
Summer	CDS 621 Practicum I (6) CDS 623 September Experience (1) CDS 657 Augmentative Procedures for Comm Dis (2)	
	9 Credits	

Students participating in the INICIO or PANGEA projects will be provided augmented Program Plans

Note: If a student needs to alter their program plan (e.g., changing the sequence of their academic courses or reducing their clinical load), it will likely result in the extension of the student's program.

All students complete a capstone project. For most students this consists of the **Evidence-Based Practice Project (EBP project)**. At the end of their first year, students identify a clinical question they are interested in exploring. During their second year, students complete an in-depth literature review, collect data through a related clinical application, write a formal paper with their findings, and present their project to students and faculty. Occasionally students interested in research may do a thesis or complete an alternative EBP project. The requirements for these alternatives are described in the EBP project handbook.

CDS 601: *Research:* [Topic] (1-9 credits) P/N only.

CDS 602: *Supervised College Teaching* (1-9 credits)

CDS 603: *Dissertation* (1 – 16 credits) P/N only.

CDS 605: *Reading and Conference:* [Topic] (1 – 3 credits).

CDS 606: *Special Problems:* [Topic] (1-16 credits).

CDS 607: *Seminar:* [Topic] (1-3 credits) Optional grading. Instructs on various topics including Dysphagia, Multicultural Issues in Communication Disorders and Sciences, Professional Ethics.

CDS 608: *Workshop:* [Topic] (1-16 credits).

CDS 609: *Practicum:* [Topic] (1-16 credits).

CDS 610: *Experimental Course:* [Topic] (1 – 5 credits).

CDS 611: *Clinical Methods* (1) P/N only. Provides methodology behind sound clinical practices and fundamentals of the UO speech-language-hearing center operations. Prepares students to begin working with clients.

CDS 620. *Workshop: Evidence-Based Practice.* (1-2 Credit). This course supports students in developing their Evidence-Based Practice Projects via: (1) methods to promote critical evaluation and adoption of research findings; (2) principles of culturally responsive research practice, practice-based evidence and implementation science; and (3) activities to prepare students to complete their EBP projects.

CDS 621. *Practicum I.* (2-7 Credits). Designed to support first year master's students as they proceed with their clinical training. The course will provide methodology, evidence-based practice and clinic operations training. The focus on using evidence-based practice and rational clinical decision-making will be incorporated throughout class instruction and clinical experiences.

CDS 622. *Practicum II.* (2-7 Credits). Designed to help prepare second-year students for their medical and school externships. Students will learn clinical skills in the following areas: professional issues in medical settings; documentation in medical settings; ethical issues in speech-language pathology; school practicum requirements; professional issues in securing employment.

CDS 623. *September Experience in Speech Language Pathology.* (1 Credit). Designed to prepare Graduate Student Clinicians to become Speech-Language Pathologists who can work in the school setting. There are specific skills that Speech-Language Pathologists in the school setting perform and the GSC will be prepared to demonstrate these skills by the end of this externship.

CDS 624: *Medical Externship*. (7-14 Credits). Designed to prepare Graduate Student Clinicians to become Speech-Language Pathologists who can work in the medical setting. There are specific skills that Speech-Language Pathologists in the medical setting perform and the GSC will be prepared to demonstrate these skills by the end of this externship.

CDS 625: *Final Full-Time Practicum* (1 – 15 credits) P/N only. Provides diagnostic and treatment experience in the public school setting.

CDS 627: *Fluency Disorders* (2 Credits) This course is designed to provide students with a foundation in the diagnosis and treatment of fluency disorders across the lifespan, with an emphasis on developmental stuttering.

CDS 631: *Cultural-Linguistic Diversity for Clinicians* (3 credits). Topics include Multicultural Issues in Communication Disorders and Sciences, Dysphagia, Professional Ethics.

CDS 649: *Assessment and Treatment of Feeding and Swallowing Disorders* (4) Explores the nature and characteristics of feeding and swallowing; methods of evaluation and management of feeding and swallowing in adults and children.

CDS 651: *School-Age Language Development & Disorders* (4) Acquaints students with normal language development in school-age children and adolescents as well as language disorders of children and adolescents; emphasis on contributions from linguistics, psychology, education, and learning theory.

CDS 652: *Speech Sound Disorders* (4) Presents the theoretical background and clinical information needed to assess and treat individuals with speech sound disorders.

CDS 654: *Management of Adult Language Disorders* (4) Provides a foundation in diagnosis and treatment of adult neurogenic language disorders, concentrating on aphasia and the cognitive-linguistic changes associated with dementia.

CDS 656: *Voice Science Disorders* (3) Reviews anatomy and physiology of vocal mechanism; explores diagnostic and therapeutic approaches for various voice disorders.

CDS 657: *Augmentative Procedures for Communication Disorders* (2) Examines recent advancements in design, development, and use of systems supplemental to vocal speech and language.

CDS 660: *Motor Speech Disorders* (3) Studies speech disorders associated with lesions of central and peripheral nervous systems.

CDS 663: *Management of Acquired Cognitive Disorders* (4) Examines current theory and practice in cognitive rehabilitation. Reviews models and tools for treating attention, memory, and dysexecutive syndromes.

CDS 665: *Language Disorders in Children* (4) Reviews child language disorders and related topics, including principles of assessment and intervention, cultural awareness and sensitivity, clinical application, and working with families.

CDS 706: *Special Problems: [Topic]* (1-16 credits).

CDS 707: *Seminar: [Topic]* (1 – 5 credits).

CDS 708: *Workshop: [Topic]* (1-16 credits).

CDS 709: *Practicum: [Topic]* (1 – 16 credits).

CDS 710: *Experimental Course: [Topic]* (1 – 5 credits).

Non-CDS Coursework:

CFT 609: *Prac Micro Counseling Skills* (1-16 credits). The purpose of this beginning counseling skills class is to provide students with both didactic and experiential training and supervision designed to enhance competency in at least three broad areas. These three areas are: (1) developing skills for conducting interviews that contributes to developing a helping relationship; (2) increasing self-awareness; and (3) integrating basic multicultural awareness, knowledge, and skills into the helping relationship.

EDUC 611: *Survey Education Research Methods* (3) Surveys qualitative, quantitative, and single- subject research methods. Develops student competence in using published research to inform decision-making in various settings.

Clinical Practicum

During practica, CDS students learn to follow a process of rational clinical decision-making using evidence-based practices. The method of scientific inquiry is emphasized as students learn to define problems, develop hypotheses, collect and analyze data, and accept or reject hypotheses regarding clinical problems.

Students participate in practicum at the University Speech Language Hearing Center (UOSLHC), part of the College of Education's multidisciplinary HEDCO Clinic, and at a variety of off campus sites. Students are closely supervised by professionals holding the Certificate of Clinical Competence (CCC) from the American Speech- Language-Hearing Association (ASHA) at all sites. During the second year, students participate in a full-time educational experience and a full-time medical externship. Medical or educational practicum may be assigned outside of the local Eugene area and may require students to relocate for one or both terms.

As part of the University of Oregon Center for Excellence in Developmental Disabilities (UCEDD), the Speech- Language and Hearing Center adheres to a philosophy of multidisciplinary intervention. Practicum opportunities are designed to facilitate multidisciplinary interaction with other professionals including physicians, teachers, early childhood educators, nurses, dentists, physical and occupational therapists, psychologists, and counselors.

CLINIC REQUIREMENTS

Prior to start of clinical practicum, all students must: Meet the **ADMINISTRATIVE REQUIREMENTS FOR HEALTH PROFESSION STUDENT CLINICAL TRAINING** as put forward by the **OREGON HEALTH AUTHORITY, OFFICE FOR HEALTH AND POLICY RESEARCH** (<https://www.oregon.gov/oha/HPA/HP/Pages/SCT.aspx>) and submit documentation verifying that each of the items listed below are completed to CastleBranch. Student cannot start work in the clinic until these forms are on file.

Instructions for CastleBranch access, additional details of each requirement, and fees are listed in the Next Steps and Mandatory Requirements letters which are sent to incoming students in early summer before the program begins.

1. Screenings

- a. **Tuberculosis (TB):** TB screening must be conducted in a manner consistent with CDC guidelines. <http://www.cdc.gov/tb/topic/testing>.
- b. **Substance Abuse Drug Panel Drug Screen**
- c. **Fingerprints/Criminal Background Check**
- d. **Social Security Number Trace and Sex Offender Registry Check**

2. Immunizations

Documented receipt of vaccine or documented immunity via [titer](#) or valid history of disease, or via a record from the [Oregon ALERT Immunization Information System](#).

- a. **Hepatitis B (Hep B)**: documentation of vaccination or proof of immunity via titer is acceptable.
- b. **Measles, Mumps, Rubella (MMR)**: documented proof
- c. **Varicella (chickenpox)**: documented proof
- d. **Tetanus, diphtheria, pertussis (Tdap)**: documented proof
- e. **Polio**: recommended but not required
- f. **Influenza Immunization**: required for most medical placements/outpatient clinics
- g. **COVID-19 series**

3. CPR/Basic Life Support (BLS) for healthcare providers: note that trainings must comply with the American Heart Association.

- Review and sign [ASHA Code of Ethics](#)
- Complete HIPAA and OSHA trainings on Castlebranch
- Review the following forms and policies on [infoCDS](#) (under CDS Practicum)
 - Infection Control Precautions – complete training and quiz through Castlebranch. Instructions will be sent from Castlebranch. Fees will be listed in Mandatory Requirements Letter.
 - Client Privacy and Security - sign HEDCO Confidentiality form, and complete training with CastleBranch HIPAA
 - Mandatory Reporting – attend COE course on Mandatory Reporting during Clinical Methods Week
 - Professional Considerations – Covers professional behavior, use of COE badge and proximity card, dress code, use of food/drinks in clinic, and clinic absences
 - Communication – Covers use of student mailboxes, communication with supervisors, mailing procedures for client records, and making clinic-related telephone calls
 - Titanium - Titanium training will take place during CM, resources related to processes and procedures are available at this link.
 - Clinical Clock Hours – Describes how to count clinical clock hours
 - Review the [HEDCO Clinic Handbook](#) to be accessed on infoCDS
- Submit **documentation of at least 15 of the required 25 hours of observation to Castlebranch, upon approval to be entered into CALIPSO prior to the first day of clinic.**
 - [Register for CALIPSO](#), a web-based application to track students' knowledge and skills acquisition (often referred to as KASA) and

completion of supervised clinical practicum hours, online and pay a one-time fee of \$100. Instructions on how to register will be sent out during Clinical Methods week.

By the end of the first term, students must:

- Submit **Documentation of the remaining 10 observation hours (if not completed before the term began) to Castlebranch, upon approval to be entered into CALIPSO by the last day of Fall term.**

Each term, students must:

- Register for CDS Practicum as outlined on program plan, and
- Pass practicum clinical competencies (i.e., competencies that demonstrate acquisition of skills).

Annually (at the beginning of the fall term in the second year), students must:

- Complete blood borne pathogen/infection control training
- Complete Client Privacy and Security training and sign HEDCO Confidentiality form
- Submit proof of **annual** TB testing and flu vaccination. Note - If immunizations and TB screenings are not up to date, we cannot guarantee that a student will be accepted at medical and/or school externship sites. This could impact the student's timely progression through the program, prevent the student from participating in a variety of clinical experiences, and ultimately prevent the student from graduating.

Depending on placements in off-campus practicum and externship, students may:

- Need to meet additional requirements as prescribed by a particular practicum site that may incur additional expenses
- **Be required to travel to off campus sites** for practicum and externship placements up to an hour drive each way. These placements may occur at any time in the student's program. **Arrangements for transportation are the responsibility of student.**

By the time of graduation, students must:

- Complete 400 Clinical Clock hours (325 must be completed as a graduate student)
- Meet competencies that demonstrate acquisition of knowledge and skills
- Meet with the Director of Clinical Education to verify that ASHA clock hours and KASA Competencies are met.
- Approval of graduation once both academic and practicum requirements are filled. Graduation will not be approved until both academic and practicum requirements are fulfilled.

CLIENT PRIVACY & SECURITY

It is the legal and ethical responsibility of the HEDCO Clinic to protect the privacy of both clients and student clinicians. It is expected that all student clinicians, employees, visitors, student observers, and service professionals providing services and conducting necessary business during clinic hours will uphold all state and federal laws concerning client and student rights.

This means that you may not talk about or share client or student information (as defined below) with anyone including your own family members, peers, and coworkers or those of any client. **Please refer to the HEDCO Policy Handbook for confidentiality regulations covering the entire HEDCO Clinic.**

Students have to sign the *Statement of Familiarization and Compliance with ASHA Code of Ethics* indicating that they **read and agree to abide by the Code of Ethics of the American Speech-language-Hearing Association.**

- <https://www.asha.org/policy/et2016-00342/>

Students must complete annual HIPAA training.

Protected Health Information (PHI)

The UO Speech-Language-Hearing Center adheres to the regulations on privacy of personal health information as outlined in the Health Insurance Portability and Accountability Act (HIPAA). Protected Health Information (PHI) is defined as any individually identifiable information regarding a client, the client's medical or mental health history, or treatment received. Examples include, but are not limited to:

- Name
- Address
- Birthdates and dates of service
- Phone numbers
- E-mail addresses
- Social security numbers
- Health status
- Payment information
- Health insurance plan information
- Photos
- Video recordings
- Audio recordings

Confidential Student Information

Students' records are protected under the Family Educational Rights and Privacy Act (FERPA). This applies to student records in schools where you do your practicum and externship (it also applies to your own records at the university). Examples of student records include but are not limited to:

- Students' or family members' names
- Students' date of birth
- Address
- Students' identification or social security number

- Student grades
- Individual Education Plans (IEP)
- Any information that lets an outside person identify a student with reasonable certainty
- Financial information

Electronic Medical Records

The confidentiality of the client file is a primary requirement.

- Titanium is the Electronic Medical Record (EMR) used in the HEDCO Clinic
 - Students are expected to be familiar with practices and policies for Titanium in the Titanium One Drive folder.
 - https://uoregonmy.sharepoint.com/:f:/r/personal/aloverin_uoregon_edu/Documents/CDS%20on%20OneDrive/Titanium?csf=1&web=1&e=rZGfEJ
- All client documentation is generated and edited on Titanium which is accessed through the Virtual Desktop Horizon application
 - <https://coehelp.uoregon.edu/coe-clinics/virtual-desktop-installation/>
- No documentation may be written, stored or transferred outside of Titanium without explicit consent of your supervisor or the director of clinical education.
 - **Printed Documentation:** Printed documentation relating to a client may not be left unsupervised at any time.
- **When to Use Client Codes**
 - Clients' full names should be used for documentation within Titanium
 - Use client codes when referring to client in emails or for scheduling purposes.
 - **Client codes** are made up of the first two letters of the client's last name, followed by the first two letters of their first name. For example, the name "Sammy Client" would be CLSA.
- Lesson plans are generated in the Virtual Desktop Interface (Horizon). These should be deleted at the end of each term.
- Use confidential recycling bins in HEDCO to discard any documentation that contains confidential client information.

Sending Client Related Information via E-Mail and phone/text

- Be extremely careful when communicating by e-mail regarding patient/client issues. Appointment reminders should be sent through Titanium. Do not share confidential information via email.
- Students must use their UO account for all electronic transfer of client information. Do not use automatic forwarding to one of your non-UO e-mail accounts.
- Delete client-related emails from your e-mail account on a regular basis.
- Phone calls should be made from clinic phones or with a blocked number whenever possible.
- Texting with clients is discouraged. Please discuss texting needs with your supervisor directly.

Sharing Client Information

- Please hold all meetings regarding clients behind closed doors.

- If it is necessary to refer to a client when speaking in a more open area, please use the client code and be discrete regarding identifying information.
- Be aware that discussions in therapy rooms may be overheard through the audio-visual observation system.
- You should not share client specific information with anyone outside the clinic including roommates, spouses, or friends.

Due to the multidisciplinary nature of the HEDCO Clinic, additional confidentiality precautions are necessary. The clinic is a shared space, so you may often be working side by side with students from other disciplines. While each program requires its students to keep client information confidential, you may at times be inadvertently exposed to information about cases or clients from other clinics. It is expected that you will handle this information as you would with your own cases by keeping this information confidential and not discussing or divulging it to anyone.

If during your visit to the clinic you recognize a client whom you know personally, please excuse yourself from the situation and bring this to the attention of the clinic manager. For questions about this policy, please contact the clinic manager at (541) 346-0915.

MANDATORY REPORTING

Mandatory Reporting of Child Abuse

Mandatory reporters are all “public and private officials” as defined by state statute, including School Employees (**Effective January 1, 2013, employees of Oregon higher education institutions are explicitly included in the law as mandatory reporters.**) (Excerpt from <http://around.uoregon.edu/content/qa-mandatory-reporting-child-abuse>)

Note: *Interns or students who are not employees are not mandatory reporters unless their profession is otherwise noted in the list in question. However, it is the University’s expectation that volunteers, ..., students and interns will report issues of suspected child abuse to their supervisors.* (Excerpt from

<http://around.uoregon.edu/content/qa-mandatory-reporting-child-abuse>)

The following is an excerpt from a memo from the UO president on 12/7/2012

<http://around.uoregon.edu/content/memo-president-all-uo-employees>

As a result of an amendment to the Oregon Child Abuse Reporting Statutes, effective January 1, 2013, all UO employees have a duty to make a report to the Oregon Department of Human Services or a law enforcement agency when there is reasonable cause to believe any child with whom the employee comes in contact has suffered abuse or that any person with whom the employee comes in contact has abused a child. For instances that relate to UO authorized activities, all UO employees should make the report to University of Oregon Police Department. For purposes of this reporting responsibility, “abuse” includes, but is not limited to:

assault of a child;

physical injury to a child caused by other than accidental means;

any mental injury to a child caused by cruelty to a child;
rape of a child;
sexual abuse;
sexual exploitation;
negligent treatment or maltreatment of a child;
threatened harm to a child;
buying or selling of a child;
allowing a child on the premises where methamphetamine is being manufactured; and
unlawful exposure to a controlled substance that subjects a child to risk of harm.

The duty of employees of public universities to report incidents of child abuse applies at all times, not just to those incidents occurring during working hours or on campus. For this purpose, university employees include all faculty and staff, student workers, graduate teaching fellows and temporary employees.

Under the law, reports must be made to the local office of the Department of Human Services or to a law enforcement agency in the county where the reporting employee identifies child abuse. Failure to report when required to do so is a Class A violation. Persons who make reports in good faith are immune from liability for making the report. For instances that relate to UO-authorized activities, UO employees are expected to make the report immediately to the UO Police Department (541-346-2919).

INFECTION CONTROL AND BLOOD BORN PATHOGENS PRECAUTIONS

As speech-language pathologists we regularly get in close contact with our clients and patients. This makes us and our clients particularly susceptible to contracting a disease. In order to minimize the risk of transmitting a disease, all students, staff, and supervisors are required to follow standard precautions. Standard precautions are to be followed in any practicum setting – university clinic, schools, medical facilities etc. Students must complete annual training.

Additional training may be required by off-campus practicum and externship sites prior to a student's off-campus placement.

Note: If a student has a cough, runny nose, a fever, or any contagious disease, the student shall not provide in person services. Please, contact your supervisor and the clinic director as soon as possible if you are unable to see your client.

Hand Washing Protocol

- **Hands are the most common vehicle for spreading infection and cross contamination**
- **Hand washing represents the best, preventive measure in the home and at work**
- Wash before and after each patient, after cleaning toys and after removing gloves
- Remove all rings, and place in a safe place

- Start with water, add soap and lather up, scrubbing palms, the backs of your hands, wrist and lower forearms. Minimum 20 seconds (sing Happy Birthday!), don't forget to clean fingernails and between fingers
- Thoroughly rinse off soap under running water
- Dry hands by blotting, using a paper towel
- Turn off water using the paper towel, not your clean hands

Alcohol-Based Hand Sanitizers

- Alcohol-based hand sanitizers kill bacteria more effectively than handwashing with soap and water.
- They are less damaging to skin than soap and water, resulting in less dryness and irritation.
- They require less time than handwashing with soap and water. – Rub hands until dry
- Bottles/dispensers are placed in each treatment room for easy access.

Cover Your Cough

(from Center of Disease Control and Prevention)

To help stop the spread of germs,

- Cover your mouth and nose with a tissue when you cough or sneeze.
- Put your used tissue in the waste basket.
- If you don't have a tissue, cough or sneeze into your upper sleeve or elbow, not your hands.
- You may be asked to put on a facemask to protect others.
- Wash your hands often with soap and warm water for 20 seconds.
- If soap and water are not available, use an alcohol-based hand rub.

Protocol for Proper Glove Use

- **Gloves need to be worn whenever there is a risk to get in contact with bodily fluids (e.g., mucous membrane or blood)**
- Use latex-free (nitrile or vinyl) examination gloves.
- Gloves should fit properly.
- Change gloves between clients/patients. If a glove becomes torn or perforated, replace it. Never reuse disposable gloves
- If client questions use of gloves, explain that gloves are worn to protect client, and are a precautionary measure
- Place bandages on open sores or cuts prior to putting on gloves
- Double-glove when treating patients known to be infected with HIV or Hepatitis B
- Removing Gloves
 - Peel off one glove from the wrist to the fingertip, then grasp it in the gloved hand
 - Using the bared hand, peel off the second glove from the inside, touching the first glove inside the second glove as it is removed
 - Immediately dispose of glove in any wastebasket lined with plastic bags immediately after use. Do not place used gloves on the table.

- Wash hands thoroughly when completed

Use of Tongue Depressors

- Disposable tongue depressors are available in the clinic.
- Prior to an oral examination, be careful not to touch the part of the tongue depressor that will be inserted into the client's mouth.
- Dispose of depressor immediately after use.

Cleaning Surfaces in the Client Room

- Each clinic room has disposable rubber gloves, alcohol-based hand sanitizers and infection control cleaning supplies, including wipes for disinfecting tables and chairs after each session.
- **Each table is to be wiped down with antibacterial wipes (located in each room) after client leaves the room.**
- If an accident occurs involving blood, there is **a bloodborne pathogen kit located in the kitchen area for disposal.**

Cleaning Toys and Other Material

- **Toys should be cleaned after each session.** You are responsible for cleaning the toys you use.
- Use the antibacterial wipes that are located in each clinic room to clean the toys.
- Return toys to the appropriate place when dry.
- **Audiology:** Audiological headsets should be wiped down with audio-wipes after each use. Dispose of audio-wipes and/or alcohol wipes in waste basket lined with plastic bags immediately after use.

PROFESSIONAL CONSIDERATIONS

Professional Behavior

Students will be asked to use professional behavior in all therapy sessions, meetings, and correspondence related to clinical practice. Please remember that, as a student, you are providing services under the license of the assigned supervisor. For that reason, the supervisor will always need to make the final decisions about evaluation or treatment. Professional behavior mandates that you have respect for the fellow professionals you are working with and learn positive and successful ways to resolve conflict. Conflict is a natural part of all professional environments and often serves as a vehicle for positive change if approached in the right manner. Should you find yourself in a conflict situation, please seek immediate assistance from your supervisor, the director of clinical education or the graduate program advisor, so a timely and positive resolution can be achieved.

College of Education Badge and Proximity Card

The UO College of Education (COE) requires that students placed in field experience, practicum, or student teaching sites and faculty/staff who supervise students at these sites (including the HEDCO Clinic) obtain college issued identification badges (i.e., COE ID badges). These badges indicate that the student/staff/faculty has received background clearance based on a criminal history check.

Students will have privileges added to their UO ID cards, which will enable access to locked clinic entrances. ID cards must be kept at all times for entrance into locked areas. Please, do not rely on clinic reception staff to open the door for you. See Clinic Manager for card activation. Should you lose the card, please contact the Clinic Manager immediately.

Professional Attire and Considerations

Students are required to maintain a professional appearance at all times when working in the clinic or at a practicum placement. Professional appearance shows respect for the client(s) you are serving and for the facility you are working in. You are encouraged to dress comfortably and professionally when working in the HEDCO clinic or any off-campus placements. Others look to your dress to make assumptions about your expertise, engagement and professionalism. Please consider this when choosing what to wear as a clinician. It is important that you dress in a way that considers the safety, comfort and needs of you and your clients. Please keep the following in mind:

Clean, odor free clothing and shoes in good repair are required in clinic at all times. Please see the director of Clinical Education if you are unable to meet this requirement for any reason.

Consider the needs, skills, behaviors of your client and session activities when choosing your outfit. Choose clothing that is washable, flexible and professional. Clothing and accessories should limit distractions and safety risks. For example, jewelry or strappy clothing may be pulled forcefully from your body. Clothing with logos or words might be distracting to clients. Tight or short clothing may limit mobility when playing with clients on the floor. Refrain from wearing exercise gear (yoga/sweatpants), short shorts/skirts, flip flops, t shirts with logos/writing, swim suits and tank tops

Due to client sensitivity to scents, refrain from using perfume, cologne, aftershave, essential oils or other scented products in the clinic.

Consider cameras, observations and clinical teaching when choosing outfits. Bend, stoop and stretch in front of the mirror to make sure you will not expose parts of your body or undergarments you would be uncomfortable having a family member, supervisor or classmate see.

When off campus, please follow the dress requirements of that location, being mindful that you are interacting with potential employers and individuals who will serve as references and provide letters of recommendation.

Professionalism matters.

Different types of facilities serve different populations and will have different expectations regarding dress. You want to be both professional and comfortable so please check with your assigned supervisor prior to starting a practicum if you have questions. In general, medical settings require socks/stockings and closed toe shoes to meet the health code.

Food/Drink in Clinic

Students should not bring coffee/soda or other beverages into clinic sessions or in clinic rooms. Water is acceptable during the session if a cup of water will be provided to the client as well. If the student intends to drink water only between clients, please store the water out of reach/sight of the client during the session. In off campus settings, students should follow the same practice. Food should only enter a clinic session if it is an intended part of the intervention. Clinicians should never eat their lunch/snack or chew gum in a clinic session. Hot beverages should be safely stored in an out of reach/sight during clinic sessions and only accessed when clients are not present. If snacks/food are a part of a clinic session, students are responsible for cleaning and disinfecting surfaces before and after the event.

Clinic Absences

Students are expected to be present for all scheduled therapy sessions and meetings. Illness and emergencies are the only acceptable reasons for an absence.

If a student must be absent from a scheduled appointment or meeting, it is the student's responsibility to

- 1. Contact the supervisor first*
- 2. Contact the client-General Rule minimum of 3 hours notice or by 8 a.m. for morning appointments.*
- 3. Notify the HEDCO office staff as early as possible.*
- 4. Re-schedule your appointment IF supervisor, client and room are available.*
- 5. If you have 2 or more absences, a meeting will be scheduled with the clinic director, supervisor and student. Failure to cancel with appropriate notice, excessive absences or missing clinic for reasons other than illness or emergencies may result in you not receiving clinic hours, documented critical concerns and/or a "no pass" in Practicum*

CLINICAL PRACTICUM CONSIDERATIONS

Clinic Hours and Assignments

The Speech Language and Hearing Center of the HEDCO Clinic currently operates from 8:30 a.m. until 6 p.m. on Monday-Friday. Some Saturday events may occur. Students should expect to have clients at any time the clinic is in operation. Accommodations for scheduling assignments can only be made for classes (CDS and others) or extreme situations. We cannot make scheduling accommodations for routine childcare, transportation, employment, travel or recreational needs. Please notify the Director of Clinical Education during Clinical Methods Week or by week 5 of the previous term if you are taking courses not outlined on the program plan or have a scheduling

accommodation need for the upcoming term. Clients may be scheduled immediately after class, back-to-back from each other or with large breaks between. Students should be prepared for all schedule types.

Clinical assignments are made based on a multitude of factors including student clinician's clock hour acquisition needs, clinical experience and competency needs, clinical variety, HEDCO clinic client needs, client/supervisor/clinician schedules, room availability and more. These factors may contribute a certain degree of variance in clinic schedules and client caseloads between students and across terms.

Clinic schedules will be distributed on Monday of the first week of class to allow for the multitude of changes that occur during clinic breaks. You may be notified of assignments earlier if transition time is needed. Please know that early client assignments are always subject to change.

Fair and Equal Treatment

In alignment with the mission of the Communication Disorders and Sciences Program mission, all clients in the HEDCO clinic have the right to respectful, quality care. The UO Speech Language and hearing center values inclusion and welcomes all clients seeking services communication challenges. All clients are treated equitably regardless of background including, but not limited to, socioeconomic status, culture, ethnicity, gender identity, sexuality, and personal belief systems.

Right to be treated with respect

Clients are entitled to be treated respectfully and appropriately by clinicians, supervisors and clinic personnel. Members of the personnel address patients without violating their dignity, personal beliefs, or privacy. Special requirements arising from the patient's ethnic/cultural background, language of origin, sexual orientation and gender identity are to be taken into account as far as possible. When the patient is a child, the needs of the other family members must also be considered.

Right to good care

Each client is entitled to good quality health care. In this context, objectively good care refers to evidence-based care and subjectively good care to the patient's personal experience of the care provided. If the client's needs cannot adequately be met by the services available at the student training center, appropriate referrals to community resources should be provided.

Section II

Master's Degree Requirements, Policies, and Procedures

MASTER'S DEGREE REQUIREMENTS

Graduate school and program requirements are described during the new student orientation meeting at the beginning of each academic year. Students should also obtain and review the Undergraduate and Graduate Catalog:

<http://uocatalog.uoregon.edu/education/specialeducationandclinicalsciences/#mscommunications>. Students in the CDS master's degree program must meet all graduate school and CDS program requirements.

Upon graduation, students in the CDS master's degree program will have fulfilled the knowledge and skills necessary for starting their clinical fellowship year and starting the certification process in Speech-Language Pathology as outlined by the American Speech-Language-Hearing Association. See ASHA website: <http://asha.org/certification/>.

Note: Students graduating January 1, 2020 or later have to meet the [2020 Standards and Implementation Procedures for the Certificate of Clinical Competence in Speech-Language Pathology](#).

2020 additions to the 2014 standards may be reviewed here:

<https://www.asha.org/Certification/Certification-Standards-Change-in-2020/>

In adherence to the **2020 Standards and Implementation Procedures for the Certificate of Clinical Competence in Speech-Language Pathology**, the student will meet the following standards upon graduation:

- Demonstrate knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span (Standard IV-B)
- Demonstrate knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas (Standard IV-C):
 - Speech sound production, to encompass articulation, motor planning and execution, phonology, and accent modification
 - Fluency and fluency disorders
 - Voice and resonance, including respiration and phonation
 - Receptive and expressive language, including phonology, morphology, syntax, semantics, pragmatics (language use and social aspects of communication), prelinguistic communication, paralinguistic communication (e.g., gestures, signs, body language), and literacy in speaking, listening, reading, and writing
 - Hearing, including the impact on speech and language

- Swallowing/feeding, including (a) structure and function of orofacial myology and (b) oral, pharyngeal, laryngeal, pulmonary, esophageal, gastrointestinal, and related functions across the life span
- Cognitive aspects of communication, including attention, memory, sequencing, problem solving, and executive functioning
- Social aspects of communication, including challenging behavior, ineffective social skills, and lack of communication opportunities
- Augmentative and alternative communication modalities
- Demonstrate current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates (Standard IV-C)
- Demonstrate knowledge of standards of ethical conduct (Standard IV-E)
- Knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice (Standard IV-F)
- Demonstrate knowledge of contemporary professional issues (Standard IV- G)
- Demonstrate knowledge of entry level and advanced certifications, licensure, and other relevant professional credentials, as well as local, state, and national regulations and policies relevant to professional practice (Standard IV-H)
- Skills in oral and written or other forms of communication sufficient for entry into professional practice (Standard V-A)
- Demonstrate the following skills outcomes (Standard V-B):
 - Evaluation
 - Conduct screening and prevention procedures (including prevention activities).
 - Collect case history information and integrate information from clients/patients, family, caregivers, teachers, and relevant others, including other professionals.
 - Select and administer appropriate evaluation procedures, such as behavioral observations, non- standardized and standardized tests, and instrumental procedures.
 - Adapt evaluation procedures to meet client/patient needs.
 - Interpret, integrate, and synthesize all information to develop diagnoses and make appropriate recommendations for intervention.
 - Complete administrative and reporting functions necessary to support evaluation.
 - Refer clients/patients for appropriate services.
 - Intervention
 - Develop setting-appropriate intervention plans with measurable and achievable goals that meet clients'/patients' needs. Collaborate with clients/patients and relevant others in the planning process.

- Implement intervention plans (involve clients/patients and relevant others in the intervention process).
- Select or develop and use appropriate materials and instrumentation for prevention and intervention.
- Measure and evaluate clients'/patients' performance and progress.
- Modify intervention plans, strategies, materials, or instrumentation as appropriate to meet the needs of clients/patients.
- Complete administrative and reporting functions necessary to support intervention.
- Identify and refer clients/patients for services as appropriate.
- Interaction and Personal Qualities
 - Communicate effectively, recognizing the needs, values, preferred mode of communication, and cultural/linguistic background of the client/patient, family, caregivers, and relevant others.
 - Collaborate with other professionals in case management.
 - Provide counseling regarding communication and swallowing disorders to clients/patients, family, caregivers, and relevant others.
 - Adhere to the ASHA Code of Ethics and behave professionally.
- Have completed a minimum of 400 clock hours of supervised clinical experience in the practice of speech- language pathology. Twenty-five hours must be spent in clinical observation, and 375 hours must be spent in direct client/patient contact (Standard V-C)

2020 Changes to Speech-Language Pathology Standards

- Clinical supervisors and Clinical Fellowship mentors will have to have a minimum of
 - Nine months practice experience post-certification before serving as a supervisor.
 - Two hours of professional development in the area of supervision post-certification.
- Applicants for certification will be required to show coursework that covers basic physics or chemistry knowledge.
- Knowledge and skills will be refined to include speech sound production, fluency disorders, literacy, and feeding within the current nine core content areas.
- Applicants are encouraged to include interprofessional education and interprofessional practice into their clinical practicum and clinical fellowship experience.
- Beginning with the 2020-2022 certification maintenance interval, certificate holders will have to earn one of their [30 required certification maintenance hours](#) (CMHs) in Ethics.

The CFCC is considering a requirement for English language proficiency. As with any other change to the certification standards, this potential change would go out for

widespread peer review in advance of the CFCC voting to add the requirement into the standards. It would be at least one year from the CFCC's vote to approve before the requirement would go into effect.

Graduate School Policies

In addition to program requirements, students must also meet all requirements established by the graduate school. Pertinent requirements are listed below. For more details, please visit the graduate school website: <http://gradschool.uoregon.edu/policies-procedures/masters>

Minimum Graduate School Requirements for a Master's Degree

- Minimum registration per term: 3 credits
- Required minimum GPA: 3.0
- Minimum graded credits: 24 credits
- Total credit minimum: 45 credits
- Minimum credits in major: 30 credits

GRADUATE SCHOOL GRADING POLICY

Graduate School policy states that graduate students must maintain at least a 3.00 grade point average (GPA) in graduate courses taken in the degree program. Grades of D+ or lower for graduate courses are not accepted for graduate credit but are computed in the GPA. Similarly, the grade of N (no pass) is not accepted for graduate credit. A grade of P (pass) must be equal to or better than a B-. A GPA below 3.00 at any time during a graduate student's studies or the accumulation of more than 5 credits of N or F grades — regardless of the GPA — is considered unsatisfactory. The dean of the Graduate School, after consultation with the student's home department, may disqualify the student from the Graduate School, thus terminating the student's degree program.

For more details on the Graduate School Satisfactory Progress Requirements see (<https://gradschool.uoregon.edu/academics/policies/general/satisfactory-progress>)

TIME LIMIT

Students must complete all requirements for the master's degree within seven years, including all transferred credits, thesis or evidence-based project, and examinations. The seven-year time period will begin with the term of admission to the master's program. For example: a master's student admitted in Fall 2020 will have a completion deadline of Summer 2027.

The beginning date of the seven-year time period will be adjusted to an earlier date to include any graduate credits, approved for transfer into the program, that were taken

before the date of admission. For example: a master's student admitted for Fall 2013 who has approved transfer credits taken at a previous university in Fall 2011 will have a completion deadline of Summer 2018.

ENROLLMENT AND RESIDENCY POLICIES

A minimum of 30 credits must be taken at the Eugene campus, over a minimum period of two terms. Twenty- four of the total credits required must be University of Oregon graded credits. At least 9 credits in courses numbered 600-699 must be taken in residence. For detailed description of the requirements refer to:

<http://gradschool.uoregon.edu/policies-procedures/enrollment-residency>

CONTINUOUS ENROLLMENT

The Graduate School requires "continuous enrollment" (not including summers) until all program requirements have been completed, unless on leave status (maximum time of one calendar year) has been approved. Students wishing to interrupt their studies for good reason must file an application for on leave status with their academic coordinator (Autum Loverin) Approval of the request guarantees the student's right to return to the program in good standing by the end of the calendar year of leave. Students who leave a program without on-leave approval status or who fail to return by the end of the approved year face two consequences:

1. They must file a petition for readmission. Program approval of the petition is not automatic; the program may deny the request or may attach other stipulations to the approval.
2. Any changes in degree requirements and procedures adopted by the Graduate School or the program during the student's absence will apply to the readmitted student's program of studies.

For more information about on-Leave status, see:

<http://gradschool.uoregon.edu/policies-procedures/leave>

REQUIREMENT FOR M.A.

CDS graduate students can earn either an M.A. (Master of Arts) or M.S. (Master of Science) degree. To earn an M.A. degree, students must demonstrate competence in a second language, equivalent to the satisfactory completion of the second-year college sequence. Competency may be demonstrated by either the Graduate Student Foreign Language Test or through submission of adequate undergraduate course work. Language competence must be demonstrated within the overall seven-year limitation for completion of a master's degree.

There is no language requirement for the M.S. and professional advanced degrees unless the department so specifies.

<http://gradschool.uoregon.edu/policies-procedures/masters>

Language Requirement: Distinction Between MA & MS Degrees:

<https://gradschool.uoregon.edu/academics/completing-degree/masters-minimum-requirements#language-requirements>

GRADUATE STUDENTS RECEIVING FINANCIAL AID

Federal regulations require students to notify the Financial Aid Office

<http://financialaid.uoregon.edu/>. (1-800- 760-6953 or 541-346-3221) as soon they know that they will receive any educational resources so that necessary revisions to their financial aid package can be made. Such resources include a GE position, fellowship, scholarship, or any other type of monetary award. Because receiving additional financial resources may reduce a financial aid award, students should contact the Financial Aid Office prior to applying for a GE position or other type of support.

Communication Disorders and Sciences Program Policies and Practices

CDS ACADEMIC GRADING POLICY

In addition to the Graduate School grading policy (as described on page 24), CDS program policy states that, if a student receives lower than a B- in any academic course and/or does not demonstrate the skills required to satisfy an ASHA Knowledge and Skills Assessment (KASA) competency targeted through the course, the student may be required to complete additional learning experiences to meet the KASA competency or retake the class. Please note that if a student is required to complete additional learning experiences to demonstrate KASA competency in class or clinic this will not, in most cases, result in a grade change. If a student does not meet the required competencies associated with a particular class or if a student receives below a B- they may not be able to register for subsequent terms of class and/or practicum and/or externship. These decisions are at the sole discretion of the instructor and graduate program advisor or director of clinical education.

Faculty will conduct a quarterly review process. Students judged to have made unsatisfactory progress, will be alerted in writing. The program may choose to develop a plan of support. If at the end of the following term, the student is still experiencing difficulty or has not completed the goals outlined in the plan of support, the program may choose to a) modify the plan of support or b) terminate the student's enrollment.

STUDENT EVALUATION OF CLINICAL PRACTICUM AND EXTERNSHIPS

The UO CDS program uses a combination of formative and summative assessment to support and enhance our students' attainment of clinical competencies and to assess the acquisition of knowledge and skills. The following formats are used. To view forms listed here, see Clinic Practicum on [infoCDS](#)

- Written feedback on skill competencies provided on the Session Observation Form
- Individual Practicum Performance Evaluation (IPPE)- completed at midterm and finals for each clinical placement
- Verbal and electronic feedback via email by clinical faculty
- Feedback on written documentation in Titanium
- Students' self-reflection
- Other formats

The UO CDS program is a competency-based program and adheres to the standards set forth by the Council on Academic Accreditation (CAA), our national accreditation body, and the Council for Clinical Certification (CFCC). This means that students have to demonstrate specified clinical competencies by program graduation. For each practicum placement, students' clinical performance is evaluated and graded at midterm and finals week on the IPPE (accessed through CALIPSO, the electronic student tracking system used by the UO CDS program). Clinical competency is rated using the following scale (see the following page for a detailed description of the ratings):

1. Skill absent – supervisor modeling and intervention needed
2. Skill set emerging – supervisor intervention needed
3. Skill set evident – with supervisor support and feedback
4. Independence with skill set – given occasional feedback
5. CFY-ready - consultation with supervisor

The purpose of the rating system is to provide feedback on specific clinical competency areas and guide decisions about where students need practice or support. In most cases, the ratings on the final IPPE will reflect a student's performance over the last 3 to 4 weeks of the term. There may be cases where, based on student experience and/or difficulty of a particular clinical case, the student's final score may be adjusted.

Clinical practicum and externships are graded on a Pass/No Pass basis.

A pass in a practicum course indicates that a student has met the minimum requirements to count clinical clock hours earned that term. In order to receive a pass during the first two terms of clinical placement, a student must:

1. have a minimum average competency score of 2 in each assigned practicum assignment (see next page for a definition), and
2. 2 or fewer critical concerns listed on IPPE across all practicum assignments.

In order to receive a pass during the third term and all subsequent terms, a student must have:

1. a minimum average competency score of 3 in each practicum assignment, and
2. 2 or fewer critical concerns listed on IPPE across all practicum assignments.

If a student doesn't meet these requirements, it will be at the discretion of the Director of Clinical Education to decide if a student passes the practicum. Adjustments may be made based on client complexity, client attendance, and student familiarity with that client. Students may not count clinical hours during a term when a No Pass grade is received.

The following behaviors or performance will result in a No Pass for clinical practicum and are possible grounds for program termination:

1. Violation of ASHA Code of Ethics <https://www.asha.org/Code-of-Ethics/>
2. Violation of the Student Conduct Code <http://studentlife.uoregon.edu/conduct>
3. Serious breach of professionalism – including but not limited to:
 - a. Jeopardizing a client's safety
 - b. Sharing inappropriate personal information about self or client
 - c. Use of profanity or chemical substances while involved in clinic activities
4. Being asked to leave a part-time or full-time externship or receiving a failing grade in an externship (medical or educational setting)

When IPPEs are finalized at the end of the term, competency scores are transferred to the Cumulative Evaluation on CALIPSO. Competency on a standard is considered to be met when a student's average on this standard reaches at least a "3" on this form.

SCORING RATIONALE FOR COMPETENCY-BASED SCORES ON IPPE

1. **Skill absent – supervisor modeling/intervention needed**
 - Student
 - Lacks knowledge base
 - Unable to apply knowledge
 - Supervisor
 - Plans and implements session
2. **Skill set emerging – supervisor intervention needed**
 - Student
 - Demonstrates some knowledge
 - Beginning to apply knowledge
 - Supervisor
 - Dominant role
 - Directs planning and implementation
 - Frequent support/intervention in routine situations

A competency grade of 2 might be appropriate initially if a student works with a new type of client, in a new setting, or uses a new method

3. **Skill set evident – with supervisor support and feedback**
 - Student
 - Demonstrates adequate knowledge base
 - Usually applies knowledge in routine contexts
 - Occasionally applies knowledge in non-routine situations
 - Occasionally analyzes and synthesizes information
 - Joint problem-solving with supervisor
 - Supervisor
 - Provides occasional support in routine situation
 - Usually provides support/ intervention in non-routine situations

4. **Independence with skill set - given occasional feedback**
 - Student
 - Demonstrates good knowledge base
 - Consistently applies knowledge in routine situations
 - Usually applies knowledge in non-routine situations
 - Usually analyzes and synthesizes information
 - Takes lead in joint problem solving with supervisor
 - Supervisor
 - Rarely provides support in routine situations
 - Occasional support in non-routine situations

5. **CFY ready**
 - Student
 - Demonstrates good knowledge base
 - Consistently applies knowledge in routine and non-routine situations
 - Consistently analyzes and synthesizes information
 - Consults with supervisor as needed
 - Supervisor
 - Has role of consultant
 - Occasional support in non-routine situations

CERTIFICATION AND LICENSURE REQUIREMENTS

In addition to program requirements, students will meet requirements for:

- Entering their Clinical Fellowship Year (CFY), which is necessary for ASHA certification.
- Oregon State licensure issued by the Oregon Board of Examiners for Speech-Language Pathologist and Audiologists.

Students are responsible for reviewing requirements on the ASHA Membership and Certification website, which details academic and clinical clock hour requirements: <http://www.asha.org/certification/>. Each term students should review their progress toward meeting these requirements with their clinical supervisor.

- Students applying for ASHA certification January 1, 2020 or later have to meet [2020 Standards and Implementation Procedures for the Certificate of Clinical Competence in Speech-Language Pathology](#).

In order to obtain a professional license by the Oregon Board of Examiners and ASHA certification, the applicant must pass the PRAXIS II exam in Speech-Language Pathology. Students are strongly encouraged to take the PRAXIS II exam before graduation. Students must request that their scores be sent through ETS (Educational Testing Services) to the CDS master's program. A passing score of 600 is required to receive Certification of Clinical Competency by ASHA and licensure through the Oregon Board of Examiners for Speech-Language Pathologist and Audiologists.

Students who plan to practice as speech-language pathologists outside Oregon need to familiarize themselves with licensure requirements in the state they would like to practice. Students who plan to practice outside of Oregon, after they graduate, should set up a meeting with the Director of Clinical Education no later than their second term to set up a plan to ensure that they meet any additional requirements.

PLAN OF SUPPORT

Occasionally students do not progress as expected in their clinical or academic work. A plan of support may be required for any of the following:

1. Grades lower than B- in academic coursework, five credits of "F" or "NP", or a cumulative GPA below 3.0.
2. Three or more "Clinical Concerns" reported on Session Observation Forms in a term and/or documented on midterm and/or final IPPEs. Students can receive critical concerns across areas evaluated on the IPPE, including evaluation (such as "did not review/practice test"), treatment (e.g., "abandoned lesson plan without justification"), and preparedness, interactions, and personal qualities (e.g., "missed scheduled meetings").
 - a. Critical Concerns – Evaluation
 - i. Did not review/practice test
 - ii. Did not follow instructions
 - iii. Did not accurately record data
 - b. Critical Concerns – Treatment
 - i. Data collection lacking
 - ii. Abandoned lesson plan without justification
 - iii. Did not incorporate suggestions from supervisor and/or self-reflection

- iv. Lesson plan not adequate
- c. Critical Concerns – Preparedness, Interactions, and Personal Qualities
 - i. Did not follow clinic protocols for confidentiality, universal precautions, or cancellation/ rescheduling
 - ii. Missed scheduled meetings
 - iii. Appearance not professional
 - iv. Not punctual
 - v. Lacked professional demeanor
 - vi. Documentation/paperwork not timely or missing
 - vii. Incomplete/inaccurate paperwork and/or careless errors
 - viii. Inadequate communication and interpersonal skills with client, supervisor and/or other professionals
- 3. A “no pass” grade in practicum or notable lack of progress in clinical areas documented on session observation forms and IPPEs as reflected by the following:
 - a. A competency score of “1” is received on the grading rubric for any of the IPPE areas during the first two terms.
 - b. A competency score of “2” or “1” is received on the grading rubric for any of the IPPE areas during the third or later term.
- 4. Documented violations of professionalism, such as absences, lateness or rude behavior toward a client or supervisor either via email or in person.
- 5. A grade of No Pass is received for any clinical placement.
 - a. In order to receive a pass during the first two terms, a student must have a minimum average competency score of 2.0 for each assigned practicum.
 - b. In order to receive a pass during term 3 and later terms, a student must have a minimum average competency score of 3.0 in each assigned practicum.

If the Graduate Advisor or Director of Clinical Education believes a plan of support is warranted, then the student is contacted and a meeting is scheduled.

If a student’s academic performance presents sufficient reason for concern that the student may not make adequate academic progress, the Graduate Advisor will schedule a meeting with the student to discuss the concerns.

If a student’s clinical performance or professional behavior presents sufficient reason for concern that the student may not make adequate progress toward clinical competencies, the Director of Clinical Education/Graduate Advisor schedules a meeting with the student to discuss the concerns and, if indicated, develop a plan of support. The student’s Supervisor(s) may also be part of this meeting.

During the meeting, the student and the Clinical Education/Graduate advisor will discuss goals, an action plan, support needed, persons responsible, and a timeline for remediation based on the student’s areas of concern and need for remediation.

Following the meeting, the Graduate Advisor/Director of Clinical Education will generate a Student Advising Form which will be shared with the student and placed in the student's file. There are three types of supports that may be offered for struggling students: (1) **Formal Academic Accommodations**, (2) a **Program Extension for students needing more time**; and/or (3) a **Plan of Support**. All of these will be detailed on the Student Advising Form (see appended document) which will be completed and signed by student, Academic Advisor and Director of Clinical Education. Formal Academic Accommodations are typically requested through the University of Oregon Accessible Education Office. If the request for accommodations results from the advising process (i.e., the student does not independently initiate this process at matriculation), the CDS Academic Advisor will help make sure a student makes an appointment and will then document any accommodations the result from this process on the Student Advising Form. The student will be responsible for letting individual faculty know of accommodations and if there are any concerns with implementation, the student will alert the Academic Advisor who will facilitate implementation of accommodations. The accommodations will remain in place for the duration of the program unless a student initiates a change in a discussion with the Academic Advisor. The student will discuss any academic accommodations that may extend to clinical assignments with the Director of Clinical Education to determine if they can be implemented in specific clinical assignments. A Program Extension will be documented on the Student Advising Form and a copy will be sent to the student as well as the file. It will remain in place until the student meets graduation requirements and the Statement of Completion Form (completed for every student) will serve as documentation of the completion of the Program Extension. A Plan of Support will involve a collaborative conversation between a student and the Advisor to determine actions that might help a student succeed. Examples might include, extra practice and feedback with clinical writing; replacement of an assignment with an equivalent assignment; extension for assignment or clinical documentation. The Plan of Support will indicate the action, who is responsible and the date that the support will fade as well as time when the Plan of Support will be considered complete. The Advisor will be responsible for documenting when the Plan of Support is withdrawn or completed and alerting the student. The Plan of Support is an option on the Student Advising Form and will be stored by the Academic Coordinator in the student's CDS file.

As necessary based on the terms of the plan, the Graduate Advisor/Director of Clinical Education will provide the student's current clinical supervisors and/or academic instructors with a copy of the plan of support.

It is the student's responsibility to share and discuss their plan of support with clinical supervisors and/or academic faculty in subsequent terms (as long as the plan is still active and support is needed/required). If academic support is needed, the student should schedule a meeting with their instructors and discuss the plan that is in place.

Failure to meet the goals on a plan of support will result in a No Pass.

1. If a student does not meet goals on their plan of support within the specified time period, not to extend beyond 1 full academic term, or the student is unable to perform at competency without faculty supports following the completion of the support plan, the student will likely be dismissed from the program.
2. A student who is currently on a clinical plan of support will not be able to move to September Experience/Alternative September Experience or to Educational or Medical Externships until the student demonstrates adequate clinical competencies without a support plan.

PAY FOR PRACTICUM

American Speech-Language Hearing Association (ASHA) Policy - “ASHA policy allows students to receive pay for services they provide within the clinical practicum setting. However, some academic programs or state licensure laws may have policies that prohibit students from being paid for their practicum work. In such cases, ASHA defers to the university's or state's decision about such payment.” [See this ASHA web page](#)

CDS and University Policy - Whereas ASHA policy allows students to receive pay for services they provide within the clinical practicum setting, the University of Oregon policy does not allow students to be on payroll (i.e., they are not entitled to wages) for practica and internships for which they receive university credit. However, students are allowed to be paid a stipend that covers living expenses (e.g., rent) or travel.

The program discourages students from entering into a contractual agreement with a facility that requires students to work at that facility beyond the clinical practicum period. Note: Additional funding of this type may offset other University funding, such as student loans. It is recommended that financial issues regarding receiving a stipend be discussed with the University financial aid office.

RETENTION

Students must maintain “good standing” for the duration of their program. Minimal requirements for “good standing” include:

1. Maintain GPA of 3.0 in graduate coursework (B- or better in CDS coursework, please refer to grading policy).
2. Making satisfactory progress toward the degree.
3. No more than 5 credits of incomplete (see incomplete policy).
4. Meeting clinical competencies on expected timelines without excessive critical concerns.
5. Maintaining continuous enrollment unless awarded on-leave or in absentia status.
6. Demonstrating professionalism in academic and clinical settings, including:

- a. Adhering to ASHA Code of Ethics: <https://www.asha.org/Code-of-Ethics/>
- b. Student Conduct Code: <http://studentlife.uoregon.edu/conduct>
- c. Professionalism Competencies described on IPPE

TERMINATION FROM THE PROGRAM

Students who choose to terminate their participation in the program voluntarily should notify the graduate program advisor and the student services coordinator. The written communication should indicate the term and year the student is leaving the program, the reason for termination, and whether or not the student plans to return at a later date. The student must complete and sign the “Relinquishing of Graduate School Standing” form available from the student services coordinator.

To be reinstated following voluntary relinquishment of enrollment, a student must reapply to the program. If the program admits the student, the student must be held to the program standards under which he or she was readmitted.

Students may be asked to terminate their program for a variety of reasons. Examples include but are not limited to low grade point average, lack of progress toward clinical competencies, number of incompletes, failure to reach competency in the clinic, and unethical conduct. In addition, failure to follow Graduate School requirements for continuous enrollment will result in involuntary relinquishment of enrollment. In this case, reapplication to the program is required for re-admittance to be considered. Once the decision is made to terminate a student, a letter must be sent to notify the student of the program’s decision. In this letter, the student will be given the reasons for termination or pending termination. If the student decides to withdraw, formal notification should be sent to the program and the Graduate School.

The student may pursue mediation or file an appeal following the Graduate School Grievance policy:

<https://gradschool.uoregon.edu/academics/policies/general/academic-grievances>
<https://policies.uoregon.edu/grievance-procedures>

INCOMPLETE POLICY

An incomplete grade may be given when a student has been unable to complete their coursework or practica because of unusual circumstances.

An incomplete (I) is an instructor-initiated mark. A mark of I may be reported only when the quality of work is satisfactory, but some minor yet essential requirement has not been completed for reasons acceptable to the instructor.

Graduate students need to be aware that there are two sets of policies regarding incompletes on the student record: (1) Program and (2) Graduate School. Graduate students should become familiar with both sets of policies.

The Graduate School policy requires that graduate students must convert a graduate course grade of Incomplete ("I") into a passing grade within one calendar year of the term the course was taken. After one year, the student must petition to the Graduate School for the removal of an incomplete.

The program policy requires that an incomplete grade contract (available from the Graduate School: <https://gradschool.uoregon.edu/academics/policies/general/grades-incompletes>) must be completed and signed by both the student and the instructor or record. The work needed to complete the requirement(s) and a timeline must be specified. Incomplete grades in either coursework or clinic may prevent students from receiving certain practicum assignments. One copy will be given to the student and one copy will be kept in the student's file in the program office.

If a student has more than 5 credits of incompletes, they may not be allowed to continue in the program until the incompletes are removed. Students must apply for an "on-leave" status until the incompletes are removed.

SECTION III

DEPARTMENT of SPECIAL EDUCATION/ CLINICAL SCIENCES STUDENT FUNDING GUIDELINES (SPECS)

The Department of Special Education and Clinical Sciences (SPECS) within the College of Education offers a number of opportunities for students seeking funding support. This handout identifies and explains the different ways student funding support is offered, and the process that a student should follow to procure funding.

GRADUATE EMPLOYEES (GE)

The Department of Special Education and Clinical Sciences offers funding for our graduate students in the form of graduate teaching fellowships (GEs, formerly known as GTFs) up to .49 FTE (full-time equivalent). These awards are based on merit and not financial need. Each carries a tuition waiver (except incidental fees). In addition to the non-instructional fees, new graduate students will be charged a one-time matriculation fee during their first term of enrollment. There is a monthly salary based on the appointment FTE and education qualifications (degree held) of the student.

Appointments are made for a minimum of .20 FTE and a maximum of .49 FTE, and may be for the full academic year or on a term-by-term basis. Workloads for GEs shall be prorated on the percentage basis of FTE. For example, a .20 FTE shall be assigned employment responsibilities that do not exceed a maximum of 88 hours of work per quarter, and proportionately for appointments at other FTEs as follows:

- .20 FTE 88 hours per quarter/8 hours per week
- .30 FTE 131 hours per quarter/12 hours per week
- .40 FTE 175 hours per quarter/16 hours per week
- .49 FTE 215 hours per quarter/19 hours per week

New students can apply for these awards of financial assistance by completing the GE award application found at <https://education.uoregon.edu/sas>; a listing of available GE positions can be found at this same website. Health insurance is provided during the academic year (for more information on health insurance, contact the Graduate Teaching Fellows Federation at gtff@gtff.net or 541-344-0832).

Reappointments are not automatic, nor are they guaranteed. In order to be reappointed, GEs must make satisfactory progress toward their graduate degree and receive a satisfactory job performance evaluation.

GEs are eligible to receive a summer sandwich tuition waiver (which carries the same salary and tuition waiver as an academic year appointment) if: a) they held a GE appointment for at least 2 terms during the academic year and will be appointed for the following fall, or b) they held a spring term appointment during the current academic year and will be appointed for all three terms the following academic year.

TRAINING/RESEARCH GRANT SUPPORT

Training or research funding support may be available for students with Ph.D. or Master's level academic standing. These appointments are funded through training and research grants awarded to the university by federal agencies and private sources for support of the basic training and research programs in the Department of Special Education and Clinical Sciences. Selection for these positions is based on a student's interest in a particular training or research area, and occurs by mutual agreement of the student and the faculty member directing the work. Students seeking training or research grant-funded support should contact the faculty member directing a funded project. Research conducted under these appointments is used to satisfy advanced degree requirements.

Funding may include: a) quarterly tuition waiver, b) monthly (9 or 12-month) stipend payment, and c) health insurance coverage. Students must maintain satisfactory progress in their course of study to continue receiving federally-funded financial support.

Students who receive financial assistance (tuition/stipend) from a personnel preparation grant awarded by the Individuals with Disabilities Education Act (IDEA) have additional obligations. Students must agree to a service obligation by working in the field of special education, related services or early intervention after program completion for a specified period of time as repayment. If the student fails to meet their obligation through work, they must reimburse the federal government for the amount of support they received (or whatever share they have not paid back through work) plus interest and collection fees that the federal government may levy. Students sign a legal and binding Service Obligation Agreement before receiving financial assistance and an Exit Agreement before leaving the UO.

COLLEGE OF EDUCATION STUDENT SCHOLARSHIPS AND RESEARCH AWARDS

The College of Education awards scholarships and research awards ranging from \$1,000 - \$5,000 to COE students to support their studies. In some cases, these scholarships may provide awards to multiple recipients. The scholarship application, checklist, and research award list are available in the Office of the Dean and online <https://education.uoregon.edu/prospective-students/scholarships> in the fall of each year for the next academic year. Applications are generally due in February; selections are made by mid-May. General scholarships awards are awarded once a year and research awards are awarded twice a year. Check COE website for deadlines.

STUDENT EMPLOYMENT

Student employees are students first and foremost and, in recognition of this, are limited to a total of half-time employment at the UO each month. This limit includes all student employment positions held simultaneously. During term breaks and one term each year, students on leave from school may be employed full-time. Summer term is considered a term. Students may have a GE appointment and also work as a student employee. These students are limited to .49 FTE employment counting both GE and student employment hours, and may lose their GE appointment if they exceed this limit. There are five levels of

student employment recognizing various skill levels required to perform student jobs. Each program advertises for and hires its own student employees, <http://hr.uoregon.edu/recruit/student-employment>.

COLLEGE WORK STUDY PROGRAM, LOANS AND GRANTS

The College Work Study Program (under federal funding for students from low-income families) provides an alternative means of financial assistance. For work study certification and to apply for loans or grants, a separate request for forms should be made to the Office of Student Financial Aid, 1278 University of Oregon, Eugene, OR 97403-1278, <http://financialaid.uoregon.edu/>.

FUNDING FOR SUMMER TERM/SUMMER SANDWICH TUITION

There is no guarantee of summer support. Students who require summer support need to contact academic program directors and/or research Principal Investigators during fall term to make arrangements for the following summer. GEs who qualify for the summer sandwich tuition waiver must complete the Request for Summer Sandwich Tuition Waiver form by the last day of the fall term following the summer enrollment. This form can be found on the Graduate School web page or you can contact the Business Manager of your program for assistance, <http://gradschool.uoregon.edu/GE/summer-sandwich>.

STUDENT STIPENDS

A stipend recipient is usually not restricted by the funding agency or the university from supplementing a stipend award through employment; however, the College of Education policy is that employment associated with the university should not exceed a .49 FTE level.

Two types of university student employment exist. The first is university hourly student employment. Assigned tasks can range from clerical support to computer programming. Wage rates and hours claimed must conform to established audit standards. The second kind of employment is defined by graduate teaching fellowship standards. GE tasks are to be closely related professional-level academic duties such as teaching or conducting research. To see the maximum allowable stipend, please contact the Graduate School 541-346-5129

Anticipated GE Salaries: <https://gradschool.uoregon.edu/funding/ge/salary-benefits>

Please check above link for current GE salary figures.

ATTENTION: Graduate Students Receiving Financial Aid

Federal regulations require students to notify the Financial Aid Office (1-800-760-6953 or 541-346-3221) as soon they know that they will receive any educational

resources so that necessary revisions to their financial aid package can be made. Such resources include a GE position, fellowship, scholarship, or any other type of monetary award. Because receiving additional financial resources may reduce your financial aid award, you should contact the Financial Aid Office prior to applying for a GE position or other type of support.

SECTION IV

Appendix

Appendix A: Student Advising Form



STUDENT ADVISING FORM

STUDENT _____

DATE PLAN INITIATED _____

ADVISOR _____

Type of support:

- Academic Accommodations
- Program Extension
- Plan of Support

I. Academic Accommodations:

*List Accommodations and Date AEC initiated accommodations. Note any instructions/requests to faculty. **Note: It is the student's responsibility for letting individual faculty know of accommodations via the AEC Office's standard procedures and via a meeting with the course instructor.***

II. Program Extension

Describe Program Extension by term and include anticipated graduation date. Note any conditions or exceptions.

Term	Courses/Practicum	Comments

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Anticipated Graduation Date _____

III. Plan of Support

Activity	Who Responsible	Implementation Dates

Anticipated Date for Removal of Plan _____

Signatures:

I have read, understand and agree with the actions outlined on this Advising Plan:

Student

Date

Academic/Clinical Advisor

Date

For Removal of Support Plan:

I have been notified that my support plan is no longer active.

Student

Date

Academic/Clinical Advisor

Date