Evaluation of Practicum

The Knowledge and Skills Acquisition (KASA) & the Clinical Skills and Competency Form (CSCF) were designed to collect information regarding a student's professional and interpersonal skills. Clinical supervisors *and clinicians* complete the appropriate sections of the form at mid-term and at the conclusion of the semester to determine a rating which reflects the independence and competence of the clinician during a practicum experience.

Information Concerning Clinical Grades and Professional Protocol Grades

Grades are compiled from ratings on the Clinical Skills Competency Form (CSCF). The expected ratings indicate the level of ability, which is commensurate with each sequential level of practicum experience. Each supervisor that works with a student clinician rates his/her performance. The overall SPHS 5309 practicum grade is determined by averaging the individual ratings. The percentages of expected competency ratings associated with each grade are as follows:

A ≥ 100%
B 99-85%
C 84-70%
D 69-55%
F ≤ 54%

The overall practicum grade may be lowered due to a professional protocol infraction as described below.

Practicum experiences are documented through records of clock hours. These hours will be credited to a clinician's practicum experience when they obtain a grade of B or better in each practicum experience. Clock hours will not be recorded for practicum experiences in which a grade of C or lower is obtained. If a grade of C or lower is obtained during a practicum experience, a Remediation Plan will be developed as described below.

The CSCF ratings/grades will be used to determine attainment of the competencies on the Knowledge and Skills Aquisition (KASA). Grades of B or better will indicate attainment of the appropriate KASA knowledge and skills. However, grades of C or lower will indicate those competencies that have not been attained.

Professional Protocol

This is a general term for the **3** specific areas delineated on the CSCF, which are evaluated as Satisfactory (S) or Unsatisfactory (U).

Professional Behavior: a grade of U will lower the overall SPHS 5309 clinic grade. A grade of U must be remediated within a specified time period or clinical privileges may be terminated.

Written Communication Skills: a grade of U may lower the overall SPHS 5309 clinic grade, and clinical privileges may be terminated. Remediation Plans will not be extended beyond two semesters.

Oral and Non-verbal Communication: a grade of U may lower the overall SPHS 5309 clinic grade, and clinical privileges may be terminated. Remediation Plans will not be extended beyond one semester.

Remediation Plan

This is a plan developed by the Department Chair along with the Clinical Faculty currently supervising a student clinician. A Remediation Plan is developed when a student clinician is not demonstrating knowledge and skills commensurate with the expectations for the student's current level in clinical practicum. This clinician will typically have earned a grade of C or lower in clinical practicum and/or have received a U for one or more Professional Protocol areas. The Remediation Plan will include:

- Description of expected knowledge and skills, which are not being demonstrated by the clinician.
- Specific goals and behaviors that must be demonstrated to indicate knowledge and skills appropriate for current practicum level (to be developed by faculty and clinician).
- Time frame within which these improvements must be demonstrated and consistently maintained.
- A maximum number of 2 Remediation Plans will be developed for a student clinician during the graduate program for SPHS 5309. Should a student earn a grade of 'C' or 'U' for Professional Protocol during a practicum experience following the completion of 2 Remediation Plans, his/her clinical privileges will be terminated.

Probation

This is the status given to a student clinician who is currently working with a current Remediation Plan. A student clinician who has successfully completed a Remediation Plan is no longer on Probation. However, the skills delineated in the Remediation Plan must be maintained and if they are not, the student clinician will automatically be returned to Probationary status and another Remediation Plan will be developed and clinical privileges may be terminated. No more than two Remediation Plans will be developed for a student clinician. Student clinicians who are on probation must obtain a grade of 'B' or better in all clinical assignments and must obtain a grade of 'S' on all professional protocols from all Clinical Faculty currently supervising this student in order to be removed from Probationary status. A student clinician who does not successfully complete the Remediation Plan within the specified time frame will either have the Remediation Plan extended or have clinical privileges terminated. Under no circumstances will Probationary status or a Remediation Plan be extended across more than two semesters.

Eligibility for Externships

An overall clinical practicum grade of 'B' or better must be obtained in the two semesters immediately prior to participating in an externship. If a grade of 'C' or 'U' or lower is earned in any of these semesters, it will delay and may preclude an externship if adequate improvement is not demonstrated within the specified time period listed in the Remediation Plan as described above. Additionally, a clinician must complete 100 clock hours of treatment/diagnostics under the direct supervision of the Lamar University Speech & Hearing Clinic to be eligible for an externship. Students will not be allowed to enter externship status while on probation or under a remediation plan. Additionally, students placed on probation at an externship site will be pulled from the current site and all clock hours accrued at that site will be relinquished. Please refer to Clinical Practicum Handbook for further explanation of eligibility for externships.

CLINICAL SKILLS & COMPETENCIES FORM – *COVER SHEET*

LAMAR ROTATION

Clinician: _____ Clinical Supervisor: _____
Semester: Fall/ Spring/ Summer/ 20__ Semester in Clinic: 1 2 3 4 5 6
Clinic Assignment(s): _____
Assignment:

Facility	Age Range	Cultural Diversity

Total clock hours earned during current semester: _____

MIDTERM

Clinical Skills Competency (A ≥ 100% of expected ratings, B = 99-85%, C = 84-70%, D ≤ 69-55%, F ≤ 54%)			
Approach to Clinical Work	Evaluation	Intervention	Interaction/ Personal Qualities

Professional Competency (S = Satisfactory, U = Unsatisfactory)		
Professional Behavior	Written Communication	Oral/Nonverbal Communication

FINAL

Clinical Skills Competency (A ≥ 100% of expected ratings, B = 99-85%, C = 84-70%, D ≤ 69-55%, F ≤ 54%)			
Approach to Clinical Work	Evaluation	Intervention	Interaction/ Personal Qualities

Professional Competency (S = Satisfactory, U = Unsatisfactory)		
Professional Behavior	Written Communication	Oral/Nonverbal Communication

If a student has obtained at least 1 ***unsatisfactory rating*** *(U, C, D, F) a remediation plan is necessary. Please notify Clinic Director.*

Mid-Term Evaluation Date: _____Recommended Grade:_____
Final Evaluation Date: _____Recommended Grade: _____

Key Experiences:

Strengths/Accomplishments:

Recommendations for Future Clinical Growth:

Date: _____ Clinical Supervisor: _____ Clinician: _____

LAMAR UNIVERSITY

Clinical Skills Grade *Summary Form*

Approach to Clinical Work	Standard	Semester in Clinic 1	2	3	4	5	6	Midterm	Final
A. Clinical Perspective	Lamar	2	3	4	4	4	4		
B. Organizational Skills	Lamar	3	4	4	4	4	4		
C. Clinical Initiative/Decision Making	Lamar	3	3	3	3	4	4		
D. Participation in Supervisory Process	Lamar	3	3	4	4	4	4		
E. Flexibility in Clinical Practice	Lamar	2	3	4	4	4	4		
							Percentage: Received/Expected		
							Numeric Grade/Letter Grade		

Evaluation	Standard	Semester in Clinic 1	2	3	4	5	6	Midterm	Final
A. Conducts screening and prevention procedures	IVG; 1a	2	3	3	4	4	4		
B. Collects and integrates case history information	IVG; 1b	3	3	4	4	4	4		
C. Selects and implements evaluation procedures	IVG; 1c	2	3	3	4	4	4		
D. Adapts interviewing and testing procedures	IVG; 1d	2	2	2	3	3	4		
E. Interprets results and makes recommendations	IVG; 1e	2	2	3	3	4	4		
F. Completes administrative & reporting functions	IVG; 1f	2	3	3	4	4	4		
G. Makes appropriate recommendations & referrals	IVG; 1g	2	2	3	3	3	3		
							Percentage: Received/Expected		
							Numeric Grade/Letter Grade		

Intervention	Standard	Semester in Clinic 1	2	3	4	5	6	Midterm	Final
A. Develops treatment plans	IVG; 2a	2	3	3	4	4	4		
B. Implements intervention plan	IVG; 2b	3	3	4	4	4	4		
C. Effectively utilizes materials & instrumentation	IVG; 2c	3	3	4	4	4	4		
D. Measures/evaluates performance and progress	IVG; 2d	2	3	3	4	4	4		
E. Modifies plan to meet needs of clients	IVG; 2e	2	3	3	4	4	4		
F. Completes administrative & reporting functions	IVG; 2f	2	3	3	4	4	4		
G. Identifies associated conditions/makes referrals	IVG; 2g	2	2	2	3	3	3		
							Percentage: Received/Expected		
							Numeric Grade/Letter Grade		

Intervention	Standard	Semester in Clinic 1	2	3	4	5	6	Midterm	Final
A. Develops treatment plans	IVG; 2a	2	3	3	4	4	4		
B. Implements intervention plan	IVG; 2b	3	3	4	4	4	4		
C. Effectively utilizes materials & instrumentation	IVG; 2c	3	3	4	4	4	4		
							Percentage: Received/Expected		
							Numeric Grade/Letter Grade		
							Total Percentage: Received/Expected		
							Total Letter Grade		

0 = Absent: Specific repeated direction does not alter unsatisfactory skills
1 = Taught: Specific repeated direction required
2 = Emerging: Specific direction results in some generalization of skills
3 = Present: General and some specific direction results in competence
4 = Developed: Demonstrates independence but needs some supervisory direction
5 = Exceptional: Takes initiative; displays superior competencies

Clinician: _____ Clinical Supervisor: _____

(List key experiences, strengths/accomplishments, and recommendations for improvement)

LAMAR UNIVERSITY

CLINICAL SKILLS COMPETENCY FORM

Professional Protocol

Student Name: _____Semester/Year: _____
Please indicate satisfactory behavior with an "S" and any unsatisfactory behavior with a "U". Attach a written explanation of any unsatisfactory behavior.

Professional Behavior (IVG; 3d)	**Midterm**	**Final**	
Ethical Practice Conducts all clinical work in accordance with Lamar University Professional Protocol and the Code of Ethics and scope of Practice in Speech-Language Pathology set forth by the American Speech-Language Hearing Association.			
Responsibility Consistently prepares for and completes clinical services, conferences, and other practicum activities. Uses universal safety precautions whenever necessary.			
Punctuality Completes all clinical practicum responsibilities in a timely manner and follows prescribed clinical procedures for service delivery.			
Confidentiality Protects and maintains confidentiality of clinical information as prescribed by HIPAA guidelines and clinic protocols.			
Personal Appearance Presents professional image through appropriate personal appearance and dress, identification with professional nametag, and professional demeanor.			
Written Communication Skills (IV-B)			
Consistently and accurately conveys professional information from coursework, supervisory input, clinical activities and other resources.			
Consistently writes information in a clear and organized manner using accurate spelling and grammar.			
Consistently and accurately uses professional writing conventions, terminology and style to clearly communicate information in a manner consistent with audience and/or clinical setting.			
Oral/Nonverbal Communication (IV –B)			
Consistently and accurately uses oral communication that demonstrates speech & language skills in English, which, at a minimum, are consistent with ASHA's most current position statement on students and professionals who speak English with accents and nonstandard dialects.			
Consistently and accurately conveys correct information from course work, supervisory input, and clinical activities and other resources.			
Consistently and accurately describes behaviors of client and patient.			
Nonverbal language, including but not limited to affect, eye contact, tone, or body language, is consistently appropriate for clinical interactions.			
Consistently models appropriate communication in all clinical settings and provides appropriate clarification to clients, family members, or other professionals when needed.			
Oral and nonverbal communications are appropriate for the cultural, socioeconomic, and semantic needs of the audience.			

Failure to meet these standards will result in probationary status. If exhibited behaviors violate these standards of our profession, the supervising SLP who identifies a clinician's conduct as inappropriate will complete a Professional Infraction Notice. The result may be lowering of the semester clinical grade and/pr termination of clinical responsibilities determined by the SLP Department Chair, the Clinical Director or the Externship Advisor based on the severity and/or consistency of the violation. A remediation plan will e developed, if appropriate.

Clinical Skills Rating Scale

APPROACH TO CLINICAL WORK

A. Clinical Perspective

- Initiates and accomplishes professional activities related to overall case management
- Demonstrates ability to focus on client's needs and to modify case management as needed to meet those needs.
- Demonstrates clear understanding of assessment, intervention, and case management responsibilities.

Expected Ratings					
Semester					
1	2	3	4	5	6
2	3	4	4	4	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

B. Organizational Skills

- Accomplishes clinical work in an efficient and effective manner
- Thoroughly plans and prepares for all clinical activities to increase competence
- Organizes information within a theoretical perspective that is guided by current research and clinical experience

Expected Ratings					
Semester					
1	2	3	4	5	6
3	4	4	4	4	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

C. Clinical Initiative/Decision-Making

- Demonstrates an active and responsible approach to clinical work
- Seeks and considers alternative interpretations of clinical data, observations, other relevant information
- Seeks and considers alternative approaches for providing effective professional services

Expected Ratings					
Semester					
1	2	3	4	5	6
3	3	3	3	4	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

D. Participates in the Supervisory Process by:

- Actively participating in own clinical development by recognizing and stating own needs and requesting meaningful feedback
- Positively responding to supervisory feedback by thoughtful consideration of new ideas and information
- Implementing supervisory suggestions to maximize clinical growth and effectiveness
- Demonstrating strategies to analyze and develop own clinical effectiveness including self-observation and analysis of knowledge and skills

Expected Ratings					
Semester					
1	2	3	4	5	6
3	3	4	4	4	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

E. Flexibility in Clinical Practice

- Actively develops a variety of clinical perspectives, models, and strategies
- Demonstrates self-confidence in considering and utilizing a variety of clinical perspectives, models, and strategies
- Demonstrates and applies a range of interaction styles and clinical approaches to provide services appropriate to each client

Expected Ratings					
Semester					
1	2	3	4	5	6
2	3	4	4	4	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

EVALUATION SKILLS

A. Conducts screening and prevention procedures (IV-G; 1a)

- Selects/adapts screening procedures appropriate for each individual client
- Effectively administers and accurately scores screening instruments
- Accurately interprets screening results and makes appropriate recommendations

Expected Ratings					
Semester					
1	2	3	4	5	6
2	3	3	4	4	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

B. Collects and integrates case history information (IV-G; 1b)

- Gathers information from clinic file, client, family, caregivers, and professionals
- Thoroughly reads and summarizes information
- Formulates questions to clarify and update information
- Obtains needed information taking into consideration perspectives of client, family, and other agencies

Expected Ratings					
Semester					
1	2	3	4	5	6
3	3	4	4	4	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

C. Selects and implements evaluation procedures (nonstandardized tests, behavioral observations, and standardized tests, IV-G; 1c)

- Develops comprehensive assessment battery to accomplish clinical purpose
- Selects appropriate standardized tests for individual client
- Plans for and develops non-standardized probes
- Appropriately administers standardized test to obtain representative client performance
- Accurately observes and records relevant communication and other behaviors
- Consistently and accurately scores standardized tests and analyzes results of non-standardized measures

Expected Ratings					
Semester					
1	2	3	4	5	6
3	3	4	4	4	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

D. Adapts interviewing and testing procedures to meet individual client needs (IV-G; 1d)

- Recognizes need to adapt assessment battery and testing procedures to accommodate needs unique to specific client
- Plans for and implements modifications based on client's responses and participation
- Actively utilizes a variety of resources to obtain relevant assessment information

Expected Ratings					
Semester					
1	2	3	4	5	6
2	2	2	3	3	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

E. Interprets and integrates test results and behavioral observations, synthesizes information gained from all sources, develops diagnostic impressions, and makes recommendations (IV-G; 1e)

- Determines validity and appropriateness of information obtained
- Interprets assessment information to determine client's current functioning
- Compares client performance to peer group
- Determines profile of skills including strengths, difficulties, and error patterns
- Diagnoses communication difficulties and their impact for client and family
- Determines client's responses to trial teaching procedures
- Considers factors contributing to communication difficulty

Expected Ratings					
Semester					
1	2	3	4	5	6
2	2	3	3	4	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

F. Completes administrative and reporting functions necessary to support evaluation (IV-G;1f)

- Consistently and accurately prepares for evaluation session.
- Organizes formal/informal test results
- Writes a comprehensive and accurate evaluation report that is appropriate to the clinical setting and needs of the client
- Completes a comprehensive written report of assessment results including accurate description of client's current status, strengths, and needs. Completes appropriate billing in a timely manner

Expected Ratings					
Semester					
1	2	3	4	5	6
2	3	3	4	4	4

Comments: _____

_____

Rating for Midterm: ____ **Rating for Final: ____**

G. Makes appropriate recommendations and referrals for clients/patients (IV-G; 1g)

- Develops appropriate recommendations for case management including referrals and consultations
- Develops appropriate recommendations for intervention and/or re-evaluations to address client's needs

Expected Ratings					
Semester					
1	2	3	4	5	6
2	2	3	3	3	3

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

INTERVENTION SKILLS

A. Develops focused, measurable and achievable treatment plans (IV-G; 2a)

- Includes meaningful and measurable long-term and short-term goals
- Selects effective treatment strategies and approaches based on academic and diagnostic information
- Develops treatment plan in coordination with client, family, and relevant others
- Develops thorough lesson plans to support achievement of short-term goals including clinical materials/instrumentation, motivating activities, instructions, and feedback
- Implements suggestions from previous sessions and supervisory conferences

Expected Ratings					
Semester					
1	2	3	4	5	6
2	3	3	4	4	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

B. Implements intervention plans (IV-G; 2b)

- Utilizes treatment time to address client communication and other needs
- Applies treatment contexts, approaches, and strategies to foster client progress
- Implements strategies to involve client, family, and relevant others to support communication progress

Expected Ratings					
Semester					
1	2	3	4	5	6
3	3	4	4	4	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

C. Effectively utilizes materials and instrumentation for prevention and intervention (IV-G; 2c)

- Appropriately uses materials, instrumentation, instructions, prompts, and feedback to facilitate client participation and change
- Recognizes and utilizes spontaneous teaching opportunities to facilitate client progress

Expected Ratings					
Semester					
1	2	3	4	5	6
3	3	4	4	4	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

D. Measures/evaluates client performance and progress (IV-G; 2d)

- Accurately observes and records client and clinician behavior
- Analyzes observational data to determine effective and ineffective aspects of treatment
- Periodically monitors client progress through appropriate data collection
- Consults with client, family, and relevant others concerning progress and changing needs of the client

Expected Ratings					
Semester					
1	2	3	4	5	6
2	3	3	4	4	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

E. Modifies intervention plan to meet individual needs of clients (IV-G; 2e)

- Modifies treatment procedures, materials, and/or instrumentation within sessions based on client's response
- Modifies subsequent sessions based upon session analyses and supervisor feedback
- Modifies goals and approaches in response to client progress and changing needs
- Utilizes a variety of resources to gain information concerning approaches to treatment

Expected Ratings					
Semester					
1	2	3	4	5	6
2	3	3	4	4	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

F. Completes administrative and reporting functions necessary to support intervention (IV-g; 2f)

- Maintains appropriate and comprehensive clinical records
- Completes appropriate clinical reports in a timely manner
- Writes professional reports characterized by comprehensive and accurate description of the intervention process, client's current status, client's strengths/needs.
- Completes case management activities necessary to address needs of individual clients, their families, and relevant others

Expected Ratings					
Semester					
1	2	3	4	5	6
2	3	3	4	4	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

G. Identifies associated conditions and refers clients, their families, and relevant others for additional services as appropriate (IV-G; 2g)

- Recognizes associated conditions and/or needs warranting professional attention, such as: audiological, educational, medical, psychological, social, and vocational
- Appropriately refers and supports clients, their families, and relevant others in obtaining appropriate services

Expected Ratings					
Semester					
1	2	3	4	5	6
2	2	2	3	3	3

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

INTERACTION AND PERSONAL QUALITIES

A. Communicates effectively with client, family, caregivers, and relevant others (IVG; 3a)

- Communicates clearly and effectively with client, family, caregivers, and relevant others demonstrating sensitivity to cultural/linguistic backgrounds, preferred modes of communication, and communication status
- Uses communication characterized by:
  - Responsiveness to others
  - Appropriateness of tone/level/demeanor
  - Flexibility in communication strategy and style

Expected Ratings					
Semester					
1	2	3	4	5	6
3	3	3	4	4	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

B. Collaborates with other professionals in case managements (IV-G; 3b)

- Gathers and considers information from supervisors and other professionals
- Accurately and clearly describes client's behavior/communication status, strengths, and needs to supervisors and other professionals.
- Accurately and clearly describes the intervention process
- Makes appropriate decisions based on shared information
- Initiates activities and contributes information that promotes mutual problem solving

Expected Ratings					
Semester					
1	2	3	4	5	6
2	3	3	4	4	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

C. Counsels and collaborates with clients, family, caregivers, and relevant others regarding communication and swallowing disorders (IV-G; 3c)

- Obtains information from client, family, and relevant others pertinent to case management
- Accurately and clearly explains information regarding client status and needs using appropriate terminology
- Facilitates discussion of attitudes and feelings pertinent to progress
- Effectively uses conventional counseling strategies such as listening and reflecting to facilitate progress
- Engages client, family, and relevant others in problem solving activities to facilitate progress

Expected Ratings					
Semester					
1	2	3	4	5	6
2	3	3	4	4	4

Comments: _____

_____

_____

Rating for Midterm: ____ **Rating for Final: ____**

Knowledge & Skills Acquisition Standards

Expected Knowledge Outcomes:	CCC Standard Addressed
Student clinician will demonstrate knowledge of the Code of Ethics as issued by the American Speech-Language-Hearing Association.	III-E

Behavioral Objectives: Student clinician will read and maintain familiarity with the ASHA Code of Ethics as demonstrated by participation in clinical seminars and by signature on the Lamar University Clinical Education Ethical Services Agreement.

Student clinician will demonstrate knowledge of professional issues.	III-G

Behavioral Objectives: Student clinician will perform at expected levels of participation in clinic Seminars (e.g., HIPAA, Risk Management, Billing) as demonstrated by signature on the Lamar University Confidentiality and Security Agreement and required attendance at SPHS 5309 seminars.

Students clinician will demonstrate knowledge about certification, Specialty recognition, and other relevant professional credentials.	III-H

Behavioral Objective: Student will demonstrate knowledge of information regarding certification and specialty recognition through participation in appropriate clinical seminars.

Student must develop skills in oral and written or other forms of communication sufficient for entry into professional practice.	IV-B

Behavioral Objectives: Student clinician will consistently demonstrate skills in oral and written communication as appropriate for the semester of clinical experience and for the long-term goal of entry into professional practice, as measured through the Lamar University Protocol for Oral/Nonverbal Communication and the Lamar University Protocol for Written Communication. Evidence of oral and written communication skills may be assessed in the following areas:

- Chart reviews
- Planning
- Conferences with supervisors/clinical instructors
- Lesson plans
- Session evaluations
- Chart notes
- Evaluation reports
- Clinical Forum presentations
- Progress reports
- Communication with other professionals
- Communication with client/patient
- Communication with family or a client/patient
- Communication with clinical Instructor/Supervisor
- Communication with all other personnel involved in client/patient care

Behavioral Objective: Student clinician will consistently meet levels of performance as expected for each sequential semester of clinical work as measured through use of the Lamar University Clinical Skills Competency Form, in the following areas:	IV-G

- Prevention,
- Evaluation,
- Intervention, and
- Personal qualities appropriate for professional work.

Opportunities for Remediation:

IV-B:
If a student receives an "Unsatisfactory" for any of the written communication skills, the Clinical Instructors will issue a "Professional Infraction Notice." If unsatisfactory ratings remain at mid-term or end-of-

semester evaluations the student's clinical privileges will be automatically lowered to probationary status, and a remediation plan will be developed by the Clinical Director in collaboration with the Department Chair with notification to the major professor. Additionally, the student's semester grade may be lowered. Development of written communication skills will be evaluated at all subsequent mid- and end-of-semester evaluations. Failure to remediate, as evidenced by not achieving and maintaining satisfactory performance (S) by the end of semester 3 may result in termination of clinical privileges.

If a student receives an "Unsatisfactory" for any of the oral/nonverbal communication skills, the Clinical Director will issue a "Professional Infraction Notice." If unsatisfactory rating remain at mid-term or end-of-semester evaluations the student's clinical privileges will be automatically lowered to probationary status, and a remediation plan will be developed by the Clinical Director in consultation with the Department Chair with notification to the major professor. Additionally, the student's grade for that semester of clinic may be lowered. Failure to remediate, as evidenced by not achieving and maintaining satisfactory performance (S) by the end of semester 2 may result in termination of clinical privileges.

Professionalism and Ethical Behavior

The **Protocol for Professional Behavior** form is the tool used to assess professional behavior competencies: **Ethical practice, responsibility, punctuality, confidentiality, and personal appearance.** If exhibited behaviors violate these standards of our profession, the Clinical Director will complete a **Professional Infraction Notice**. Failure to meet these standards may result in probationary status to be determined by the Department Chair with notification to the major professor and the Clinical Instructor directly involved. A remediation plan will be developed that provides the student with specific written recommendations for remediation, along with a deadline by which the remediation must be accomplished. Unsatisfactory performance in any of the following areas: 1) ethical practice, 2) responsibility, 3) punctuality, 4) confidentiality, or 5) personal appearance will result in lowering of the clinic grade for the semester, and may also result in termination of clinical privileges. Termination with no remediation option may be warranted for severe ethical violations or threats to safety/welfare of clients.

IV-G:
Students will be given on-going feedback by their clinical supervisors with specific recommendations for remediation as needed. A formal evaluation meeting will be held at mid-semester and at the end of the semester, using the Clinical Skills and Competency Form as a mechanism for the supervisor to identify areas of success, as well as areas needing remediation. Failure to demonstrate expected levels of performance in any area of clinical skills will be recorded on the Clinical Skills and Competency Form and the clinical supervisor/instructor for that practicum assignment will make specific recommendations for those areas that are not at expected levels. Students who demonstrate clinical skills below expectations for the current level (semester) will receive an opportunity to improve these skills through remediation. This remediation will include specific goals, suggested resources, and a reasonable time frame for completion. Please see the Graduate Handbook for further information regarding remediation of identified areas of clinical skills (SLP Graduate Handbook).

Conflict Resolution

There are always cases of disagreement between individuals, but if a dispute arises between a faculty member, academic or clinical, and student, the student may feel uncertain about how to resolve the problem without prejudice. The following policies have been adopted to give students a forum within which issues can be aired and, hopefully, resolved satisfactorily. The best hope is that the disagreement can be resolved by a discussion between the two parties. If the dispute cannot be resolved between the principle parties for any reason, the student should bring the complaint to the Clinical Director. The Clinical Director will act as mediator between all individuals involved in the complaint and will attempt to arrive at a fair solution. If the dispute still cannot be resolved between the principle parties and the Clinical Director, the complaint will be taken to the Department Chair. The Department Chair will establish a group, including the complainant, to discuss the issue and reach a resolution.

Questions pertaining to classroom assignments, performance, or grading should be raised with the course instructor. Students that are uncertain or confused as to policies or procedures with regard to course selection, requirements, or any of a number of other such issues, should see their advisors.

Questions regarding assignments in particular practicum/internship sites should be directed to the appropriate Clinical Advisor. Canards cannot be relied upon. Contact the appropriate individual by telephone, email, or personal visit to obtain accurate information. If a satisfactory solution is not reached, it is then appropriate to discuss the matter with the Clinical Director, who can advise further actions or avenues of appeal.

Complaints regarding clinic caseload, supervision, internships/externships, or any other clinically related issues/concerns should attempt to be resolved with the individual supervisor/instructor, professor, or clinical advisor directly involved. If a satisfactory solution is not reached, it is then appropriate to discuss the matter with the Clinical Director.

All complaints must be signed and submitted in writing prior to meeting with the Clinical Director. The document must clearly describe the specific nature of the complaint, the names of all parties involved in the complaint, steps taken to alleviate the problem, the outcomes thus far, and any other significant information.

A student may request to meet with the Clinical Director in private. However, all parties involved in the episode may request to attend the meeting. Most of the time, the parties to a dispute settle the issues during these discussions. However, if a student remains dissatisfied with the outcome of these conversations, the student may submit a written request to meet with the Department Chair to discuss conflict resolution. The letter must state the specific nature of the complaint and the redress, or remedy, the student seeks as an outcome of the meeting.

It is important to recall that the complaint process requires a student in conflict with an instructor, supervisor, or clinical advisor to attempt to resolve the dispute before meeting with either the Clinical Director or the Department Chair.

The student should start the process by meeting with the instructor/supervisor and then with the Clinical Director, and finally the Department Chair.

Students are encouraged to resolve complaints (or grievances) at the appropriate level of dispute; however, should this approach fail or be inappropriate, students may submit written complaints to the Office of Student Affairs in the Wimberly Building, Suite 115 or via fax (409) 880-1726.