

University of North Texas
Department of Audiology and Speech-
Language Pathology

Audiology (AuD) Clinical
Practicum
Student Handbook

August 2026

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Clinical Practicum Guidelines and Policies

Introduction

The University of North Texas Department of Audiology and Speech-Language Pathology offers undergraduate and graduate programs in audiology and speech-language pathology. Curriculum for these degrees includes required clinical practicum. These practicum, together with academic coursework, are designed to develop students' professional knowledge and skills by involving them in clinical service delivery to clients, under the guidance and direction of licensed, certified professionals who serve as practicum supervisors. At the graduate level, clinical practicum will enable the student to obtain the necessary supervised clinical clock hours required for certification by the American Speech-Language and Hearing Association (ASHA). Students will enroll in clinical practicum during the final two semesters of undergraduate studies and during the entire program of graduate studies. Graduate students must satisfactorily complete the clinical practicum requirements in order to complete the degree requirements.

Students complete the required clinical practicum at the University of North Texas Speech and Hearing Center, as well as through assignments to approved, off-campus practicum sites. The Off-campus Clinical Coordinators of the Speech and Hearing Center will organize assignments to clinical practicum. Students will be given the opportunity to request specific practicum experiences consistent with their professional interests; however, assignments may differ from requests due to availability of a practicum setting and/or the student's readiness for the setting.

The purpose of this handbook is to orient the student to the clinical practicum experience and to provide the student with an understanding of the requirements for the clinical practicum. Students will find that the information contained within the handbook provides important information about the University of North Texas Speech and Hearing Center, as well as information about off-campus practicum placements.

ASHA Code of Ethics

The UNT Speech and Hearing Center is committed to adherence to the American Speech-Language-Hearing Association's (ASHA) Code of Ethics in all its service delivery and student training practice policies and procedures. See below for preamble to ASHA Code of Ethics and web links.

The ASHA Code of Ethics reflects what we value as professionals and establishes expectations for our scientific and clinical practice based on principles of duty, accountability, fairness, and responsibility. The ASHA Code of Ethics is intended to ensure the welfare of the consumer and to protect the reputation and integrity of the professions. The ASHA Code of Ethics is a framework and focused guide for professionals in support of day-to-day decision-making related to professional conduct. The Code is partly obligatory and disciplinary, and partly aspirational and descriptive in that it defines the professional's role. The Code educates professionals in the discipline, as well as students, other professionals, and the public, regarding ethical principles and standards that direct professional conduct.

The preservation of the highest standards of integrity and ethical principles is vital to the responsible discharge of obligations by audiologists, speech-language pathologists, and speech, language, and hearing scientists who serve as clinicians, educators, mentors, researchers, supervisors, and administrators. This Code of Ethics sets forth the fundamental principles and rules considered essential to this purpose and is applicable to the following individuals:

- A member of the American Speech-Language-Hearing Association holding the Certificate of Clinical Competence (CCC)
- A member of the Association not holding the Certificate of Clinical Competence (CCC)
- A nonmember of the Association holding the Certificate of Clinical Competence (CCC)
- An applicant for certification or for membership and certification

The fundamentals of ethical conduct are described by Principles of Ethics and by Rules of Ethics. The four Principles of Ethics form the underlying philosophical basis for the Code of Ethics and are reflected in the following areas: (I) responsibility to persons served professionally and to research participants, both human and animal; (II) responsibility for one's professional competence; (III) responsibility to the public; and (IV) responsibility for professional relationships. Individuals shall honor and abide by these Principles as affirmative obligations under all conditions of applicable professional activity. Rules of Ethics are specific statements of minimally acceptable as well as unacceptable professional conduct.

The Code is designed to provide guidance to members, applicants, and certified individuals as they make professional decisions. Because the Code is not intended to address specific situations and is not inclusive of all possible ethical dilemmas, professionals are expected to follow the written provisions and to uphold the spirit and purpose of the Code. Adherence to the Code of Ethics and its enforcement results in respect for the professions and positive outcomes for individuals who benefit from the work of audiologists, speech-language pathologist, and speech, language, and hearing scientists (ASHA, 2016).

For a complete version of the ASHA Code of Ethics, go to: <http://www.asha.org/Code-of-Ethics/>

The mailing address for self-reporting in writing is:

American Speech-Language-Hearing Association, Standards and Ethics
2200 Research Blvd., #313
Rockville, MD 20850

Reference for this material was taken directly from the ASHA website:

<https://www.asha.org/Code-of-Ethics/>

American Speech-Language-Hearing Association. (2016). Code of Ethics [Ethics]. Available from www.asha.org/policy/ .

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State of Texas Code of Ethics

All students and clinical supervisors also adhere to the Texas Code of ethics, which is similar to the ASHA Code of Ethics. For more information, see the link below.

Texas Code of Ethics

111.115. Standards of Ethical Practice (Code of Ethics). (New section adopted effective October 1, 2016, 41 TexReg 4441) <https://www.tdlr.texas.gov/slpa/slparules.htm#subp>

Texas Department of Licensing and Regulations for Speech-Language Pathologists and Audiologists: <https://www.tdlr.texas.gov/slpa/slpa.htm>

About the UNT Speech and Hearing Center

The mission of the UNT Speech and Hearing Center is to serve individuals with speech, language, hearing, and related disorders by providing excellent diagnostic and treatment services, and to provide excellence in clinical education for students in the Department of Audiology and Speech-Language Pathology. The Center operates as a state-of-the-art speech and hearing center, providing speech-language pathology and audiology services to adults and children. All services are provided under the direction of licensed audiologists and speech-language pathologists who are accountable for the outcomes of assessment and treatment and the satisfaction of the client. These speech-language pathologists and audiologists also assume the role of clinical supervisors for the student clinicians enrolled in practicum. Practicum students work directly with clinical supervisors in service delivery to clients. Thus, the UNT Speech and Hearing Center fulfills a dual mission; providing excellent service delivery to clients and excellent clinical education to students.

The UNT Speech and Hearing Center provides many services to clients, including:

- Full audiological assessment
- Hearing aid evaluations
- Dispensing of hearing aids
- Musician's ear plugs
- Specialized audiological assessments including auditory brainstem response (ABR), electronystagmogram (ENG), and videonystagmography (VNG)
- Educational audiology services
- Aural rehabilitation
- Speech and language assessments
- Treatment of speech, language, voice and fluency disorders
- Preschool language therapy program
- Treatment for language-learning disorders
- Program for adult neurogenic disorders including stroke and traumatic brain injury (TBI)
- Specialized voice evaluation including video endoscopy
- Augmentative/alternative communication services.

Students are assigned to different clinical practicum experiences within the Center, providing varied experiences to develop professional knowledge and skills across the scope of practice of the profession.

Clients come to the UNT Speech and Hearing Center to receive excellent clinical services for speech/language/hearing and related disorders. They are seeking the help of professionals who are not only committed to helping them, but are committed to educating students as well.

Responsibility of Clinical Supervisors

The clinical supervisors of the Center are professionals committed to providing excellent clinical service delivery to clients of the Center and excellent clinical instruction to students within the Department of Audiology and Speech-Language Pathology. Clinical supervisors help students develop clinical competence by encouraging the application of academic theory and knowledge within the clinical setting, guiding and instructing the student in clinical methods, and assisting the student in understanding clinical operations and decision-making. Clinical supervision within the Center adheres to the guidelines provided by ASHA. Supervisors assume roles and responsibilities outlined by ASHA, strive to develop skills and competencies recommended for supervisors by ASHA, and follow the ASHA ethical guidelines for clinical supervision of students. In accordance with ASHA guidelines, supervisors provide direct supervision during at least 50% of diagnostic sessions provided by student clinicians. For students in the early phases of practicum, supervision often well exceeds these minimum requirements.

Clinical supervisors within the Center utilize an apprenticeship model of supervision. This supervisory model involves ongoing collaboration between the supervisor and the student in training, such that excellent service delivery is provided to the client and the student has the opportunity to develop their clinical skills in a supportive environment, rich with instruction and modeling. The goal of the apprenticeship model is to develop self-discovery and self-evaluation skills of the student.

The following are key features of the apprenticeship model of clinical supervision:

- The student and supervisor work together to provide excellent clinical services to clients.
- The supervisor serves as an instructor and guide, providing modeling, direction, and consistent feedback to the student.
- The student assumes responsibility and personal accountability for learning.
- Sound communication between the student and supervisor is essential for learning.
- The role of the supervisor is to teach specific clinical skills, as well as to develop the student's ability to make appropriate clinical decisions.
- The supervisor provides various amounts of support to the student in the form of explanation, direction, modeling, questioning, and feedback to the student.
- The amount of support provided to the student by the supervisor varies depending on the complexity of the situation, the student's familiarity and experience with the information, and unique circumstances of the clinical situation.
- Maximal support is usually provided to students in the initial phase of practicum, with the expectation that the student will gain independence through instruction and experience; however, supervisors and students will find that various situations may influence the amount of support required.
- Evaluation of the student clinician is based on the amount of support required with the expectation that the student gains independence as the practicum experience progresses.
- Students work to become independently capable of providing excellent clinical service delivery, utilizing the knowledge and experience of supervisors to help them develop and refine their clinical skills.

The outcome of the apprenticeship model of supervision is excellent service delivery to clients and continued growth and independence in clinical knowledge and skills of the student.

The Role of the Student Clinician

Students enrolled in clinical practicum are expected to embrace the desire to provide excellent services to clients and assume personal responsibility and accountability for learning. Students must respect the responsibility of the supervisor to hold paramount the needs of the client while providing opportunity and support to the student during the acquisition of clinical knowledge and skills. This requires students to understand that the supervisor must make decisions regarding how much independence to allow the student based on the student's readiness to provide excellent clinical services. Therefore, students who demonstrate a clear understanding of the clinical situation, the ability to apply the necessary knowledge and skills, and ongoing self-evaluation and refinement of methods will have the most independence in the practicum experience. Students who are unable to assess the clinical situation, do not demonstrate necessary knowledge and skills and are unable to independently evaluate, refine and improve their methods will receive the greatest input and guidance from the clinical supervisors. Ultimately, the goal of the clinical practicum is for students to be able to provide quality clinical services with minimal guidance and direction from supervisors, consistent with expectations for entry-level professionals.

Policy on Student Criminal Background Checks

All students entering the graduate program in Audiology will be required to undergo a criminal background check through UNT's Risk Management Department. This will be paid for by the department of ASLP. Any student with a record involving crimes against children will be banned from enrolling in the 6010, 6020, 6060, or 6090 Clinical Practicum courses.

Policy on Student Vaccinations

All students entering Texas communication disorders graduate programs, including UNT, are required to have specific vaccinations (per Texas public health guidelines)
Texas Administrative Code – Rule 97.64.

[Texas Administrative Code, Subchapter B, Section 97.64 - Required Vaccinations for Students Enrolled in Health-Related and Veterinary Courses in Institutions of Higher Education | Texas Administrative Code | Justia](#)

If vaccinations are declined for religious or personal reasons, a student must apply for a conscientious exemption (see link below), and inform the graduate coordinator and clinic director immediately upon entry into the graduate program. A student exempt from vaccinations may not be eligible for certain offsite clinical placements.

Affidavit application link from the Texas Government for a Conscientious Exemption:

<https://corequest.dshs.texas.gov/>

Research/Evidence-Based Practice

The Department of Audiology and Speech-Language Pathology and the UNT Speech and Hearing Center is committed to expanding scholarly knowledge of the professions, and using that knowledge in the evaluation and treatment of communication disorders. Research and clinical practice are interdependent. Evidence-based practice is the use of current, best evidence (obtained through research and scholarly study), clinical expertise (obtained through experience in assessment and treatment of communication disorders), and client/patient values (ASHA, 2005). Evidence-based practice is the cornerstone of all service delivery at the UNT Speech and Hearing Center.

As a result, students' clinical experiences should include:

- Application/integration of research evidence presented in coursework
- Opportunity to use evidence as a guide in clinical decision-making
- Opportunity to present research to clients/family members to help them make informed decisions about care
- Opportunity to identify potential research questions

Students participating in clinical practicum are encouraged to take advantage of opportunities for research/scholarly work related to clinical practice.

Examples of these may include:

- Writing a case study for a professional presentation/publication
- Studying the outcome or effectiveness of a clinical intervention
- Implementing clinical protocols based on emerging research
- Evaluating economic/sociological factors related to clinical service delivery, such as cost-benefit ratios for interventions, or patient satisfaction

Competency-Based Evaluation

Students' performance in clinical practicum is evaluated through a competency-based assessment process. For each semester of clinical practicum, specific competency levels are designated. These competencies are provided to students at the beginning of each semester. The competencies outline specific clinical skills that students must achieve with designated levels of supervisory assistance. Competencies are sequenced with skills increasing in complexity and degree of independence required as the student progresses through the program. For example, competencies for first-semester students focus on lower-level clinical skills with significant guidance and direction from the supervisor. Competencies in later semesters will include more advanced skills and will require the student to function more independently.

Successful completion of clinical practicum requires the student to earn a letter grade of B or better. A letter grade of B requires a student to satisfactorily achieve the competencies defined and outlined in each semester's clinical syllabus, which is provided at the beginning of each semester. Students are responsible for reviewing the competencies in the syllabus and for working collaboratively with the clinical supervisor to develop the skills. By the end of the semester, students must be demonstrating a skill in a stable, consistent manner (the student can complete the skill **most** of the time, except in atypical or difficult situations). Demonstrating a skill one time does not indicate competency.

Throughout the semester, the clinical supervisor will give provide the student feedback about clinical competency through weekly meetings, written feedback, and corrections to reports/ clinical documentation. Supervisors will schedule mid-term meetings with each student to discuss overall progress in obtaining competencies as well as areas that require specific attention. Students who receive a rating of "unsatisfactory progress" will be required to work with the supervisor to identify specific learning needs to meet competency expectations.

Success in clinical practicum is achieved by acquiring specific clinical competencies in the instructional clinic and by demonstrating application of knowledge and skills during actual service delivery to clients.

Individualized Action Plans

Clinical service delivery can be challenging, even for experienced clinicians. For students working to acquire professional knowledge, understand the complexities of clinical service delivery, and develop beginning clinical skills, it may be overwhelming. To support students and encourage success in the clinical practicum, supervisors will often formulate additional instructional activities for students. These activities are designed to provide the student with a better knowledge base, more direct instruction or modeling, more detailed explanation, or just more opportunity to practice a skill for refinement.

Examples of instructional activities include:

- Reading assignments from textbooks or journal articles
- More frequent individualized meetings with the clinical supervisor
- Direct explanation or demonstration of a skill or activity
- A specific assignment by the supervisor for the student to practice a skill
- A skill check-off by the clinical supervisor.

It is important that when supervisors suggest or assign instructional activities, students take responsibility for completing the work. It is also important that students and supervisors communicate clearly about the exact expectation for the student. For example, if the supervisor says, “I would like you to practice giving this test,” the student will probably understand that the supervisor means go through the test and practice administration as if you were giving it. If, however, the supervisor says, “You need to look over the test before tomorrow,” what exactly is the student expected to do? In this case, the student may want to verify exactly what the supervisor would like the student to be prepared to do. Students should also be open and honest about time constraints they may have as supervisors may be able to assist them in prioritizing the many demands of clinical work.

Supervisors often get frustrated when remedial work is assigned and the student does not complete the assignment. This is often interpreted by the supervisor as lack of interest or desire to learn by the student.

Suggestions to Students for a Successful Clinical Practicum Experience

It's not what you know, it's what you learn!

Supervisors don't expect students to know everything; in fact, they generally understand that students may know very little initially. Supervisors do expect to see students learn. Students can facilitate the learning process by following these suggestions.

Be prepared: Take the time to review the clients' records and plan what you will do in a clinical session or appointment. Prepare equipment and materials in advance. Arrive on time, prepared to inform your supervisor how you intend to manage that appointment.

Ask specific questions: Analyze what you are not clear about and formulate specific questions for the supervisor. Telling the supervisor "I don't know what to do," or "I'm lost," will prompt them to begin questioning you, which can sometimes make you feel put on the spot.

Self-evaluate: Develop the habit of assessing what went well and what did not. This will help you identify where you need to focus your learning and what assistance you need from the supervisor.

Seek guidance when needed: Make certain your supervisor is aware of things you are unsure about. Don't pretend to know something or try to cover-up uncertainties. Explain to the supervisor what you think you should do and then listen for confirmation or additional suggestions.

Be sure you know exactly what is expected: If you are uncertain what the supervisor wants you to do, ask for clarification or further explanation. If you are still unclear, ask for reading material or demonstration.

Be open to feedback: Your supervisor needs to tell you honestly what went well and not so well. Getting defensive or overly emotional can make this difficult and create a communication barrier that prevents optimal learning.

Take initiative and responsibility: Show interest, curiosity, and a desire to learn. Seek out extra learning opportunities. Be willing to do what it takes to learn.

Show respect: Demonstrate care and concern for the client and recognition of the efforts of the supervisor. Recognize that the supervisor must maintain a difficult balance of providing excellent care to the client and optimal learning for the student.

Set realistic expectations: Don't expect perfection from yourself. If you make a mistake, learn from it and move forward.

Be accountable: To yourself, to your client, and to your supervisor. Take responsibility for being prompt, well prepared, and ready to work in the best interest of the client.

Be flexible: Be willing to do whatever it takes to serve the client, to learn, and to be the best you can be.

Off-campus Practicum Placement

Students will be placed in off-campus practicum assignments as part of their overall clinical practicum experience. These off-campus assignments generally occur in the second and third year of the Au.D. program. The fourth year of the Au.D. Program is composed of intensive off-campus externship experiences. The students will be placed in off-campus practicum experiences that prepare them for entry-level practice in the professions.

All off-campus practicum are arranged by the Off-campus Clinical Coordinators of the UNT Speech and Hearing Center or by Clinical Supervisors of the Center. Professionals working in the off-campus practicum sites serve as clinical supervisors for the students placed at the site. Off-campus supervisors are provided evaluation criteria by UNT to assess the student's performance in the off-campus practicum. Communication between the off-campus supervisor and UNT faculty is maintained to assure that supervision is consistent with UNT practices.

Off-campus practicum provides the student with opportunities to experience clinical service delivery models and client populations that often differ from those present in the UNT Speech and Hearing Center. For example, students may be placed in hospital settings, schools, physician offices or private practices. Off-campus practicum serves as a means of developing students' clinical skills across the broad scope of practice of the profession of audiology, thereby preparing the student for professional practice.

Off-campus practicum provides new challenges and learning opportunities for the student. Students may observe differences between practicum experiences at the UNT Speech and Hearing Center and the off-campus setting.

These differences may include:

- A faster pace of work with less time for supervisory meetings and consultation
- Different methods of service delivery such as streamlined assessment protocols or more indirect service delivery
- Multidisciplinary service delivery models that require extensive coordination with other professionals such as teachers, physicians, physical therapists, deaf educators and others involved in treatment of the client
- Different methods of documentation such as Individualized Education Plans (IEPs), Integrated Family Service Plans (IFSPs), Medicare documentation, or computerized formats
- Workload management practices such as utilizing assistants, prioritizing tasks, and managing productivity
- Working within the guidelines of eligibility criteria or reimbursement demands

Because these factors require additional learning by the student, it is important that the student demonstrate a readiness to apply previously-learned clinical skills acquired within the UNT

Speech and Hearing Center within the context of new demands offered in the off-campus practicum setting. In other words, students must show a level of proficiency in their clinical skills during their practicum within the UNT Speech and Hearing Center that suggests they will be successful with the new demands presented in the off-campus setting.

UNT faculty will determine a student's readiness for placement in off-campus practicum by evaluating the following prior to their placement:

- Understanding of theoretical components of clinical service delivery as demonstrated in coursework and practicum
- Basic clinical assessment skills such as obtaining a case history, determining an assessment plan, completing assessment activities according to standards and practice guidelines, interpreting results, and sharing results with clients and family members
- Basic clinical intervention skills such as determining baseline performance, writing measurable goals, evaluating the outcome of intervention, and modifying goals when indicated
- Professional communication skills as demonstrated by the ability to document clinical service delivery in a clear, concise, and accurate manner and the ability to discuss issues related to clinical service delivery in an organized and coherent manner appropriate to the audience.
- Professional and interpersonal skills to engage positively in the supervisory process under potentially stressful and demanding situations
- Ability to self-evaluate performance, seek assistance when indicated, and modify behavior based on feedback and experience.

Students should recognize that throughout their coursework and clinical practicum experiences within the UNT Speech and Hearing Center, faculty and supervisors will be evaluating each student's readiness for off-campus practicum. Students will be provided the opportunity for remediation if their level of performance does not indicate readiness for placement. Students will not be placed in off-campus practicum when their level of performance in coursework or clinical assignments suggests a significant likelihood of failure in the off-campus placement. Students should be aware that their placements are carefully made with consideration of skill level and need for well-rounded experiences over the course of the program; placement requests may be considered but are not a guarantee of your placement. The placements, once assigned by the supervisor for the semester, are final.

Grading for Clinic

Students will receive continued feedback about their performance in clinic through both formal and informal feedback, competency forms, and mid-term and final evaluations. A mid-term evaluation will be conducted as a means of providing structured, formal feedback from the supervisor to the student. If the supervisor feels that the student's performance during client service delivery is not adequate for the successful completion of the practicum assignment, the supervisor will clearly indicate this concern to the student. At that time, the student and the supervisor will develop precise goals that must be achieved by the student during the remainder of the practicum assignment. The supervisor will usually provide the student with instructional assignments to support the student's learning and facilitate achievement of the goals. Failure of the student to complete the instructional activities or achieve the stated goals may result in a failing grade for the practicum assignment.

Students enrolled in clinical practicum will be provided a course syllabus outlining the objectives of the clinical practicum as well as the competency requirements for the practicum, other course requirements, and grading practices. Students should refer to the syllabus for information regarding grading.

Students who obtain a passing grade for practicum may count the client contact hours toward the supervised clinical clock hour requirements for ASHA certification.

Clinic Practicum Pass/Fail Grading Criteria:

Core Competency Evaluation: The UNT Audiology Core Competencies worksheet is a reference document to guide expectations related to the level of competence over the entire course of clinical practicum, from first year through the third year, prior to the fourth-year externship.

This document is kept throughout the clinical education. A new evaluation form is completed each semester. This is ongoing and longitudinal.

Each competency will be marked by the clinical supervisor with a number that corresponds to the semester in which the student is enrolled (i.e. 1, 2, 3 [First Year], 4, 5, 6 [Second Year], 7, 8 [Third Year]). The number is placed in the percentage box that applies to the student's skill level. Percentages are equivalent to the percentage of time the student can independently achieve the competency with no assistance from the supervisor; they are not equivalent to a grading percentage of any kind. Evaluations occur at midterm and final. The final valuation at the end of the semester will be formally reported as part of the final.

Progressive Portfolio: Self-evaluation of clinical and personal progress is an important factor in clinical education and overall academic success.

As part of the clinical practicum, students will keep a portfolio of their clinical work and experiences, which will be reviewed with the Clinical Director each semester. At the end of each semester, the student will review their portfolio to identify areas of growth achieved and write goals for the next semester. This will serve as the student's self-evaluation, which will be presented to the Clinical Director at the semester exit interview during on-campus program years. This portfolio, at the end of the third year, will have chronicled the educational journey and be a collection of valuable information useful for externship preparation and application.

Exit Interview: Students will be required to have an exit interview with the Clinical Director, which serves as the final exam for each semester. Clinical competencies, portfolio, and goals will be reviewed and discussed. Failure to attend this meeting will result in failure of the clinic semester.

Grading: Semester grades are determined by clinical performance including professionalism (as defined in the Core Competency worksheet), completion and quality of portfolio, and exit interview.

- Competencies (professionalism not included) account for 34% of final semester grade
- Professionalism, as detailed on Core Competency worksheet
 - o *Meets UNT Standard* for all professionalism skills: No letter grade reduction
 - o *Room for Improvement* for ANY professionalism skills: One letter grade reduction

- o *Unacceptable* for ANY professionalism skill: Two letter grade reduction (and failure of course)
- Portfolio accounts for 33% of final semester grade. To receive full credit for the portfolio, students must journal after each clinical block and include documentation of at least one case weekly to demonstrate their work. The final decision of the quality of the portfolio and whether or not full credit is received rests with the Clinical Director.
- Exit Interview is pass/fail and accounts for 33% of final semester grade. Failure to complete the exit interview with the clinical supervisor results in failure of the clinical semester. The final decision of the student's readiness to move on to the next clinical semester rests with the Clinical Director.

Expected Mastery Level to be Achieved per Semester

6010: 1st Semester

Mastery Level Achieved	Points Earned
≥15%	34
11 – 14%	23
≤10%	12

6020: 2nd Semester

Mastery Level Achieved	Points Earned
≥30%	34
20 – 29%	23
<20%	12

6020: 3rd Semester

Mastery Level Achieved	Points Earned
≥40%	34
30 – 39%	23
<30%	12

6060: 4th Semester

Mastery Level Achieved	Points Earned
≥50%	34
40 – 49%	23
<40%	12

6060: 5th Semester

Mastery Level Achieved	Points Earned
≥55%	34
45-54%	23
<45%	12

6060: 6th Semester

Mastery Level Achieved	Points Earned
≥60%	34
50-59%	23
<50%	12

6060: 7th Semester

Mastery Level Achieved	Points Earned
≥65%	34
55-64%	23
<55%	12

6060: 8th Semester

Mastery Level Achieved	Points Earned
≥70%	34
60-69%	23
<60%	12

6090: 9th Semester

Mastery Level Achieved	Points Earned
≥80%	34
70-79%	23
<70%	12

6090: 10th Semester

Mastery Level Achieved	Points Earned
≥90%	34
80 – 89%	23
<80%	12

6090: 11th Semester

Mastery Level Achieved	Points Earned
≥95%	34
85-94%	23
<85%	12

1st Semester 6010 Pass/Fail Guidelines (Clinic Practicum): Graduate Student clinicians must score an average letter grade of B or better across all sections of the UNT Audiology Master Competencies worksheet. If a first semester graduate student clinician fails to score an average of a B (C or lower is NOT a passing grade) or better on the Clinical Competencies final evaluation, they will be assigned a Fail for the first semester of clinic practicum and will be required to repeat 6010 (retake/re-register 6010) in a subsequent semester.

2nd and 3rd Semester 6020 Pass/Fail Guidelines (Clinic Practicum): Graduate Student clinicians must score an average letter grade of B or better across all sections of the UNT Audiology Master Competencies worksheet. If a 2nd or 3rd semester graduate student clinician fails to score an average of a B (C or lower is NOT a passing grade) or better on the Clinical Competencies final evaluation, they will be assigned a Fail for the first semester of clinic practicum and will be required to repeat 6020 (retake/re-register 6020) in a subsequent semester.

4th-8th Semester 6060 Pass/Fail Guidelines (Clinic Practicum): Graduate Student clinicians must score an average letter grade of B or better across all sections of the UNT Audiology Master Competencies worksheet. If a 4th-8th semester graduate student clinician fails to score an average of a B (C or lower is NOT a passing grade) or better on the Clinical Competencies final evaluation, they will be assigned a Fail for the first semester of clinic practicum and will be required to repeat 6060 (retake/re-register 6060) in a subsequent semester.

9th-11th Semester 6090 Pass/Fail Guidelines (Clinic Practicum): Graduate Student clinicians must score an average letter grade of B or better across all sections of the UNT Audiology Master Competencies worksheet. If a 9th-11th semester graduate student clinician fails to score an average of a B (C or lower is NOT a passing grade) or better on the Clinical Competencies final evaluation, they will be assigned a Fail for the first semester of clinic practicum and will be required to repeat 6090 (retake/re-register 6090) in a subsequent semester.

Recording Clinical Clock Hours

Practicum experiences are designed to meet requirements for certification by the American Speech-Language and Hearing Association; therefore, maintaining records and monitoring accumulation of clinical clock hours is an important responsibility of the student and the program. Students should keep a log of all client evaluations, including the client's age, date of service, type of service provided, and clock hours. These should be totaled at the end of the semester and entered in the diagnostics column of the Practicum Hours Summary Form (pg. 82). At the end of the semester, the student will calculate the total number of clock hours and record it on the Practicum Hours Summary Form (pg. 82). Students should complete two identical forms for the semester, one for the student to keep and one to turn into the ASLP department. Each supervisor will verify the student's record of the clock hours by initialing the hours entered on the form. The total clock hours will then be tallied and verified during clinic checkout at the end of the semester. The ASLP Department will maintain a record of the student's clock hours, and a record will also be provided to the student at the end of each semester.

Students are encouraged to monitor their clock hours, throughout their time in the program, to assure that they are obtaining the necessary clock hours for completion of ASHA required hours for certification. Students who have concerns about their clock hours should schedule an appointment with the Clinic Director.

Hours should be counted and calculated as follows:

A. ASHA Countable Time

Clinicians may define countable time to be reported for ASHA certification as any time spent when a student is engaged in a clinical audiology task and is supervised by a professional in audiology.

Expectations and inclusions of these activities include:

- Students may only report time spent in direct contact with clients. This excludes preparation time, report writing, scoring tests or language samples, and writing lesson plans.
- Prevention hours may be reported if the clinician is providing information or participating in activities that are directly related to prevention of communication disorders (e.g. education on noise exposure, alcohol-related birth defects).
- Evaluation hours may be reported for time spent assessing and diagnosing communication disorders, prior to initiation of an intervention program. Hours may also be reported for informal testing, re-evaluation, and non-standardized tests.
- Treatment or evaluation time may be counted for time spent in professional meetings and/or individual education (IEP) meetings only if the family or client is present. This excludes time spent meeting with clinical supervisors.
- Observation hours may only be reported as observation.

- Clinical clock hours with clients who present with more than one diagnosis should distribute the time spent working on each disorder accordingly.
- Hours spent working with pediatric patients can be defined as birth through high school age.

B. Computing Clinic Clock Hours

A clinician should record the exact number of minutes/hours that the clinician is in direct contact with the client during treatment or assessment activities. This can include time spent escorting a client to and from the therapy/assessment rooms, as this is engaging in an interaction. This can also include time spent conferencing with a parent/spouse/caretaker prior to, or after, a treatment/assessment session. Amount of time spent in direct contact with the client or clinical conference should be recorded exactly in terms of minutes/hours. Rounding up to the nearest hour of time increment is not appropriate.

If more than one clinician is co-treating/testing during an appointment, the time spent in the appointment can be counted by two clinicians the amount of direct time that was spent engaged in treatment or assessment activities with the client during an appointment.

Attendance

Attendance for all practicum assignments is critical. Students should recognize that an absence affects not only their learning but also service delivery to the client. An absence should occur only due to illness or an emergency. In the event of illness or an emergency, the student should notify the supervisor, providing as much notice as possible. The student should speak directly with the supervisor and provide information about the appointment or activities the student planned for the session. If the student cannot reach the supervisor, they should leave a voice mail message and email, including a number where the supervisor may contact them.

Students should recognize that supervisors are often in the clinic and are unable to check voice mail for extended periods of time. If they have any concerns that the supervisor may not retrieve the voice mail message prior to the client's appointment, they should contact a staff member of the clinic and request assistance in notifying the supervisor of their absence. Supervisors may choose to assign a student a make-up assignment in the event of absence. Multiple absences during a practicum assignment for any reason will jeopardize the student's grade and successful completion of the practicum.

English Proficiency Policy Statement

The Department of Audiology and Speech-Language Pathology and the Speech and Hearing Center at the University of North Texas (UNT) support the position of the American Speech-Language-Hearing Association in encouraging people of varied backgrounds to enter the field of communication disorders. ASHA states that, “students and professionals in communication sciences and disorders who speak with accents and/or dialects can effectively provide speech, language, and audiological services to persons with communication disorders as long as they have the expected level of knowledge in normal and disordered communication, the expected level of diagnostic and clinical case management skills, and when necessary, the ability to model target phonemes, grammatical features, and other aspects of speech and language that characterize a client’s particular problems” (<https://www.asha.org/policy/TR1998-00154/>).

At UNT, all students in the Department of Audiology and Speech-Language Pathology must possess adequate written and verbal communication skills in Standard American English necessary to meet academic and clinical requirements. In particular, graduate clinical students will be judged on the following skills and abilities in their supervised clinical practicum when applicable to client/patient service delivery and related student-professional interactions. These skills will be judged by licensed and experienced clinical supervisors at the UNT Speech and Hearing Center.

Students must be able to:

- Communicate effectively, sensitively, and efficiently with clients, professors, and colleagues
- Comprehend technical, procedural, and professional materials while demonstrating consistent ability to follow clinically related instructions and supervisory input
- Possess the ability to readily communicate observations and findings, prepare progress notes, correspond, and complete evaluation or treatment reports in a clear, logical and professional manner
- Perceive the speech of clients and accurately judge its quality and specific patterns of usage
- Readily comprehend language expressed in oral, graphic, and gestural forms
- Show acceptable intelligibility to allow for administration of speech, language, or audiological assessment instruments in a reliable and valid manner and to effectively relay all types of clinical information, instructions, and clinical feedback to clients in the treatment setting
- Demonstrate appropriate pragmatic skills, including eye contact and use of appropriate social and professional language and communication in the academic and clinical context
- Modify communication in order to match the context and needs of the listener
- Demonstrate understanding of non-literal, figurative, or ambiguous language
- Demonstrate understanding of indirect and non-verbal communications in the clinical setting

- Speech-language pathology students must be able to model desired voice, fluency, articulation, and oral/nasal resonance, as well as features associated with English grammatical structure (syntax, morphology), semantics, literacy teaching, and other areas consistent with the objectives of a client in the assessment and treatment setting

Non-native speakers of English will work closely with supervisors toward establishing this proficiency, prior to and during enrollment in clinical practicum. Students who speak with accents and/or dialects may seek out OR be asked to obtain assistance in improving English proficiency skills. This can be at the recommendation of the clinical direction, clinical supervisory, and departmental instructional faculty. English proficiency services will be provided at the UNT Speech and Hearing Center at no cost to the student. Other related English proficiency services which are available to UNT students, including UNT's Intensive English Language Institute (<https://international.unt.edu/content/academic-English>), will also be recommended as appropriate.

Progress towards improving English proficiency skills will be formally reviewed each semester at mid and final review points. Continuation in, and modification of, a student's clinical and academic program will be determined by the department chair, clinic director, and other instructional or supervisory personnel. This will be based on different factors, including, but not limited to, the amount of demonstrated improvement and the degree of student's English competency skills as required for effective assessment and intervention implementation in a clinical practicum setting, in and outside of the UNT clinic.

Graduate Student Clinical Performance Reviews and Guidelines or Remediation

All graduate student clinicians in AuD practicum and offsite assignments will be reviewed twice a semester by the clinical supervisory staff. Student clinicians will be reviewed with full consideration towards ASHA and CAA standards, whereby students' clinical performances will be measured in accordance with expectations for the specific academic semester and year of the student's graduate training program. Specific clinical competencies for treatment and diagnostic clinical skills are listed in the UNT AuD Competency worksheets that are based on the specific semester and year of student's graduate training program.

In the event that a graduate student clinician in their first eight semesters of graduate school is not performing up to said standards and expectations by the mid-semester review time, a remediation plan and NOTIFICATION OF CONCERN (NOC) will be specifically tailored toward that students' individual needs and clinical goals (see form below). The remediation plan, including specific clinical performance expectations, will be communicated to the student, likely in a joint meeting involving the clinic director, supervisors for that student, and the graduate student advisor. The graduate student will be asked to approve the remediation plan and the expected clinical performance competencies as outlined on the NOC. The NOC and other supporting documents (if applicable) will be placed in the student's permanent file.

An additional student meeting will be scheduled at or near the end of the academic semester to review student's clinical progress, current performance, and to determine if student is meeting stated expectations as outlined on the NOC. The NOC will be updated accordingly, as will be decisions based on the student's final clinical Pass/Fail grade.

If a student is in their 4th-11th semester of graduate training, or clinical externship semesters, the review process will be guided by the input of the offsite or externship clinical supervisor. In most circumstances, the clinic director will gather all supporting evidence regarding the student performance concerns and then proceed with a meeting that will include the clinic director and graduate student advisor. The student will be presented with a specific contract outlining student performance expectations on multiple parameters of treatment and diagnostic clinical skills and competencies for the remainder of the offsite or externship semester. Standards for meeting clinical performance expectations will be communicated to the student in a contract form in the event that a student is allowed to return to the offsite or externship site for completion. In the event that a student placement is curtailed due to substandard performance, the clinic director and graduate student advisor will devise a remedial clinical plan suited to meet the particular student's clinical deficiencies. If the student is ultimately assigned a failing grade for the offsite or externship assignment and has received a failing clinic grade in a previous clinical practicum semester, they will not be allowed to complete another clinical practicum at UNT.

The clinic director, graduate student advisor, and department head (and not the externship site supervisor) will ultimately decide whether a student's clinical externship performance meets ASHA and CAA clinical standards to warrant a passing grade.

Notification of Concern

The Notification of Concern (NOC) form is used by the UNT Audiology and Speech-Language Pathology (ASLP) Department to alert students and to provide record for the ASLP Department of concerns that may prevent a student from successfully completing the ASLP program. The NOC should be reserved for only those situations that, if not corrected or addressed, would be a significant barrier to success in the Audiology profession. The process involved with the NOC form is focused on helping a student improve skills and to provide a tracking mechanism for identifying and applying action plans designed to alleviate the concerns. In some cases, however, it may also be used to identify students who should seriously consider changing majors. Faculty or staff should complete this form as completely and specifically as possible and should involve the student by reviewing the information and issues of concern as indicated below. A student should sign the NOC before it is saved to the student's permanent file and departmental records.

Student Information					
Student Name:		UNT ID:		Email Address:	
Major:	Audiology and Speech-Language Pathology				
UG or Grad Level:					

General Information					
Date Issued:		Received By:		Date Resolved:	
Course No:		Course Title:		Semester:	
Originator:		Title of Originator:	Supervisor/ Clinic Director	Date Student Responded:	

- **Identify the area of your concern:** Please check all areas that apply and rate your level of concern for each area
- **Low=Alert Status:**
 - ☐ The actions already taken were sufficiently successful in the clinic or academic program.
 - ☐ No action has been taken yet, but this concern should be monitored.
- **Medium= In need of remediation:**
 - ☐ The student needs assistance formulating an action plan and identifying services and resources to help them be successful.
- **High= Serious action needed:**
 - ☐ Extension of the student's academic or clinic program.
 - ☐ The issue may warrant possible removal from the program.

☐ SKILLS	☐ CONTENT KNOWLEDGE	☐ PEDAGOGY or PERFORMANCE	☐ PROFESSIONAL DISPOSITION
May include concerns in: Speaking Writing Reading Listening or other skills	Many include concerns in factual accuracy, conceptual understanding, procedural understanding, theoretical bases, problem solving or other knowledge issues.	May include concerns with client rapport, developing therapeutic goals and training strategies, data collection, behavior management, treatment preparation and implementation, client tracking, clinical confidence, or other clinic performance issues.	May include concerns with attendance, respect, responsibility, initiative, judgement, teamwork, clinic, attire, honesty, emotional coping, meeting deadlines, following procedures, or other professional behaviors.
RATE YOUR LEVEL OF CONCERN IN THIS AREA (see above): ☐ high ☐ medium ☐ low ☐ none of the above	RATE YOUR LEVEL OF CONCERN IN THIS AREA (see above): ☐ high ☐ medium ☐ low ☐ none of the above	RATE YOUR LEVEL OF CONCERN IN THIS AREA (see above): ☐ high ☐ medium ☐ low ☐ none of the above	RATE YOUR LEVEL OF CONCERN IN THIS AREA (see above): ☐ high ☐ medium ☐ low ☐ none of the above

Describe your concern as specifically as possible. Explain what you have already done to assist the student in resolving this concern. (Recommend resources/services, accommodations, discussing the concern, allowing additional opportunities to demonstrate competence, etc.) This information will help the ASLP staff to recommend effective interventions and to avoid repeating strategies that have already proven unsuccessful (include attachment if appropriate).

Action Plan: Identify what needs to be completed and/or demonstrated so that the student may move forward in the ASLP program. Specify the completion date(s). If applicable, identify other faculty/staff who will participate in determining the student's success in resolving this concern.

Staff Signature(s): _____

Student Signature: _____

Discussed with _____ (indicate personnel) on _____ (date).

Statement Concerning Procedures for Making Clinic Assignments

Any student enrolled in ASLP 6060 Clinical Practicum will be required to accept clinical assignments, on and off campus, that are made by the clinic director during a given semester. These assignments may be scheduled at any time between the hours of 7:00AM – 6:00PM Monday through Friday. The assignment of clinical practicum experiences will be based on student training needs, American Speech-Language-Hearing Association (ASHA) requirements, and service demands of the UNT Speech and Hearing Center. Clinical assignments will NOT be made or modified because of student's personal preferences, altered work schedules, academic loads, or individual travel constraints (e.g. lack of transportation, commuting schedules). During a given semester, a student can expect to be assigned up to 2 full-semester assignments (this includes offsite centers and on campus clinic). If more than two clinical assignments are made, the student may refuse to accept them.

Clinic assignments are determined based on the student's need to fulfill the areas included in the 2020 Standards for the Certificate of Clinical Competence in Audiology . Students need to be competent in all of these areas to gain the Certificate of Clinical Competence (CCC) in Audiology. Student's clinical assignments will be based on the ages, cultural distribution, and the areas that have not been fulfilled. For further information on the standards, see the section on the standards for the Certificate of Clinical Competence (CCC) in Audiology.

In the event that a clinical assignment is not acceptable to a student, the student may petition to an ad hoc committee, composed of other students and faculty members, to have the assignment waived or modified. If the petition is denied and the student chooses not to accept the clinical assignment, then the student's clinical grade will be reduced by one letter grade for that semester (e.g. B becomes C). This grade reduction will be implemented for each clinical assignment not accepted. All clinical practicum assignments and any subsequent modifications must be authorized by the clinic director.

Summary Tips for Students

- Keep accurate and thorough records of evaluation and treatment clock hours. Your supervisor will need to review and verify those clock hours at the end of the semester for credit.
- Be sure to divide clock hours into the appropriate categories.
- Some clients may fit into multiple categories. Consult with your clinical supervisor about how to divide the clock hours into the appropriate category.
- Be sure you have the phone number of your supervisor at home, if they provide it, or their UNT email address.
- Contact your supervisor ASAP in the event of illness or emergency that will require absence from an assigned client. Do not assume they have received your message until you have heard back directly from the supervisor.
- If you are unable to reach your UNT supervisor, contact the Center front desk (940-565-2262) and request assistance in notifying the supervisor of your absence.
- Remember that repeated absence for any reason may jeopardize passing the clinic assignment.

UNT Speech and Hearing Center Clinic Procedures and Policies

As student clinicians, you are a member of the clinical team providing services to clients of the UNT Speech and Hearing Center. Part of your clinical learning experience is to gain an understanding of the procedures involved in service delivery to clients. Clients of the Center view students as beginning professionals and expect the same level of professionalism from students that they do from supervisors and staff of the Center. It is important that students understand and follow the procedures of the clinic and maintain professionalism at all times.

Clinic Work Environment

The first-floor area of the Speech and Hearing Center is utilized for the assessment and treatment of clients and operates as a professional work area. The Center employs a full-time secretary and a full-time billing clerk, as well as part-time student workers to support the operations of the Center. These employees manage important aspects of clinical operations such as scheduling clients, managing documentation, billing for clinical services, and ordering clinical supplies and re-sale equipment. Because confidential health information and billing information is stored in the clinic office area, students are restricted from the area behind the reception desk. Employees of the Center are available to assist students in obtaining clinical records and supplies, scheduling clients, and completing billing for clinical services. Students should be mindful of the need to maintain a professional work atmosphere in the clinic work area at all times.

The clinic operates as a fee-for-service provider. This means that most of the clients pay for services received, although some may be seen at a reduced rate or on scholarship according to Center policies. Methods of reimbursement for services include:

- Private pay by the individual receiving services
- Third party reimbursement (insurance companies)
- Scholarships for specific programs or services
- UNT students receive speech services at the Center free of charge and at a reduced rate for most audiology services

Students will have the opportunity to learn important information about billing and reimbursement during their practicum experience at the Center. Students will be responsible for completing billing information after each client contact via CounselEAR. The UNT Speech and Hearing Center billing personal will assist students in learning how to complete billing via CounselEAR. Supervisors will assist students in learning the appropriate CPT (Common Procedural Terminology) code and ICD (International Classification of Disease) codes that are used to bill for services. Documentation of the client contact must support the billing codes selected. Learning to bill accurately for services is an important professional skill and essential for ethical practice. Students should seek input and assistance from the supervisor if they have questions about completing the superbill.

Health Insurance Portability and Accountability Act (HIPAA)

As a health care provider, the University of North Texas (UNT) Speech and Hearing Center in the Department of Audiology and Speech-Language Pathology (ASLP) must comply with the Federal Health Insurance Portability and Accountability Act (HIPAA) regulations. Faculty, staff, and student clinicians of UNT must comply with these regulations.

1. *What is HIPAA?*

HIPAA is the Health Insurance Portability and Accountability Act of 1996 that was designed to protect health insurance coverage for workers and their families when they changed or lost jobs. These are Federal regulations being developed by the Department of Health and Human Services, of which only the first two have been published; the Electronic Data Interchange (EDI) Rule and the Privacy Rule.

2. *How does HIPAA affect me and the UNT Speech and Hearing Center?*

The rules state that any health care provider that maintains or transmits “individually identifiable health information” is subject to HIPAA. It is intended to protect the privacy of individually identifiable health information contained in a patient’s medical record.

Making a reasonable effort to protect our client’s confidentiality is the primary focus of HIPAA as it applies to us.

3. *I understand that I need to adhere to the following guidelines and procedures in order to honor client privacy and HIPAA regulation in the UNT Speech and Hearing Center.*

- Never discuss or reveal any identifying information about a client(s) in public areas inside or outside of the UNT Clinic building and/or ASLP department. Even casual discussion about any of our clients outside of the UNT clinic is prohibited.
- Never leave papers or materials with client name(s) in public places in or outside of the UNT clinic.
- Never take written materials out of the UNT clinic with any type of client information on them: lesson plans, logs, clinical reports may be written outside of the UNT clinic, ONLY if no identifying information is included on them.
- Never take video/audio recordings of clients outside of UNT clinic or ASLP department; if using personal computer/iPhone to tape client, this should be erased immediately after analysis, and must never leave the UNT clinic.
- Storage devices such as flash drives, DVDs, cameras, or others containing client personal information (e.g., clinic reports, photos), should never be taken outside of the UNT clinic or ASLP department.
- When printing clinic-related reports, use only the client’s initials until printing the final draft, which should only be printed inside the UNT clinic.

- All copies of clinic report drafts should be shredded when you are finished with them; the final draft must be printed in the UNT clinic or ASLP department.
- Never save client-related reports on a computer, storage device, or other outside of the UNT clinic. Never take storage device containing client report with identifying information outside of UNT clinic or ASLP department.
- Client permanent files, accessed via CounselEAR, can only be read or utilized inside the UNT clinic on UNT desktops. Client files must never leave the clinic or department under any circumstances.
- Any phone calls pertaining to UNT clinic clients should not be made in public areas in or outside of the UNT clinic.
- All requested client-related files, reports, or other client-related information must be sent via postal mail; faxes are not secure devices.
- Emails pertaining to clients should contain initials only when emailing to or from a source outside of the UNT clinic or department.
- Information about a client can only be sent if there is a current permission for release of information in the client's file.
- When exchanging information about a client, use only the minimum amount of information that is necessary to accomplish the purpose of the disclosure.
- Persons outside of the ASLP major are not allowed in clinical treatment/diagnostic areas, or areas in which client information is available or stored (e.g. student computer lab, library, assessment labs, clinic rooms). ASLP students are not to bring friends, relatives, or others into these areas of the clinic or department without special clearance from the clinic director. Persons outside of the ASLP major are never allowed to observe clinic treatment or diagnostic activities without clearance from the clinic director and special permission from a client or client's guardian, spouse, or parent.

It is understood that exchanging information about clients with faculty and fellow student clinicians is part of your educational and clinical experience at UNT, but it is necessary that you make every effort to respect UNT clients' privacy. Due to the configuration of most university speech and hearing clinic areas, clients in the waiting areas may easily overhear personal and professional conversations. Thus, any discussions about clients or clinical activity that are not directed at a specific client or family member should be conducted in a private area of the UNT clinic or ASLP department. In the event whereby you are unsure if a particular action would potentially be in violation of a client's privacy rights, you are encouraged to err on the side of caution!

HIPPA Agreement Form

I have read the UNT client privacy protection guidelines above and agree to adhere to each procedure as long as I am a student in the Department of ASLP. In the event that I am determined to be out of compliance with any of the HIPAA-related guidelines, my privileges and/or affiliation with the UNT Speech and Hearing Center and/or Department of ASLP may be revoked, or I will be subject to another disciplinary action

Printed Student Name

Date

Student Signature

Client Confidentiality

Clients who receive services at the UNT Speech and Hearing Center have the right to confidentiality. The Health Insurance Portability and Accountability Act (HIPAA) is a federal law that mandates specific requirements all health care providers must follow related to client confidentiality. The UNT Speech and Hearing Center has specific guidelines to comply with HIPAA requirements. It is important that students follow these guidelines at all times.

Notice of Health Information Practices – All clients of the Center receive this information before receiving services at the Center. The notice describes how each client's health information (known as protected health information or PHI) may be used.

The notice describes client's rights regarding their PHI, including:

- The right to confidential services
- The requirement that release of PHI to others not directly involved in the client's care or necessary for reimbursement be authorized by the client before release
- The right to read records related to services received and, if requested by the client, the right to amend those records if deemed appropriate
- The right to request an accounting of all releases of PHI to others

Students should adhere to the following guidelines in order to assure client confidentiality of PHI:

- Do not discuss any information about clients of the Center, including the names of clients receiving services at the Center, with anyone not involved in the care of the client (anyone other than supervisors, faculty, staff, or other professionals involved directly in the client's care).
- Be mindful of discussion with family/caregivers in the clinic waiting area where others are present. If specific or sensitive information needs to be discussed, ask the client or family/caregivers to come back to the treatment area where privacy is possible. Do not conduct case history interviews or engage in extensive counseling in the waiting area.
- Keep all clinical records secure. CounselEAR should never be accessed outside of the UNT Speech and Hearing Center. Clinical files should never leave the UNT Speech and Hearing Center. Do not leave reports, clinical files, or lesson plans out in sight of others. Do not type clinical reports in computer files accessible by others. Do not leave reports on unattended computer screens.
- If client information is to be presented in case studies, classroom learning activities, or class projects, all identifying information (client's name, address, record number, etc.) must be removed. If a videotape of a session is to be shown to others not directly involved in the client's care, written authorization must be received by the client. The authorization must specify who will view the recording and for what purpose the information will be used.

- Client information may be used in research activities only if all identifying information is removed from the data. If identifying information is included, written authorization must be obtained from the client.

Client information can be disclosed/released under the following circumstances **without** written authorization from the client:

- Information released to the client or guardian of the client. The client does not need to sign a release form when they receive the information.
- For purposes of ongoing treatment. For example, consultation with a supervisor or consultant on the case
- For payment purposes, for example, when information is sent to an insurance company for payment
- For organizational needs, for example, if information is reviewed for quality assurance purposes by clinic administration.

Policy on Department Identification Cards and Name Badges

Students must obtain a University of North Texas student identification card and a UNT Speech and Hearing nametag. These nametags should be worn in every practicum setting including the UNT Speech and Hearing Center.

Questions or concerns about nametags and ID cards should be taken to the administrative office in room 260 of the UNT Speech and Hearing Center.

Note: You must be wearing a badge to maintain HIPAA compliance. Students who are not wearing a badge will be unable to engage in clinical activities.

Policy on Department and Clinic Closing Hours

The Audiology and Speech-Language Pathology Department and UNT Speech and Hearing Center is open from 8:00AM to 5:00PM Monday through Friday.

Policy Regarding the Closing of Clinic due to Bad Weather

If **UNT cancels classes**, all clinic activities are automatically CANCELED. If UNT delays the start of classes, the Clinic will start when UNT classes start. You should NEVER put yourself at risk to get to the clinic on these days!

The clinic director will work with front office staff to contact clients scheduled for services on days that UNT classes are cancelled or delayed. The student clinician should **NOT** contact clients in these circumstances.

If there are any modifications to this policy in any given weather-related situation, the clinic director will notify students immediately. If there are any questions regarding the closing of clinic due to weather-related purposes, please contact the clinic director immediately. There may be some exceptions made to this policy, depending on weather-related patterns. Student clinicians are asked to check emails often on days on which local weather cancellations are occurring.

CounselEAR

In the fall of 2018, the UNT Speech and Hearing Center transferred over to electronic documentation and now uses CounselEAR for all client documentation and billing. CounselEAR is an online, cloud-based system specifically designated to make the clinic more efficient and effective. Students will register for CounselEAR at the beginning of the semester.

CounselEAR Student Setup:

- When beginning CounselEAR, you will be sent an email including your username (this will be your UNT email) and a temporary password
- Login to CounselEAR using this information
- Once signed in, click your name in the upper right-hand corner. This will pull up your user profile
- In the box *Password*, type in your desired new password
- In the box below, retype your new password
- Click *save*

General Rules and Guidelines:

- CounselEAR may NOT be accessed outside of the clinic computers for any reason. It is a HIPAA violation.
- There are tutorial videos on CounselEar for additional support
 - Click *Help* on the blue bar and a drop-down menu will appear
 - Under *Support Information* click *Tutorial Videos*
- Do not share your login information
- When using CounselEAR, you must always be logged into your own account. All changes made must be done on your own account.
- CounselEar has a *Chat* function with which you can message the front desk and other clinicians.
 - Ex: Used to inform the front desk if a client or parent has contacted you directly to cancel a session
 - It is not recommended that you use this feature to contact supervisors. Email is the preferred method.
- At the bottom of each patient profile, there is an option to add notes
 - Ex: You call a client for either diagnostic or therapeutic purposes, please write notes based on the call. This will allow supervisors, the front desk, and fellow clinicians to view this information
- Invoices will be filled out electronically on CounselEAR
- Anytime you have an appointment, you must complete the invoice the SAME DAY.
- Attendance will be tracked using the patient visits on CounselEar
- When a client shows up for their appointment, a pop-up will appear on your screen to let you know they have arrived

Client Records/Documentation

Learning to document clinical service delivery is an important professional skill and one that many students find challenging. The ASHA Code of Ethics states that “individuals must maintain accurate records of professional services rendered and products dispensed and shall allow access to these records when appropriately authorized” (American Speech-Language and Hearing Association, Code of Ethics, 2003). Part of your practicum experience will include learning to write evaluation reports, treatment plans, and progress notes in a clear, concise, and professional manner.

When a client receives services at the UNT Speech and Hearing Center, a permanent client record is established that will contain all relevant documentation of services provided to the client on CounselEAR.

It is important that students keep in mind the following important points about the client record:

- Students are not to log in to their CounselEAR account outside of the UNT Speech and Hearing Center desktop computers.
- Records must be kept confidential at all times. Records may not be printed or distributed to individuals not involved in the client’s treatment, reimbursement, or operations of the center without authorization from the client.
- The client record serves as a legal document of all professional services provided. The record may be subpoenaed for legal matters.
- Clients may access their clinical records by requesting in writing to do so.
- Client reports are sent to referring physicians, schools, and other agencies only after obtaining proper Release of Information.
- Client reports must be completed within the Center guidelines and must reflect standards of the Center.

After registering for CounselEAR, students may access the clinical file of a client by searching their name in the patient search bar, clicking on their client’s name, and then clicking on the documents tab. The documents tab includes folders, including: Outside Reports-AUD, Audiograms_Evaluations, and Case History . Students will find that the documents tab contains all relevant documentation of information related to services provided to the client including case history information, evaluation reports, treatment plans and progress notes, and correspondence with other professionals. Students will find that the clinical record contains all relevant documentation of information related to services provided to the client including case history information, evaluation reports, treatment plans, and progress notes, and correspondence with other professionals.

Learning to document services in a professional style is an important skill that often requires considerable effort for students. Similar to clinical skills, students usually require a great deal of guidance and input from supervisors when learning to write clinical reports. Students can easily feel overwhelmed and frustrated by the amount of revisions supervisors request on reports and clinic notes. It is important for students to keep in mind that clinical supervisors have two

important goals when working with students on clinical reports. One is assuring that the report clearly and accurately documents the clinical services provided to the client in a professional manner. The second is helping the student learn the skill of clinical documentation.

Unfortunately, some students do not take full advantage of the learning opportunities provided in the editing and revision process and work only to finish the task.

Students are provided the following suggestions to assist them in learning to document clinical services:

- When reading clinical reports, pay attention to the style and wording of the report. Note how the report conveys factual and interpreted information in a professional style. Take the time to read and study reports written by others.
- Think about the major points which need to be conveyed in the report. Including non-significant or irrelevant detail results in a report that is lengthy and cumbersome to read.
- Take time to proof-read and edit a report. Assess the report for spelling, grammar, clarity and conciseness.
- When receiving a report back from a supervisor with revisions, take time to analyze the revisions and understand why the supervisor made the changes.
- Keep electronic or hard copies of reports complete with revisions to refer to in the future. For confidentiality purposes, remove the client's name and all identifying information. Electronic copies with identifying information may only be saved on a clinic computer; completed reports may not be saved on external drives that may be removed from the Center. All electronic reports must be de-identified before leaving the Center.
- Consult with clinical supervisors regarding ways to improve clinical documentation skills.
- Keep in mind that correct spelling, grammar, and punctuation is expected of college students on all writing assignments.

It is important for students to recognize that clients and other professionals draw conclusions about the capabilities of a professional based on the thoroughness, accuracy, and completeness of their documentation. Each report is an opportunity to build a good professional reputation.

Working Files

Clients who receive ongoing treatment in the Center may have a working file in addition to the permanent client file. A working file serves as a means of tracking ongoing treatment activities and facilitating communication between the student clinician and the supervisor.

Working files may include:

- Treatment plans for individual sessions
- Raw data or summary data about treatment sessions
- Records of practice activities or homework assignments given to clients
- Records of educational information provided to clients and/or family members

Information contained in the working file is summarized into formal progress notes and treatment summaries and then destroyed in a manner that assures confidentiality. Although the working file is not considered a permanent or legal record, it may contain confidential information and should be maintained in a manner consistent with client confidentiality.

The following guidelines apply to the working file:

- The working file should not leave the UNT Speech and Hearing Center.
- Working files should be kept secured in the hearing aid tech workroom. The work area is locked each evening.
- The working file should be turned into the front office staff once all clinical report is completed and approved by the supervisor.

Dress Code

The Speech and Hearing Center provides professional services to clients from across the community. Supervisors and students are expected to maintain a clean, professional appearance at all times during patient care. **Name tags are expected to be worn at all times during patient care.**

Approved Attire:

- Solid-colored scrub tops and matching-colored bottoms, excluding white, are the standard clinic attire for students. Contrasting color piping along the neckline only is permissible.
- Undergarments should not be visible through tops or pants. Scrubs that allow skin to be seen when bending down or over are not appropriate. Undershirts/camisoles may be considered.
- Appropriate footwear includes closed-toe shoes such as athletic footwear or clogs, but excludes flip flops, rain boots and Vibram “barefoot” shoes.
- Non-obtrusive piercings and jewelry that do not interfere with or inhibit performance of clinical or patient services may be worn.
- UNT Speech and/or Audiology approved jackets or pullovers are also acceptable tops that can be worn with scrub pants.

Attire Not Appropriate for Patient Care:

- Tattoos of any sort that portray vulgarity or profanity must be covered by a long-sleeve shirt, if on the arms, or removable bandage, if located on any visible portion of the body. Sleeve tattoos are not permitted in clinic and will be covered by a solid long-sleeve shirt under scrubs. Questions about tattoos should be discussed with the clinical directors. The clinical directors have final discretion regarding visibility of tattoos in their respective clinics.
- Shorts, jeans, T-shirts, midriff shirts, flip flops, leggings, and other “street clothes.”

It is important for students to keep in mind that professional demeanor significantly influences a client’s assessment of the competence of the professional. Right or wrong, professional appearance is a key component of professional demeanor. Individuals who are not compliant with the clinical dress code will be asked by their supervisor to return home to change clothing.

Equipment and Materials

The Department of Audiology and Speech-Language pathology invests significant resources in equipment and materials for the education of students and service delivery to clients. Part of learning clinical service delivery involves learning to use and manage equipment, keeping in mind that treatment space and equipment are generally utilized hour after hour by many students and supervisors. Therefore, equipment must be returned to designated storage areas immediately after use, and treatment spaces must be cleaned and ready for the next client.

Students should utilize the following guidelines for responsibly managing equipment and materials of the Center:

- Learn to operate all equipment safely and according to guidelines. If a student is unsure how to operate equipment, they should seek assistance from the clinical supervisor.
- Follow guidelines regarding maintenance and calibration of equipment.
- Report any equipment malfunctions to the clinical supervisor immediately. It is important that malfunctioning equipment not be utilized in service delivery to clients.
- Return all equipment and materials to designated storage areas. Materials should be sorted and cleaned before returning.
- Notify the clinical supervisor, clinic secretary, or clinic graduate assistants if clinic supplies are low or empty so that they may be reordered promptly.
- Do not leave toys, electrical cords, or materials on the floor where they may be a fall hazard to others.
- Keep in mind safety when choosing materials for use with small children. Do not select materials with small parts that may be a choking hazard to a child under three years of age.

Students and supervisors may make requests for additional materials or equipment to the Center director. Every effort will be made to secure equipment or materials needed for clients.

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Family Centered Care

The UNT Speech and Hearing Center encourages the active involvement of family members and caregivers in the evaluation and treatment process. Family members, particularly parents of children, should be viewed as important partners in the treatment process. Every effort should be made to advance their knowledge and understanding of the assessment and intervention process, assist them in understanding how to facilitate the client's communication, and develop their ability to advocate effectively for the client.

As a means of facilitating the involvement of the family/caregiver, the supervisor and student clinician may:

- Invite the family/caregiver to observe sessions in the observation or treatment area
- Request that the family/caregiver actively participate in the treatment activities
- Model or demonstrate treatment techniques for the family/caregiver and coach them in learning to do the same techniques outside of treatment
- Provide ongoing education to the family/caregiver in a clear and understandable manner
- Elicit feedback from the family/caregiver about the client's communication abilities outside of the treatment setting
- Encourage the family/caregiver to express questions or concerns about the treatment process and respond accordingly
- Conduct formal counseling sessions with the client/family/caregivers
- Provide home programs that the family or caregivers can be involved in

An important part of professional preparation is learning to establish a positive, effective working relationship with the client and the client's family and caregivers. Students sometimes feel challenged to answer questions or provide specific suggestions, particularly when they are struggling to understand a client's status or behaviors. If a client or family expresses concerns or doubts about assessment results or treatment activities, students may feel defensive or unappreciated for their efforts. Sometimes, these feelings prevent clinicians from engaging the family/caregivers actively in treatment. Students should keep in mind that these situations are part of the challenges of professional practice. Effective professionals learn how to encourage input and questions from clients and family/caregivers, respond to concerns or complaints in a helpful, non-defensive manner, and to value the contribution of the client and their family/caregivers in the assessment and treatment process. Students should seek input from clinical supervisors about ways of engaging the client and the family/caregivers in intervention, methods of explaining sometimes complicated clinical information in understandable terms and techniques to encourage input and feedback from the client and family/caregiver.

Infection Control Policy

Infection Control – “The conscious management of the environment or the purposes of minimizing the potential spread of disease” (Bankaitis & Kemp, 2003)

Students and professionals who provide clinical services to clients are required to follow guidelines designed to minimize the risk of exposing themselves and clients to infections. These guidelines are referred to as infection control guidelines. The UNT Speech and Hearing Center follows guidelines consistent with most health care agencies known as Universal Precautions. Universal Precautions outlines methods of minimizing exposure to body substances that may transmit infections to providers and clients of the Center. Although the risk of exposure to harmful infections for audiologists is significantly less than other health care professions (such as nurses and physicians), it is important for the safety of the individual clinician, as well as all clients of the Center, that Universal Precautions are followed at all times.

Students will receive infection control orientation and training during the initial few weeks of clinical practicum. Students are expected to know and follow these guidelines during all practicum work.

- I. Universal Precautions
 - a. Wash hands after each client
 - b. Wear gloves when performing cerumen management
- II. Cleaning and Disinfection
 - a. All cleaning and disinfection should be completed immediately after each client.
 - Small toys with inside spaces should have all surfaces of the toy wiped down with a disinfectant wipe including hinges, nooks and crannies, etc.
 - Large toys with inside spaces should be immersed in cleaning liquids.
 - General surfaces such as tables and chairs should have all surfaces immediately wiped down after each appointment.
 - b. Sterilization must be done when an object is contaminated with any infectious substances such as blood, mucous, or other bodily fluids.
 - c. Objects made completely of plastic (no fabric, batteries, buttons, etc.) can be cleaned in the dishwasher. Place objects inside a mesh bag to prevent them from falling down, use the gentlest cycle, then allow objects to air dry.
 - d. Toys made of metal can be sanitized by using a mixture of bleach and water. Use a tablespoon of bleach diluted in a quart of water and allow the toys to air dry.
 - e. Objects made of fabric can be spot cleaned with a disinfectant wipe.
 - f. Books can be cleaned with a cloth that has been dipped into a 50/50 mixture of distilled white vinegar and water or mild soapy water. Stand the books upwards and separate the pages while they dry.

(Geddes, 2017)

- III. Standard Audiology Room Items
 - a. Each Audiology room should always be stocked with the following items:
 - i. Gloves

- ii. Hand sanitizer
 - iii. Tissue boxes
 - iv. Disinfectant wipes
 - v. Hearing aid/earmold disinfectant wipes
- IV. Locating Cleaning/Infection Control Supplies
 - a. Room 150 Cabinets – Infection control/clean up kit, personal protection kit, blood borne pathogen clean up kit, latex gloves, etc.
 - b. Cleaning Supplies (contact hearing aid techs) Paper towels, hand sanitizer, Windex, Lysol, wipes/disinfectant wipes, tissues, etc.

Observation Area/Video Recording Equipment

Many treatment areas of the UNT Speech and Hearing Center are equipped with observation areas and/or video recording equipment that may be utilized for clinical supervision activities and/or family/caregiver education. Clinical supervisors may observe client appointments from their computer, or they may choose to observe in the treatment room where they can provide direct assistance or modeling to the student clinician. Sometimes supervisors may invite the family/caregiver to observe sessions with them so that they can explain intervention techniques to the family/caregiver while the student clinician works with the client. Supervisors may also request that student clinicians review a recorded treatment session for analysis. Video recording is also utilized for family/caregiver education purposes as well. Computers will be available in the student workroom for students to view recorded sessions. Students are not permitted to download sessions to their personal flash drives to view outside of the clinic.

Safety/Emergency Procedures

Students are expected to adhere to the following guidelines to assure the safety of all clients and co-workers of the Center:

- In the event of a fire, the student should immediately remove any clients from the area and activate an alert to co-workers. Upon hearing a fire alarm, all students and staff will proceed with the fire evacuation plan.
- Space heaters will not be used in any treatment areas.
- Electrical cords should not run across a floor where they could pose a fall hazard to others.
- Materials and toys will not be left on the floor as to cause a fall hazard to others. Age appropriate materials and toys will be used in treatment.
- Children will be supervised at all times, including in the waiting area. If a parent or caregiver is not present at the conclusion of treatment, the student clinician or supervisor should wait with the child or ask a member of the clinic staff to wait.
- Children should only be released to the care of a custodial parent or designated caregiver at the conclusion of treatment. If someone other than a custodial parent or designated caregiver is to pick up the child, the parent should provide notice to the clinician, and the clinician should verify the identity of the person prior to releasing the child.
- All accidents or injuries to staff, student clinicians, clients, or visitors should be reported immediately to the clinical supervisor and Center director.

Incident Reporting Policy

It is the policy of the University of North Texas Speech and Hearing Center to utilize an incident reporting and management system as an integral tool in ensuring the health and welfare of individuals receiving services administered by clinicians of the University of North Texas Speech and Hearing Center. All significant incidents associated with the University of North Texas Speech and Hearing Center personnel, clients, or the public will be documented and reported to the clinical supervisor and a copy forwarded to the clinic director. A significant incident is defined as any incident that is unexpected or has an unexpected outcome. All employees, contract personnel, volunteers, and/or agents of the UNT Speech and Hearing Center will follow the Incident Reporting policy.

Incident Reporting Policy Rationale:

A mechanism for handling reportable incidents must be established to ensure proper management of incidents, determine any potential legal liability, and to enhance the quality of care to our clients by identifying problem areas in an effort to prevent the occurrence of future incidents. It is also done to document threatening incidents to staff so that potential safety hazards can be addressed.

Reportable Incidents:

Any event which is not consistent with the routine operation of the University of North Texas Speech and Hearing Center and that adversely affects or threatens to affect the well-being of the employees, faculty members, clients, students, visitors, or property of the University, regardless of whether an actual injury is involved or not

1. Classification of Injury:
 - a. None: no injury.
 - b. Minor: application of a dressing, ice, cleaning of wound, limb elevation, or topical medication.
 - c. Moderate: suturing, application of steri-strips/skin glue, or splinting.
 - d. Major: surgery, casting, traction, or required consultation for neurological or internal injury.
 - e. Catastrophic: disability or death.

Violent Disturbance Incidents:

Everyone is asked to assist in making the Speech and Hearing Center a safe and peaceful place to carry on business as normally as possible. However, disturbances sometimes do occur, and everyone should be aware of actions to take. For clinic purposes, “violent” disturbances are

defined as any physical or non-physical act that results in threatened or actual harm to a person or property.

It also includes any threatening words or actions whether verbal or non-verbal. Take the following steps if a violent disturbance occurs:

1. Stop the session or appointment; alert the front desk to call for police assistance. For emergencies, immediately dial 911. For non-emergency threats, call the campus police first (940) 565-3000.
2. In the event of a violent disturbance, front desk employees should move other clients in the reception area and other spaces to a secure location. Clients already in therapy rooms should stay in their room and keep the door closed.
3. If the client is being physically violent, a clinician should not try to engage with, or restrain, that client in any way. Do not take any unnecessary chances.
4. Assist the campus police when they arrive by supplying them with all additional information and ask others to do the same.

Reporting Guidelines:

1. The involved person reports all incidents causing injury or property damage, or where there was the potential for such injury or property damage, to appropriate supervisor and/or clinic director immediately.
2. In the event that there is suspected abuse, incidents should be directly reported to Texas Department of Family Protective Services at (940) 387-8544.
3. In the event that the incident warrants contact with a public safety or law enforcement agency, the UNT public safety department should be contacted directly at (940) 565-3000 and/or the Denton Police Department (940) 349-8181 or 911 in the case of an emergency situation.
4. All reportable incidents should be additionally reported by telephone call to the UNT Risk Management Services at (940) 565-2109 and/or UNT Office of Institutional Compliance at (940) 565-4080. In the case of reporting an incident to the UNT Risk Management Services or UNT Office of Institutional Compliance, details of the incident are not required, just a call notifying the office that there was an incident.
5. The Incident Report Form is filled out immediately by the supervisor, employee or faculty member, or anyone else witnessing the incident.

UNT Speech and Hearing Center Suspected Child Abuse Reporting Policy

Suspected Child Abuse Reporting Policy Statement:

The University of North Texas Speech and Hearing Center places the highest emphasis on the safety and well-being of its students, faculty, and staff. The University of North Texas Speech and Hearing Center places the same emphasis on the safety and well-being of its visitors and particularly those visitors who are minors.

Suspected Child Abuse Reporting Policy Rationale:

Minors may visit the University of North Texas Speech and Hearing Center for a number of reasons, including but not limited to visits as a client or visits as someone who is accompanying a client. The protection of minors, especially from physical or sexual abuse, is a core value of the University of North Texas Speech and Hearing Center, and every member of the center has an obligation to comply with the provisions of this policy.

Reportable Incidents:

All students, volunteers, and third-party contractors are required by University of North Texas Speech and Hearing Center policy to report suspected cases of child abuse and/or neglect.

These incidents include the following instances:

1. *Abused Child:* A child is abused when an individual:
 - a) Inflicts, causes to be inflicted, or allows to be inflicted physical injury, by other than accidental means, which causes death, disfigurement, impairment of physical
OR
Emotional health or loss of impairment of any bodily function to such child; or
 - b) Creates a substantial risk of physical injury to the child by other than accidental means which would be likely to cause death, disfigurement, impairment of physical or emotional health, or loss or impairment of any bodily function; or
 - c) Commits or allows to be committed any sex offense upon such child, including all sexual acts, fondling a child, or having the child touch the person in a sexual manner;
or
 - d) Commits or allows to be committed an act or acts of torture upon such child; or
 - e) Inflicts excessive corporal punishment upon such child; or
 - f) Causes an illegal controlled substance to be sold, transferred, distributed, or given to a child
2. *Neglected Child:* A neglected child is any child who is not receiving the proper or necessary nourishment or medically indicated treatment including food or care, or otherwise is not receiving the necessary support, medical or other remedial care, or other care necessary for his or her well-being, including adequate food, clothing, or shelter; or

who is abandoned by his or her parents or other person responsible for the child's welfare. Neglect may also include failure to provide adequate supervision to a child, such as when a child is left unsupervised or left in the care of someone incapable.

Reporting Guidelines:

1. In the event that there is suspected abuse, incidents should be directly reported to Texas Department of Family Protective Services at (940) 387-8544.
2. The Suspected Child Abuse Incident Report Form is filled out immediately by the supervisor, employee or faculty member, or anyone else witnessing the incident and delivered to the front desk of the UNT Speech and Hearing Center or faxed to (940) 369-7701.
3. In the event that the incident warrants contact with a public safety or law enforcement agency, the UNT Police Department should be contacted directly at (940) 565-3000 and/or the Denton Police Department (940) 349-8181 or 911 in the case of an emergency situation.
4. All reportable incidents should be additionally reported by telephone call to the UNT Risk Management Services at (940) 565-2109 and/or UNT Office of Institutional Compliance at (940) 565-4080. In the case of reporting an incident to the UNT Risk Management Services or UNT Office of Institutional Compliance, details of the incident are not required, just a call notifying the office that there was an incident.

Quality Improvement

Like most professional practices, the UNT Speech and Hearing Center maintains a program for quality improvement of services. This program involves ongoing collection and analysis of information and data with the objective of identifying opportunities to improve the quality of services to clients receiving services at the Center, as well as the educational services to students. Because the UNT Speech and Hearing Center has a dual mission of excellent service delivery to clients and excellent clinical education to students, quality improvement activities encompass both missions.

The UNT Speech and Hearing Center Quality Improvement Plan includes the following:

- Collection and analysis of client satisfaction surveys
- Collection and analysis of student satisfaction surveys, including satisfaction with clinical supervisors and satisfaction with the clinical practicum experience
- Auditing of clinical records and billing information
- Peer-review of clinical documentation
- Analysis and review of operational information such as denials for reimbursement, waiting lists for services, and compliance with confidentiality guidelines
- Tracking of feedback or complaints from clients, referral agencies, and other stakeholders
- Tracking the timeliness of documentation

For a quality improvement program to work most effectively, each individual in the organization must take responsibility for identifying and sharing information to improve the quality of services. Professional practice involves an ongoing commitment to improve the quality of services.

As student clinicians, you can contribute to the quality improvement process in the following ways:

- Work to develop a positive working relationship with your supervisor that allows for the sharing of new ideas and identification of ways to improve service delivery to clients, as well the clinical education process.
- Approach problems or obstacles with a process of improvement ideology. If something goes wrong, think about what might make it work better. Instead of blaming others, think of ways a process may be changed to encourage accuracy or quality.
- Identify problems and opportunities for improvement in a positive manner. Don't just complain; think about possible solutions. Don't be afraid to share ideas.
- Be committed to doing whatever it takes to provide the best clinical services to your clients and the best educational environment for yourself.

Important Summary Points

- The UNT Speech and Hearing Center provides professional audiology and speech-language pathology services to the community. Clients often judge the quality of the services they receive based on the professionalism of the students, supervisors, and staff of the Center.
- Students should know and follow guidelines for confidentiality at all times. HIPPA laws that affect the use and disclosure of protected health information (PHI) in the Center are the same as guidelines followed by hospitals, clinics, and private practices.
- The client record is considered a legal document and may be subpoenaed by a court of law. Records should support clinical decision-making and recommendations. Ask yourself if the documentation would allow you, the provider, to explain or defend a clinical decision perhaps a year or two when you may have little recollection of the evaluation or treatment episode. Also, records must support billing.
- Students are expected to follow the dress code of supervisors and staff of the Center at all times.
- Clinical education involves learning to use equipment and materials in a safe, appropriate manner that is considerate of the workflow of the entire Center. Students are responsible for managing the resources of the Center responsibly.
- Clinical research supports that the involvement of family and caregivers in management of communication disorders improves the outcomes for persons with the disorder. Students are expected to learn how to engage the family/caregivers actively in evaluation, treatment and decision-making and to respect the culture of all individuals involved in services.
- Students are expected to maintain a safe environment for clients, co-workers, and themselves. Students must learn and follow all environmental safety guidelines, including infection control, equipment safety, fire safety, and emergency procedures.
- Quality improvement is key to long-term success of any organization. Audiologists and speech-language pathologists must be committed to continually assessing and improving the quality of services they provide. Begin your commitment to quality improvement now. Identify ways of improving the services you provide to clients. When asked for feedback about your clinical education experience, be honest and open while respecting the efforts of others. Work together with other students, supervisors, and faculty provide excellent clinical service delivery to clients of the Center and excellence in clinical education to students of the department.

Preparation for Medical Offsite

Students will be required by the affiliate facility to complete SOME or ALL of the following contract conditions.

MOST places require the following:

- Criminal Background Check
- Liability Insurance – ASHA endorses a plan or student liability insurance coverage that typically covers \$1,000,000 to \$3,000,000.
- Immunizations
 - o Rubella, or immune status
 - o History of chicken pox (varicella) or evidence of immunization
 - o Tuberculosis skin test (must be obtained within one month of internship)
 - o Two measles vaccinations after the age of one
- Hepatitis B Series Shots
- Health Insurance
- CPR Certification
- First Aid
- Blood Born Pathogens (OSHA)
- High Risk Substance Abuse
- Mandatory Reporter Training

Preparation for School Offsite

Many school districts will provide a criminal background check through the school. However, it is important that students check with their school offsite supervisor regarding background check/immunization requirements.

General Offsite Information

Clinical offsite placement requests are submitted to the UNT Clinical Supervisor that organizes the offsite placements. Not all students will receive their first choice of offsite placement. Once offsites are assigned, the student is responsible for contacting their offsite supervisor regarding any forms or certificates needed. The student will also be asked to create a “student profile” including their clinical experiences at UNT that will be sent to the offsite supervisor. Students will receive treatment and diagnostic competency forms that are to be taken to offsite supervisors and brought back to the clinic when the offsite is completed

Student Evaluation of Clinical Offsite

After completing a clinical offsite, students must complete an evaluation of their clinical offsite. This information provides the clinic director with knowledge of the student's overall experience and knowledge gained while at their offsite.

Resources for Students

The American Speech-Language-Hearing Association (ASHA) provides excellent resources for students considering or in the process of pursuing a career as an audiologist or speech-language pathologist. These resources are available at www.asha.org/students. The UNT Department of Audiology and Speech-Language Pathology holds accreditation from the Council of Academic Accreditation for the graduate audiology and speech-language pathology programs. CAA accreditation requires programs to continually evaluate the quality and effectiveness of their graduate education programs. The CAA also provides a procedure for students to register formal complaints. Students may review this procedure at www.asha.org/Academic/accreditation/accredmanual/section8.htm.

Students who wish to file a complaint to the CAA may submit that complaint to:

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



Suspected Child Abuse Incident Report Form

Please complete the following information within 24 hours of an incident involving any suspected child abuse or neglect of a Program Participant. This form should be delivered to the front desk of the UNT Speech and Hearing Center or faxed to (940) 369-7702.

Reporting Party Information:

Name of Reporter: _____ Title: _____

Did reporter witness the incident? (Y/N): _____ Reporter Phone Number: () _____

Reporter Signature: _____ Today's Date: _____

Victim Party Information:

Name of Victim: _____ Birthdate or approx. age: _____

Sex: _____ Victim Phone Number: () _____

Address: _____ State: _____ Zip: _____

Present location of victim: _____ School: _____ Grade: _____

Physically disabled? (Y/N): _____ Developmentally Disabled (Y/N): _____

Type of Abuse (circle one or more): PHYSICAL MENTAL SEXUAL NEGLECT OTHER

(Specify): _____

Relationship to suspect: _____

Incident Information:

Date/Time of Incident: _____ Place of Incident: _____

Narrative description (what victim said/what the mandated reporter observed/what person accompanying the victim said/similar or past incidents involving the victim or suspect):

Clinical Offsite Forms

The following forms will be provided to you by the clinical supervisor responsible for assigning clinical externships:

- Offsite Placement Request Form
- Student Profile Form
- Diagnostic Competency Evaluation Form
- Student Evaluation of Offsite Form

Clinical Orientation Acknowledgement

____I verify that I have read the UNT Speech and Hearing Center Clinic Manual and that I understand the policies/procedures related to clinical practicum in the Center. I agree to abide by the policies and procedures described in the clinic manual. I understand that failure to follow policies/procedures could potentially impact my grade in clinical practicum. Furthermore, I understand that failure to follow policies and procedures that place my clients, my fellow students, or myself at risk for injury may result in suspension from clinical assignments.

____I verify that I have read information regarding patient's protected health information and confidentiality requirements. I agree to abide by the practices described in the manual regarding patient confidentiality.

____I verify that I have read the Safety/Emergency Procedures, and I agree to abide by them at all times.

____I acknowledge receiving information on infection control practices. I agree to follow Universal Precautions, including body substance isolation procedures.

____I acknowledge receiving information on incident reporting policies. I agree to abide by them at all times.

Student Clinician

Date

Notification of Concern

The Notification of Concern (NOC) form is used by the UNT Audiology and Speech-Language Pathology (ASLP) Department to alert students and to provide record for the ASLP Department of concerns that may prevent a student from successfully completing the ASLP program. The NOC should be reserved for only those situations that, if not corrected or addressed, would be a significant barrier to success in the Speech-Language Pathology profession. The process involved with the NOC form is focused on helping a student improve skills and to provide a tracking mechanism for identifying and applying action plans designed to alleviate the concerns. In some cases, however, it may also be used to identify students who should seriously consider changing majors. Faculty or staff should complete this form as completely and specifically as possible and should involve the student by reviewing the information and issues of concern as indicated below. A student should sign the NOC before it is saved to the student CALIPSO system and departmental records.

Student Information					
Student Name:		UNT ID:		Email Address:	
Major:	Audiology and Speech-Language Pathology				
UG or Grad Level:					

General Information					
Date Issued:		Received By:		Date Resolved:	
Course No:		Course Title:		Semester:	
Originator:		Title of Originator:	Supervisor/ Clinic Director	Date Student Responded:	

- **Identify the area of your concern:** Please check all areas that apply and rate your level of concern for each area
- **Low=Alert Status:**
 - a ☐ The actions already taken were sufficiently successful in the clinic or academic program.
 - b ☐ No action has been taken yet, but this concern should be monitored.
- **Medium= In need of remediation:**
 - ☐ The student needs assistance formulating an action plan and identifying services and resources to help them be successful.
- **High= Serious action needed:**
 - a ☐ Extension of the student's academic or clinic program.
 - b ☐ The issue may warrant possible removal from the program.

☐ SKILLS	☐ CONTENT KNOWLEDGE	☐ PEDAGOGY or PERFORMANCE	☐ PROFESSIONAL DISPOSITION
May include concerns in: Speaking Writing Reading Listening or other skills	Many include concerns in factual accuracy, conceptual understanding, procedural understanding, theoretical bases, problem solving or other knowledge issues.	May include concerns with client rapport, developing therapeutic goals and training strategies, data collection, behavior management, treatment preparation and implementation, client tracking, clinical confidence, or other clinic performance issues.	May include concerns with attendance, respect, responsibility, initiative, judgement, teamwork, clinic, attire, honesty, emotional coping, meeting deadlines, following procedures, or other professional behaviors.
RATE YOUR LEVEL OF CONCERN IN THIS AREA (see above): ☐ high ☐ medium ☐ low ☐ none of the above	RATE YOUR LEVEL OF CONCERN IN THIS AREA (see above): ☐ high ☐ medium ☐ low ☐ none of the above	RATE YOUR LEVEL OF CONCERN IN THIS AREA (see above): ☐ high ☐ medium ☐ low ☐ none of the above	RATE YOUR LEVEL OF CONCERN IN THIS AREA (see above): ☐ high ☐ medium ☐ low ☐ none of the above

Describe your concern as specifically as possible. Explain what you have already done to assist the student in resolving this concern. (Recommend resources/services, accommodations, discussing the concern, allowing additional opportunities to demonstrate competence, etc.) This information will help the ASLP staff to recommend effective interventions and to avoid repeating strategies that have already proven unsuccessful (include attachment if appropriate).

Action Plan: Identify what needs to be completed and/or demonstrated so that the student may move forward in the ASLP program. Specify the completion date(s). If applicable, identify other factually/staff who will participate in determining the student's success in resolving this concern.

Staff Signature(s): _____

Student Signature: _____

Discussed with _____ (indicate personnel) on _____ (date).

Health Insurance Portability and Accountability Act (HIPAA)

As a health care provider, the University of North Texas (UNT) Speech and Hearing in the Department of Audiology and Speech-Language Pathology (ASLP) must comply with the Federal Health Insurance Portability and Accountability Act (HIPAA) regulations. Faculty, staff, and student clinicians of UNT must comply with these regulations.

1. *What is HIPAA?*

HIPAA is the Health Insurance Portability and Accountability Act of 1996 that was designed to protect health insurance coverage for workers and their families when they changed or lost jobs. These are Federal regulations being developed by the Department of Health and Human Services, of which only the first two have been published; the Electronic Data Interchange (EDI) Rule and the Privacy Rule.

2. *How does HIPAA affect me and the UNT Speech and Hearing Center?*

The rules state that any health care provider that maintains or transmits “individually identifiable health information” is subject to HIPAA. It is intended to protect the privacy of individually identifiable health information contained in a patient’s medical record.

Making a reasonable effort to protect our client’s confidentiality is the primary focus of HIPAA as it applies to us.

3. *I understand that I need to adhere to the following guidelines and procedures in order to honor client privacy and HIPAA regulation in the UNT Speech and Hearing Center.*

- Never discuss or reveal any identifying information about a client(s) in public areas inside or outside of the UNT Clinic building and/or ASLP department. Even casual discussion about any of our clients outside of the UNT clinic is prohibited.
- Never leave papers or materials with client name(s) in public places in or outside of the UNT clinic.
- Never take written materials out of the UNT clinic with any type of client information on them: lesson plans, logs, clinical reports may be written outside of the UNT clinic, ONLY if no identifying information is included on them.
- Never take video/audio recordings of clients outside of UNT clinic or ASLP department; if using personal computer/iPhone to tape client, this should be erased immediately after analysis, and must never leave the UNT clinic.
- Storage devices such as flash drives, DVDs, cameras, or others containing client personal information (e.g., clinic reports, photos), should never be taken outside of the UNT clinic or ASLP department.
- When printing clinic related reports, use only the client’s initials until printing the final draft, which should only be printed inside the UNT clinic.

- All copies of clinic report drafts should be shredded when you are finished with them; the final draft must be printed in the UNT clinic or ASLP department.
- Never save client related reports on a computer, storage device, or other outside of the UNT clinic. Never take storage device containing client report with identifying information outside of UNT clinic or ASLP department.
- Client permanent files, accessed via CounselEAR, can only be read or utilized inside the UNT clinic on UNT desktops. Client files must never leave the clinic or department under any circumstances.
- Any phone calls pertaining to UNT clinic clients should not be made in public areas in or outside of the UNT clinic.
- All requested client-related files, reports, or other client-related information must be sent via postal mail; faxes are not secure devices.
- Emails pertaining to clients should contain initials only when emailing to or from a source outside of the UNT clinic or department.
- Information about a client can only be sent if there is a current permission for release of information in the client's file.
- When exchanging information about a client, use only the minimum amount of information that is necessary to accomplish the purpose of the disclosure.
- Persons outside of the ASLP major are not allowed in clinical treatment/diagnostic areas, or areas in which client information is available or stored (e.g. student computer lab, library, assessment labs, clinic rooms). ASLP students are not to bring friends, relatives, or others into these areas of the clinic or department without special clearance from the clinic director. Persons outside of the ASLP major are never allowed to observe clinic treatment or diagnostic activities without clearance from the clinic director and special permission from a client or client's guardian, spouse, or parent.

It is understood that exchanging information about clients with faculty and fellow student clinicians is part of your educational and clinical experience at UNT, but it is necessary that you make every effort to respect UNT clients' privacy. Due to the configuration of most university speech and hearing clinic areas, clients in the waiting areas may easily overhear personal and professional conversations. Thus, any discussions about clients or clinical activity that are not directed at a specific client or family member should be conducted in a private area of the UNT clinic or ASLP department. In the event whereby you are unsure if a particular action would potentially be in violation of a client's privacy rights, you are encouraged to err on the side of caution!

I have read the UNT client privacy protection guidelines above and agree to adhere to each procedure as long as I am a student in the Department of ASLP. In the event that I am determined to be out of compliance with any of the HIPAA related guidelines, my privileges and/or affiliation with the UNT Speech and Hearing Center and/or Department of ASLP may be revoked, or I will be subject to another disciplinary action.

Printed Student Name

Date

Student Signature



Department of Audiology and Speech Language Pathology

UNT Clinical Practicum Audiology Student Semester Hours Summary

Name: _____

EUID: _____

Semester and Year: __

	Administration		Hearing Evaluation		Aural Rehabilitation		Amplification		Vestibular Eval. (ENG/VNG) & Rehabilitation		Prevention & Identification		Electrophysiology (Evoked Potentials)		Case Study/ Simulations
Observation															
Direct Patient Care															
TOTALS															

*****Left Region for On-site Clinical Practicum Hours/Right Region for Off-site Clinical Practicum Hours***

GRAND TOTAL: _____

Student Clinician Signature*: _____

Accepted by: _____

Date: _____

*I certify that these reported hours represent an accurate accounting of my clinical practicum work for this semester.

<i>Name of Supervisor</i>	<i>ASHA Number</i>	<i>TX License Number</i>	<i>Practicum Location</i>
_____	_____	_____	_____
_____	_____	_____	_____