

Communication Sciences and Disorders

Policies and Procedures for Clinical Education

2010 - 2011

Clinical Education in Communication Sciences and Disorders

Clinical Education in the Communication Sciences and Disorders program at Longwood University is based on the following guiding principles:

- Evidence-Based Practice
- ASHA Code of Ethics
- ASHA Scope of Practice
- ASHA CCC Standards
- Best Practice in Clinical Supervision
- HIPAA Regulations

Students participate in educational experiences through the practicum courses, clinical teaching teams, and service to clients at the Longwood Center for Communication, Literacy, and Learning (LCCLL), off campus LCCLL contract sites and in external placements.

The mission of the Longwood Center for Communication, Literacy and Learning is to provide quality professional services to individuals of all ages both at the Center and through community outreach programs. Such professional services may include early interventions, speech/language evaluations and therapy, targeted tutoring, and parent support programs. The mission of the Center is also to provide quality educational experiences to Longwood University students as they engage in professional activities through the Center under faculty supervision

I. CLINICAL PREPAREDNESS

A. Certifications

Prior to placement in the first level of clinical practicum, each student will submit documentation of:

- A negative Tb Skin Test signifying that the student is free of tubercular infection. The certification must be dated within the 3 months prior to submission.
 - **Students should have a Tb Skin Test prior to the orientation meeting at the start of their graduate program and present the documentation of a negative test to the clinical director at orientation.**
- Current health insurance (by signing *Acknowledgement of Risk and Release*)
 - **Students should print and sign this document and bring it to the clinical orientation -**
http://www.longwood.edu/materielmanagement/rm_risk-release.pdf
- Current automobile insurance
 - **Students should print this form in Appendix 1 of this manual, complete it and bring it to the clinical orientation.**
- HIPAA and universal precautions training (see specifics in C and D)
- A Signed Confidentiality Agreement
 - **Students should print this form in Appendix 2 of this manual, complete it and bring it to the clinical orientation.**
- Agreement of Understanding
 - **Students should print this form in Appendix 3 of this manual and bring it to the clinical orientation**
- Criminal Background Check (see specifics in B)

Additionally, some off-site health care practicum settings require HepB vaccinations, CPR, radiation training, infection control, or other trainings as a condition of practicum placement at their sites. Updated Tb tests and criminal background checks may be required by external facilities at time of placement. You will be notified prior to the placement about any specific conditions of the placement.

Present copies of all certifications to the Clinical Director.

B. Criminal Record Background Check

Longwood policy requires that each student who participates in a program-related field placement must complete a criminal background check; therefore, each student who registers for CSDS 580 (Initial Practicum in Speech Language and Hearing) must submit evidence of a criminal record background check **conducted no earlier than 3 months prior to the start of the course**. To obtain a criminal record background check, follow this procedure:

- Go to www.CertifiedBackground.com and click on "students."

- In the package code box, enter package code: og79
- Select a method of payment: Visa, MasterCard or money order.

Once your order is submitted, you will receive a password to view the results of your background check. The results will be available in approximately 72 hours.

Once your background check is complete, print a copy and deliver it to the clinical director at orientation.

Students will not be allowed to participate in speech-language diagnostics or therapy without documentation of an approved background check. The clinical director will evaluate the documentation to determine the student's acceptability for working in the Longwood University Center for Communication, Literacy, and Learning (LCCLL).

A background check is considered "valid" by LCCLL for a 24 month period. At the discretion of the LCCLL Director or Speech-Language Clinical Director, the student may be asked to complete another background check prior to 24 months.

External practicum sites may require an additional criminal record background checks immediately prior to the student's placement at that facility. External practicum placements will evaluate the information resulting from a student's criminal background record according to their own facility policies. The CSDS program will abide by the decision of each external practicum site as to the acceptability of the practicum student at their agency.

- C. **HEARING SCREENING** – All incoming grad students will have their hearing screened by second year grade students under the direct supervision of a faculty member or clinical educator.

D. CONFIDENTIALITY

Any violation of these regulations will result in a remediation plan and may result in termination of clinical privileges.

All students must sign the non-disclosure confidentiality statement before beginning clinical practicum.

HIPAA Training

HIPAA refers to the Health Insurance Portability and Accountability Act and mandates how private health information should be handled. The student clinician's understanding of HIPAA is essential. Each graduate student in CSDS will submit documentation of successful completion of the HIPAA training modules which include a series of PowerPoint presentations online in MOAT and quizzes at the end of each module. You will be given a secure e-mail account, which is separate from the @live.longwood.edu account that all Longwood students use. You will receive an e-mail in your secure

account that provides you with access to MOAT. When you receive the e-mail, log into MOAT and begin the modules. All security modules **MUST** be completed, including the “Longwood vault” before you will be directed to the successful completion certificate. **Each student will print the “successful completion” certificate and place it in the Clinical Director’s mailbox in the supervision room by the end of the first week of classes. Students will not be able to participate in clinical practicum until the modules are complete and the certificate is submitted to the Clinical Director.**

Confidential Record

As required by the ASHA Code of Ethics, **ALL** information pertaining to clients and their families is to be considered confidential information. Cases **must not** be discussed with friends, roommates, or any person outside of the clinical setting or relationship.

Confidential records are maintained in locked file cabinets in locked rooms. Only persons who have successfully completed the confidentiality training and assurance requirements are given access to these files.

Students may not exchange information about clients, either by phone, fax, or e-mail, with other individuals or agencies without the written permission of the client AND verbal permission of the clinical supervisor. If the student clinician believes that additional information about a client is needed or that the case should be referred for additional treatment, that student must talk with the supervisor about the need for additional information or treatment and, with supervisor’s approval, complete release of information form for client’s signature.

Whenever clinic information (i.e. lesson plans, etc) is being transported to an LCCLL off-site contract placement, or any other time it is necessary to transport any client related information, it is MANDATORY that students carry that information in one of the locked black boxes that are stored in the workroom. The box should be locked and transported in the trunk of the car. If testing is conducted at the off-site contract placement, the completed test forms must be returned in the lock box and filed in the locked file cabinet the same day.

When students generate draft copies of lesson plans, notes, and reports, client confidential information is removed. **Students are required to transfer these files to their supervisor for review using ONLY their encrypted Longwood e-mail account.** Students are assigned an encrypted account at the start of practicum.

Clinical Notebooks

Each student is required to keep a notebook with the items listed below in chronological order (most recent on top). The notebook should be readily available to the student and given to the supervisor every session. These notebooks should be kept for off -site LCCLL placements as well and available to the LU off-site placement supervisor. Please

use dividers for sections.

- a. **Personal clinical goals** (described in the section on Clinical Teaching Teams)– for the semester at the front of the notebook
- b. **Lesson plans** – once approved by the supervisor for the week.
- c. **Observation Feedback forms** – from supervisor.

This notebook is kept at LCCLL, unless the student is taking it to an LCCLL off-site placement. **If a student is carrying his/her clinical notebook to the site, it must be kept in the lockbox.**

Confidential information not needed in client files should be shredded in the grad workroom shredder.

Security of Graduate Student Work Room

The graduate student workroom is a locked room and students are issued keys at the start of their clinical placements. Students must return the keys at the end of each semester. Student keys are returned at the end of each semester as part of final records check. Keys are re-issued at the beginning of the next semester to students seeing clients at LCCLL. Students MAY NOT allow any unauthorized persons entry to the graduate student workroom. **Parents/clients/family members are NEVER permitted in the Graduate Student Workroom.**

E. Use of Computers/Printer/Copier

Computers are provided for student use in the Graduate Student Workroom. These computers are limited to those functions necessary to the preparation and reporting of diagnostic and therapy sessions and related correspondence. **Instant messaging, personal e-mail accounts, computer games, etc. are not permitted on the workroom computers.** Students should use personal laptops or other electronic devices for checking personal e-mail.

All client reports, correspondence to referral sources, or any other documents containing personal identifying information must be maintained **on these computers only.** **Students may not save reports to personal flash drives or CDs.**

The printer in the graduate workroom is for clinical uses only. It is not for printing work related to courses, such as PowerPoint presentations, assignments, etc. Those should be printed on students' own printers. The same is true of the copy machines at the center. Those are to be used for copies related to the work of the LCCLL, not for personal uses. There is a copier at the library where students can make copies of materials that are not related to clinical work. The copier in the office is for official LCCLL business used by faculty and staff. **The copier for copying materials for clinical use is in the storage room at the top of the stairs.**

The color printer on the COW (computer on wheels) is available for printing clinic related materials.

The videos of any sessions that need to be preserved will be saved to DVD at the end of each semester and the hard drive will be purged for a fresh start the following semester.

F. Procedures for Writing Clinical Reports/Treatment Plans/Lesson Plans/SOAP Notes/Progress Reports

Students may never remove client files from LCCLL, unless they have been given permission by the clinical supervisor to transport to an LCCLL off-site contract placement. **In that instance, the files must be transported in the locked black box.** It is permissible to write clinical reports, treatment plans, lesson plans, SOAP notes, and progress reports from your home computers **under the following conditions:**

1. Client identifying information is not listed on any paperwork or electronic document a student has in his/her possession outside LCCLL.
 - a. Students may **never** remove the case history form from the center, but may take notes, **without any identifying information**, and take that with them to write the report.
 - b. **Students may never remove the completed test protocols from the center, but may take notes about the test results** – item analysis, scores, etc. as long as identifying information is not included in the notes that the student takes to write the report. If testing at an LCCLL off-site contract placement, the completed test protocols must be returned to the center at the end of testing the **SAME** day.
 - c. Students view the video of the session at the center and take notes, without any identifying information, in order to write the report, SOAP note, next lesson plan, etc. The SOAP note for a session is written and then the **lesson plan for the subsequent session is developed based on the results reported in the SOAP.**
2. **Students never write the clinical report/plan/etc. in the presence of anyone that is not a student or supervisor at LCCLL.** Once a student has received the corrected copy from his/her supervisor and has it in the secure e-mail account to add identifying information while at LCCLL, **the student must delete the original copy from his/her home computer or laptop.**
3. **Under no circumstances are students allowed to write any report on a public computer in a library or elsewhere.** The only two acceptable places to write any clinical documents are at home, without identifying information, or on the computers in the graduate workroom at LCCLL.

4. **SOAP notes** from the week's sessions along with **lesson plans** for the next week's sessions **must be sent to the clinical supervisor by noon on Friday of each week** if the next session is on Monday or Tuesday. If the next session is on Wednesday, Thursday or Friday, it is acceptable to submit the SOAP and the lesson plan by Monday at noon.
5. **Draft evaluation reports** must be sent to the clinical supervisor within 48 hours of the evaluation, unless given prior permission from the supervisor for a different schedule.
6. Students write the draft report, or other clinical document as listed above, with just the client's initials and **no identifying information**. Students submit the draft documents to the clinical supervisor electronically **through their secure LU e-mail account to the supervisors LU e-mail account**. The clinical supervisor will submit it back electronically with comments, corrections, etc. Once all corrections have been made, the final draft of the document, with the identifying information, must be written on the computers in the graduate student workroom and printed for placement in the client's file once all signatures have been obtained. Students are responsible for obtaining the supervisor's signature and placing the documents in the client's file.
7. Students are issued a secure Longwood e-mail account when they begin the initial practicum. This is a different e-mail account than the @live.longwood.edu account each Longwood student is issued. **Forwarding e-mail from a LU secure account to any other e-mail account is PROHIBITED as this compromises security and violates HIPAA.**

G. Infection Control

The health and safety of clients, student clinicians, faculty, and LCCLL staff are of utmost concern. Student clinicians complete a training module on universal precautions and other measures important to infection control. The training module includes designated videos and a quiz. Students must view the Blood borne Pathogens video and the hand washing video and complete the **universal precautions quiz** on Blackboard **by the end of the first week of the initial practicum class**. Passing for this quiz is 90%. If a student does not achieve a grade of 90%, he/she should re-watch the video, notify the Clinical Director of the need to retake the quiz, and then do so **BY the end of the first week of initial practicum class. After passing the test at 90%, the student will print the test and place it in the Clinical Director's mailbox in the supervision room.**

H. Liability Insurance

Students enrolled in all levels of clinical practicum **are strongly encouraged by both the CSDS program and the Longwood office of Material Management (Risk Management) to carry professional liability insurance**. Liability insurance is designed to protect you as a professional person in the event that someone might sue you, claiming

that something you advised, recommended, or required was injurious. This insurance does not *prevent* someone from bringing suit against you, but it does provide financial assistance for legal fees and other expenses incurred in defending yourself. One option for obtaining the insurance is through the National Student Speech-Language-Hearing Association (NSSLHA); membership is required. Through NSSLHA you will be able to obtain liability insurance at low cost. For more information about coverage go to:

<https://www.personal-plans.com/asha/welcome.do>

Choose the “Professional Liability” button from the menu to the left.

The professional liability insurance is administered by Seabury & Smith at:

Marsh Affinity Group Services
75 Remittance Drive, Suite 1788
Chicago, IL 60675
Toll-Free: 1-800-503-9230

II. CLINICAL PRACTICUM

A. Observation Hours

All students must complete, or show documentation of having completed at the undergraduate level, 25 hours of observation of an ASHA certified speech-language pathologist engaged in therapy and/or evaluation with clients. If students did not complete 25 hours of observation at the undergraduate level, they will enroll in CSDS 589 - Introduction to Clinical Practice, during the summer prior to starting CSDS 580 in the fall semester.

B. Clinical Clock Hours

Each student plans practicum experiences with the clinical director; however, each student will assume responsibility for the accumulation of necessary ASHA clock hours. Although it is expected that a student will accrue more hours when engaged in a higher number of credit hours for practicum, there is no direct correspondence between the number of credit hours and the number of clinical clock hours earned. Students may not attend any placement unless currently enrolled in one of the clinical practicum courses.

All students are required to participate in practicum at the Longwood Center for Communication, Literacy, and Learning (LCCLL). Students typically complete more than 60 clinical clock hours before an external placement is approved. Students must complete a minimum of two off-campus clinical experiences approved by the Communication Sciences and Disorders Clinical Affairs Committee.

Admission to the graduate program does not guarantee admission to off-campus clinical placements. Admission to these placements depends on the quality of the graduate student's academic record, clinical performance under the supervision of LU faculty and clinical educators, and possession of characteristics necessary to pursue a career in speech-language pathology. Students apply for off-campus clinical experiences and placements are the decision of the CSDS Clinical Affairs Committee. A minimum letter grade of B- must be earned in each CSDS practicum and externship course in order to count clinical clock hours. Hours must be obtained under the supervision of an ASHA certified speech-language pathologist.

C. Clinical Affairs Committee

The Clinical Affairs Committee consists of the Clinical Director, Graduate Program Coordinator, and at least one additional faculty member. The committee meets each semester to review each student's readiness for the next practicum.

D. Clinical Education

During the clinical experiences offered in the Longwood Center for Communication, Literacy and Learning and the off-campus clinical sites, students learn to:

- plan diagnostic assessments,
- perform a range of diagnostic procedures,
- interpret results of diagnostic assessments,
- report diagnostic assessment results in an organized, accurate, and professional manner,
- interact appropriately with clients, clients' families, and other professionals,
- demonstrate appropriate planning for therapy sessions,
- conduct appropriate therapy procedures,
- manage unacceptable behavior during assessments and therapy, and
- participate in evaluation of own clinical performance.

Students must notify the Clinical Director of any additional courses a student must take in the subsequent semester, such as, but not limited to, Sign Language or Speech Science. This information assists the Clinical Director in planning clinical assignments for the next semester.

Faculty and clinical supervisors are ASHA-certified, Commonwealth of Virginia licensed professionals and provide ongoing, direct supervision of the assessment and intervention activities of the clinic. Evaluations and therapy sessions are digitally video-recorded so that students, supervisors, faculty, and clients can review the sessions, in a completely confidential manner, in accordance with the Health Insurance Portability and Accountability Act (HIPAA) standards.

E. SUMMARY OF CLINICAL EDUCATION EXPERIENCES NEEDED BASED ON ASHA KASA

Type of Session	Area	Minimum Number of Hours
<u>Clinical Observation</u>		<u>25 hours</u>
Assessment	<ul style="list-style-type: none"> · articulation · fluency · voice and resonance, including respiration and phonation 	Practicum experience must be obtained in all nine areas, across the life span (including pediatric, adult, and geriatric), and must be sufficient in duration to establish and document competence in each area.
Treatment	<ul style="list-style-type: none"> · receptive and expressive language (phonology, morphology, syntax, semantics, and pragmatics) in speaking, listening, reading, writing, and manual modalities · hearing, including the impact on speech and language · swallowing (oral, pharyngeal, esophageal, and related functions, 	

Prevention

- including oral function for feeding; orofacial myofunction)
 - **cognitive aspects of communication** (attention, memory, sequencing, problem- solving, executive functioning)
 - **social aspects of communication** (including challenging behavior, ineffective social skills, lack of communication opportunities)
 - **communication modalities** (including oral, manual, augmentative, and alternative communication techniques and assistive technologies)
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F. Essential Skills Policy

Longwood University and the CSDS Program are committed to diversity. Thus, students from culturally and linguistically diverse backgrounds are an important part of the student body. All students are expected to meet all the clinical and academic requirements of the program. Students from diverse backgrounds can expect to participate fully in the clinical component of the program as long as they can communicate effectively with clients and their families and can model the clients' target behaviors. (Adopted by the faculty, May, 5, 2009; adapted from Temple University).

Implementation of Essential Skills Policy

All graduate students will participate in oral communication screening with CSDS faculty or clinical educators within 1st two weeks of matriculation into the program to determine their current communication skills. A second screening, by another faculty member or clinical educator, is conducted for any student who does not pass the screening. The clinic and program directors will meet with any student who does not pass the second screening.

G. Coordination of Clinical Education and Academic Coursework

Clinical practicum is designed to follow academic coursework as closely as possible. Students have either completed, or are currently enrolled in, the academic disorder course that corresponds to the clinical experiences in which they are engaged.

H. Maintaining Record of Clinical Clock Hours

Maintaining a record of clinical clock hours is imperative! At the start of CSDS 580, students will be instructed on how to complete the clock hour forms. There is one form for recording diagnostic hours and one form for treatment hours. Students must provide their clock hour recording form to the supervisor to initial and approve the time **after every session**. It is permissible to record all diagnostic hours on one form; however, **a separate form is required for each supervisor for treatment hours**.

Students are infrequently assigned in teams for diagnostics or treatment, but when they are, the clock hour time is allocated by the percent of services each student provides. If, for example, two students are assigned to a diagnostic and one student conducts the caregiver interview and one student administers the evaluation, they are each given time commensurate with the amount of time each spent during the diagnostic session. If they

are working together with a client, the same principle applies. The Longwood clinical supervisor verifies the time on each student's clinical clock hour form.

The time in evaluation and treatment and the time observed are recorded for each session and then totaled at the end of the semester on the *Clinical Practicum Summary Form*. All forms are available on the Clinical Education Blackboard site. It is the student's responsibility to maintain accurate records for practicum hours and to be sure that all record forms are signed and dated by the supervisor on an ongoing basis throughout the semester. Prior to the end of the semester check-out with the Clinical Director, students should total all earned hours and record them on the summary.

Students engaged in external practicum sites are responsible for maintaining accurate clock hour records. It is strongly recommended that the practicum hours be approved and initialed each day by the external supervisor for increased accountability.

At the start of each semester, students should print a copy of their clinical clock hours from SAMS documenting the hours the student has accrued. The student should sign and date the bottom of the printed page and place it in the Clinical Director's mailbox in the video supervision room. This page will be placed in the student's clinical file as documentation that the student agrees with the clock hour information that was entered into SAMS.

I. Graduate Student Clinicians Earning Hours at their Work Sites

If students are employed in a position where they are providing speech-language services and holding a provisional license from the Virginia Department of Education, they may earn up to 100 clinical clock hours through the work setting under the following conditions:

1. Students must have earned a minimum of 40 clinical clock hours under the supervision of Longwood University faculty prior to earning clock hours at their place of employment.
2. The supervisor at the place of employment must hold current ASHA certification, send a copy of the current card to the CSDS Clinical Director, and agree to supervise a minimum of 25% of each session counted for clock hours and review all lesson plans in advance of the session. The supervisor's supervisor must sign a form agreeing that he/she will support the time needed for the clinical supervisor to provide this level of supervision.
3. The supervisor must co-sign all reports written by the student clinician that were completed on evaluations used for clinical clock hours.
4. A signed affiliation agreement must be in place between Longwood University and the place of employment before any clock hours can be earned.

5. The external supervisor must meet with the CSDS Clinical Director to discuss the LU policies and procedures for supervision and student evaluation.
6. The CSDS Clinical Director, or designee, may observe the student clinician at least once in the work placement.
7. Prior to earning clock hours at a place of employment, the Clinical Affairs Committee must approve the site as an appropriate placement to gather diverse clinical experiences.
8. Additional/alternative school placements may need to be secured to ensure a breadth of clinical experience.

Persons working in other facilities as a speech-language pathologist assistant may be eligible to earn up to 75 clinical clock hours. However, this decision will be made after the clinical director consults with an ASHA certified speech-language pathologist at the place of employment to ensure that the nature of the work during the time that clinical clock hours are being earned is that of a speech-language pathologist under direct supervision not work of a speech-language pathology assistant.

J. Clinical Competencies and Remediation

If a student exhibits the need for improvement in a particular competency, including but not limited to oral and written communication skills, personal interaction skills, and/or clinical skills, the Clinical Director and one of the student's supervisors (either a faculty member or clinical educator) may develop a Clinical Improvement Plan with the student. The plan outlines the knowledge or skill to be mastered, the objectives to achieve the improvement, the target date for completion, and the date of completion. The student and the Clinical Director each sign the form at the start and the completion of the plan. The student has the right to meet with the Program Director after the improvement plan meeting if he/she has any concerns that he/she feels were not adequately addressed as a result of the meeting. Copies of the Clinical Improvement Plan are filed in the student's clinical file, the student's academic file, and a copy is given to the student.

K. Policies for External Practicum Placements

Students Participating in an External Practicum Placement

1. Prior to placement in an external facility, students must have successfully completed at least two semesters of practicum at the Longwood Center for Communication, Literacy, and Learning (LCCLL) under the supervision of LU clinical supervisors, completed the *Application for CSDS External Placements* and obtained a minimum of 40 clock hours.
2. Before beginning the externship experience, the student will have accrued 150 clinical clock hours.

3. Students will be placed in external facilities that have a signed clinical affiliation agreement with Longwood University.
4. **Students are encouraged to identify sites for their external placements; however, before contacting any placement site, the student must discuss the placement possibility with the Clinical Director.** Establishing the placements and the affiliation agreements is the responsibility of the Clinical Director.
5. Any student participating in an external placement must have the following on file in his/her clinical file at LCCLL:
 - a. Auto insurance form
 - b. Tb test results
 - c. Certified Background check results
6. External facilities may have additional requirements such as CPR training, radiation safety training, etc. It is the student's responsibility to meet those requirements as outlined by the facility at the time of placement.
7. **Students are expected to attend their external placement on all assigned days.** Prior to the start of the placement, the clinical director informs the external supervisor of any dates in which the student may have an academic conflict and need to be excused from the placement. If the student has an extenuating circumstance, in which he/she would like to request a re-scheduling of day(s) at the placement or to be released from the placement for a day or more for a particular reason, the student must first make the request to the clinical director before discussing it with the external supervisor. Longwood University holidays (i.e. fall break, spring break, and the day before Thanksgiving) do not apply when students are in external placements. Students are expected to attend the placement.

External Practicum Placement Facilities

When a practicum placement is being made at an external facility, the following steps are completed by the clinical director.

1. An affiliation agreement is signed by the clinical director and the department chair and sent to the facility for signature.
2. A copy of the current ASHA certification and state license for each supervisor in the facility is obtained from the supervisors.
3. A supervisor training session is conducted by the clinical director at the start of each semester with the external supervisors for that semester. Each new supervisor is given a Longwood University Clinical Supervision Handbook. The training session includes the following topics:

- a. Longwood policies for supervision
 - b. the student evaluation system
 - c. best practices in supervision
4. Once the student is participating in the external practicum placement, the clinical director, or designee, may visit the site to observe the student and meet with the supervisor.

III. ROLES AND RESPONSIBILITIES OF THE STUDENT CLINICIAN

A. Professional Commitment

The Communication Sciences and Disorders Program has a dual and equal commitment to the students for academic and clinical preparation and to the clients who will present themselves for speech and language services. In order to appropriately and adequately meet both of those commitments, the **Longwood Center for Communication, Literacy, and Learning (LCCLL) is operated as a business**. Students who are assigned clients in the center will be expected to meet their clients for **each scheduled session** across the semester or summer session. **ONLY** in cases of personal illness or crisis shall a student clinician consider canceling a diagnostic or therapy session.

During periods of inclement weather, the Center will follow the same closing procedures as Longwood University. Student clinicians should advise clients and parents/caregivers to check www.longwood.edu or call 395-2000 to determine if Longwood University is open.

The LCCLL operates during the following time periods.

<u>Session</u>	<u>Dates of Operation</u>
Fall	Start of classes through last week of classes
Spring	Start of classes through last week of classes
Summer	Six weeks, depending on the Longwood University summer schedule

B. Responsibility for Individual Materials and Supplies

Each student will be responsible for providing some of his or her own equipment. The following items will be necessary for your personal use in the Center:

- A pen light and additional batteries for oral mechanism examinations
- A stop watch
- Calculator
- A good sound quality audio recorder and extra batteries. This is to be used in audio recording your evaluations and in some cases your treatment sessions.

The items below are recommended, but not required

- Small dry erase board and markers
- Disinfectant/antibacterial wipes
- Clipboard
- Index cards
- Multi-colored markers

C. Responsibility for Facility, Materials, and Equipment

All graduate students in CSDS are equally responsible for the preservation, maintenance, and wise use and management of furnishings, equipment, and materials found at LCCLL. The appearance of walls in therapy rooms, graduate student workrooms, observation rooms, and center reception area must be preserved. Only approved posters, notices, or wall hangings may be displayed in the common areas. In therapy rooms, avoid the use of tape, tacks, or push pins to attach therapy materials to walls. Post-it notes and Post-it paper may be used instead. Be careful to prevent bleeding through of ink when using markers by doubling the paper. Each graduate student will be assigned a section of the materials closet to maintain throughout the semester.

Procedures for Check out of Tests and Materials

Materials housed in the Therapy Supply Closet may be checked out by students for preparation of or use in a diagnostic or therapy session.

- **Check out an entire test, kit, or set of materials. DO NOT** remove components for check out.
- Return all components of the borrowed set of materials within 2 days. Check and recheck to be certain that all pieces, pictures, etc. are returned together.
- Return borrowed items in a timely manner, as other students may be waiting to use the same materials.
- **Students are not to remove any clinical diagnostic or treatment materials from LCCLL other than for LCCLL off-site contract site assignments. Students are not to take LCCLL materials, tests, or equipment to external placements.** It is possible to check out a test for a CSDS course assignment. If taking a test out of the cabinet for use at the center, sign the check out log on the cabinet door. If taking a test out of LCCLL, for an assignment related to a course, or to read the manual and learn to administer the test, take all parts of the test, and sign the log on the front of the cabinet. It is critical to follow these procedures.

Maintenance of Facility

Following a therapy/diagnostic session, the student clinician will be responsible for housekeeping of the treatment room, including re-arranging furniture, returning borrowed materials to the therapy supply closet, and wiping off all used surfaces and non-consumable materials with disinfectant, as necessary.

Additionally, each full-time graduate student will be assigned the responsibility of housekeeping of the Graduate Student Workroom. A rotating schedule will be created and posted in the Graduate Student Workroom at the beginning of each semester. The

physical space of the workroom should be monitored at least twice per week for the following:

- Removal of all trash from floors and surfaces
- Re-organization of furniture, equipment, materials to original order
- Cleaning of table surfaces

The student assigned to be housekeeper for the week will be expected to check off his/her name at the end of the week of service.

D. Professional Punctuality and Timeliness

Student clinicians who are assigned clients in the Center or in external practicum placements are expected to be prepared and prompt in meeting those clients for their scheduled sessions. **No less than 15 minutes prior to the beginning of a session,** student clinicians will be expected to have:

- clinical notebook available for supervisor,
- data collection forms prepared for use,
- all needed materials, supplies, and equipment gathered and prepared,
- the assigned treatment room open and prepared according to established protocols.

Similarly, student clinicians will end the therapy session promptly. An hour session is 55 minutes and a half hour session is 25 minutes to allow the subsequent user of the room to enter for set up.

Students must always have a supervisor in the building before beginning a session with a client.

E. Professional Interactions

Student clinicians are expected:

- To meet assigned clients in the waiting room and escort them to the designated therapy room. There may be some occasions when a student may be asked by a supervisor to meet the client on the first floor of the building.
- To start the video recording equipment and alert the clinical supervisor immediately prior to beginning the session.
- To stop the video recording equipment immediately after the session.
- To refrain from sharing information about the therapy activities, expectations, or outcomes in the Center's waiting room with clients/parents/caregivers. **This information should be shared within the assigned therapy room where confidentiality can be preserved.**
- To remain with the client for the duration of the therapy session. Younger clients, especially, are not to be left unattended in the therapy rooms or hallway.

- To remain in the Center with the assigned client for the duration of the therapy unless prior permission to leave the building with the client has been previously obtained from the clinical supervisor.
- To remain within the Center for **20 minutes** while waiting for a tardy client. When it appears that a client is a “no-show”, student clinicians must check with the clinical supervisor prior to removing therapy materials and leaving LCCLL.
- To request permission from the clinical supervisor for permission to observe a diagnostic or therapy session conducted by another student clinician. Students should observe from the recording room, but deference is given to the supervisors.
- To respect others and to be courteous. **DO NOT** interrupt a diagnostic or therapy session unless it is absolutely necessary (i.e. the building is on fire!!). **DO NOT** knock on a closed treatment room door unless there is a critical emergency.
- To maintain a quiet atmosphere in the graduate student workroom

F. Professional Etiquette

Student clinicians must be cognizant of the fact that whether they are working at LCCLL or in off-campus practicum placements, they represent Longwood University and the College of Education and Human Services. Likewise they represent the profession of speech-language pathology to the public. Therefore, students must present a professional appearance in dress, manner, and communication.

- Use professional work-place language that is respectful of people of all ages and cultural groups.
- While in the presence of clients and/or their parents or caregivers, refer to yourself and your supervisor as Miss, Mrs., Mr., or Dr. as appropriate.
- Encourage parents or caregivers to observe the treatment session. Be available to share information about a client’s progress and/or treatment strategies or procedures that can be continued at home.
- Refrain from chewing gum during a therapy or diagnostic session or while conferencing with a client/parent/caregiver or other professional on the phone or in person.
- Limit eating/drinking to the graduate student work room and to times apart from clients/parents/caregivers. **DO NOT** eat or drink over your keyboard. Do not leave food in the workroom.
- Refrain from smoking or using any tobacco products on the premises of LCCLL.
- Refrain from loud talking or laughter while in the observation room as this level of noise could interfere with the diagnostic or treatment session. At the discretion of the clinical supervisor, a student may be dismissed from the observation room if the student’s distracting behavior threatens to interfere with the clinical session.
- Respect the ideas and materials owned and/or developed by fellow student clinicians. Sharing materials and ideas is a great way to expand your clinical “tool” kit. Frequently, student clinicians may bring personal materials to the graduate student work room or use that space to create and leave materials. Remember to return borrowed materials and give credit for borrowed ideas.

- Dress professionally (see section H)

G. Clinical Placements

Clinic responsibilities take priority over fall and spring break and designated holidays.

Whereas LCCLL is closed during Longwood University breaks and designated holidays, external placements may not be; therefore, when in external placements, students follow the schedule of that facility regarding holidays. Any deviation from this policy must first be cleared by the Clinical Director before discussing with an external supervisor.

H. Evidence Based Practice

Students provide services to clients using evidence based practices. Students are introduced to the principles of evidence based practice in CSDS 580 Initial Practicum in Speech, Language and Hearing and learn about evidence based practice specific to each of the disorder areas within their content courses.

I. Professional Dress

Student clinicians will be expected to demonstrate professional dress at LCCLL whenever LCCLL is open for business. Even if students are not directly working with clients, but are engaged in report writing, materials development, conferencing with faculty supervisor, passing through to speak with a fellow student, etc., professional dress will be the expectation. Students whose dress does not follow these guidelines may be sent home to change or, if time does not permit, will be asked to wear a Center smock. Student clinicians are encouraged, but not required, to wear the Longwood CSDS polo shirt that they are given at orientation. When making decisions about manner of dress, consider the following dos and don'ts:

DO

1. Dress comfortably, but appropriately.
2. Wear your student clinician name tag at all times while at LCCLL.
3. Cover tattoos or body art with clothing.
4. Limit pierced jewelry to ear lobes only.
5. Choose typical human hair colors when altering the color of your hair.
6. Women: Check your appearance in the mirror when standing, bending over, and squatting down. No cleavage, midriff, back, or upper thigh should be visible.

DON'T

1. Wear perfumes or perfumed lotions. Our clients who have respiratory issues or allergies may be adversely affected (particularly in the small confines of the therapy room).
2. Wear clothing that is either too-tightly or too-loosely fitting.

3. Wear flip-flops or sneakers.
4. Wear clothing with slogans, expressions, or graphics that may be offensive.
5. Wear clothing that is crumpled, excessively wrinkled, or tattered.

The Student Guidelines form below, sent to us from one of our placement sites, (Speech Smarts, ® p.c.), is an example of the expectations of external placement sites regarding dress and other professional behavior.

Student Guidelines

Be on time, be inquisitive, be mature, be responsible, be a learner, listen more than you talk, ask questions, be willing to help out, be a speech pathologist in training!

Dress Code

Please dress with respect to our clients and to our profession. Clothing that reveals cleavage, your back, your chest, your feet, your stomach or your underwear is not appropriate for a place of business. Translation: no flip-flops or similar footwear, no shorts, no short skirts unless worn with hosiery, no low-cut blouses/tops/dresses. Sandals are okay as long as they are not distracting. Even in a business casual work environment, clothing should be pressed and never wrinkled. Torn, dirty, or frayed clothing is unacceptable. All seams must be finished. Any clothing that has words, terms, or pictures that may be offensive to other employees is unacceptable. Hair should be swept away from eyes, allowing good eye contact; a must-have for a good communicator.

If you feel that what you are wearing is not in accordance with the spirit of this policy, you are probably right. Trust your instinct and change your clothes. Students will be sent home if they are not deemed appropriately dressed.

J. Maintenance of Student Clinical Records

A clinical file is established for each student containing information about a student's developing clinical competencies, acquisition of clinical clock hours, and compliance information. The Clinical Director maintains hard copies of these in a secure file cabinet.

Knowledge and Skill (KASA) clinical competencies, clinical clock hours, and tracking for VDOE hours are all entered into the Student Assessment Management System (SAMS) at the end of each semester by the Clinical Director. Students are given "read only" access to their own information in SAMS and are expected to monitor their progress throughout their placements. It is imperative that students track their progress toward achieving each of the clinical competencies, particularly during their last two semesters of practicum to ensure successful completion of all KASA competencies. Students will sign a form at mid-semester during each of their two final placements indicating their progress toward achieving the required clock hours and competencies. If a student is planning to work in another state after graduation, it is essential that the student obtain the licensing requirements of that state by the end of the first year of the

graduate program and share that information with the Clinical Director in order to effectively plan for meeting those requirements.

K. Maintenance of Client Files

File folders for active clients are filed alphabetically in the locked client file cabinet in the graduate student workroom. When a file is removed for review, a checkout card should be inserted in place of the file with the number, date, and name of the person removing the file.

Students who are assigned clients at LCCLL will be responsible for the maintenance of accurate and current client files. All forms to be used can be located on the Clinical Education Blackboard™ site. All students who are enrolled in a clinical practicum course have access to the Clinical Education Blackboard site. The forms listed below should be completed and placed in the client files.

- Session attendance sheet – log of documentation of the client’s attendance and punctuality across the semester
- Running Notes – a log of contacts with documentation of each phone call, email, or face-to-face contact related to client
- Diagnostic reports
 - There are two templates available on the Clinical Ed. site;
 - One for evaluations of clients evaluated at LCCLL and our off-site contract placements
 - One for infants and toddlers evaluated in association with the Infant Toddler Connection (ITC)
- Completed test forms/language samples/etc.
- Treatment plans
 - A treatment plan template is located on the Clinical Ed site.
- SOAP notes
 - A SOAP note template as well as an instruction sheet for completing SOAP notes is available on the Clinical Ed. site.
- End-of-semester progress report
 - A progress report template is available on the Clinical Ed. site.

Files for Off-Site LCCLL contract clients

- Files are maintained for all screenings completed through LCCLL contracts
 - Screening protocols and screening result forms are placed in the site specific screening file for the designated semester
- Files are maintained for all off-site LCCLL contract clients
 - IEPs and other school reports are in the files, as appropriate

File folders of inactive clients are stored separately.

Client chart audits are conducted at the end of each semester to ensure current and accurate compliance with client file regulations.

L. Clinical Forms

All forms related to clinical practicum are available on the Clinical Education Blackboard™ website. **Students should print the forms available in *Course Documents on Clinical Ed.* and add them to their Clinical Education Handbook.** These forms are discussed during clinical orientation and during CSDS 580 Initial Practicum in Speech-Language and Hearing.

Below is a list of the forms that should be printed and added to your Clinical Education notebook in this order.

- Diagnostic Clock Hour Form
- Therapy Clock Hour Form
- Clock Hour Summary Form
- Session attendance sheet
- Running Notes
- Assessment Planning Worksheet
- Agenda for Evaluation
- Hearing Screening Form
- Hearing Screening Results Form
- Diagnostic report templates (LCCLL and ITC templates)
- All VDOE Severity Rating Scale Forms
- Treatment Plan Template
- Lesson Plan Template
- SOAP Note Template
- Instruction sheet for completing SOAP notes
- End-of-semester progress report
- Clinical Effectiveness Form
- End of Semester Client File Check
- Clinical Population Diversity Form
- Practicum Evaluation Form (This form must be saved and then opened in order to access each of the tabs at the bottom of the spreadsheet. Print the worksheets with each of the 5 tabs.
- Application for External Placement

M. Billing/Supervision Sheet

1. Copies of the billing form are located in one of the plastic boxes on the wall next to the door in the graduate student workroom.

2. Student clinician fills out the client name, clinician name and date before the session and circles the appropriate service code (CPT code) and the appropriate diagnosis (ICD-9) code.
3. The student may be asked to use the ICD-9 book to look up appropriate codes. Copies of the codes are in a notebook in the graduate student workroom. There is also a copy of the code notebook in the video supervision room.
3. The student clinician gives the bill to the supervisor to initial in the appropriate supervisor box. The supervisor confirms all codes, lists the amount of time for the session and the student then places the bill in the slot on the office manager's door.

N. Faculty/Staff/Graduate Students as Parent/Caregiver of Client

The following policies apply to faculty/staff/graduate students who are a family member of a client at the center.

- The faculty/staff/graduate student has the same rights as any parent/caregiver regarding access to the client's file, that is, a written request must be made and a copy will be provided.
- The faculty/staff/graduate student may **not** access, under any circumstances, the client's files from the client file drawer. As with all clients and caregivers, client files must be requested through the office manager.
- The faculty/staff/graduate student is to discuss the client's services, progress, etc. with the student clinician/faculty supervisor before or after the client's session or during a scheduled conference. The supervisor should always be present when the faculty/staff/graduate student is discussing their family member with the student clinician.
- Faculty/staff/graduate students do not have input to the selection or assignment of student clinician or supervisor.

O. Parent/Caregiver Observation

Student clinicians encourage parents or significant others to observe therapy sessions frequently. Allow time during therapy sessions to discuss results or new strategies which emerged from the day's session. When working with toddlers, parent/caregiver participates in the session so that he/she will be able to implement the strategies in the home environment.

P. Cancellations

By clients: Advise clients/parents to call the Center secretary as soon as they are aware of the need to cancel a therapy session. When a scheduled session is not held, student clinicians must document the cancellation in the running notes (remember to sign and date your entry) and submit a billing slip that is marked "Cancelled." If a client is absent for two sessions without prior notice, student clinicians must inform the clinical supervisor who will make the decision as to the appropriate course of action.

By clinicians: Student clinicians are expected to attend all therapy sessions except in cases of personal illness or emergency. Student clinicians should NOT conduct therapy when ill (e.g. fever, sore throat, deep cough, skin rash, or other infectious conditions). For all occasions that require absence, student clinicians should consult **immediately** with the clinical supervisor. When unable to keep an appointment, student clinicians are responsible for the following:

- Call the office manager so she can cancel as early as possible to prevent the client from appearing unnecessarily.
- Notify assigned supervisor and the clinical director. Student clinicians should have in their possession the phone numbers of LCCLL, the relevant off-site placement, and supervisors.
- Make up the absence at a mutually agreeable time.

Q. Gifts for Clients

It is the policy of the CSDS program that students will not give gifts to clients. It is permissible to give a client a sticker or a reward from the reward box in the graduate student workroom, but it is not permissible to give a gift to any client for any reason.

R. End of Semester Procedures

At the end of each semester, students must submit the following forms to the Clinical Director. Each of these forms is available on the Clinical Ed. Blackboard™ website.

1. **Clock hour forms** – initialed, signed by supervisor, supervisor's ASHA number and each column on each sheet must be totaled.
2. **Clock hour summary** – this is a summary of the hours students earned during the semester in each disorder area for adults and children in both evaluation and treatment. It is critical that students list at the top of the form in the designated space the number of education placement hours earned during that semester.
3. **Clinical Population Diversity Form** – students complete this form when in external placements
4. **Clinical Effectiveness Form** – each student completes a reflection form related to specific topics of clinical effectiveness. Once completed, the student discusses the reflection with his/her CTT supervisor, if completing practicum at LCCLL, or with his/her external supervisor, if completing an external placement.
5. **Evaluation of Supervisor(s)** – each student completes an evaluation of his/her supervisor(s) for that semester. This is completed online at <http://survey.longwood.edu/inq5/cgi-bin/qwebcorporate.cgi?idx=89EMC8> and is anonymous.

Students, who are treating clients at LCCLL or at LCCLL off-site contract placements, complete peer reviews of client files to ensure complete and accurate records. End of

semester client file check list forms are located on the Clinical Ed. Blackboard™ site. Details of how to complete the client file check are discussed with students during the first semester.

S. Health and Safety

Fire Prevention

Fire extinguishers are checked on a monthly basis. Exit routes are posted in all rooms. Stairwells are checked regularly to ensure that fire doors remain closed.

First Aid

A well-stocked First Aid kit is available in the main office. Faculty supervisors and ITC staff maintain current CPR certification. A functioning AED is mounted in the main hallway.

Building Security

The door to the Center is locked after work hours or when evening classes are scheduled after students arrive. Bathroom doors are locked at the end of the work day. If students are in the building after faculty/staff leave for the day, students must check to be sure the bathrooms are locked when they leave the building.

Supervision of Children

All children served at or accompanying family members to LCCLL must be accompanied by someone 16 years of age or older.

Emergencies

Any situation that threatens the health and safety of clients and their families, students, faculty, or staff should be reported immediately to the Center Director or Office Manager and to the faculty supervisor. Persons should use the intercom available in each intervention room to request assistance. The Center Director, Office Manager, or faculty supervisor will make the decision as to whether or not a 911 call should be placed.

Any student or staff member who feels his/her security is threatened should call 911 or the Longwood University police at 434-392-2091.

In case of an automobile accident while in route to or from a clinical placement, it is imperative that the student call Dr. Power-deFur immediately after calling 911. Students will be given her cell phone number at orientation. For any emergency that occurs at an external placement site, contact Mrs. Daly.

Evacuation Plan

In the case of fire or other emergency requiring evacuation of the Center, all occupants will follow the evacuation plan posted in each room at LCCLL.

- The last occupant to leave any of the rooms or offices shall turn off the lights and close the door.
- Once outside, all evacuees shall meet at the bank parking lot on the corner of North and 3rd Streets in order to be sure that everyone is accounted for.

Additional health and safety policies:

- Smoking is not permitted anywhere in the LCCLL.
- Students should practice frequent hand-washing (before and after sessions) to reduce the risk of exposure to infection to self and others.
- Students who are ill should not enter LCCLL and expose clients or fellow students to infection. If you are feverish or have any condition that can be transmitted to another person, **STAY AT HOME**.
- If food items are to be introduced in a diagnostic or therapy session, clients/parents must be advised **PRIOR** to introduction to provide an opportunity for discussion of food allergies or sensitivities. As a rule, avoid the use of all peanut products.
- Rubber gloves are to be worn by student clinicians or supervisors who are conducting oral mechanism exams. **PRIOR** to the use of gloves, check with clients/parents about a possible latex allergy.
- Following each diagnostic or therapy session, all table surfaces and all manipulatives used by clients must be sterilized with disinfectant solution or disinfectant wipes. Cleaning of surfaces and materials will be the student clinician's responsibility.

T. Parking

The parking lot behind the building is for LCCLL clients and other tenants of the building **ONLY**. The building owner has authorized towing of non-tagged vehicles. Students should park elsewhere (e.g., in municipal lots or Longwood commuter student lots). Students may park in the lot behind the building **after** 5:30 pm.

IV. CLINICAL SUPERVISION

A. Supervisory Process

Clinical supervision is a collaborative process between supervisor and supervisee with the eventual goal of student independence and professional level knowledge that will effectively serve clients with communication disorders. Supervision exists on a continuum beginning with significant levels of direct feedback provided by the supervisor and transitioning through a collaborative stage to the eventual goal of self-supervision. Students meet regularly with their clinical supervisors.

B. Clinical Teaching Teams (CTT)

Each semester students participate in a clinical teaching team, which is led by a faculty member or clinical educator. Collaboration as part of an inter-disciplinary team is an essential aspect of effective service provision in most work settings for speech-language pathologists. The CTT provides students with the opportunity to work cooperatively as part of an educational and professional service team.

Teams meet on a set schedule announced at the start of each semester and students rotate roles and responsibilities throughout the semester as part of the team. Students bring questions and ideas about clients, treatments, and other assigned topics to the team for discussion.

Students are expected to take an **ACTIVE** role in the supervisory process at CTT meetings by:

1. Initiating and facilitating discussions
2. Sharing ideas, plans, and concerns
3. Asking questions
4. Identifying issues
5. Offering alternatives
6. Planning strategies and approaches

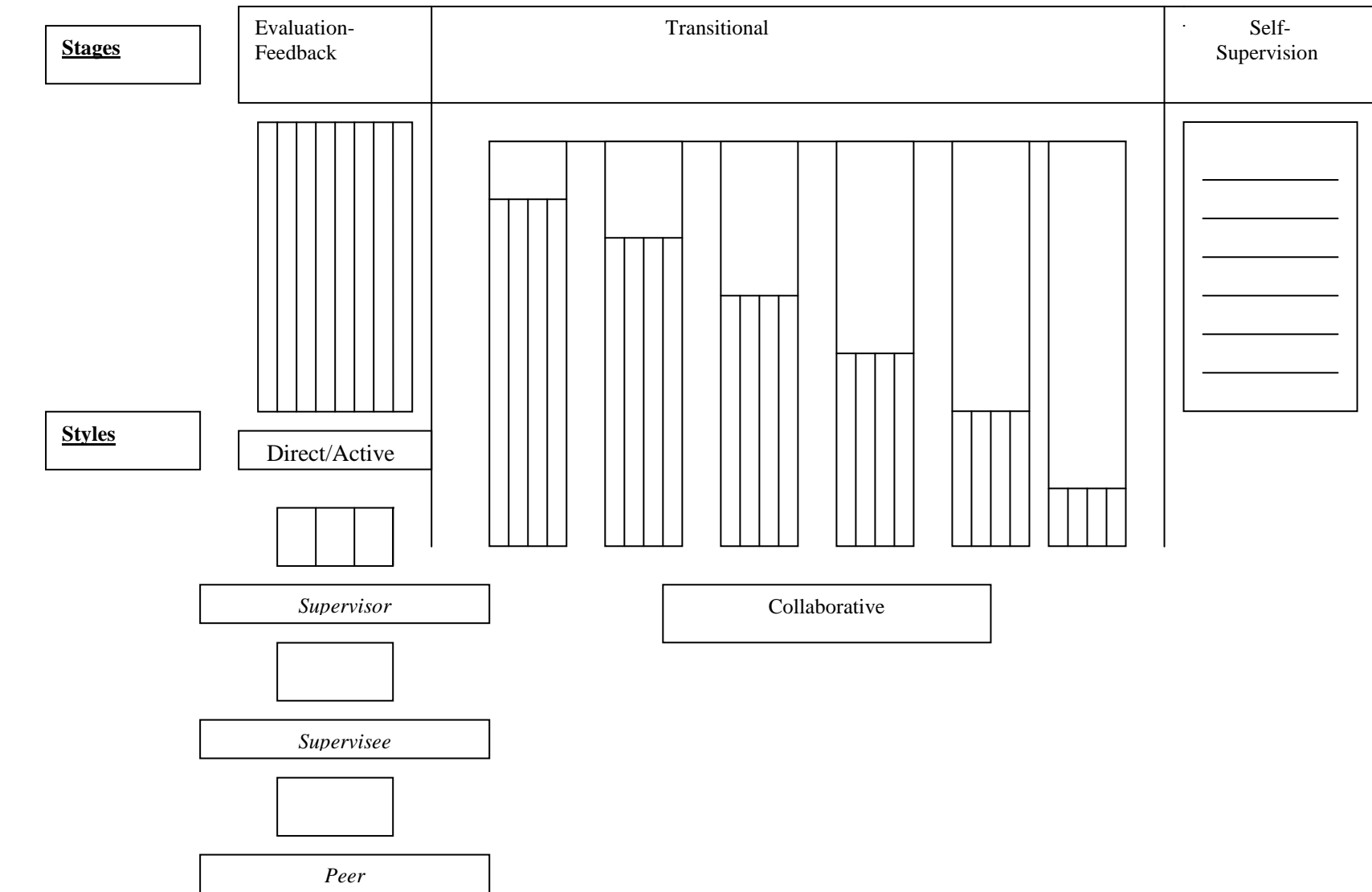
Personal Clinical Goals

Each semester students develop their own personal clinical goals for the semester. This will be discussed at the first CTT meeting and students will receive guidance on developing their goals.

C. Student Feedback

Students complete clinical supervisor evaluations for faculty/clinical educators providing supervision at LCCLL and LCCLL off-site contract placements as well as evaluations of the external placement supervisors. These are completed online and submitted to the department chair and shared with the supervisors.

STAGES OF SUPERVISION



Anderson's STAGES OF SUPERVISION and THE APPROPRIATE STYLES FOR EACH STAGE

McCrea, E.S., Brasseur, J.A. (2003). *The supervisory process in speech-language pathology and audiology*. Boston: Allyn and Bacon

Communication Sciences and Disorders Speech and Language Services

SUPERVISION RATING SCALE / SUPERVISION CONTINUUM

Student Behaviors	Not Evident	Emerging	Standard Met
	<ul style="list-style-type: none"> • Skill is not evident most of time. • Student needs direct instruction to modify behavior. • Student is often unaware of need to change. <p style="text-align: center;">(Skill present < 25%)</p>	<ul style="list-style-type: none"> • Skill is emerging; is inconsistent or inadequate. • Student shows awareness of need to change behavior with supervisor input. • Student is aware of need to modify behavior, but does not always modify behavior independently or correctly. <p style="text-align: center;">(Skill present 26-80%)</p>	<ul style="list-style-type: none"> • Skill is present and needs further refinement, or consistency. • Skill is developed / implemented most of the time and needs continued refinement or consistency. • Student is aware and can modify behavior in session; can self-evaluate. <p style="text-align: center;">(Skill present 80-95%)</p>
RATING	1	2	3
Supervisor Behaviors	Supervisor must model behavior and implement the skill required for client to receive optimal care. Supervisor provides numerous instructions and frequent modeling.	Supervisor frequently provides instructions and support for all aspects of case management and services. Supervisor provides ongoing monitoring and feedback; focuses on increasing student awareness of how/when to improve skill.	Supervisor collaborates with the student to plan and suggest possible alternatives. Supervisor serves as consultant in areas where student has less experience. Provides guidance on ideas initiated by student.
Supervisor Styles	Modeling/Intervention	Frequent Intervention	Monitoring and Guidance

Supervisors use the rating scale/continuum to evaluate student performance on the Practicum Evaluation form and the Clinical Competency and Formative Assessment Record. Students are rated according to the level of skill or competency demonstrated and degree of supervision required.

Adapted from:

- Anderson, J. L. (1988). *The supervisory process in speech-language pathology and audiology*. Boston: College-Hill Press.
- CSD Network Practicum Grade Determination. Communication & Sciences Department, University of Pittsburgh.

Automobile Insurance Form

Longwood University

CSDS Program

Longwood Center for Communication Literacy and Learning

- In accordance with the Office of Risk Management in Richmond, students who drive private vehicles to/from field service activities must provide the insurance information requested below. This requirement is for the motorist's legal protection, the protection of other students in the vehicle, and/or Longwood University's protection. If involved in an accident, the motorist's insurance carries the primary liability.

- If the vehicle is not insured, the motor vehicle owner is required to pay to DMV a \$500 uninsured motor vehicle fee in addition to normal registration fees. This does not provide the motorist with any insurance coverage, but allows the vehicle to be operated in Virginia for a one year period. If involved in an accident, the motorist remains personally liable.

This form must be on file in the CSDS Program Office **prior** to driving to the activity site (insurance or no insurance).

Student's Name _____ ID# _____ - _____ - _____

Field Service Activity _____

Semester and Year: Summer _____ Fall _____ Spring _____ Year _____

Automobile Make/Model/Year _____

Insurance Company _____

Insurance Company Address _____

Insurance Policy Number _____

CONFIDENTIALITY STATEMENT

I understand that Longwood Center for Communication, Literacy, and Learning (LCCLL) has a legal and ethical responsibility to protect the integrity, availability, and confidentiality of its information and the privacy of its clients. Under no circumstances should client information be released or discussed with anyone unless it is in the course of performing legitimate clinical responsibilities.

I understand that I am responsible for implementing security measures in accordance with applicable laws and regulations.

I further acknowledge my responsibilities to protect *Confidential Information* as stated below. Initial each statement after you read it.

1. ____ I acknowledge that all clinical, financial, and personal information is confidential and is to be protected against unauthorized viewing, discussion, and disclosure.
2. ____ I will make sure that my computer in the workroom is turned off each night.
3. ____ I will not use instant messaging in any format or personal e-mail accounts on LCCLL computers
4. ____ I will set the password protection on my assigned computer so that I must log back into the computer if I am idle more than 3 minutes.
5. ____ I will lock the client file cabinet after every use.
6. ____ I further understand that this information is privileged and confidential and no matter what format (electronic, written, observed, overheard, etc.) that it may originate from or exist in.
7. ____ I further understand that I may use, view, disclose, and/or copy information only as it relates to the performance of my assigned responsibilities. Unauthorized viewing, discussion, or disclosure is a violation of LCCLL policy and may be a violation of state and federal laws. Any such violation may result in immediate termination of clinical privileges and possibly civil liability and/or criminal charges.
8. ____ I will not discuss *Confidential Information* where others can overhear, such as in hallways or elevators or anywhere outside the LCCLL, even if the patient's name is not used.
9. ____ I will limit distribution of *Confidential Information* to only those individuals with a legitimate need for the information.
10. ____ I agree to follow all established policies regarding the changing, amending, deleting, or destroying of information in any form and agree to not make any unauthorized transmissions, changes, amendments, or deletions. Such unauthorized transmissions may include, but are not limited to, transferring *Confidential Information* from LCCLL's computer system to another system or location, such as a home personal computer or laptop.
11. ____ I will not use the information in any way detrimental to LCCLL and will keep all information confidential. I will never save any clinical information to a flash drive or other portable device.
12. ____ I will immediately report to the Clinical Director or LCCLL Director any activity, by any person, including myself, that is a violation of this Agreement or any LCCLL policy.
13. ____ I agree that my obligations under this Agreement will continue after I graduate or otherwise terminate my association with LCCLL.
14. This agreement shall be interpreted in accordance with the laws of the State of Virginia.
15. ____ I understand that this signed and dated document will become part of my student clinical record.

Print Name/Student Clinician

Signature

Date

Agreement of Understanding

I have read the CSDS Graduate Student Handbook and agree to abide by the policies outlined in the academic and clinical education sections of the handbook.

I will use the handbook as a reference throughout practicum and will download the updated versions of the handbook each fall that I am enrolled in the graduate CSDS program.

I understand that the keys that I am issued for clinical practicum must be returned in person (they must not be mailed to the clinic) at the end of each semester

I understand that I am responsible for the cost of replacing the keys and potentially the locks if I should lose the keys that I am issued.

Print Name/Student Clinician

Signature

Date

Dr. Lissa Power-deFur
Program Coordinator

Date