Speech-Language Pathology
Graduate Program

Academic and Clinical Handbook 2020

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Welcome to the Speech-Language Pathology Graduate Program!

This Speech-Language Pathology (SLP) Graduate Program Handbook speaks to the academic components of your graduate training, the whole clinical experience, and includes everything you will need to successfully complete the academic and clinical expectations of the University of Montana’s SLP graduate program.

At the end of this handbook is a contract noting that you have read and understand all policies, procedures, and requirements associated with academic training components and clinical education in the SLP graduate program outlined in this handbook. Please review this handbook thoroughly. Contact the SLP Program Director or Graduate Student Advisor with any academic questions or concerns; and contact the Clinic Director or Clinical Externship Coordinator with any clinical questions or concerns.

Upon completion of your review of this handbook you will need to:

• Sign the contracts noting your thorough review and understanding, and
• Submit the signed contracts to the SLP Program Director and the Clinical Education team.

Submission of the signed contract and authorization for release of information is required to start your clinical practicum experiences in the SLP graduate program.

Introduction to SLP Graduate Program

Overview of SLP Training

The terminal degree required to practice as a speech-language pathologist is a master’s degree. Upon completion of the Master of Science in Speech-Language Pathology graduate program at the University of Montana (UM), graduates will be prepared to complete their Clinical Fellowship (CF) year in order to apply to become a certified speech-language pathologist to be able to assess and treat infants, children, and adults with acquired or developmental speech, language, and/or swallowing disorders.

Our program is fully accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) and meets the academic and clinical standards for Certification of Clinical Competence in Speech Language-Pathology (CCC-SLP) by the credentialing body the Council for Clinical Certification in Audiology and Speech-Language Pathology (CFCC) of the American Speech-Language-Hearing Association (ASHA) and licensure requirements in Montana and many other states.

We are committed to providing students with high-caliber academic and clinical training experiences with a focus on inter-professional education and research. Our goal is to prepare students with the knowledge and skills necessary to provide effective speech-language pathology services for diverse populations in all relevant environments.
Organizational Structure and Mission Statements

The SLP graduate program is housed in the School of Speech, Language, Hearing, and Occupational Sciences (SLHOS). SLHOS is comprised of two divisions: the SLP programs and the Occupational Therapy program (coming fall 2021) and is within the College of Health. The following mission statements guide our educational practices:

The University of Montana Mission

The University of Montana transforms lives by providing a high-quality and accessible education and by generating world-class research and creative scholarship in an exceptional place. We integrate the liberal arts and sciences into undergraduate, graduate, and professional studies to shape global citizens who are creative and agile learners committed to expanding the boundaries of knowledge and to building and sustaining diverse communities.

The College of Health Mission

The College of Health

The College of Health is dedicated to improving the health and quality of life for Montanans, our nation, and our international community. Our mission is to recruit students into the health professions, execute the highest quality education for those students, create new programs to meet the workforce needs of our growing & diverse population, strengthen relationships with rural and urban community partners, lead impactful research, and encourage interprofessional education. We strive to accomplish these goals while promoting student success, celebrating diversity, and implementing team-based healthcare education opportunities.

The School of Speech, Language, Hearing, & Occupational Sciences Mission

The School of Speech, Language, Hearing, & Occupational Sciences (SLHOS) is to prepare students for progressive, collaborative, and research-minded careers in speech-language pathology, audiology, and related fields through rigorous academic and clinical training. We strive to be innovative in the use of technology and program delivery to provide services to traditionally under-served regions and populations. Through our emphasis on typical and atypical speech, language, cognition, swallowing, and hearing function, students gain knowledge and skills along with ethical and culturally competent values that foster a commitment to lifelong learning and civic engagement.
University of Montana DeWit RiteCare Speech, Language, and Hearing Clinic Mission (DeWit RiteCare Clinic)
The UM DeWit RiteCare Clinic is committed to providing quality speech, language, literacy, cognition, swallowing, and hearing services locally and globally to people across the lifespan. We prepare future speech-language pathologists with practical experience through exceptional hands-on training and supervision. Intervention is evidence-based and client-centered. We believe that every individual should have access to these services, regardless of financial, geographic, or physical barriers. Scholarships are supported by the Western Montana Scottish Rite Foundation; however, masonic affiliation is not required.

Equal Opportunity – Non-Discrimination
The University of Montana provides to all people the equal opportunity for education, employment, and participation in University activities without regard to race, color, religion, national origin, creed, service in the uniformed services (as defined in state and federal law), veteran status, sex, age, political ideas, marital or family status, physical or mental disability, or sexual orientation. Responsibility for effecting equal opportunity accrues to all University administrators, faculty, and staff. This responsibility includes assurance that employment and admission decisions, personnel actions, and administration of benefits to students and employees rest exclusively upon criteria that adhere to the principle of Equal opportunity. The University prohibits retaliation against a person for bringing a complaint of prohibited discrimination, for assisting someone with a complaint of discrimination, or for participating in any manner in an investigation or resolution of a complaint of discrimination.

SLP Graduate Program Objectives and National Standards
As a CAA accredited SLP graduate program, our academic and clinical education process is established relative to the knowledge and skills required for clinical certification (see Overview of SLP Training). In order to become a certified speech-language pathologist, ASHA requires that competency in intervention, diagnostics, prevention, and consultation is demonstrated across all nine main areas within the Professional Practice Competencies.

The scope of practice will include the thorough development of the following Professional Practice Competencies: 1) Accountability, 2) Integrity, 3) Effective Communication Skills, 4) Clinical Reasoning, 5) Evidence-based Practice, 6) Concern for Individuals Served, 7) Cultural Competence, 8) Professional Duty, and 9) Collaborative Practice.

SLP Graduate Program Objectives

Upon graduation, students will demonstrate competency in following objectives:

1. Graduate students will develop their professional attributes of accountability, integrity, effective communication skills, clinical reasoning, evidence-based practice, concern for individuals served, cultural competence, professional duty, and collaborative practice.

2. Graduate students will develop their ability to recognize typical and atypical human development and etiology, characteristics, anatomical/physiologic characteristics, acoustic characteristics, associated psychological characteristics, developmental nature, linguistic characteristics and cultural characteristics pertaining to articulation, fluency, voice and resonance, receptive and expressive language, hearing, swallowing, cognitive aspects, social aspects of communication, and augmentative and alternative communication.

3. Graduate students will demonstrate skills in prevention and identification of communication and swallowing disorders and differences as well as prevention.

4. Graduate students will develop their skills to evaluate for communication and swallowing disorders and differences in the areas of articulation, fluency, voice and resonance, receptive and expressive language, hearing, swallowing, cognitive aspects, social aspects of communication, and augmentative and alternative communication.

5. Graduate students will develop their ability to minimize the effects of change in the communication and swallowing mechanisms to assist clients to engage in their environment as fully as possible when impacted by articulation, fluency, voice and resonance, receptive and expressive language, hearing, swallowing, cognitive aspects, social aspects of communication, and augmentative and alternative communication.

6. Graduate student clinicians will develop their ability to minimize the effects of change in the communication and swallowing mechanisms to assist clients to engage in their environment as fully as possible when impacted by articulation, fluency, voice and resonance, receptive and expressive language, hearing, swallowing, cognitive aspects, social aspects of communication, and augmentative and alternative communication as judged by their clinical educators.

7. Graduate students will work within their scope of practice by synthesizing the interdependence of speech, language, and hearing, engage in relevant issues and advocacy, actively engage in clinical education process, practicing professionalism, developing interaction and communication skills and self-evaluate their own practical effectiveness.

8. Graduate students will recognize and account for issues related to diversity.

9. Graduate students will implement and explain evidence-based practices to clients, families, and caregivers.

10. Graduate students will participate in timely recordkeeping and administrative tasks relevant to billing, coding, and credentialing.

11. Graduate students will hold clients’ welfare in highest regard by respecting clinical educator choices, implementing evidence-based practice, and participating in ethical conduct.

12. Graduate students will meet expectations commensurate with their level of experience and clinical setting.
CAA and ASHA Standards

In order for students to be eligible to enter a CF, UM students must first earn a Master of Science in Speech-Language Pathology that includes the following:

1. **Academic Course Work:** 36 graduate semester hours, including courses in biological sciences, chemistry or physics, statistics, and social/behavior sciences.

2. **Supervised Clinical Observation and Clinical Practicum:** Students must earn 400 clock hours of clinical practicum.
   - a. **Clinical Observation:** 25 hours must be completed prior to the SLP 571 clinical practicum.
   - b. **Clinical Education/Practicum:** 375 hours. Clinical clock hours must be sufficient in breadth and depth to achieve demonstrated skills outcomes in the areas of evaluation, intervention, and client interaction.
   - c. At least 325 of 400 hours must be completed while engaged in graduate study in an accredited program.
   - d. Upon SLP program approval, students may receive credit for up to 50 clinical practicum hours earned under the supervision of an SLP professional with CCC-SLP from ASHA during their undergraduate or post baccalaureate education.
   - e. Up to 20% (i.e., 75 hours) of direct contact hours may be obtained through alternative clinical education (ACE) methods. Only the time spent in active engagement with the ACE may be counted. ACE may include the use of standardized patients and simulation technologies (e.g., virtual patients, digitized mannequins, immersive reality, task trainers, computer-based interactive programs).

**SLP Graduate Program Delivery Options**

Given the critical shortage of SLPs in rural areas, the UM SLP graduate program is committed to providing accessibility to the graduate program for individuals who cannot move to the Missoula campus for training, and for those who partake in clinical externship experiences that are outside of the local regional area. As such, the SLP graduate program offers two delivery options (i.e., on-campus, distance) by simultaneously broadcasts all graduate didactic courses. That is, students accepted into a distance program can access graduate courses live (at the time they are taught) and partake in a class simultaneously with on-campus students via a software platform. Students apply and are accepted into the on-campus or distance program. Distance program seats are limited, and thus students cannot switch to be in the graduate distance program once accepted into the on-campus program. There are, however, opportunities for students accepted into the on-campus program to access didactic courses via distance in the second year of their graduate studies if these students choose to complete externships in non-regional areas that are close to Missoula. Limited part-time options are available for students who initially applied and were accepted for a part-time graduate program. These requests are reviewed on a case-by-case basis, by the admissions team, prior to acceptance. Typically, students complete 3 years of graduate school according to individualized plans of study.
On-Campus Program

- Students follow a traditional classroom structure by attending courses face-to-face on the UM campus (with the exception of some distance courses in year two if a non-regional externship is chosen).
- Clinical practica/externships are completed every semester throughout the graduate program and begin as a clinical practicum in the UM’s DeWit RiteCare Clinic in the first semester in the graduate program.
- Subsequent off-campus practica/externships (typically after the first two semesters of graduate school) take place in off-campus sites.
  - Practica or externships can be arranged throughout the state and country if preferred with didactic distance course offerings.
- Typically, on-campus students complete the degree in a minimum of 4 semesters and 1 summer term.

Distance Graduate Program

- Students participate synchronously in all academic courses with students on campus via web-broadcasting.
- Students begin clinical practicum at UM’s DeWit RiteCare Clinic on the UM-Missoula campus in the summer term following two semesters of academic study.
- Practica continue throughout the remainder of the graduate program in off-campus sites (and can be arranged throughout the state and country).
- Typically, students complete the program in a minimum of 4 semesters and 2 summer terms.

SLP Graduate Program Prerequisites

Students enter the SLP graduate program with 1) an undergraduate degree with an undergraduate major in speech-language-hearing sciences (SLHS), or 2) an undergraduate degree in a non-SLHS area with the additional completion of CSD leveling courses. The SLP graduate program prerequisite courses include the following (full descriptions found in the UM Course Catalog):

- CSD 110 Introduction to Speech, Language and Audiology
- CSD 205 Clinical Application & Observations in SLP & Audiology
- CSD 210 Speech & Language Development
- CSD 222 Introduction to Audiology
- CSD 320 Phonological Development & Phonetics
- CSD 330 Anatomy & Physiology of the Speech & Swallowing Mechanism
- CSD 331 Neurological Bases of Communication & Swallowing Disorders
- CSD 420 Speech and Hearing Science
- CSD 450 Intro to Aural (Ear) Rehabilitation
- CSD 460 Birth to Five Language Assessment and Treatment
In addition to the required prerequisite course work, in order to apply for ASHA certification, SLP graduate students must have completed additional course work in (ASHA Standard IV-A):

1. **Physical Science** (3 credits): Physics or chemistry.
2. **Biological Science** (3 credits): Science of living things (human or animal): biology, general anatomy & physiology, neuroanatomy & neurophysiology, human genetics, or veterinary science (must be non-SLHOS courses)
3. **Social/Behavioral Science** (3 credits): Psychology, sociology, anthropology, or public health.
4. **Statistics** (3 credits): Prerequisite for SLP 600 Research Methods. Psychology, Math, or Social stats; stats also meets the previous math course category. One stand-alone course is required. SLP 600 Research Methods course does not count for stats.

*Multicultural* (3 Credits) a cross-cultural course with an emphasis on more than one culture. At UM, CSD 480 Multicultural Issues, fulfills the multicultural prerequisite

*Advanced placement, CLEP, or exam of equivalency may be used, but transcripts must be provided.

*Other courses in which multiple cultures are studies may be acceptable based on syllabi approval by the SLP graduate program.

Prior to the start of graduate school, the Graduate Student Advisor will review each student’s transcripts to determine whether all prerequisite courses are completed. The Graduate Student Advisor will work with a student to determine how best to integrate missing or partially obtained required courses into each student’s Plan of Study. Typically, students will take a course as an elective during their graduate studies and careful planning will be made to ensure a prerequisite course or courses are taken prior to/or concurrently with accompanying graduate coursework that requires associated foundational knowledge. It should be noted, however, if a student has a significant amount of prerequisite coursework that is not completed upon acceptance into the SLP graduate program, additional semester(s) of coursework may need to be completed, thus extended plans of study may be required for full training completion.

**Transfer of Credits to the University of Montana Graduate Program**

Students may petition the UM Graduate School and follow the [graduate school policy](#) (see C5.000) for the transfer of up to 9 graduate credit hours of which they earned an A or B grade into their graduate program at UM. After a semester of satisfactory work in a graduate program at UM, the student can ask the SLP graduate program to make a written request to the Graduate School to accept transfer credits. An official copy of the student's transcript of the courses for transfer and catalog course description should accompany the recommendation.

**SLP Graduate Plans, Degree Options**

**Student Advising and Plans of Study**

In the SLP graduate program an assigned Graduate Student Advisor helps to monitor students’ academic and clinical progress in accordance with the ASHA CFCC standards. All graduate
students are assigned to be advised by the Graduate Student Advisor prior to their start of graduate school. Graduate advisement and clinical practica/externship placements are closely coordinated within a student’s plan of study.

Plans of study are assigned based on a review of transcript(s) and initial results from a “preference survey.” The survey is used by the Graduate Student Advisor to gain insight into students’ experiences, interests, and preferences regarding their final practicum setting (i.e., medical, schools) for their final full-time externship. Based on the results of that survey, students are then assigned 1 of 2 plans of study which help pace, prioritize, and track students toward their final externship. Regardless of the plan of study, students will complete all the same courses and clinical requirements, one plan starts with a focus on SLP developmental disorders, and the other starts with a focus on acquired disorders.

During orientation, each student reviews their assigned plan of study individually, in-person, with the Graduate Student Advisor and verifies that the plan is aligned with their goals. Additionally, in orientation all students receive group advisement regarding program structure, sequence, practicum, and advising processes.

On-going group advisement occurs each semester within the key clinical courses of SLP 570 (fall and spring year 1), SLP 575 (fall year 2), and SLP 675 (spring year 2). Individual advising occurs in-person/virtually/via email/via phone during all semesters including summer and when students are off-campus in clinical placements.

Advisement includes a focus on continuous evaluation and updates of each student’s plan of study. When and if a student requires a significant alteration of a plan study, a new plan of study is created and reviewed with the student accordingly. All students are encouraged to meet regularly with their Graduate Student Advisor and Clinical Externship Coordinator via in-person and/or virtual meetings (distance students) to ensure appropriate progress and ultimate student success.

Following initial orientation individual and group advisement sessions, students are encouraged to make individual appointments with the Graduate Student Advisor if further advisement is needed at any time.

**Degree Options**

**Thesis Option**
71 total graduate credits (35 graduate program course credits, 30 graduate practicum credits, and a minimum of 6 thesis credits, which may require an additional semester)

**Non-thesis Option**
68 total graduate credits (35 graduate program course credits, 30 graduate practicum credits, and 3 graduate capstone/portfolio project credits)
SLP Graduate Curriculum

The following academic and clinical credits and courses are included in the plans of study to complete the master’s degree in speech-language pathology (full course descriptions):

Required Academic Coursework and Credits (38 – 41 credits total)

- 35 credits of graduate program courses, a majority of which focus on developmental and acquired communication and swallowing disorders.
- Either a graduate thesis (6 credits) or graduate non-thesis portfolio project (3 credits option).
- Some students will have additional electives if there is a need to complete prerequisite or ASHA Std IV-A coursework (see SLP Graduate Program Prerequisites).

Required Graduate Core Curriculum Courses

- SLP 520 Articulation & Phonological Disorders (3 credits)
- SLP 530 Voice and Motor Speech Disorders (4 credits)
- SLP 540 Fluency Disorders (3 credits)
- SLP 560 Dx/Tx School-Age Lang (3 credits)
- SLP 580 Diagnostics (3 credits)
- SLP 565 Aphasia & Acq. Apraxia (3 credits)
- SLP 591 Special Topics - Evidence-Based Practices (1 credit)
- SLP 566 Acquired Cognitive Communication Disorders (3 credits)
- SLP 600 Research Methods (3 credits)
- SLP 640 Swallowing Disorders (3 credits)
- SLP 545 Autism/Complex Communication (2 credits)
- SLP 546 AAC Complex Communication II (1 credit)

Capstone Option

- SLP 688 MS Capstone Portfolio (3 credits)

Thesis Option

If a student decides to complete a thesis (SLP 699 Thesis) for a total 6 credits, then SLP 688 Capstone will not need to be completed. Students pursuing a thesis should choose this option by the end of the fall semester in their first year of graduate school. Students will start taking these credits during the spring or summer semester year 1 and complete all 6 credits in consecutive semesters by the end of the program. In order to complete a thesis, students must work with an academic faculty member of the SLP program to develop a project proposal and project as directed by the thesis policy and procedures outlined by the University of Montana Graduate School (see C6.000). The SLP faculty member will become the Chair of the Graduate Student Thesis Committee. The SLP faculty member Thesis Chair, student, and Graduate Student Advisor will then work together to determine how to integrate the 6 thesis credits into a student’s plan of study.
In order to provide ideal mentorship, the SLP faculty typically mentor a limited number of students in a thesis option each year. Thus, it is encouraged that students meet individually with faculty with whom they are interested in studying early in the fall semester to determine whether a thesis is an available option with a professor.

**Required Clinical Education Coursework and Credits (30 credits total)**

- 30 credits of clinical practicum—includes specialty clinics and direct experiences communication disorders across multiple settings (see clinical education coursework)
- 3 clinic course credits
- working with children and adults with developmental/acquired/swallowing 3 practicum levels that develop clinical skill and competency across multiple sites
- a minimum of 375 supervised clock hours (25 hours of observation must be completed before beginning clinical practicum; See Standard V-C)

**Required Graduate Clinical Courses/Practica**

- SLP 570 Clinic Proc/Pro Pract I (2 credits total)
- SLP 571 Found Applied Clinic Srv/Lrn (6 credits total)
- SLP 575 Advanced Clinical Proc II (1 credit)
- SLP 576 Advanced Applied Clinic II (12 credits total)
- SLP 675 Clinical Ext/Adv Practicum (12 credits total)

**Technology Requirements**

**Electronic Tracking System**

The SLP graduate program uses a web-based tracking system (i.e., CALIPSO) as a tool to document ASHA standards, graduate work, and clinical work. All graduate students are required to use an electronic tracking system to document clinical clock hours (e.g., case logs), time logs, and required clinical forms. The SLP clinical education team will provide training to support clinical educators and graduate student clinicians, both on and off campus, in the use of the tracking system. Instructions and tutorials are available on the CALIPSO site to support users.

**Broadcast Platform**

The SLP graduate program simultaneously broadcasts all graduate didactic courses. That is, distance students access graduate courses live (at the time they are taught) and partake in a class simultaneously with on-campus students via a software platform. The SLP graduate program will direct students how to access courses via distance broadcast using a chosen software program (e.g., Zoom).
Teaching Learning Platform

All instructors provide their syllabi, course content, and communications via an electronic learning platform (i.e., Moodle). Faculty will upload course content to Moodle and students will be expected to check regularly, download, and access this content for course participation. Moodle 101 for Students is a self-paced tutorial that will familiarize you with the general course layout and key features of your online courses. It takes approximately 30-minutes to work through the tutorial. You should consider enrolling yourself if you are new to Moodle. Technical support for Moodle is available through the UMOnline Support Desk, 8am - 5pm, Monday through Friday at (406) 243-4999 or by email at umonline-help@umontana.edu.

Clinical Education

Clinical Education Overview

The SLP graduate program faculty believe excellence is paramount for the delivery of clinical services to all clients. Clinical educators (also called supervisors) support student clinicians and work in partnership with clients and their families to deliver high quality services using methods and technologies that are evidence-based, timely, and effective. Furthermore, clinical educators and student clinicians collaborate with community agencies to provide comprehensive and appropriate services within the speech-language pathology scope of practice. All clinical educators hold CCC-SLP/CCC-A. Student clinicians are paired with clinical educators and sites in a way that reflects a didactic (teaching-training) learning experience. Clinical educators that choose to support our graduate student clinicians are dedicated to lifelong learning, ethical practice, and consider clinical education to be a distinct area of practice in the field of speech-language pathology and audiology.

The clinical education process is thought of as a pyramid with equal weight given to the client, the student clinician, and the clinical educator. The goal of the clinical educator is to guide graduate students in becoming competent clinicians who are capable of independent problem solving and providing evidence-based practice.

Each graduate student clinician is required to obtain a sufficient variety of supervised clinical experiences in different work settings and with different populations. A minimum of 50 hours meeting the supervision requirements is suggested at each site. All students typically complete their first practicum at the UM DeWit RiteCare Clinic; on-campus students typically complete their first practicum during their first and second semesters and distance students complete their first practicum during their first summer semester. Other practicum sites will involve off-campus affiliations. To meet the clinical requirements, practicum experiences will involve a placement in a variety of settings. All students are required to do a public school rotation and a medical based rotation (e.g. hospital, skilled nursing facility, or rehabilitation center) and/or other locations (e.g. private practice or specialty clinics). Clinical experiences are designed to support the interests of graduate students while providing depth and breadth of knowledge and experience. To meet the clinical competency standards each student creates an
individualized plan with the Clinical Externship Coordinator. Any exceptions to these requirements are reviewed on a case-by-case basis, based on the student’s experiences, breadth and depth needs, and must be approved by the clinical education team.

Clinical Expectations Relative to STANDARDS OF KNOWLEDGE AND SKILLS

Clinical Observations
ASHA requires that students participate in guided observation (Standard V-C certification requirements). Students in the SLP graduate program are required to observe at least 25 hours of clinical observation provided by certified (CCC) speech-language pathologists and/or audiologists, prior to starting SLP 571 initial clinical placement. Documentation of completed 25 hours must be uploaded to CALIPSO and include the ASHA number of the SLP, date, time, and site. Verification of an ASHA certification can be obtained online through the ASHA Certification Verification System.

Students may observe assessment and evaluation of cognitive, communication and swallowing disorders, speech and language therapy, and client/patient counseling. The clinical observation experiences allow students to become familiar with the client/patient/clinician interaction process, assessment and evaluation procedures, therapy planning, and therapy counseling techniques. The SLP Clinical Externship Coordinator and/or Clinic Director oversees students’ clinical observations and can suggest observation sites. Students that are part of the UM CSD B.A. degree or leveling coursework will accrue the majority of their observation hours through course assignments (e.g., CSD 205/405). If students do not enter the SLP graduate program with this requirement met, then additional hours will need to be obtained independently.

The Missoula area has been saturated with requests to observe; therefore, we ask that any observations outside of coursework, off-campus offerings, and Master Clinician be done outside the Missoula area, possibly in your hometown. Many of Montana’s schools, clinics, private practices, skilled nursing facilities, and hospitals have procedures in place to allow students to observe an ASHA-certified SLP. The majority of these sites will require students to have completed an introduction to HIPAA policies, provide proof of immunizations, and/or to obtain a background check. The SLP graduate program dress code must be implemented during all clinical observations or professional interactions. All independent observations must be documented on the Clinical Observation Form obtained from the Clinical Externship Coordinator. When a student’s 25 hours are complete, the student may send them to the Clinical Externship Coordinator to upload an electronic copy to their SLP graduate student folder and CALIPSO.

Students may use the Master Clinician Network to satisfy this requirement if it was related to a class and a qualified SLP participates in this experience. If Master Clinician Network observations are not related to a class, the student may inquire with the Clinical Externship Coordinator to ask to approve observations and participate in guided activities. These observations may not be approved if requisite work in the program itself is not completed.
Protocol must be followed for clinical observations. Students must contact the Clinical Externship Coordinator to learn the protocols for particular sites. Students may not contact local sites on their own without permission from the Clinical Externship Coordinator. The best way to approach clinical observation is to take advantage of in-class observations (CSD 405 or CSD 205), attend observation opportunities each April in the DeWit RiteCare, and use the Master Clinician Network.

Typically, graduate students shadow or observe prior to initiation of their practicum. These observations are not considered part of the 25 observation hours. Observation is part of prerequisite requirements to familiarize the student with a clinical setting or may be part of an interview process for practicum placement decisions.

Clinical Clock Hours
375 clinical clock hours of supervised practicum must include experiences with client/patient populations across the life span and from culturally/linguistically diverse backgrounds. These experiences must represent various types and severities of communication delays and/or related disorders, differences, and disabilities, and meet the requirements of the ASHA Standards. The following is a chart of clinical clock hour guidelines for the SLP graduate program. This reflects the minimum a student may obtain; however, students are encouraged to take full advantage of their opportunities while respecting their academic obligations.

<table>
<thead>
<tr>
<th>Semester</th>
<th>Class</th>
<th>Hours (used as a guide)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Undergraduate</td>
<td></td>
<td>25 Observation hours (required)</td>
</tr>
<tr>
<td>Semester 1 Fall DeWit RiteCare Clinic</td>
<td>CSD 205/405</td>
<td>30 Hours minimum</td>
</tr>
<tr>
<td>Semester 2 Spring DeWit RiteCare Clinic</td>
<td>SLP 571</td>
<td>30 Hours minimum</td>
</tr>
<tr>
<td>Semester 3 Summer Off Campus/DeWit</td>
<td>SLP 571</td>
<td>60-75 Hours</td>
</tr>
<tr>
<td>Semester 4 Fall Off Campus</td>
<td>SLP 576</td>
<td>75-100 Hours</td>
</tr>
<tr>
<td>Semester 5 Spring Off Campus</td>
<td>SLP 576</td>
<td>180-200 Hours</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>400 Hours</td>
</tr>
</tbody>
</table>

Clinical Sites

The University of Montana DeWit RiteCare Clinic
The UM DeWit RiteCare Clinic serves as the primary practicum site for UM SLP graduate students and is dedicated to providing screening, observations, diagnostic/assessment, and intervention services for individuals with speech, language, swallowing, and/or hearing disorders. Clinical services are open to the general public. The DeWit RiteCare Clinic can bill insurance including Medicare, Medicaid, and other third party providers. The DeWit RiteCare Clinic services are supported philanthropically by the Western Montana Scottish Rite of Free Masonry through scholarships for families in need.

In addition, the DeWit RiteCare Clinic serves as the primary observation site for undergraduate students. On occasion, seniors and levelers in the undergraduate program are invited to participate in therapeutic and/or peer support activities. Undergraduate involvement is developed on a case-by-case basis and closely supervised and monitored by an SLP clinical
faculty member. Undergraduate students that are participating as student clinicians must meet the same prerequisite clinical requirements as graduate student clinicians.

**Off-Campus Clinical Affiliations**

The SLP graduate program offers affiliate practicum experiences at sites that have a written *memorandum of understanding* (MOU) with UM and the SLP graduate program. Typically, students partake in these off-site supervised practicum experiences in their second year of graduate school. Students must work with the Clinical Externship Coordinator to arrange off-campus practicum sites and only the Clinical Externship Coordinator may contact the sites until otherwise specified. Sites are available across the United States with an emphasis on locations in Montana.

While operating within the procedural expectations of each provider, the Clinical Externship Coordinator works with each site to match their particular needs. This involves designing a clinical practicum agreement that is best for the site during the placement, the level of the graduate student’s clinical experience, the amount of time (i.e. part-time or full-time placements), and other significant factors. Our goal is to integrate our students seamlessly into the site’s established system.

If a new clinical site is developed, the Clinical Externship Coordinator will vet the placement. This includes, at minimum, telephone communication with the designated contact person, identifying that the clinical educators have their CCC-SLP, verification of understanding of the roles and responsibilities of clinical education, and understanding of the onboarding process and other site-specific requirements. Further steps may be taken such as site visits, identifying conflicts of interest, or gaining referrals. Additionally, all clinical educators are required to review and sign a Clinical Pre-placement Review prior to each rotation (See below.) If the Clinical Externship Coordinator feels confident that the site will meet the standards and match the values of the SLP graduate program, a student may receive that placement.

Due to the COVID pandemic, all students are now required, by the College of Health, to complete an *Affirmation and Acknowledgement of Risk* prior to participating in in-person clinical experiences. This document acknowledges the nature of clinical practicum, a required degree of skill and knowledge of activities and risk in these settings, the inherent risk of these experiences, and acknowledgement that all risks cannot be prevented. (Please see the full document for additional details.) This paperwork will be coordinated through your SLP 571, 576 and/or SLP 675 course and kept on file in your SLP graduate student file in UM Box.

**The Clinical Education Process**

**Clinical Educator Qualifications**

Clinical education, also called clinical teaching or clinical supervision, is a distinct area of expertise in speech-language pathology. Those who supervise are referred to as *clinical educators.* “To meet ASHA’s Standards for the Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP), student clinicians must be supervised by an individual who 1)
holds ASHA certification in the appropriate profession, 2) has completed a minimum of 9 months (or the part-time equivalent) after earning the CCC-SLP, and 3) has completed a minimum of 2 hours of professional development in the area of clinical instruction/supervision (see Standard V-E). University programs also may require the supervisor to hold the necessary state credential to practice in their setting, i.e. license and/or teacher certification “ (retrieved 7/9/20 from https://www.asha.org/slp/supervisionFAQs/#requirements).

The SLP graduate program houses a variety of clinical educators to provide each student with the depth and breadth needed for training with multiple clients, disorders, and sites. Documentation of the clinical educator process is used in all practicum and externships or affiliations. Evaluation information is collected on the experience of both the student clinician and the clinical educator. SLP faculty and staff use this data to support continued growth in the clinical education process.

**Supervision Requirements and Model**

Effective supervision models have been based on *The Supervisory Process in Speech-Language Pathology and Audiology* (Anderson, 1988). Anderson’s model is designed to capture the career of the professional, but as clinical educators, we must focus on the initial stages. According to Anderson, supervision starts with 100% clinical educator participation, where the clinical educator may be conducting the first few sessions while the student clinician simply observes. ASHA standards require that clinical educators observe a minimum of 25% of therapy, 25% of diagnostics and must be on-site for every session. When considering Anderson’s model, the DeWit RiteCare Clinic supervision starts significantly above the 25% required by ASHA.

Anderson (1988) advocated that as the student clinician’s independence increases, the amount of supervision decreases. This requires the clinical educator to be sensitive to the needs of the student clinician. While keeping this in mind, the clinical educator is ultimately responsible for the client and services provided by the student because they are performed under the license of the supervising clinician. Understandably, the clinical educator, particularly during initial student experiences, will want to be highly present and active in the service delivery. The model below demonstrates our ethical and legal commitment.

**Clinic On-Campus**

All SLP graduate students are required to start their practical process at the DeWit RiteCare Clinic or a satellite site. At the beginning of the program, on campus students simultaneously complete a didactic clinical processes course (SLP 570) and a clinical practicum course (SLP 571) with an assigned clinical educator and clients. Students in the distance program will complete the full SLP 570 series prior to completing their first SLP 571 clinical practicum course.

Each semester that a student completes on-campus clinic, the clinic director and graduate advisor work together to determine student’s needs and graduate experiences and then assigns each student their clients and associated clinical educator. Students then work directly with
their assigned clinical educator to provide assessment/therapy services with each assigned client/group of clients.

**Clinic in an Off-site Placement**

Before an off-site clinical placement begins, the student and the clinical educator complete the **Clinical Pre-placement Review** to determine that the placement is appropriate for the student and all requirements for supervision can be met. During the initial meeting with the clinical educator, and prior to intervention with clients for assessment, screening, or intervention, the student clinician and the clinical educator will complete the **Clinical Practicum Agreement**. This task allows the clinical educator to develop goals for the student’s clinical skill development, review the timeline for documentation and requirements of client services, opens a discussion to the personal learning styles of the clinician, and outlines standard procedures (e.g. calling in sick, COVID precautions, and daily schedule).

All students must follow the site’s procedures with particular attention to confidentiality and HIPAA regulations.

**Weekly Meetings**

Other activities during a clinical practicum rotation will include discussing and signing a “Clinical Practicum Agreement,” including a discussion of student learning style and supervisor teaching style. Students will have the opportunity for 1:1 meetings that will include supervision in clinical preparation (e.g., training in population or setting-specific processes, lesson planning, evidence-based assessment/treatment selection) and documentation (clinical, educational, and reflective). Meetings, emails, Skype/Zoom meetings, and written communication are a few of the tools clinical educators will use to support a student’s clinical development throughout each semester. On-site clinical educators may also choose to hold group meetings in place of some, but not all, 1:1 meetings.

**Documentation in an Electronic Tracking System**

Student clinician clock hours, known as clockhours, must be submitted in accordance to supervisors' request (daily, weekly, or monthly) and approved by their clinical educators each month. Along with documentation of all clinical activities, students complete site and clinical educator evaluations. Clinical educators use an electronic tracking system such as CALIPSO to perform midterm and final evaluations of clinical skills and faculty may require students to upload additional documentation associated with clinical achievements specific to their unique clinical experiences.

**Midterm and Final Conferences**

The clinical educator (on-site or off-site) will use the Graduate Student Clinician Midterm and Final Evaluation Form in CALIPSO as a tool to evaluate a student’s clinical skills. The form is
based on ASHA recommendations and standards. Students must schedule a final conference with their clinical educator during finals week to receive their evaluation feedback. Final clinic grades will be issued at this conference. In off-campus placements, the Clinical Externship Coordinator arranges mid-term and final conference call and/or email check-ins with the site supervisor and student. Students must ensure that all procedures and forms are complete before the completion of the practicum. If off-campus for an externship, all closure activities must align with the site’s policies.

In off-site externships, if a clinical educator or student requires support through the clinical process, contact with the Clinical Externship Coordinator should be immediate. Utilizing this resource as early as possible in a setting can result in a stronger experience for all parties. The Clinical Externship Coordinator can arrange meetings, make site visits, and/or provide additional resources to support the clinical educator and the student clinician.

**Additional Requirements**

Clinical educators on and off-site may require additional components/assignments for a clinical practicum experience as long as it is commensurate with the workload expected for that course. If this is the case, these additional components will be clearly written in the clinical educator’s syllabus (on-site) and written in the clinical practicum agreement (on and off-site).

**SLP Faculty Responsibilities**

For on-campus placements, faculty clinical educators will review student’s clinical achievements each semester to ensure that each student is on track to meeting clinical competencies. For externships, the Clinical Externship Coordinator will review student’s clinical achievements each semester to ensure that each student is on track to meeting clinical competencies. An assigned student remediation committee may assist with remedial procedures in clinical courses in which a C+ or lower is obtained or competencies are not met.

**Externship Clinical Educator Responsibilities**

In off-site externships, clinical educators will document clinical competencies and suggest a letter grade for the practicum experience. The Clinical Externship Coordinator will calculate final grades and will approve course competencies for students accordingly. If a student receives a C+ or lower and does not have approval for specified course competencies, a remediation plan is designed and a student remediation committee will be assigned to the student. Remediation needs are assessed throughout the clinical experience, particularly at midterm and final. Clinical educators are required to notify the Clinical Externship Coordinator immediately if a student is struggling to meet expected levels of achievement.

As part of the student remediation committee, the team may consist of the clinical educator with whom the student is completing the clinical experience, the Clinical Externship Coordinator, the Clinical Director, School Chair, SLP Program Director or designee will meet with the student to develop a plan and administer procedures for clinical competency remediation.

The Clinical Externship Coordinator will coordinate with all off-campus clinical educators to
assure that student clinical competencies and/or remediation plans are documented and filed in CALIPSO.

**Student Responsibilities**

Students are responsible for ensuring that clinical forms are up-to-date and accurate. With this in mind, students must make sure all forms and their CALIPSO account are up-to-date, accurate, and approved by appropriate Clinical Educators and/or the Clinical Externship Coordinator. Students that have not been compliant with documentation may experience the consequence of delayed clinical placements and graduation.

Clinical clock hours and clinical competencies will be documented in CALIPSO by the student to be reviewed and approved by the clinical educator.

The student and his/her clinical educator will complete and submit the midterm and final clinical evaluation form for each semester of clinical experiences. Students are also required to participate in conferences, using a variety of distance technologies, arranged by the Clinical Externship Coordinator and a site-visit can be requested as applicable. All clinical clock hours and clinical competencies must be approved by the student’s ASHA certified clinical educator. These records are documented in CALIPSO and can be verified through the ASHA Certification Verification website.

It is the student’s responsibility to ensure that any remediation plans are completed and documented each semester as instructed. Students are responsible for their learning and communicating with the assigned student remediation committee regarding the completion of tasks or the need for assistance.

**Graduate and Clinical Policies and Procedures**

**Dress Code**

We contribute to the public image of our school and of the profession of speech-language pathology through our appearance and interaction with others. Our expertise is best communicated through a professional presence. This requires attention to our appearance and dress. Appropriate dress and personal appearance for graduate clinicians should always be consistent with professional standards while in the clinic and while working with participants in research labs, including at satellite clinic sites and via Zoom for Healthcare. Appearance should not affect the clinician-patient or the research assistant/volunteer-participant relationship.

**General Guidelines**

- All clothing must be clean, maintained, and appropriately fitted.
- Appropriate personal hygiene is expected and must be maintained on a daily basis.
- Hair styles, makeup, etc., should meet professional standards.
- Please keep in mind that jewelry can be distracting to some patients.
- Please be considerate of olfactory sensitivities by patients/participants, families, staff, and peers. Scented products or other odors such as cigarette smoke should be avoided.
Inappropriate Attire
Inappropriate attire includes, but is not limited to, active sportswear, mini-skirts, flip-flops, halter tops, or apparel with messages or commercial advertising. Unkempt (e.g., soiled, torn, “worn”, or wrinkled clothing) or inappropriately revealing clothing (including when bending or stretching) are not acceptable. Jeans and shorts that meet the above criteria are not acceptable when interacting with patients or research participants in the clinic, but lab policies govern their acceptability within the lab and school settings may have their own allowances. All clinicians and research staff are expected to exercise good judgment in choosing their work clothes.

Violations
Anyone coming to work in attire that is deemed inappropriate may be asked to leave and return appropriately dressed. Such discussions should not occur in the presence of other students, patients, or research participants. Under no circumstances should individuals be asked to wear specific garments as a disciplinary measure but should feel free to appropriate remEDIATE dress concerns on their own.

Clinician Expectations

Upon the initiation of graduate school, specifically clinical practicum, each student must have completed and/or submitted each of the following items to the SLP Program Coordinator, who files them securely in UMBox and CALIPSO. Students should retain original documents for their own records.

Subscribe to CALIPSO
CALIPSO is an electronic data program used to document clinical competencies, necessary records, and track and support requests for clinical placements. Each student will receive an email with instructions on subscribing to CALIPSO following orientation.

25 Observation Hours
Each student must have 25 hours of observation completed and documented prior to beginning their graduate program. If lacking hours, Master Clinician Network or other in-person observation may be a means of obtaining remaining hours but must be completed according to guided clinical observation requirements (See ASHA Standard V-C).

Obtain CPR and First Aid Certification
Instructions on completing CPR and BLS (Basic Life Support) are included in the Welcome Letter. This training must be completed prior to being eligible to participate in the clinic. Cohort 2020: Due to COVID restrictions, many students expressed difficulty finding in-person CPR and first aid classes. In-person training is ideal and may be required for specific clinical settings, but if no in-person training is available, a fully online course will be acceptable. Please note that some externship facilities may require you to recertify with an in-person class prior to externship placements. If this is the case, you will let you know prior to your externship rotation.
**Immunizations**

Each student is required to have current immunizations for clinical placements on and off campus. The Curry Health Center can assist (for those that have University of Montana health coverage), 406-243-4330. The following is a list of the required immunizations:

- **PPD (TB):** Must be completed no more than 3 months prior to the start of your clinical rotation and renewed annually (Year 1, one-step TB test; Year 2, type to be determined by externship site)
- **TDAP:** Tetanus portion good for ten years
- **Hepatitis B series:** second shot 30 days after first; third shot 6 months after first
- **MMR:** Required for enrollment to the UM. Records may be obtained from Student Health Services
- **Varicella titer**
- Flu shot and other preventative measures may be required by some practicum sites. It is the student’s responsibility to comply with the organization’s policy.

*Please note that there may be additional requirements for externship placements. You will be notified if this is the case, and it will be your responsibility to complete them.*

**Proof of Health Insurance**

Students may choose the UM policy or an outside provider. Proof of coverage must be scanned by the SLP Outreach Grant Coordinator.

**Proof of Liability Insurance**

Students automatically have liability coverage through UM when enrolled as a student. Some practicums may require *additional* liability insurance. Students may purchase additional liability insurance through [Mercer](http://www.mercer.com), an ASHA/NSSLHA affiliate.

**HIPAA Training**

Students are required to complete the Health Insurance Portability and Accountability Act (HIPAA) training. To participate in the training:

1. Go to this site: Collaborative Institutional Training Initiative
2. Go to “register” on the top right-hand corner.
3. When prompted “select your organization affiliation” type in: University of Montana
4. Click on “Continue to Step 2”
5. Complete registration information.
   a) Email – please use your UM email
   b) Employee number – use your 790 number
   c) Select “Health Information Privacy and Security (HIPS)”
   d) On the “Step 7” page, go to Question #7 and click “Group 1: RiteCare Clinicians and Graduate Student Clinicians”
6. Students should keep a copy of the certificate of completion for their own records and submit a copy to the SLP Program Coordinator.
Background Information Check
Students are required to complete a background check using Verified Credentials. Upon completion, please share your report with the SLP Program Coordinator so it may be reviewed and uploaded to CALIPSO. Information revealed by the check will be reviewed by the Clinical Education Team and follow-up will be advised by the School Chair and necessary UM support personnel. Use these steps to complete the background check:

1. Go to Verified Credentials
2. At the very top, enter this code: first box: YYBHJ second box: 92447
3. Follow the steps to create an account and complete the background check process
4. When prompted you will select Fall 2020 (NOT Academic Year of 2020). If you are prompted to pay, you have selected the wrong session. Background checks are paid for through your SLHOS program tuition.
5. You will need to enter your Student ID number (790 Number)
6. Background checks are sent to the department by Verified Credentials.

Blood Borne Pathogen Training
Students will complete Blood Borne Pathogen training in their SLP 570 course prior to engaging in clinical experience at the DeWit RiteCare Clinic.

Clinical Educator Feedback Form
At the completion of each semester, students are invited to provide feedback about their clinical education experience, either via a traditional course evaluation and/or in CALIPSO.

Self-Reflection
While research on self-reflective practices in the field of speech-language pathology is limited (Caty, Kinsella, Doyle, 2015), both written reflection and reflexive discussion have been used widely in clinical education across fields, with many benefits. Students in this program may be asked to participate in reflexive practices to facilitate their learning throughout their graduate experience, particularly during clinical practicum.

Professional Expectations

Professional Conduct
Student clinicians are speech-language pathologists in training. Student clinicians will be held to the highest standards of integrity and ethical principles. Our guiding principles for professional contact come from the 2016 ASHA Code of Ethics, ASHA Scope of Practice in Speech-Language Pathology and the UM Student Code of Conduct. Student clinicians are responsible for honoring the privacy, confidentiality, communication needs, and individual rights of every client. Student clinicians are responsible for client-centered care, intervention planning and treatment, record keeping, and written reports that are an integral part of the profession of speech-language pathology.
ASHA Code of Ethics and Clinical Requirements
As an ASHA accredited program, the 2016 ASHA Code of Ethics binds the faculty, staff, and students of the UM DeWit RiteCare Clinic and other practicum sites. Read this material carefully and consider its application to all student clinical practice. The principles will be addressed throughout the training program, both in academic classes and in clinical practicum. Students should become well acquainted with the Code of Ethics so that the judgments and decisions they make as a graduate student form a solid, ethical foundation for their future as a professional speech-language pathologist. If students have any questions or concerns regarding the Code of Ethics or its application, they should discuss them with their clinical educator, advisor, or the Director of Clinical Education.

Confidentiality Compliance and HIPAA Training
Confidentiality compliance and HIPAA training are part of the University of Montana Research and Creative Scholarship Compliance Oversight. One principle covered in the ASHA Code of Ethics, as well as the mandated HIPAA requirements, involves the protection of clients’ rights to confidentiality. This practice includes issues of release of information, digital and auditory recording and observation of sessions, and maintenance of client records. In general, clinicians should err on the side of caution when considering confidentiality.

Off-Campus Practicum Placement Planning
On-campus students typically begin their off-campus practicum in the summer or fall following their first year of graduate study. Distance students typically begin their off-campus practicum in the fall semester following their first year of graduate study. All students complete both a public school placement and a medical and/or private practice placement (hospital, skilled nursing facility, rehabilitative center, etc.) as part of their rotations. Any exceptions to these requirements are reviewed on a case-by-case basis, based on the student’s experiences, breadth and depth needs, and must be approved by the clinical education team. A backward design model is implemented to plan for these second-year off-site externships when students first start graduate school. That is, students communicate their site preference (medical, schools) for their final full-time SLP 675 off-campus site setting when initially meeting with the Graduate Student Advisor/Clinical Externship Coordinator when they start the SLP graduate program, and then all other site placements are planned accordingly.

Students will request clinical placement preferences through a clinical suggestions spreadsheet that is emailed directly to the Clinical Externship Coordinator. The Clinical Externship Coordinator will make the initial contact with the site. Sometimes, students are familiar with the site they are requesting and may even be acquainted with that site’s clinical educators, however, students may not initiate externship placements and may be subject to disciplinary measures if this rule is violated. All externship placements must be developed and finalized through the Clinical Externship Coordinator. Specialized final placements, such as a major medical center or specialty clinic, must be made by September 30th of your first semester. Please email the Clinical Externship Coordinator with this interest. Requests for externships, through spreadsheet submission, must be made in accordance with the following timelines:
<table>
<thead>
<tr>
<th>Semester Requests</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Summer</td>
<td>November 1st, Semester 1</td>
</tr>
<tr>
<td>Fall</td>
<td>January 1st, Winter Break</td>
</tr>
<tr>
<td>Spring</td>
<td>March 1st, Semester 2</td>
</tr>
</tbody>
</table>

Local placements are defined as sites within a **70-mile radius** of Missoula: This radius includes, but is not limited to: Alberton, Arlee, Bonner, Clinton, Corvallis, Drummond, Florence, Frenchtown, Hamilton, Lolo, Missoula, Potomac, Ronan, Seeley Lake, St. Ignatius, Polson, Stevensville, and Victor. Because Montana is rural and Missoula is a relatively small community, students are required to be open-minded about placements. Location flexibility may be essential in finding placements for all students. Students should think about relatives, friends, Air B&B, etc. that would support taking an assignment outside of Missoula.

The Clinical Externship Coordinator will act on students’ behalf to secure a clinical placement. The Clinical Externship Coordinator will make every effort to secure a suggested placement; however, students need to understand that requested clinical sites are not guaranteed. Students are expected to accept their confirmed clinical externship. Those who do not/cannot accept their confirmed placement may need to defer the externship until the following semester. Students should understand that a deferment or refusal of an assigned clinical externship placement or site may likely prolong his/her education program.

**On-Campus Practicum Assignments**

The clinical practicum courses are offered for all students providing assessments or therapy services each semester requiring a minimum of 30 credits. On-campus students participate in clinical practicums during the first two semesters of graduate study. Students engage in practicums the following summer, fall, and spring semesters prior to graduation.

Distance students participate in their first clinical practicum on campus during the summer following the first two semesters. **Distance students are required to complete a change of status form to be eligible for on-campus courses (practicum) during this summer semester only.** These students return to distance status in the fall. On-campus students do not change their status unless their plan of study changes. The Clinical Externship Coordinator will advise if a status change is required. For more information, please see the [Change of Status](#) website. Distance students will continue with fall, spring, and summer externships prior to graduation. On occasion, a student may start the program the summer before the official fall start date by special arrangement. Practical experiences are outlined in each student’s plan of study.

**On-Campus Clinical Practicum Load**

The clinic load is a coordination of needs and requirements of clients, student clinicians, and clinical educators. Flexibility is important. For the student’s first and second semester, a typical assignment is three to four contact hours a week. Students should expect to accrue 30 clock
hours each semester their first year. Distance students participate in an intensive clinical experience during the summer session which will result in significantly more initial clinical clock hours, 60 or more.

**Dropping Clinic or Changing Credits**

If a student clinician finds it necessary to either officially drop or reduce the number of credits for a clinic course once the semester has begun, the Clinical Educator, Clinic Director, and the Clinical Externship Coordinator must approve the request in writing. Because of the disruption and change in client services, this change is considered ONLY in rare occasions and based on health or extremely unusual circumstances.

**Diagnostic Clinic Hours**

A specific number of hours is not specified for diagnostic experiences. The SLP graduate program requires all students to accrue diagnostic hours of “sufficient breadth and depth” to demonstrate assessment and evaluation procedures. This experience is part of clinical practicums SLP 571, SLP 576, and SLP 675. In addition, students are offered a didactic course on diagnostics (i.e., SLP 580).

**Client Accommodations and Sensitivity**

**Accommodations for Differences and Disabilities**

All forms, handouts, and documents should be accessible, so they are available in alternative formats, such as screen readers. All interpersonal activities such as conferences, lectures, and clinical services can be accommodated including the use of text telephone (TTY), amplified phone, text, note taker, or the services of sign language interpreter. Service animals, defined as a dog or miniature horse that is individually trained to do work or perform tasks that are related to the individual’s impairment, may accompany a client to his/her sessions. The DeWit RiteCare Clinic has a room designated for use when a service animal is present. Disability Services defines and identifies use of animals on campus. Services and accommodations are available for a client and/or client’s family or care providers and should be of no additional cost to them.

**Multicultural and Diversity Perspectives**

UM and SLHOS are dedicated to developing each student’s knowledge and understanding of the importance of multicultural and diversity perspectives. During clinical and academic training, students will develop skills and techniques to support their preparation for the diversity of clients that will be a part of their profession. The curriculum will focus on the selection of diagnostic tools, the analysis of an evaluation, and the provision of services and intervention that reflect the culture and needs of the client, family, and community.
Clinic Hours

DeWit RiteCare Clinic
The DeWit RiteCare Clinic operates Monday and Thursday, 8:00 am to 5:00 pm, Tuesday and Wednesday 8:00 am to 8:00 pm, and by special appointment on Fridays. The DeWit RiteCare Clinic evening services may vary based on academic schedules. Students are required to be available Monday-Friday for day and evening appointments. Students will coordinate with their assigned clinical educator on scheduling. While in the graduate program, clinical placement takes priority.

Clinical Preparation and Practice at DeWit RiteCare Clinic
During the first weeks of the semester in which a student is assigned to a clinical practicum experience at the DeWit RiteCare Clinic, students will participate in general clinic orientation and training specific to this setting with the clinic director and clinic office manager. Training topics include: continued HIPAA review, on-site clinical processes (including test and materials checkout, room reservations, computer use, general clinic flow), electronic medical record system documentation, and telepractice.

Following thorough orientation to the DeWit RiteCare Clinic, students will begin their clinical practice, guided by their assigned clinical educator. The clinical process includes chart review, preparation, direct service provision, and documentation. Each clinical educator will have a unique approach to clinical practice. Students must adhere to their assigned clinical educator’s expectations throughout their practicum, both as defined in the “Clinical Practicum Agreement” as well as incidentally throughout the placement. Outside of scheduled class time, students are expected to reserve their time during working hours (unless otherwise specified on the “Clinical Practicum Agreement” for their clinical practicum activities.

Essential Functions and Technical Standards for Program Admission and Continued Enrollment for the Graduate SLP Program

The Essential Functions and Technical Standards for program admission and continued enrollment describe the expectations and requisite abilities considered necessary for professionals in the field of speech-language pathology. The School of Speech, Language, Hearing, and Occupational Sciences at the University of Montana is committed to preparing all qualified individuals who are capable of performing the essential functions required of the profession, including persons with disabilities, with or without reasonable accommodation. In complying with the Americans with Disabilities Act (ADA) and Section 504 of the Civil Rights Rehabilitation Act of 1973 regarding students and applicants with disabilities, no otherwise qualified and competent individual with a disability shall be denied access to or participation in services, programs, and activities solely on the basis of the disability.
Essential Functions

SLP graduate students are to achieve the level of competency required for graduation and practice as applicable. It is recognized that degrees of ability vary widely among individuals. Admission candidates who feel they may not be able to acquire the essential functions set forth are encouraged to contact the Graduate Student Advisor. Any admission candidates who may require academic modification to fulfill the essential functions and technical standards due to a disability are encouraged to contact the Disability Services for Students office at (406) 243-2243.

To be successful in the SLP graduate program and perform the roles of this profession, a student must consistently:

1. Communicate effectively in English with clients/patients and professionals from a variety of cultural backgrounds.
2. Have the ability to learn complex information, be able to perform clinical problem solving, synthesize and apply information from the discipline of Communicative Sciences and Disorders and related disciplines to formulate diagnostic and treatment judgments.
4. Have the capacity to maintain composure and emotional stability during periods of high stress.
5. Demonstrate affective skills and appropriate demeanor and rapport that relate to professional education and quality client/patient care.
6. Demonstrate flexibility and the ability to adjust to changing situations and uncertainty in an academic or clinical environment.
7. Have the ability to reliably and critically self-evaluate their professional, technical, and personal skills that contribute to positive client outcomes.
8. Have the ability to accept constructive criticism and respond by appropriate modification of behavior.

Technical Standards for Admission and Continued Enrollment

The technical standards for admission to and continued enrollment in the UM SLP graduate program reflect the essential qualities and abilities that are considered necessary to a student’s academic and/or clinical performance. Ability to meet these technical standards is required for admission and must be maintained throughout a student’s progress in the SLP graduate degree program. Students should carefully review the technical standards below to determine if assistance is needed to perform any of the required tasks.

Communication Skills

A student must possess adequate communication skills to:

- Communicate effectively and efficiently in English at a level sufficient to meet curricular and clinical demands. (See Students and Professionals Who Speak English with Accents and Nonstandard Dialects: Issues and Recommendations.)
• Effectively communicate judgments and treatment information and to observe, recognize and understand non-verbal behavior.
• Elicit information, gather information, and describe findings. This communication should be comprehensible by clients/patients, professionals, and lay-persons.
• Communicate effectively and sensitively with clients/patients and colleagues, including individuals from different cultural and social backgrounds. (See Cultural Competence in Professional Service Delivery.)

Psychomotor Skills
A student must possess adequate skills to:
• Execute movements reasonably required to move from area to area, maneuver in small places, use equipment, materials and technology (i.e. microphones, hearing aids, computers, AAC devices, etc.) as needed to provide clients with appropriate general care.
• Access transportation to and from clinical and academic placements.
• Participate in classroom and clinical activities for the defined workday.

Intellectual / Cognitive Abilities
A student must possess adequate, ethical, emotional, and cognitive skills to:
• Comprehend, retain, integrate, synthesize, and apply information sufficient to meet curricular and clinical demands.
• Identify relevant findings from history, evaluation, and data to formulate a diagnosis, prognosis, and treatment plan.
• Solve problems, reason, and make sound clinical judgments in patient assessment, diagnostic planning, and therapeutic planning consistent with the principles of evidence-based practice in speech-language pathology.
• Develop and exhibit a sense of ethics and recognize and apply pertinent legal and ethical standards.
• Self-evaluate, identify, and communicate limits of one’s own knowledge and skills.

Sensory / Observational Skills
A student must possess adequate skills to complete the following:
• Accurately observe clients and interpret and analyze their behaviors to recognize communication disorders.
• Adequately visualize anatomic structures and discriminate findings on various imaging studies, as well as to discriminate text, numbers, tables, and graphs associated with diagnostic instruments and tests.
• Adequately treat clients using the equipment and materials of the profession safely and appropriately.

Behavioral/Social Skills
A student must possess adequate behavioral and social attributes to:
• Display mature, empathetic, and effective interpersonal professional relationships by exhibiting compassion, integrity, and concern for others.
• Recognize and show respect for individuals of different ages, genders, races, religions, sexual orientations, cultural and socioeconomic backgrounds, and disabilities.
• Recognize when a client or client’s family does or does not understand the clinician’s written and/or oral communication.
• Maintain emotional and mental health to fully utilize their intellectual abilities and exercise good judgment including prompt completion of all academic and clinical responsibilities.
• Demonstrate honesty, integrity, and professionalism.
• Maintain confidentiality of client/patient information.

**Professional Responsibility**

A student must have the capacity to:

• Manage the use of time effectively and systematize actions to complete professional and technical tasks within realistic time constraints.
• Adhere to policies of the University, their program, and clinical sites including professional dress and behavior, attending to the program’s academic schedule, which may differ from the University’s academic calendar and be subject to change at any time.
• Learn and demonstrate knowledge of and commitment to the code of ethics of their profession and behavior that reflects a sense of right and wrong in the context of care.
• Work cooperatively and collaboratively with other students on assigned projects, and participate willingly in a supervisory process involving evaluation of abilities and reasoning skills.
• Meet the challenges of any medical situation that requires a readiness for immediate and appropriate response without interference of personal or medical problems (e.g. CPR certification, evacuation procedures, infection control, and universal precautions).

**Candidates who have been accepted for admission for the SLP graduate program in SLHOS will be required to verify that they understand and meet these essential functions.** Admission decisions are made on the assumption that each candidate can meet and fulfill essential functions. When a disability is present, the applicant should contact the Disability Services for Students office at UM. That office will review a student’s request for modification and confirm that the stated condition qualifies as a disability under applicable laws.

If an applicant states he/she can meet the essential functions with modification, the SLP course instructor and/or academic/clinical education team may review the modification to ensure it does not fundamentally alter the program, cause an undue burden, or cause harm to a fellow student or client. At any time in the course of a student’s enrollment in the SLP graduate program, the student can request accommodation through the Disability Services for Students office. However, retroactive accommodation requests do not have to be honored.
Graduate and Clinical Policies and Procedures

Grades of C+ and Dismissal

• Any student that earns two grades of C+ or lower will be dismissed from the graduate program.
• If a student earns a C+ or lower in a class, a Student Remediation Committee will convene to determine the remediation for the student. (See Remediation section for details and processes.)
• Any student that earns one grade of C+ or lower in a graduate class must retake the class or take an independent study to demonstrate competencies associated with ASHA CFCC standards of knowledge and skills. Retaking a course will not result in the replacement of the C+ or lower grade. If a C+ or lower is earned in this subsequent class, the student will be dismissed from the graduate program.

Competency and Remediation

In graduate courses each student will be provided with an opportunity to demonstrate required knowledge and/or skill competencies. These knowledge and skill competencies will be assessed as delineated in course syllabi. ASHA has specified that in order to be eligible for a CF, the student must achieve a level of 80% or better on each knowledge-and-skill competency standard. Regardless of the course grade, if the student does not achieve required competencies, one additional opportunity to demonstrate this knowledge and/or skill competency will be provided. If the student does not pass the competency a second time, further course of action will be determined by the SLP graduate program and may result in dismissal from the SLP graduate program. If a student fails to attain competency, the Certification for Clinical Practice Verification by Program Director Form required for ASHA certification will not be signed regardless of an acceptable course/clinic grade.

Regardless of final grades, students must achieve a level of 80% or better to be considered competent on each ASHA knowledge and skills standard. If competency is not achieved, an individualized formal remediation plan will be implemented (see formal remediation procedures in this handbook for details). If a student fails to demonstrate competency following a remediation, then a student is placed in formal academic or clinical probation. If a student is placed in academic and/or clinical probation over two times, then the student will be dismissed from the SLP graduate program.

• If remediation requires a student to repeat a course or a section of a course, then the student will complete an independent study of the course for the specified credits the semester that the course is repeated. The repetition of the course will not result in a change of grade from the original course.
• If a student fails to successfully remediate, the student will be placed on School probation. A student remediation committee assigned to the student will then determine the actions and timeline required for the student to end probation. Students can be on School probation for
opportunities. If a student fails to complete the required probationary steps within the assigned timeline then he/she may be dismissed from the graduate program.

**Opportunities for Learning and Remediation Plan**

**Knowledge and Skill Acquisition**

Additional opportunities for learning and subsequent remediation is required when a student does not meet ASHA knowledge and skills course or clinic objectives, assessed by case studies, demonstration, testing, papers, and/or other assignments, with a minimum of a grade of B- (80% achievement).

**Informal Opportunities for Learning**

Within class or clinic, if a student earns a grade of less than 80% on an assignment and/or inadequately demonstrates a particular knowledge or skill, the clinical educator or professor will attempt to address the competency challenge within the class or clinical experience by providing an additional learning opportunity. This can be done through the provision of opportunities such as rewriting an assignment, completion of a new assignment, additional demonstration of a skill following scaffolding. Note that the additional opportunities (e.g., redoing an assignment) do not necessarily change a student’s grade. Individual faculty document additional opportunities for learning; the SLP Program Director, Clinic Director, or Graduate Academic Advisor may check-in with faculty in the middle and end of the semester to support student progress across the knowledge and skill competencies.

**Formal Remediation**

Following the completion of opportunities for learning, if a student in a course or clinic does not achieve or demonstrate competency (80% or higher) on associated ASHA knowledge and skills, then the formal remediation process is initiated. Note that competency achievement is not necessarily equivalent to the final course grade.

**Formal Student Remediation Process**

- **Step 1.** A Student Remediation Committee (SRC) is formed. The SRC is made up of:
  - The SRC Chair is the clinical educator/professor who initiated the remediation. This person is responsible for managing the remediation and seeing it through to its conclusion.
  - Faculty who are appropriate to the needs and challenges of the student (only if appropriate and can be requested by a student).
  - At least one of the following (depending on student needs):
    - School Chair/SLP Program Director
    - Clinic Director
    - Graduate Student Advisor

- **Step 2.** The SRC Chair completes the ASHA Knowledge and Skills Remedial Plan and coordinates the formal remediation meeting which includes the full SRC committee and...
the student. In the meeting, the student and committee discuss the competency concern, note the ASHA standard(s) in question, and determine a measurable goal and plan of remediation that includes a timeline of when remediation will be completed. At the conclusion of this meeting the student and SRC Chair sign and agree to the plan and follow up is completed according to the plan.

- **Step 3.** At the completion of the remedial plan timeline, the SRC Chair initiates a follow up meeting to be attend by the student and SRC Committee. The achievement of the remediation goal is measured and reported on.
  - **Step 3a.** If the student successfully meets competency and the remediation goal is met, then successful completion is noted on the ASHA Knowledge and Skills Remedial Plan and the form is signed a second time by the student and SRC Chair signature - noting the completion of the plan and follow-up second meeting.
  - **Step 3b.** If the student does not successfully meet competency and the remediation goal is not achieved, the SRC Chair invites the SLP Program Director/School Chair to the follow up remediation meeting (if not already part of the committee) and the student, SLP Program Director/School Chair, and SRC Committee document the next steps for the remedial Plan on the ASHA Knowledge and Skills Remedial Plan form. The committee and student will discuss and document why the plan was not successful. Following this discussion, the Chair decides whether another remediation is warranted, and the student is typically placed on formal academic or clinical probation. The subsequent remediation plan with a measurable goal and timeline is agreed upon and consequences are clearly provided. Note that possible program dismissal may be discussed as a consequence if appropriate.

- **Step 4.** At the conclusion of the subsequent remediation plan timeline, the SRC Chair will follow up and initiate another remediation/academic probation meeting with the SRC Committee, SLP Program Director/School Chair, and student. The achievement of the remediation goal is measured and reported. The student and committee document the level of competency achievement regarding the completion of the remediation goal on the student’s original ASHA Knowledge and Skills Remedial Plan.
  - **Step 4a.** If the student successfully meets competency and the remediation goal is met, then successful remediation completion is noted on an addendum to the ASHA Knowledge and Skills Remedial Plan and this form is signed by the student and SRC Chair noting the completion of the plan. At this time the student is taken off academic/clinical probation.
  - **Step 4b.** If the student does not successfully meet competency and the remediation goal is not met, the student is dismissed from the SLP graduate program.

Note that according to SLP graduate program policy, students can only be on academic probation for a maximum of one cycle or semester.
Conflict Resolution and Grievances

Conflict Resolution and Formal Grievances

Conflicts arise in many situations. Most conflicts can be resolved by remaining thoughtful, respectful, and courteous with the other party. You can communicate to us in many ways, such as:

- Having a conversation with a staff or faculty member
- Sending an email to your Graduate Student Advisor
- Meeting with the Clinical Director or a trusted Professor/Clinical Educator
- Working with a student organization (NSLHA)
- Completing course evaluations and exit surveys
- In the event that a conflict cannot be resolved, the following procedures are recommended:
  - Contact the SLP Program Director/School Chair
  - If the SLP Program Director/School Chair is unable to resolve the matter or is unresponsive to your requests, contact the Dean of the College of Health.
  - If the Dean is unable to resolve the matter or is unresponsive to your concern, you may consider reaching out to the Council for Academic Accreditation for Speech-Language Pathology and Audiology (CAA).

The CAA also has a process in place for complaints to be filed against the program. Before filing a complaint, it is strongly recommended that you read Chapter XIII: Complaints in the Accreditation Handbook. Complaints against the CAA must be filed within 1 year of the date the conduct being complained about occurred, and must relate to the content or the application of the Standards for Accreditation of Entry-Level Graduate Education Programs in Audiology and Speech-Language Pathology.

Title IX

“Title IX of the United States Education Amendments of 1972 is a Federal civil rights law that prohibits discrimination on the basis of sex in education programs and activities. Discrimination on the basis of sex can include sexual harassment or sexual violence, such as rape, sexual assault, sexual battery, and sexual coercion. Title IX applies to all public and private elementary and secondary schools, school districts, colleges, and universities.” Taken from the University of Montana Title IX webpage.

If you have a concern regarding an issue related to Title IX, please refer to the Title IX webpage.

Concluding the SLP Graduate Program

PRAXIS Exam

All SLP and Audiology graduate students must take the ASHA national exam by ETS called the
Praxis Audiology exam, which is part of the Praxis II series, and report their scores to the School in order to graduate from the School of Speech, Language, Hearing and Occupational Sciences. Students are required to take the national exam by the end of the final semester of the graduate program. Students are encouraged to take the test by March 15 of their final semester for scores to be received and recorded in time for graduation.

**Graduate Program Completion**

A graduate student will officially graduate at the end of the semester in which all academic coursework, Praxis exam, and all clinical coursework is complete. If a student does not successfully complete all requirements by the end of the last semester listed on the student’s program of study, the student will continue as a graduate student, until all graduation requirements have been met. The "degree conferred" semester will be the semester that the student actually completed all degree requirements and final grades were posted. Students will not receive a letter confirming program requirement completion before the degree is awarded.

**Plans of Study and Leave of Absence**

The SLP program expects graduate students to maintain and register according to their plan of study established at the beginning of their graduate studies. A graduate student who experiences unexpected health problems or other compelling personal circumstances which affect the ability to successfully maintain full-time status may request a leave of absence by petitioning the School Chair. The School Chair will work with the student to determine the length of the leave of absence which is typically assigned a semester at a time and is no longer than one year.

The student:
- may only petition for one leave of absence during their graduate program
- is responsible for any missed courses and/or clinical practicum which may extend the graduate program and result in a change of plan of study
- may not petition for a leave of absences as a means of avoiding low grades in academic courses or clinical practicum
- is expected to resume the program at the end of the approved leave of absence. If the student is unable to return, it may be recommended that the student be removed from the program. Should the student wish to reapply to the graduate program, he/she may do so on a competitive basis according to the SLP program’s regular graduate admission deadlines and procedures.

**Certification and Licensure**

**ASHA Certification Requirements for CCC-SLP**

The Council for Clinical Certification (CFCC) is responsible for processing applications by individuals who have graduated from programs accredited by the Council on Academic Accreditation (CAA), and for awarding the Certificate of Clinical Competence in Speech-
Language Pathology (CCC-SLP). The requirements for certification (CCC-SLP) include:

1. Successful completion of an accredited graduate program in communicative sciences and disorders.
2. Successful documented competencies in the ASHA 2020 Speech-Language Pathology Standards requirements.
3. Accrual of a minimum of 400 hours of supervised clinical practicum experience or equivalent. The 400 hours includes 25 observation hours.
4. A passing score on a National Praxis II examination.
5. Successful completion of a post graduate Clinical Fellowship (CF) year, which is often done during the student’s first year of employment.

Upon successful completion of the major requirements listed above, post graduates are awarded the Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP). The CCC-SLP is ASHA’s way of informing the public that an individual has met the minimum standards for clinical competence.

**Montana Licensure Requirements**

The Board of Examiners in Speech-Language Pathology and Audiology, a division of the Department of Labor, Licensing, and Regulation, grants licenses to practice in the state of Montana. The UM SLP Graduate program requirements are consistent with Montana licensure regulations.

**Graduation Form**

In spring of year 2, students will be instructed, through the SLP 675, to complete their UM Graduate School application. All applications will be collected and submitted to the Graduate Office by the Graduate Advisor. Students' CyberBear accounts will be charged the UM graduation fee.

At graduation time, the School Chair will sign the current ASHA Standards of Knowledge and Skills Competence in CALIPSO. Students are instructed to download the official Certificate of Clinical Competence document, from CALIPSO, for their record. Upon completion of the CF year and the final electronic application to ASHA, the SLP program will be contacted to officially sign off on all Standards competencies and supervised clock hours.

**REFERENCES**

American Speech-Language Hearing Association
Council of Academic Programs in Communication Sciences and Disorders Council on Academic Accreditation
HIPAA Quick Guide

Physical Security

- Locks, alarms and other physical security devices are used to keep areas secure at all times.
- Unattended areas are kept secure with locks and other devices whenever possible, even during business hours.
- Access to sensitive equipment and data is controlled -- that includes access to printers, fax machines, computers, and paper files.
- Visitors are appropriately monitored and, as necessary, escorted.
- Keys, ID badges, and anything else that controls physical access are kept secure from visitors. Theft or loss of such items is reported immediately.

Oral Communication

- Conversations involving sensitive information take place, whenever possible, in non-public areas where they cannot be easily overheard.
- Sensitive conversations are not permitted in public areas.
- Names or other information that could identify individuals are avoided whenever possible, in case a conversation is overheard.
- Only initials are used in public areas (for emergencies only).

Telephone Use

- Telephone conversations involving sensitive information are conducted in non-public areas, where they cannot be overheard – If you are in the clinic office, the door and window must be shut.
- When discussing confidential information on the phone, the other person's identity must be confirmed before proceeding with the conversation.
- **Only names and callback numbers are left on voicemail or answering machines -- or with the person that takes the message -- if a person cannot be reached directly.** Such as: “This is Shelby from the DeWit RiteCare Clinic. Please call me back at (406) 243-2405.”
- The speaker volume is turned down on answering machines or voicemail systems so that incoming messages cannot be overheard when left or played back.

Information on Paper

- Sensitive documents are kept in secure places, like a locked filing cabinet, and **never** left in unsecured areas such as unattended computer printers, photocopiers, fax machines, or persons' desktops.
- Documents that are no longer needed are shredded immediately.
- Sensitive documents are never left in plain view in areas where visitors could be present. (If such materials must be kept in public areas, they should be face down or otherwise concealed.)
• Sign-in sheets ask for only limited information -- only initials. (In health care settings, patient schedules should not be left in public areas or where they can be easily viewed by non-staff.)

Fax Machine Use
• All fax numbers are confirmed before use.
• Whenever possible, faxes are sent only to machines at known locations, where the security of the receiving machine can be assured.
• **All faxes containing sensitive information include a cover sheet identifying the recipient and including a confidentiality notice. No identifying information should be included on a fax cover sheet.** (That notice should request that faxes sent to an incorrect destination be destroyed, and also request notification to the sender of such errors. Note that it’s not clear these notices have any legal effect, but they are a standard practice.)
• Faxes should not be left sitting in or around the machine.
• Whenever possible, postal mail is used for written transmissions. (It's generally more secure, and there are clear legal protections for it.)

Email
• Care is exercised with every email message received, especially email containing attached files that may be infected. (Spam, spoofs and hoaxes should just be deleted. Do not reply.)
• Every arriving attachment should be confirmed as originating with a trusted source, or checked with antivirus software before opening.
• Links in emails are only accessed when the message is confirmed to originate from a trusted source.
• **Sensitive information is not sent in email messages, including email attachments.** (Our school email is not secure.)
• If transmission of sensitive information via email cannot be avoided, a confidentiality agreement signed by the client must be included in the chart.
• Email recipients and contents should be re-read before sending. (Confirm that you have the correct "to", "cc" and "bcc" addresses.)
I have fully read, understand and agree to the terms and conditions outlined in the 2020 Academic Graduate Student Handbook.

____________________________
Graduate Student Printed Name

____________________________
Graduate Student Signature

__________________________
Date

____________________________
SLP Program Director Signature

__________________________
Date
Authorization of Release of Information

I, ________________, authorize the School of Speech, Language, Pathology, and Occupational Sciences to release compliance/immunization documents to clinical externships sites for placement and audit purposes.

__________________________        _______________________
Graduate Student Printed Name  Graduate Student Signature  Date
Pledge to the UM community

Being a part of the University of Montana means each of us must take extraordinary steps to protect one another while caring for our own health on campus and in Missoula and beyond. As a deliberate gesture of my acceptance of this responsibility, I pledge to **protect my own health**, to **protect others** and help **protect the broader community**, including vulnerable clients that I interact with, from spread of COVID-19 or other threats to the health of our colleagues, friends and fellow citizens. I recognize that, consistent with the Code of Ethics of the American Speech Language Hearing Association, I am ethically bound to take responsibility for my own actions that significantly impact others and need to take mitigation precautions accordingly.

**PROTECT MYSELF**
- monitor for known symptoms of COVID-19: a fever of 100.4 F (38 C) or higher, dry cough, shortness of breath or difficulty breathing, chills, repeated shaking with chills, muscle pain, headache, sore throat or loss of taste or smell, congestion or runny nose, nausea or vomiting or diarrhea;
- report to Curry Health (students) or my private health providers if I experience symptoms or if I believe I have been exposed to COVID-19;
- wash my hands often with soap and water or use hand sanitizer; and
- get vaccinated for the flu in the fall.

**PROTECT OTHERS**
- maintain appropriate social distancing, especially in classroom settings or the presence of high risk members of the community;
- stay home if I feel ill or after exposure to someone who is ill or has tested positive for COVID-19;
- wear an appropriate face mask and other protective gear any time I am outside of my personal living or private working space; and
- be positive, attentive and helpful to anyone around who may be in need of support,

**PROTECT THE BROADER COMMUNITY**
- Understand that the ways I socialize and interact with others have implications for my own and others’ safety (including our clients with communication disorders),
- Keep my clothing, belongings, personal spaces and shared common spaces clean;
- Participate in testing and contact tracing to preserve the wellness of the community;
- Transparently communicate when and if I believe I could expose others to COVID-19 (e.g., traveling to places of COVID-19 outbreaks, social situations, close contacts who test positive, personal positive self-testing) and restrict contact with others accordingly; and
- Carefully observe instructional signs and follow directions given by the University, Missoula local authorities and the State of Montana.

_________________________________________  __________________________________
Signature                                                Date