DEPARTMENT OF COMMUNICATION SCIENCES & DISORDERS
SCHOOL OF APPLIED HEALTH SCIENCES
BROOKS REHABILITATION COLLEGE OF HEALTHCARE SCIENCES
JACKSONVILLE UNIVERSITY

GRADUATE STUDENT HANDBOOK – Distance Education
2025-2026

The policies stated in this handbook are consistent with university policies and are set forth in more specific terms so that the graduate student in speech-language pathology has a concise statement of expectations. These policies are annually reviewed, revised, and adopted by the Department of Communication Sciences & Disorders Curriculum Committee. In a case where a university-level policy conflicts with a department-level policy, the department reserves the right to defer to the department-level policy.

OVERVIEW

Mission, Philosophy and Program Outcomes

The Department of Communication Sciences and Disorders' mission, philosophy and program outcomes are congruent with those of Jacksonville University and consistent with the professional guidelines and standards for education of master's level speech-language pathologists.

Mission of the Department of Communication Sciences & Disorders

Communication is a right for all individuals and impacts all aspects of life. The Jacksonville University Communication Sciences and Disorders faculty are dedicated to preparing students to become scholars and clinicians that provide the highest caliber of research and clinical services for all individuals. Faculty are committed to providing innovative, experiential learning opportunities using critical thinking with an emphasis on evidence-based practice.

Our core values are represented by the acronym PREPARE:

> **P**rofessionalism
> **R**esilience
> **E**thical behavior
> **P**ersistence
> **A**dvocacy
> **R**esearch
> **E**mpowerment

Master of Science in Speech- Language Pathology Program Outcomes

Upon completion of the Master of Science in Speech-Language Pathology Program, the graduate will be able to:

- Integrate knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders.
- Consider the anatomical/physiological, psychological, developmental, social, linguistic and cultural correlates of disorders in clinical decision-making.
- Demonstrate effective communication, counseling, and collaboration with patients and relevant others, recognizing the needs, values, preferred mode of communication, and cultural/linguistic background of the patient, family, and caregivers.
- Integrate principles of ethics and cultural diversity into clinical decision making for individuals and populations experiencing complex health issues related to speech, voice, swallowing, language, and/or cognitive impairments.
- Demonstrate proficiency in the use of technology and information systems for speech-language pathologists that will improve the quality of care for individuals and populations.

- Translate relevant research findings from speech-language pathology and related disciplines to advance clinical speech-language pathology practice and improve health outcomes of individuals and populations.
- Influence public policy designed to ensure the safety and quality of healthcare for individuals and populations.
- Demonstrate social responsibility and advocacy for individuals and populations experiencing complex health issues related to speech, voice, swallowing, language, and/or cognitive impairments.
- Lead interdisciplinary health care initiatives at the organizational and systems level to improve health outcomes for individuals and populations with speech, voice, swallowing, language and/or cognitive impairments.

Diversity, Equity, and Inclusion Statement

This academic and clinical preparation occurs in an atmosphere of fairness, equity, and justice, emphasizing creative learning, excellence in clinical evaluation and treatment, ethical and professional integrity, advocacy, and cultural competencies. We model and encourage our students to promote a welcoming and open environment where all can learn and engage. We are focused on fostering a sense of belonging and feelings of value in our department community and to those we serve in the field. Our department is committed to providing academic knowledge and clinical skill instruction that supports evidence-based practice for all people serviced in the field of speech-language pathology. Our obligation when training students for independent practice in the field of speech-language pathology includes providing them with the knowledge to be culturally competent and ability to reduce healthcare disparities for their clients.

We are committed to diversifying the field of speech-language pathology as we are acutely aware of the underrepresentation of minorities in the field. This commitment includes department initiatives to recruit and retain students who identify as diverse. Diversity may include but are not limited to ethnicity, age, gender, race, religion, sexual orientation, gender identity, physical abilities, mental abilities, and values. We recognize that the presence of diversity does not equal equity and inclusion. Our obligation to as a department is to routinely assess what it means to be culturally competent and to consistently examine barriers and biases that may limit students from being successful in the program.

Knowledge and Skill Objectives for Brooks Rehabilitation Master of Science Degree in Speech-Language Pathology

(AS STATED IN THE ASHA 2020 STANDARDS)

Standard IV-A: Knowledge of Statistics, General Sciences, Social/Behavioral Sciences
Students will be able to describe/discuss…
- Basic concepts in biological sciences as they pertain to communication science & disorders
- Basic concepts in physical sciences as they pertain to communication science & disorders
- Basic concepts in social and behavioral sciences as they pertain to communication science & disorders
- Basic concepts in statistics as they pertain to communication science & disorders
- Acoustic correlates of prevention, assessment, and intervention as they pertain to all major clinical areas

Standard IV-B: Knowledge of Basic Human Communication and Swallowing Processes
Students will be able to describe/discuss the bases (see lists below) of basic human communication and swallowing processes.
- Human Communication Processes
- Human Swallowing Processes
- Biological Bases
- Neurological Bases
- Acoustic Bases
- Psychological Bases
- Developmental/Lifespan Bases
- Linguistic Bases
- Cultural Bases

Standard IV-C: Knowledge of Nature of Communication Disorders and Differences
Students will be able to describe/discuss…
- Etiologies of disorders affecting major clinical areas
- Characteristics of disorders and differences affecting major clinical areas[1] Anatomical/physiological correlates of disorders and differences affecting major clinical areas
- Acoustic correlates of disorders and differences affecting major clinical areas
- Psychological correlates of disorders and differences affecting major clinical areas

1-Major clinical areas include: (1) articulation, (2) fluency, (3) voice & resonance, (4) receptive and expressive language (within sp*eak*ing, *liste*ning, reading, writing, and manual modalities), (5) hearing, (6) swallowing, (7) cognitive aspects of communication, (8) social aspects of communication, and (9) communication modalities

Standard IV-C: Knowledge of Nature of Communication Disorders and Differences (continued)

Students will be able to describe/discuss…

- Developmental correlates of disorders and differences affecting major clinical areas[1]
- Linguistic correlates of disorders and differences affecting major clinical areas
- Cultural correlates of disorders and differences affecting major clinical areas

Standard IV-D: Knowledge of Principles and Methods of Prevention, Assessment, and Intervention

Students will be able to describe/discuss…

- Principles and methods of prevention as they pertain to all major clinical areas
- Principles and methods of assessment as they pertain to all major clinical areas
- Principles and methods of intervention as they pertain to all major clinical areas
- Anatomical/physiological correlates of prevention, assessment, and intervention as they pertain to all major clinical areas
- Collaborate with other professionals
- Communicate effectively with client, family, caregivers, and relevant others
- Provide counseling regarding communication and swallowing

Standard IV-E: Ethics

Students will be able to identify standards of ethical conduct and examples of unethical conduct.

Standard IV-F: Research processes and principles

Students will be able to describe research methods and principles, particularly as they apply to evidence-based clinical practice and will demonstrate the ability to access sources of research information and relate research to clinical practice.

Standard IV-G and H. Professional affairs and credentialing

Students will be able to describe/discuss contemporary professional issues.
Students will be able to describe/discuss basic information about certification, specialty recognition, licensure, and other relevant professional credentials.

Standard V-A Skills Outcomes:

Students must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

1-Major clinical areas include: (1) articulation, (2) fluency, (3) voice & resonance, (4) receptive and expressive language (within sp*eaking, liste*ning, reading, writing, and manual modalities), (5) hearing, (6) swallowing, (7) cognitive aspects of communication, (8) social aspects of communication, and (9) communication modalities

Standard V-B Skills Outcomes Evaluation and Intervention:
Students will complete a program of study to achieve the following skills outcomes:

- Screening and prevention procedures
- Collect case history information
- Select and administer appropriate evaluation procedures
- Interpret and integrate information to develop diagnoses and make appropriate recommendations
- Refer clients for appropriate services
- Develop and implement appropriate intervention plans
- Measure clients' performance and progress.

For full information on the revised standards, please visit the ASHA website, https://www.asha.org/Certification/2020-SLP-Certification-Standards/

Essential Functions and Technical Standards/Guidelines:

Knowledge and Skills Essential to the Practice of Speech-Language Pathology

Department of Communication Sciences and Disorders
Jacksonville University

PREAMBLE

To function in a broad variety of clinical situations, and to render a wide spectrum of patient/client care, individuals must have the following six types of skills:
- Communication
- Motor
- Sensory
- Intellectual/Cognitive
- Interpersonal
- Cultural Responsiveness

These skills enable a student to meet graduate and professional requirements as measured by state licensure and national certification. Many of these skills can be learned and developed during the course of the graduate program through coursework and clinical experience. The burden is on the applicant to demonstrate that he/she can meet the essential functions or requirements of the program. The lists below represent technical standards and essential functions that are required (with accommodations when necessary) for admission and graduation.

All students pursuing a health care profession such as speech-language pathology must possess those intellectual, ethical, physical, and emotional capabilities required to undertake the full curriculum and to achieve the levels of competence required by the faculty and the profession. Some students may have certain disabilities or combinations of disabilities which will require accommodations in order to meet the technical standards and essential functions required of all students. The program is clinically based and some accommodations (e.g., extra response time) cannot be offered in clinical practicum settings.

Academic faculty are charged with evaluating students with respect to their performance on the standards presented below. If a student feels that they are unable to meet these standards, it is their responsibility to notify the appropriate faculty member(s) to seek accommodations. Students seeking accommodations should contact JU's Disability Support Services office. https://www.ju.edu/disabilityservices/.

All students admitted to the graduate programs in the Department of Communication Sciences and Disorders at Jacksonville University are beholden to the professional standards needed to successfully engage in the speech-language pathology profession.

Motor Statements in this section acknowledge that clinical practice by audiologists and speech-language pathologists involves a variety of tasks that require manipulation of items and environments. It is recognized that this may be accomplished through a variety of means, including, but not limited to, independent motor movement, assistive technology, attendant support, or other accommodations/modifications as deemed reasonable to offer and appropriate to client/patient needs.

- Engage in physical activities at a level required to accurately implement classroom and clinical responsibilities (e.g., manipulating testing and therapeutic equipment and technology, client/patient equipment, and practice management technology) while retaining the integrity of the process
- Respond in a manner that ensures the safety of clients and others

Sensory

Statements in this section acknowledge that audiologists and speech-language pathologists use auditory, visual, tactile, and olfactory information to guide clinical practice. It is recognized that such information may be accessed through a variety of means, including direct sensory perception and /or adaptive strategies. Some examples of these strategies include visual translation displays, text readers, assistive listening devices, and perceptual descriptions by clinical assistants.

- Access sensory information to differentiate functional and disordered auditory, oral, written, and visual communication
- Access sensory information to correctly differentiate anatomical structures and diagnostic imaging findings
- Access sensory information to correctly differentiate and discriminate text, numbers, tables, and graphs associated with diagnostic instruments and tests

Intellectual/Cognitive

Statements in this section acknowledge that audiologists and speech-language pathologists must engage in critical thinking, reasoning, and comprehension and retention of information required in clinical practice. It is recognized that such skills may be fostered through a variety of means, including assistive technology and /or accommodations/modifications as deemed reasonable and appropriate to client/patient needs.

- Retain, analyze, synthesize, evaluate, and apply auditory, written, and oral information at a level sufficient to meet curricular and clinical competencies
- Employ informed critical thinking and ethical reasoning to formulate a differential diagnosis and create, implement, and adjust evaluation and treatment plans as appropriate for the client/patient's needs
- Engage in ongoing self-reflection and evaluation of one's existing knowledge and skills
- Critically examine and apply evidence-based judgment in keeping with best practices for client/patient care

Interpersonal

Statements in this section acknowledge that audiologists and speech-language pathologists must interact with a diverse community of individuals in a manner that is safe, ethical, and supportive. It is recognized that personal interaction styles may vary by individuals and cultures and that good clinical practice honors such diversity while meeting this obligation.

- Display compassion, respect, and concern for others during all academic and clinical interactions
- Adhere to all aspects of relevant professional codes of ethics, privacy, and information management policies
- Take personal responsibility for maintaining physical and mental health at a level that ensures safe, respectful, and successful participation in didactic and clinical activities

Cultural Responsiveness

Statements in this section acknowledge that audiologists and speech-language pathologists have an obligation to practice in a manner responsive to individuals from different cultures, linguistic communities, social identities, beliefs, values, and worldviews. This includes people representing a variety of abilities, ages, cultures, dialects, disabilities, ethnicities, genders, gender identities or expressions, languages, national/regional origins, races, religions, sexes, sexual orientations, socioeconomic statuses, and lived experiences.

- Engage in ongoing learning about cultures and belief systems different from one's own and the impacts of these on healthcare and educational disparities to foster effective provision of services.
- Demonstrate the application of culturally responsive evidence-based decisions to guide clinical practice

Communication

Statements in this section acknowledge that audiologists and speech-language pathologists must communicate in a way that is understood by their clients/patients and others. It is recognized that linguistic, paralinguistic, stylistic, and pragmatic variations are part of every culture, and accent, dialects, idiolects, and communication styles can differ from general American English expectations. Communication may occur in different modalities depending on the joint needs of involved parties and may be supported through various accommodations as deemed reasonable and appropriate to client/patient needs. Some examples of these accommodations include augmentative and alternative communication (AAC) devices, written displays, voice amplification, attendant-supported communication, oral translators, assistive listening devices, sign interpreters, and other non-verbal communication modes.

- Employ oral, written, auditory, and non-verbal communication at a level sufficient to meet academic and clinical competencies
- Adapt communication style to effectively interact with colleagues, clients, patients, caregivers, and invested parties of diverse backgrounds in various modes such as in person, over the phone, and in electronic format.

Glossary
- **Cultural responsivity** involves "understanding and respecting the unique cultural and linguistic differences that clients bring to the clinical interaction" (ASHA, 2017) and includes "incorporating knowledge of and sensitivity to cultural and linguistic differences into clinical and educational practices".
- **Evidence-based practice** involves "integrating the best available research with clinical expertise in the context of patient characteristics, culture, and preferences" (*Evidence-Based Practice in Psychology*, n.d.).

American Speech-Language-Hearing Association. (n.d.). *Cultural responsiveness* [Practice Portal https://www.asha.org/Practice-Portal/Professional-Issues/Cultural-Responsiveness/]
Evidence-Based Practice in Psychology. (n.d.). https://www.apa.org. Retrieved March 3, 2023, from https://www.apa.org/practice/resources/evidence

PURPOSE OF THE AMERICANS WITH DISABILITIES ACT
The purpose of the ADA is to provide opportunities for persons with disabilities to compete with other (students) on the basis of their ability. Like the Rehabilitation Act, the ADA requires many entities … to provide certain accommodations to persons with disabilities so that they may enjoy the same benefits, services and opportunities as those without disabilities. Schools must judge persons on the basis of their ability to complete the educational program rather than on their status as disabled persons. Persons seeking admission must be able to perform the "essential functions" or meet the "essential eligibility requirements" of the program. It is up to each school to determine the "essential functions" or "essential eligibility requirements" of its educational program. Preadmission inquiry as to whether a person is disabled is not permitted, but a school may ask all students to review the essential functions and technical standards for admission and graduation to determine if they are able to meet those standards and functions needed to be successful as a student and as a future speech-language pathologist.

Speech-language pathology students and applicants who have any questions about Jacksonville University's MS SLP should contact the Program Director, Bethany Walker (bwalker20@ju.edu or 904 256 8915 or the Department Chair Dr. Dan Furnas (dfurnas@ju.eduor 904-256-7623).

References
http://www.ada.gov/infoline.htm

American Association of Medical Colleges, n.d. *The Disabled Student in Medical School: An Overview of Legal Requirements. Washington, D.C.*

Schwartz, I., et al. (2007). *Eligibility requirements and essential functions*. Paper presented at the Annual Meeting of the Council on Academic Programs in Communication Sciences and Disorders.

ACADEMIC POLICIES

Application for Admission

Admission is open to qualified people of any race, color, religion, sexual orientation, gender identity, and national or ethnic origin. Graduate admission is processed through the Brooks Rehabilitation College of Healthcare Sciences, School of Applied Health Sciences. To be considered for admission, potential students must submit the following items:

Admission to the Master of Science program is limited to a specific cohort size yearly. The admission process is competitive based on the following criteria:

- Application
- A nonrefundable application fee through CSDCAS ($135 for initial application and $54 for each additional).
- Official transcripts from all colleges and universities
- Completion of a Bachelor's Degree with a minimum 3.0 grade point average in the prerequisite coursework.
- For applicants with an undergraduate major other than in speech-language pathology, completion of the required pre-requisite courses with an average of 3.0 or higher.
- All international students must meet CSD department minimum TOEFL score requirements regardless of the language in which the undergraduate program was completed. A minimum TOEFL score of 550 on the paper-based test (TOEFL PBT) or 80 on the internet-based version (TOEFL iBT) is required for admission.
- Three recommendations; two of which should be professional references. References should be from a supervisor familiar with the student's clinical abilities and if possible, an educator who taught the student
- Completion of the *Health & Immunization* form including results of TB testing, physical examination and signature of physician, A.R.N.P. or P.A.
- Documentation of CPR certification
- Personal written statement 1-2 pages in length
- Professional vita or resume
- Interviews via virtual platform may be requested by the Graduate Admissions Committee
- GRE Scores are optional and may be requested by the Graduate Admissions Committee

Background Checks

A career as a speech-language pathologist (SLP) involves working with individuals from a wide variety of backgrounds, ages, and ability levels, as well as handling confidential information. In an effort to ensure that the profession is made up of individuals of integrity, those applying for certification as an SLP must answer questions regarding their criminal background. A history of offenses may impact your ability to become

certified in the future. For more details, review the SLP CCC Application Standards for 2020 at https://www.asha.org/Certification/2020-SLP-Certification-Standards/. Additionally, as a student, it may inhibit your ability to complete the necessary practicum hours to graduate. All students accepted into Jacksonville University's graduate Speech- Language Pathology Program must have an unencumbered background check as a clinical requirement. Offenses listed on a background check may result in your offer of acceptance being rescinded.

Please see the Clinical Policies section of the handbook for more information on background checks as it is common for students to complete additional background checks required for specific clinical placements.

Selection Process
Admission to the Master's Program in Speech-Language Pathology is selective and limited to those students who demonstrate potential for successfully completing the program. An admission decision is based on evaluation of an applicant's previous coursework and their grades earned*, a written personal statement, a professional resume, individual experience within the field and three letters of recommendation. Where applicable, official GRE scores and a personal interview are also utilized in final evaluation for admission. The admissions committee scores each application item and assigns a rank to each applicant. *Completion of pre-requisite courses at JU does not guarantee admission to the program*. The highest ranked applicants are offered admission to the program based on the available number of slots.

Transfer Credit
Students of the MS SLP program may transfer in a maximum of nine semester hours of graduate academic credit from a comparable regionally accredited academic institution. The credit must be in courses similar in content and rigor to Jacksonville University's Master of Science in Speech-Language Pathology Program, and the grade must be at least a "B".

To be eligible for transfer credit, the student must submit an official transcript, course syllabus, and catalog description of the course to the Program Director of the MS SLP program. The Program Director and Academic Advisor will review the provided information and compare it with the Jacksonville University course for its equivalence in content and credit hours. Once the decision has been made, the student will be notified by email and letter of whether or not the course has been accepted. If the course(s) is/are deemed equivalent, a letter from the Program Director that indicates that the transfer credit is allowed will be sent to the Jacksonville University Registrar and placed in the student's file.

Course Information and Enrollment Policies

*Timing of course offerings is subject to change

Master of Science in Speech-Language Pathology Distance Education Program Course Progression	
Fall 1/Semester 1/Credits (9)	**Spring 2/Semester 5/Credits (9)**
SLP501 Adult Language Disorders (3) SLP531 Rehabilitation Research Design(3) SLP508 Fluency (3)	SLP509 MSD (2) SLP545 MSD Lab (2) SLP525 Counseling (2) SLP538 Voice (3)
Spring 1/Semester 2/Credits (9)	**Summer 2/Semester 6/Credits (9)**
SLP507 Diagnostics (3) SLP529 Dx Lab (1) SLP542 A&P (1) SLP526 Clinical Methods I (1) SLP523 Cognitive and Memory Disorders (3)	SLP536 Special Populations (3) SLP548 Clinical Methods III (2) SLP547 Pediatric Feeding (1) SLP503 Language Disorders: Birth-5 (3)
Summer 1/Semester 3/Credits (8)	**Fall 3/Semester 7/Credits (3)**
SLP520 Dysphagia (3) SLP543 Dysphagia Lab(1) SLP544 Multicultural (1) SLP524 Augmentative and Alternative Communication (3)	SLP550 Externship I (3)
Fall 2/Semester 4/Credits (9)	**Spring 3/Semester 8/Credits (4)**
SLP502 Speech Sound Disorders (3) SLP518 School-age Language and Literacy Disorders (3) SLP546 Clinical Methods II (1) SLP519 Aural Rehab (2)	SLP553 Capstone (1) SLP554 Externship II (3)

Course Descriptions

SLP 501. Adult language Disorders (3) This course covers current theories of language processing and of language breakdown subsequent to neuropathology. Course topics cover neuroanatomy, neuroimaging and psycholinguistic models of language processing. Evaluation, diagnosis, and treatment of adults with aphasia will be covered. Students will learn how to analyze language disorders in relation to current theories using a variety of diagnostic instruments and how to use the results of this analysis to plan for therapy.

SLP 502. Speech Sound Disorders (3). This course explores the normal acquisition of speech sounds, the etiology and nature of disorders of articulation and phonology, and assessment and intervention methods for persons exhibiting articulatory and phonological disorders. Multicultural issues in the assessment and treatment of speech sound disorders will be addressed.

SLP 503. Language Disorders: Birth to Five (3). This course addresses language development and disorders from birth through the preschool years. The characteristics and etiologies of preschool language disorders will be examined. Theoretical perspectives and evidence-based assessment and intervention approaches will be discussed. Case studies and applied activities are used to promote critical thinking for the planning of assessment and treatment.

SLP 507. Diagnostic Methods in Speech-Language Pathology (3). This course is designed to provide a general understanding of the processes and techniques of data collection and analysis for the diagnosis, assessment, and evaluation of communication disorders.

SLP 508. Fluency Disorders (3). This course covers advanced theories and techniques of diagnosis and treatment of stuttering behaviors across the life span. Case analyses and review of pertinent research are included.

SLP 509. Motor Speech Disorders (2). This course reviews developmental and acquired neurogenic speech disorders and their associated neuropathology, etiology, characteristics, assessment practices, and treatment strategies.

SLP 518. School-aged Language and Literacy Disorders (3). This course addresses the variety of delays and disorders seen in the school-age population, including an understanding of language, learning, and literacy. Theoretical perspectives and evidence-based approaches to assessment and intervention will be examined. Case studies and applied activities are used to promote critical thinking for the planning of assessment and treatment.

SLP 519. Aural Rehabilitation (2). This course reviews the impact of hearing loss on communication and prepares students to assess the impact, counsel clients on the use of hearing aids, cochlear implants, or other assistive hearing devices, and teach alternative listening and communication strategies. Theoretical perspectives and evidence-based approaches to assessment and intervention for such populations will be reviewed using case studies and applied activities.

SLP 520. Dysphagia Management (3). This course will cover anatomy, physiology, and neurology of normal swallowing including diagnostic procedures and treatment protocols. Pre-req: Completion of CSD 542 Anatomy and Physiology of Speech and Swallow with a passing grade.

SLP 523. Adult Cognitive Disorders (3). This course reviews acquired cognitive-linguistic disorders and their associated neuropathology, etiology, characteristics, assessment practice, and treatment strategies.

SLP 524. Augmentative and Alternative Communication (3). This course reviews diagnosis, intervention, and current research for non-speech communication. Survey of issues and research pertinent to the use of unaided and aided augmentative and alternative communication methods by persons with deficits in speech, language and writing will be covered.

SLP 525. Communicating with Patients and Families (2). This course provides knowledge and skills related to appropriate communication with patients and their families/caregivers/significant others in clinical settings. The critiquing of videotaped sessions with clients/patients and clinical reports will be included.

SLP 526. Clinical Methods I (1). This course will provide students with information about clinical methods related to goal writing, treatment planning, clinical documentation, and use of therapeutic procedures in clinical settings. Case studies and applied activities will be used. Successful completion of this course is required for enrollment in CSD 517.

SLP 529. Diagnostics Lab (1). In this 1-hour lab, students will learn about and practice applying various approaches to the assessment of communication disorders.

SLP 531. Rehabilitation Research Design (3). This course introduces principles of research design and analysis and provides critical evaluation of research and of evidence-based practice.

SLP 536. Special Populations (3). This course addresses the speech and language concerns related to various congenital and acquired disorders. Theoretical perspectives and evidence-based approaches to assessment and intervention for such populations will be reviewed using case studies and applied activities.

SLP 538. Voice and Resonance Disorders (3). This course provides advanced theory and techniques for the diagnosis and remediation of voice and resonance disorders across the life span. Students will receive supervised hands-on training to develop skills in the endoscopic assessment of voice and swallow function.

SLP 542. Anatomy and Physiology of Speech and Swallow (1). This one-credit course will review the anatomy, physiology, and neuroanatomy foundational to the field of speech-language pathology. The course material will concentrate on typical development, anatomy and function of the speech system (laryngeal and oral) and the typical swallow (anatomy and swallow stages).

SLP 543. Dysphagia Lab (1). This course is a companion course to CSD 520. In this two-hour lab, students will learn to apply knowledge and techniques for the assessment and treatment of swallowing disorders. Students will practice informal and formal assessment, evaluation writing, goal setting, and treatment planning and execution using a mixture of case studies and applied activities.

SLP 544. Multicultural Issues in CSD (1). This course is designed to provide students with an introduction and initial overview of the impact of culture and cultural variation on language and communication. Through lecture, activities and course materials, students will develop: (1) a foundational understanding of cultural-linguistic diversity, (2) the application to the clinical process, and (3) overall cultural competence and humility in communication sciences and disorders.

SLP 545. Motor Speech Lab (2). This course is a companion course to CSD 509. In this two-hour lab, students will learn to apply knowledge and techniques for the assessment and treatment of motor speech disorders. Students will practice informal and formal assessment, evaluation writing, goal setting, and treatment planning and execution using a mixture of case studies and applied activities.

SLP 546. Clinical Methods II (1). This course is a companion course to CSD 517. This course will focus on providing students with early clinical application skills related to

ethics, treatment planning, goal writing, and professionalism. Successful completion of this course is required for enrollment in CSD 528.

SLP 547. Pediatric Feeding (1). In this course students will be provided with knowledge pertaining to the anatomy-physiology of swallowing processes, the normal swallowing/feeding development, and strategies for the prevention, assessment, and management of children with difficulties feeding and/or swallowing. Behavioral feeding disorders be an additional area of focus. Using current literature, the common diagnostic and treatment approaches will be reviewed and analyzed in order to effectively implement evidenced based practices. Discussions of the impacts on the family and the importance of interdisciplinary treatments will be included.

SLP 548. Clinical Methods III (2). This course is a companion course to CSD 528. Successful completion of this course is required for enrollment in CSD 550. Related to legal and ethical issues, employment settings, job exploration/preparation, credentialing, trends in service delivery, board examinations and professional advocacy in the profession of speech-language pathology will be discussed. Students will examine how these issues impact the delivery of speech-language pathology services through the use of case studies and ethical problem-solving/decision-making activities.

SLP 550. Externship in Speech-Language Pathology (2 - 4; variable credit).

SLP 553. Capstone Course (1). This course will include compilation of highlights from throughout the program and a personal review of their progress using a portfolio. This portfolio will reflect a student's growth of skills and acquisition of knowledge during their Master's program. Artifacts included will be formative and summative. Students must have successfully completed all previous coursework to enroll in the Capstone Course. Students will submit this portfolio for final review and passing Capstone is a requirement for graduation. This course is Pass/Fail. Please see Capstone Course Student Guide for further details. Students are expected to meet with their faculty advisor each semester.

Teacher Certification: Since the majority of school systems in the country accept speech-language pathology licensure in lieu of teacher certification, you will be well qualified to work in the schools in most states. However, should you prefer teacher certification in addition to or instead of state licensure, courses that may be required for teacher certification (that are not part of the regular MS SLP curriculum) are available to you as JU students from the School of Education: https://www.ju.edu/education/ . You also received a letter during admissions onboarding explaining your eligibility for licensure in different states. Please refer to https://www.asha.org/advocacy/state/.

Academic Grading

Grades are assigned in the Department of Communication Sciences and Disorders based on percentages. The grade equivalent will be discussed by the faculty responsible for each course syllabus.

Grading Scale:

Percentage (%) Earned	Grade	
93.00-100.00	A	PASS
90.00-92.99	A-	
87.00-89.99	B+	
83.00-86.99	B	
80.00-82.99	B-	
77.00-79.99	C+	FAIL- see course remediation policy
70.00-76.99	C	
0.00-69.99	F	

Remediation Policies

Course Remediation Policy

A student must pass each course with a grade of B- or better. The policy for remediating courses with final grades below B- is as follows:

Final Grade	Policy	Example
C, or C+ **-first time failing a course**	In cases where a student earns a final grade between a C and C+, the student will receive a grade of incomplete. The student is permitted to enroll in courses for the next semester. The student will complete an assignment that addresses the deficiencies in that course, designed at the discretion of the instructor. If the student completes the assignment appropriately, the instructor will complete a grade change form and the student will receive a B- for the course.	Student receives a final grade C+ in CSD123 in fall. Student is permitted to enroll in spring courses. Instructor assigns a course remediation assignment for CSD123, due during spring, and student does not successfully complete the remediation assignment. Student can finish any spring courses they are currently enrolled in but i*s not* permitted to

		enroll in summer courses. Student successfully retakes CSD123 during the next year's fall, takes no spring courses, and then resumes enrollment and progress in the program starting the following summer.
	If the student does not satisfactorily complete the assignment, the student may complete that semester's courses, but then must pause their enrollment in the program and retake the course when it is next offered, after which point the student resumes their enrollment and progress in the program.	Student receives a final grade C+ in CSD123 in Fall. Student is permitted to enroll in Spring courses. Instructor assigns a course remediation assignment for CSD123, due during Spring, and student does not successfully complete the remediation assignment. Student can finish any Spring courses they are currently enrolled in but is *not* permitted to enroll in Summer courses. Student successfully retakes CSD123 in Fall and then resumes enrollment and progress in the program starting the following Summer.
F **-first time failing a course**	If the student received a grade below C in the course, the student must pause their enrollment in the program and retake the course when it is next offered. After the student successfully retakes the course, the student can resume enrollment and progress in the program.	Student receives a final grade of F in CSD123 in Fall. Student *is not* permitted to enroll in Spring or Summer courses. Student successfully retakes CSD123 in Fall and enrolls in courses for Spring and onwards.
C+ or lower **-second time failing a course**	A final grade below B- received in a second course will result in dismissal from the program.	Student receives a final grade of F in CSD123 in Fall. Student *is not* permitted to enroll in Spring or Summer courses. Studen

		successfully retakes CSD123 in Fall and enrolls in courses for Spring. Student receives a final grade of C+ in CSD789 in Spring. Student is dismissed from the program.
C+ or lower in a course student is retaking	A student who receives a grade below B- in a course they are re-taking will be dismissed from the program.	Student receives a final grade of F in CSD123 in Fall. Student *is not* permitted to enroll in Spring or Summer courses. Student receives a grade of C+ in their retake attempt for CSD123 in Fall.Student is dismissed from program.

Students dismissed from the MS program may appeal the action to the BRCHS Grievance Committee. In addition to the course grade, each academic course will have knowledge competencies linked to the ASHA certification standards. These competencies and their remediation are handled separately from the course grade, as described below.

Competency Remediation Policy:

ASHA standards and competencies are covered in each Academic and Clinical course. Each course has select activities and assignments that satisfy competency requirements outlined by these standards. Each course may have one or more opportunities to demonstrate each competency. The instructor will assess each student's competencies at the end of the course. Grades of B- or greater in a course or an assignment do not equate to demonstration of competency in associated ASHA standards. If a student does not demonstrate competency in one or more standards by the end of the course, the student will be required to remediate the associated competency. A remediation project will be assigned by the instructor on the competency(ies) where difficulty was shown. The nature of this assignment will be at the discretion of the instructor on record.

If the remediation assignment is successfully completed after the first attempt, the student's grade *will not be changed* for the remediated activity, assignment, or examination; however, the instructor on record will document mastery of the remediated competency in that course. The student *will not* be required to complete a Competency Remediation Artifact for that competency as part of their Capstone Project.

Should the student fail to meet the requirements outlined in the remediation assignment after their first attempt, the student will be required to complete a competency remediation artifact as part of their Capstone Project. Failure to successfully complete the Competency Remediation Artifact as part of the Capstone Project will result in a failed grade in the Capstone, and the student will be required to reenroll the Capstone course when it is next offered. For more information, please see the CSD 553 Capstone Student Guide.

If a student requires competency remediation in two courses during the program, a meeting with student, the instructor(s) on record, and the program director and/or department chair will be held to address barriers to success in completing further competencies. Should a student fail to demonstrate competency in the same standard (e.g., Standard IV-B) in multiple courses (e.g., CSD 501 and CSD 509) or any competency in a third course following the meeting, the student may be counselled out of the program.

Academic Standing

Student academic and clinical progress are reviewed on a regular basis by the faculty so that all faculty are aware of students who may be struggling in coursework or practicum. Students who exhibit a pattern of struggling in academic and/or clinical course work and/or professional skills may be counseled out of the program by appropriate faculty members.

Students may withdraw from classes or receive an Incomplete (I) according to the University policy. An "I" indicates that a student did not complete a course for a reason acceptable to the professor and requested and received permission from the Dean to complete the course within the first four weeks of the next semester. The student must be passing and have completed all but a particular segment of a course to qualify for a grade of "I". The "I" will be converted to the appropriate letter grade if the course work is completed by the end of the fourth week of the next semester. If the "I" course work is not completed on schedule, the "I" will convert to an "F". The "I" converted to grades "A" through "F" will then be used in computing the GPA and may result in a change of academic status if the resulting GPA so indicates. A MS SLP student cannot register for the next course while an "I" grade remains on the student's record without permission of the Program Director.

Department of Communication Sciences & Disorders Withdrawal Policy

Course/Program Withdrawal

After the Jacksonville University drop/add period, a student may withdraw from a course during a specified withdrawal period. The withdrawal period normally extends until the end of the tenth week of the traditional fall and spring semesters or the fourth week of a summer or accelerated term. Students should consult the academic calendar for exact dates. Withdrawal requests from a course or courses normally will not be considered if

received after the last day to withdraw. Exceptions will be granted only upon approval by the appropriate college dean subject to a student appeal based upon an unforeseen and unavoidable emergency that precludes completion of the course or courses. Grades of "W" will be reflected on the student's transcript but are not computed into the student's GPA. Students will not be able to complete courses until they are offered in the next rotation, which may be a year or more.

To withdraw from the program, students must send a written withdrawal request directly to the program director.

Program Re-entry after Withdrawal
To be readmitted into the program, students must formally notify the departmental Admissions Coordinator, Program Director, and Department Chair of their intention to re-enter the program. The petition should be received 1 semester prior to re-entry and should be sent directly to the Admissions Coordinator, Program Director, and Department Chair. Re-entry is contingent upon approval and space availability.

University Readmission
Students seeking readmission to the program should consult the admissions office. More information is available here: https://www.ju.edu/registrar/readmission.php

Program Completion
Students must successfully complete all course work no later than three years after entrance into the program.

Guidelines and Expectations for Academic Coursework

Honor Code

Truth has been identified by the profession as a value essential to speech-language pathologists. To underscore the importance of truth, honesty, and accountability, students, faculty, and staff in the Jacksonville University Department of Communication Sciences and Disorders adhere to the following honor code:

"On my honor as a student of Jacksonville University, I promise to uphold the values of honesty, trust, fairness, respect, and responsibility in all my dealings with faculty, staff, and students."

Egregious academic misconduct will result in dismissal from the program.

Everything submitted by a student should represent their own work. You should not ask classmates, former students, family members, friends, working SLPs, Artificial Intelligence or social media to assist with assignments, unless explicit permission is granted by the professor. For specific guidelines on AI usage in

academic and clinical settings, please refer to the separate AI policy document and syllabus information (found in Orientation Module). Unless given as a group project, assignments should not be completed collectively. Some assignments will be completed online. To comply with the Honor code, you should not screenshot information given to you electronically to share with others. This includes exams, quizzes and homework. For more information, please visit JU's academic integrity site, https://www.ju.edu/academicintegrity/

Disciplinary Policy Release
Each student accepted into the MS-SLP program agrees to:
- Represent the University in a manner that upholds the integrity and standards of the University and the Department of Communication Sciences & Disorders;
- Notify the Department Chair and Program Director of any misconduct on the part of the student;
- Permit the Dean of Students to notify the Department Chair and Program Director and/or a designated representative in case the student violates the policies as outlined elsewhere in this handbook, or the conduct code stated in the JU Student Handbook; and
- Understand the Department Chair, Program Director and Dean reserve the right to discipline the student beyond actions taken by the Jacksonville University Disciplinary Committees.

Professionalism
The MS-SLP program is a professional training program and students are expected to adhere to the following guidelines:
- Students are expected to arrive on-time for class and to actively participate in class discussions. All in-class and email interactions should be respectful, including interactions with the instructor and other students.
- Technology (laptops, phones, tablets, etc.) will be used only for taking notes or for in-class activities as instructed by the professor. As this is an online program, cameras are expected to be on for class participation whenever possible to ensure class participation and student understanding.
- Students will come to class prepared (completed readings, homework assignments, etc.)
- When conducting class presentations or hosting guest speakers in class, faculty may ask students to follow dress guidelines found in the Clinical guidelines section.
- If unprofessional behavior persists after the instructor addresses it with the student, instructors reserve the right to deduct points for unprofessional behavior from the final course grade or a grade on an assignment if the above guidelines are violated. Further, instructors may ask students to leave class if their behavior is distracting or disruptive (refer to Professional Qualities Policy)
- ***Students are expected to demonstrate consistent communication skills if they need assistance or require support. This communication can be done by scheduling a meeting with an instructor, attending office hours, or by***

professional email correspondence. Please refer to each professors'
communication policy in their syllabi.
- ***Students violating the JU Code of Conduct, ASHA Code of Ethics, or HIPAA***
may be dismissed from the program. (see Process for Dismissal from the
Program section). The Course Remediation and PQA policy do not apply as
these are considered egregious violations of professionalism and integrity. Any
violation may trigger a failing grade and/or an Academic Integrity and Misconduct
report.

Process for Dismissal from the Program
Please note: this process will not apply to students who are dismissed due to the course
remediation policy.
1. Program Director and Department Chair will meet with student and any involved
   faculty.
2. Program Director and Department Chair will review information from all parties in
   consultation with departmental policies.
3. All CSD Faculty will convene to determine the outcome.
4. Program Director and Department Chair may also consult with the Deans of the
   college to determine outcome.
5. Once a decision has been made by the CSD faculty, the Program Director and
   Department Chair will meet with the student and provide formal documentation of
   the decision.

Students who are dismissed from the MS SLP program are not eligible for re-entry to JU's MS SLP program.

Class Attendance
The Communication Sciences & Disorders faculty maintains the principle that graduate
student attendance at all classes is imperative. Lectures, discussions, labs, student
presentations and other activities that occur during scheduled class timesare invaluable
to the knowledge and development of the graduate Speech-Language Pathology
student. The faculty believe strongly that class attendance is necessary for students to
learn the assigned material and achieve course objectives while also developing
professional relationships with the faculty that remain an important part of career
progression. Grades will be awarded based on the ability of each student to achieve
specified course objectives and may include frequent student participation.

Tardiness
Students are expected to be signed into the course room before class begins.
Unavoidable and/or unexpected circumstances beyond the student's ability to control or
anticipate may be considered acceptable reasons for tardiness. Unless permission to
leave class early is granted by the professor, students are expected to remain in class
until the class is completed. Leaving a class during a presentation should also be

minimized as the faculty provide breaks during longer lectures. If a student demonstrates a pattern of missing class, tardiness, or leaving early without permission, the department may initiate a discussion with the student to improve punctuality, timeliness and participation. Should these behaviors continue, a formal Professional Qualities Assessment for the student will be scheduled with the course instructor and the Department Chair.

Absences
Faculty maintain the right to record attendance and offer in-class participation activities/labs that depend on attendance in order to count towards the student's final grade. Faculty have full discretion in regard to making-up missed activities/labs and will be assessed on a case-by-case basis. Faculty are never required to provide deadline extensions, accommodations, or make-up opportunities for missed course work unless appropriate and timely documentation has been provided. Unless a student has a letter from DSS providing accommodations, faculty are not obligated to record lectures. It is always at the faculty member's discretion to do so.

The only acceptable reasons for missing class are an emergency involving the student's immediate family, illness, active military duty, jury duty, and religious holy days. Faculty reserve the right to request a medical note if a student misses a test, quiz, exam, presentation, or other graded in-class activities (e.g., simulation experiences). Faculty also reserve the right to request a medical note if a student misses consecutive class meetings due to illness or for medical reasons. Other situations will be considered on a case-by-case basis. For student athletes, athletic competitions as sanctioned by Jacksonville University's Athletics department are also acceptable reasons for missing class. We recognize that students may have commitments (weddings, family reunions, vacations, etc.) outside of coursework. However, these are not acceptable reasons for missing class and will be considered unexcused absences without the option for online attendance.

Students are expected to email the instructor(s) *prior to* the missed class, regardless of if the absence is excused or unexcused.

Students who miss 20% or more of class meetings as calculated by credit hours <u>due to unexcused absences</u> will receive a penalty on their final grade in the course. See the tables below for exact calculations and grade penalties. For example, if CSD123 is a 3-credit hour course and the term is 15 weeks long, that course would be scheduled to meet for a total of 45 hours in the term. A student who missed 9 hours or more of class meetings would receive a penalty as outlined below. A formal Professional Qualities Assessment for the student will be also scheduled with the course instructor and the department Chair.

Credit hours	Total hours	20% of total hours*
1	15	3
2	30	6
3	45	9
4	60	12

*Please note that this does not equate to class meeting times but credit hours.

Earned final letter grade	Final letter grade after attendance penalty
A	A-
A-	B+
B+	B
B	B-
B-	C+
C+	C
C	F

Examinations

Students should have clear workspaces when taking examinations with no notebooks, textbooks or papers in view unless an open-book examination is offered. If the instructor offers online examinations, they may require the use of proctoring software or special browser software for taking the examination at home. Depending on the proctoring software, it may require access to your laptop camera and microphone or an external USB camera and microphone for you to take the online examination. The instructor will provide instructions and details as needed for installing and accessing the proctoring software. Faculty involved in testing has the prerogative of implementing additional security measures.

Students are expected to take exams on the day and time scheduled. If a student must take an examination at a time other than the one established in the course syllabus, permission must be obtained from the professor prior to the date on which the exam is set.

If a student cannot take a scheduled examination because of illness or other valid reason, the appropriate instructor must be contacted *prior to the examination*. For unexpected or unforeseen events, when prior notice is impossible, the student must contact the professor and explain the reason for missing the examination within the 24 hours following the scheduled exam time. If the reason for missing an examination is considered valid by instructor, the student will be scheduled to take a makeup exam within five days of the original examination date or at a time convenient to the faculty.

If the instructor does not consider the reason given for missing the examination valid, the student will not be permitted to take a makeup examination. If the student fails to

notify the professor prior to the examination when it is possible to do so, no makeup examination will be given. If a student fails to notify the lead instructor within the 24-hour period when an unforeseen event occurs, no makeup examination will be given. A student will be given a zero for a test that is missed and not made up.

Written Assignments

Our program is a writing-intensive program that focuses on developing professional academic and clinical writing skills. Following ASHA Standard V-A and the Essential Functions and Technical Standards Guidelines, students are expected to write effectively in the register of professional and scientific writing standards. The Publication Manual of the American Psychological Association (7th edition; https://apastyle.apa.org/) Chapter 4 has guidelines for expectations for professional and scientific writing style. It is expected that students use these guidelines for their writing. Students who do not meet these expectations may be asked by instructors to seek additional writing support from resources such as JU's Writing Center, or to complete additional assignments, quizzes, or modules related to professional and scientific writing standards.

Each student is expected to submit written assignments on the date specified in the class syllabus. Permission to turn in written assignments later than the scheduled time must be obtained from the faculty prior to the due date. The faculty has the right to refuse any written assignment submitted past the due date where the student has not obtained prior permission to turn in the assignment late. Faculty may elect to allow a paper to be turned in late for less than full credit. For all written assignments that are turned in late, 10% of the total points possible will be deducted for the first day late, and 5% of the total points possible for each day thereafter. Saturday and Sunday count as two days.

All written assignments must be submitted via Blackboard unless faculty requests an alternative method. All references and documentation used for a written assignment must follow the American Psychological Association (APA) bibliographic style. Any information, idea, concept, statistic, or other data used to complete an assignment in the School of Applied Health Sciences must be properly cited (see below for more information). Failure to use proper citation is plagiarism. Plagiarism is academic dishonesty and grounds for dismissal from the University and School of Applied Health Sciences. Students should take care to submit the correct version of documents when submitting assignments electronically. Faculty will allow one 'incorrect' submission. If the student continues to submit documents in error, faculty will not accept and will grade the original submission. Please see AI policy for AI usage and guidelines.

Correct grammar, punctuation, word usage, and spelling are required in all written assignments. Credit will be deducted for errors in these areas. It is up to faculty discretion to provide a rubric and writing guidelines for written assignments. It is expected that complete, cohesive sentences be used for all assignments and exams.

The JU Graduate School offers writing consultation through the Writing Center. The Writing Center provides writing consultation for any undergraduate assignment with a written component. We assist with essays, reports, literature reviews, group projects, etc., from any discipline. For more information, go to https://www.ju.edu/writingcenter/.

Written assignments are not to be submitted for a grade in more than one course. All final examinations must be completed by the last day of the course. Students are unable to access course functions after midnight of the last day of the course.

If there are any questions regarding written assignments in the School of Applied Health Sciences, students must seek clarification from the course faculty in a timely fashion. Faculty is required, also in a timely manner, to provide clarification that is precise and unambiguous. All students are encouraged to maintain a copy of every paper submitted for a grade.

- All formal papers written as a part of the Jacksonville University School of Applied Health Sciences curriculum will be developed according to *Publication Manual of the American Psychological Association* (7th Ed.) for manuscript preparation.
- The following amendments to the APA 7th Edition format are required by Jacksonville University School of Applied Health Sciences:
    - The date of an assignment is to be included on Title page for all papers. This will assist students in organization of work throughout the program.
    - An abstract is required for research proposals, capstone projects, literature reviews and any papers over 10 pages.
    - A table of contents is required for research proposals, capstone projects, literature reviews and any papers over 10 pages.
    - Individual faculty may choose to amend APA guidelines for specific assignments. Faculty will communicate those changes to students via course syllabi or classroom instruction.

Labs and Simulations

Lab experiences and simulations are an important part of your academic and clinical education. Student attendance at all labs is expected. Students should arrive early for scheduled lab time with pre-lab assignments completed and printed out as necessary. Professional dress is expected for simulations. It is not possible to provide make-up experiences for missed real-time simulations. If a student has an excused absence, they must notify the instructor by email prior to the lab meeting that they are unable to attend and an alternate assignment will be provided. Partial credit for the lab or simulation may be received, at the instructor's discretion, for students with unexcused absences.

Extraordinary Events

If a student requires leave from school because of unforeseen personal circumstances, the student is responsible to notify the professor and give the reason for the requested time away. In cases of personal illness, the student should notify the appropriate professor as soon as possible. Without proper notification, the student will not be permitted to make up missed class/clinical assignments or examinations. The student is responsible for notifying the appropriate professor of any change in status regarding missed class/clinical experience via email or phone. The student is responsible for notifying the University Registrar if withdrawing from class(es).

Use of Student Created Materials

Written permission must be obtained before faculty, administrators, or students may use student materials. Each student will be asked to sign the "Consent to Use Student Papers Form" at the beginning of the academic year and has the right to refuse to do so. The form is included at the end of this handbook. Signed forms will be filed in individual student advising files. If a student exercises the right to refuse to sign the form, faculty can request permission to use materials on an individual, project-by-project basis.

Social Media

It is important to remember that information, once posted on the Internet, is very difficult to completely remove. As such, care should be given to the type and tone of information shared on social media. Personal information about other students, faculty, clinical educators, or patients should **never** be shared on social media, even in private posts. In addition, damaging commentary that directly names people or affiliates of Jacksonville University should also be avoided. Depending on the type of information shared, this may be a violation of HIPAA, FERPA, or the professionalism rules stated previously in this handbook, and consequences would be handled as appropriate to the type of violation. ***Students may not post on social media about a patient, even with that patient's permission, or the permission of their legal guardian. Violation of HIPAA or FERPA in this manner could result from removal from placement, thereby extending graduation date, or dismissal from the program.*** Simulated patients, patient scenarios/videos and patient actors apply equally to this standard.

Email

Communication between the student and faculty is imperative. A student's Jacksonville.edu email is the official means of communication between the University and the student. ***Therefore, all students should check their JU email address daily regarding clinic and academic communications.*** Students have the option to forward their email to another email account if they desire. This is required for all semesters, including the final two semesters during Externships.

Use of Technology

Course content is disseminated through an online learning management system. In addition, instructors frequently require tests, quizzes, and other assignments to be turned via the learning management system using specialized software with specific

hardware requirements. As such, each graduate student is required to have a personal laptop computer that runs an up-to-date version of Microsoft Windows (e.g., Windows 10) or Apple operating system (e.g., Mac OS X) software with current Microsoft Office or equivalent software. The laptop must also be capable of wireless internet connection and must have a working webcam and microphone for testing purposes.

Please note that Chromebooks do not run Windows or MacOS and are therefore not compatible with some of the software that we use. iPads, tablets, and phones will also not support all software used by the program. While you may use a tablet for notetaking in classes, responding to emails, and other functions, laptops will be required for testing and some other activities. A desktop computer with webcam, microphone, internet access, and appropriate operating system as described above may be used for online testing at home.

Please see the professionalism section for additional information regarding acceptable use of technology in the online classroom. For specific JU requirements for hardware and connectivity, please see https://www.ju.edu/admissions/technology-requirement.php . If you do not have access to a computer that meets the above requirements, you may not be able to adequately complete assignments or examinations, which may impact course grade and program completion.

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Disability Accommodations

Receiving and Using Disability Accommodations as Healthcare Sciences Students at Jacksonville University
Our primary goal is to provide the necessary support to any student with a disability and/or medical condition in removing barriers that could impact their academic success. With that in mind, the Brooks Rehabilitation College of Healthcare Sciences has partnered with the Jacksonville University Disability Support Services (DSS) Office, to provide support for any student in their College.
In order to receive accommodations, a student must go through the DSS registration process initially and then renew/request an updated letter every term.
The Registration process consists of the following steps:
Provide documentation about your medical condition and/or disability to the Director of the Disability Support Services (dss@ju.edu or +1 (904) 256-7533).

- This documentation cannot be any older than 3 years and must provide relevant information on the connection between the condition and the accommodations requested.
- The medical provider can choose between a typed letter (on their letterhead) explaining the student's condition and how it may impact the student academically, as well as the suggested accommodations or support needed; or use one of our forms.

- Once all the documentation is received, an appointment will be set to discuss the accommodations requested and to finalize the registration process.
- ❖ The Director of Disability Support Services will provide the student with accommodation letter(s) for the requested term and it is <u>the student's responsibility</u> to provide the letters to his/her professors and have a conversation about the accommodations and how/when/if they'll be needing/using them each semester

Renewal/ request of accommodation letters process:
- ❖ In order to renew/request accommodations, the student is required to complete and submit the "Accommodation Request form" every term.
  - This form can be found on our [website](). The form needs to be downloaded and saved before it can be edited/saved and sent to us.
    Once the request is received, please allow 2-3 business days for the letters to be created and to be notified via email that they are ready to be picked up.

A student with a learning disability should weigh carefully with his/her advisor the requirements of the SLP program to ascertain its suitability, given the nature of the disability.

Professional Qualities Policy

A Professional Qualities Assessment (PQA) will be used to assist students in faculty in addressing academic or clinical concerns. A PQA may be initiated by faculty if a student is identified with needing support in the areas of professional responsibility and accountability, communication skills, or ethics. This assessment may be used to assist in creating a corrective action plan or council a student out of the program. During their first graduate semester, all students will meet with a faculty member to review. For serious and egregious violations of HIPAA, the ASHA Code of Ethics, JU's Student Code of Conduct, or JU's Academic Integrity policy, the student may be immediately dismissed from the MS SLP program (see *Process for Dismissal from the Program* section). The Course Remediation and PQA policy do not apply as these are considered egregious violations of professionalism and integrity. Any violation may trigger a failing grade and/or an Academic Integrity and Misconduct report.

Professional Qualities Assessment Protocol

1. A student has been identified by faculty as showing a concern in the areas of professional responsibility and accountability, communication skills, or ethics.
2. Faculty member will:
   a. Notify the department chair of the concern.
   b. Initiate a meeting with the student and one other faculty member to be present.
3. Both faculty members will meet with the student and outline areas of professional qualities using the PQA document using the comment section to outline specific details as well.
4. Student and faculty member will do one of the following:

       i. Discuss suggestions for a corrective action plan that includes steps to improvement and a timeline for follow-up PQA review on the corrective action plan. These details will be included in the comment section of the PQA.

<div align="center">OR</div>

       ii. Discuss alternative plans for the student including counseling out of the program.

5. Student will receive a copy of the PQA.
6. Student will respond within 48 hours of the meeting with an email sent to both faculty members summarizing the reason for the meeting and the future plans.
7. Faculty member initiating PQA will upload the PQA and student email summary to Student File.
8. Faculty member initiating PQA will follow-up with a PQA Review with the student using the determined timeline. Documentation of the PQA Review will occur on the PQA.

Grievances

Brooks Rehabilitation College of Healthcare Sciences
Student Grievance and Academic Appeal Policy

The purpose of this policy is to provide a pathway for impartial review of student issues or concerns that have not been resolved through normal informal channels. For the purpose of this policy a grievance is defined as a complaint involving unfair, arbitrary or unwarranted treatment that has not been resolved through normal channels. The following list of issues or concerns have specific University Policies that supersede this grievance process:

- Student Grade Appeal
  - https://www.ju.edu/academicintegrity/grade-appeal-process.php
- Violations of the code of Conduct
  - https://www.ju.edu/greenpages/code-of-conduct.php
- Sexual Harassment
  - https://www.ju.edu/campussecurity/campussafety/sexual-harassment-policy.php
- Academic Integrity and Misconduct Policy
  - http://www.ju.edu/academicintegrity/academic-integrity-misconduct-policy.php

ASHA Procedures for Complaints Against Graduate Education Programs

A complaint about any accredited program or program in candidacy status may be submitted by any student, instructional staff member, speech-language pathologist, audiologist, and/or member of the public.

Criteria for Complaints Against Graduate Education Programs
 For a complaint to be considered by the Council on Academic Accreditation of ASHA (CAA), it must:
- be against an accredited education program or program in Candidacy status in speech-language pathology and/or audiology,
- relate to the Standards for Accreditation of Graduate Education Programs in Audiology and Speech-Language Pathology, and specify where possible the relevant standards, and
- include verification and documentation (e.g., copies of grievance processes, communications verifying completion of processes, etc.) if the complaint is from a student or faculty/instructional staff member at that institution, that the complainant exhausted all relevant institutional grievance and review mechanisms before submitting a complaint to the CAA, if relevant to the complaint.

The complaint must clearly describe the specific nature of the complaint and the relationship of the complaint to the accreditation standards and provide supporting data for the charge. The burden of proof rests with the complainant. All written testimony must include the complainant's name, address, and telephone contact information and the complainant's relationship to the program in order for the Accreditation Office to verify and communicate with the source of the complaint.
Complaints against a program may be submitted even if separate action is pending against the program by another body, except as outlined above.

All complaints must be signed and submitted in writing to:
Chair, Council on Academic Accreditation in Audiology and Speech-Language Pathology, American Speech Language-Hearing Association, 2200 Research Boulevard #310, Rockville, Maryland 20850.
Complaints will not be accepted by e-mail or facsimile**.**

Determination of Jurisdiction
Within 15 days of receipt of the complaint, Accreditation Office staff will acknowledge receipt of the complaint and will forward a redacted copy of the complaint to the Executive Committee of the CAA. The original letter of complaint is placed in an Accreditation Office file separate from the program's accreditation file.

The Executive Committee determines whether the complaint meets the above-specified criteria. Staff, because of the need to redact the complaint, verifies the accreditation status of the program against which the complaint is filed, and communicates this

information to the Executive Committee with the redacted complaint. Although complainants are encouraged to specify the accreditation standards as the basis for the complaint, the Executive Committee will verify the relevant standards related to the complaint as part of its jurisdiction review.

An affirmative vote by two-thirds of the voting members of the Executive Committee, exclusive of the chair, is required to proceed with an investigation of a complaint. If the Executive Committee of the CAA makes the determination that the complaint does not meet the above-listed criteria, the complainant is informed within 30 days of the letter transmitting the complaint to the EC that the CAA will not review the complaint.

Evaluation of Complaint
If the Executive Committee of the CAA determines that the complaint satisfies the above-listed criteria, the CAA will evaluate the complaint.

The chair of the CAA informs the complainant within 30 days of the letter transmitting the complaint to the chair that the Council will proceed with an evaluation, including the specification of the standards upon which the investigation will be based. Because it may be necessary to reveal the identity of the complainant to the affected program or to other potential sources of relevant information, the complainant will be required to sign a waiver of confidentiality within 30 days of the letter indicating that the CAA will proceed with its evaluation. The complainant is given the opportunity to withdraw the complaint during that time. If the complainant does not wish to pursue the matter, the investigation is concluded. If the complainant does not wish to withdraw the complaint, the complainant is asked to keep the initiation of an investigation confidential.

Within 15 days of receipt of the waiver of confidentiality, the chair of the CAA notifies the program director and the institution's president or president's designee by certified return receipt mail that a complaint has been registered against the program, including the specification of the standards upon which the investigation will be based. The notification includes a redacted copy of the complaint without revealing the identity of the complainant. The program's director and the institution's president or president's designee are requested to provide complete responsive information and supporting documentation that they consider relevant to the complaint within 45 days of the date of the notification letter.

Within 15 days of receipt of the program's response to the complaint, the chair of the CAA forwards the complaint and the program's response to the complaint to the CAA. The materials are redacted and the identity of the complainant and the program under investigation is not revealed to the members of the CAA or to recipients of requests for information, unless a majority of CAA members consider such disclosure necessary for the proper investigation of the complaint. If the majority of Council members conclude that individuals other than the complainant, the program director, and the institution's president or president's designee may have information relevant to the complaint, the chair of the CAA requests such information. After reviewing all relevant information, the CAA determines the course of action within 30 days.

Such actions include, but are not limited to the following:
- Dismissal of the complaint;
- Recommending changes in the program within a specified period of time and as they relate to standards (except for those areas that are solely within the purview of the institution);
- Continuing the investigation through an on-site visit to the program;
- Placing the program on probation;
- Withholding/withdrawing accreditation.

If the CAA determines that a site visit is necessary, the program director and the institution's president or president's designee are notified, and a date for the site visit is expeditiously scheduled. The program is responsible for expenses of the site visit. The site visit team is selected from the current roster of CAA site visitors. During the site visit, emphasis is given only to those standards with which the program is allegedly not in compliance. The site visit team submits a written report to the CAA no later than 30 days following the site visit. As with all other site visits, only the observations of the site visitors are reported; site visitors do not make accreditation recommendations. The CAA forwards the report to the program director and the institution's president or president's designee within 15 days. The program or institution should provide a written response to the chair of the CAA within 30 days of the date on which the report is postmarked to the program director and the president or president's designee. The purpose of the response is to verify the accuracy of the site visit report.

The CAA reviews all evidence before it, including the site visit report and the program's response to the report, and takes one of the following actions within 21 days: Dismisses the complaint;

- Recommends modifications of the program within a specified period of time (except for those areas that are solely within the purview of the institution);
- Places the program on probation;
- Withholds/withdraws accreditation.

If the CAA withholds/withdraws accreditation, the program director and the institution's president or president's designee are informed within 15 days of the CAA decision that accreditation has been withheld/withdrawn. Notification also includes justification for the decision, and informs the program of its option to request Further Consideration. Further consideration is the mechanism whereby the program can present documentary evidence of compliance with the appropriate standards and ask the CAA to reevaluate its decision to withhold/withdraw accreditation.

If the program does not exercise its Further Consideration option, the CAA's decision to withhold/withdraw accreditation is final and no further appeal may be taken. If accreditation is withheld/withdrawn, the chair of the CAA notifies the Secretary of the U.S. Department of Education at the same time that it notifies the program of the decision.

If the program chooses to request Further Consideration, the CAA must receive the request within 30 days from the date of the notification letter. With the request for Further Consideration, the program must submit additional written documentation to justify why accreditation should not be withheld/withdrawn. A hearing with the CAA is not provided for Further Consideration requests. The CAA will evaluate the request for Further Consideration and take one of the following actions within 30 days: Recommends modifications of the program within a specified period of time (except for those areas that are solely within the purview of the institution);

- Places the program on probation;
- Withholds/withdraws accreditation.
- Within 15 days of its decision the CAA notifies the program and the complainant of its decision.

If the CAA decision after Further Consideration is to withhold/withdraw accreditation or candidacy, the program may appeal the decision in accord with the Appeal Procedures described in Chapter VI of this manual.

Summary of Timelines
The following summarizes the timelines in the complaint process, beginning from the date a complaint is received.

- Complaint is acknowledged within 15 days of receipt and forwarded to CAA Executive Committee (EC)
- If EC determines that complaint does not meet criteria for complaints, complainant is informed within 30 days that CAA will not review
- If EC determines that complaint meets criteria, complainant is informed within 30 days of the determination that CAA will proceed with evaluation
- Complainant is given 30 days to sign waiver of confidentiality or withdraw the complaint
- Within 15 days of receipt of waiver of confidentiality, the complaint is sent to the program for response within 45 days
- Within 15 days of receipt of program's response, Chair forwards complaint and program response to CAA for review
- Within 30 days, CAA determines course of action If CAA determines that a site visit is necessary, it is scheduled and site visit team submits report to CAA within 30 days of visit
- Site visit report is forwarded to program for response within 30 days
- CAA takes action within 21 days of program response
- If CAA withholds or withdraws accreditation, program is notified within 15 days of CAA decision.
- The program has 30 days to request Further Consideration.
- If program does not request Further Consideration, decision is final and CAA notifies Secretary of U.S. Department of Education; if program requests Further Consideration, CAA takes action within 30 days.
- CAA informs program and complainant within 15 days of decision following Further Consideration.

CLINICAL POLICIES

Clinical Philosophy

In addition to teaching basic skills and competencies, our clinical training philosophy is to advocate and teach a clinical approach to service centered around the following values:

***Empowerment -Focused Intervention:** Ultimately our goal as clinicians is to help clients and family members understand their strengths and needs and take responsibility for their own growth as communicators.

***Collaboration:** To meet the goal of client and family empowerment, clinicians attempt to create a working alliance with clients, family members, and possibly other significant people instrumental in facilitating improved communication in the client's life. Collaboration requires identifying and understanding strengths and needs, setting goals, monitoring progress, modifying intervention and support, and making decisions about termination of services.

***Contextualized/Functional Intervention:** Knowing that skills that are taught outside of the functional contexts of people's lives are predictably not effectively integrated into those lives, intervention is designed to incorporate an appropriate sensitivity to the individual's real world.

***Focus on Strengths:** Intervention focuses as much as possible on the individual's strength because people are more than collections of deficits and because strengths can be used to compensate for ongoing disability.

***Integration of Clinical and Academic Training:** The Communication Sciences and Disorders Department promotes integration of clinical and academic training by infusing a practical clinical orientation into the academic program that is applied then within clinical training experiences.

***Student Clinicians as Problem Solvers:** The focus of the clinical training program is to train students in the skills of clinical analysis and critical thinking so that they will be in a position to flexibly create and implement appropriately customized programs of intervention.

***Clinicians as Agents of Change in Human Development:** Clinicians must see themselves in the broad context of promoting growth and maturation in the clients they serve. Intervention implies an invitation to participate in the complete domain of life memberships.

*Clinicians as Agents of Optimism and Contributors to a Positive Communication Culture: Helping clients, family members, and other caregivers respond effectively to the many challenges associated with a communication disorder requires positive and proactive interaction. It is critical that students take advantage of opportunities to work through difficult situations using an interaction style that projects potential for success.
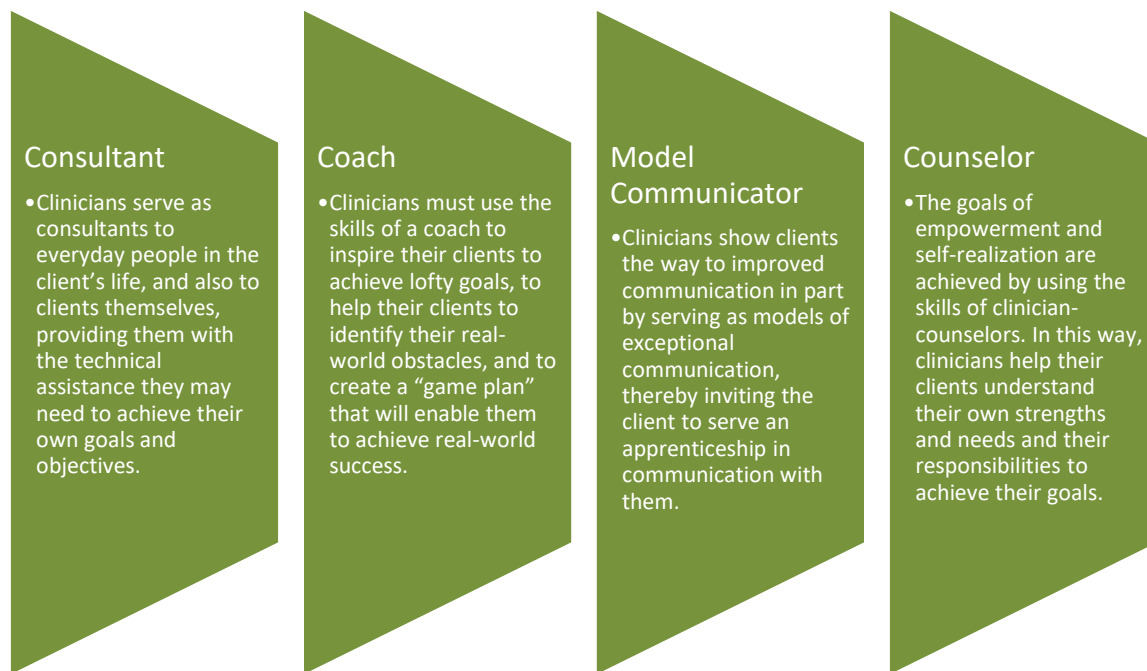
Apprenticeship Model:
At Jacksonville University we utilize an apprenticeship approach to clinical supervision. This model of supervision supports students engaging in placements at different levels of skill and competence. Successful implementation of an apprenticeship requires a commitment of both the Supervisor/Clinical Instructor/Clinical Educator and the student clinician to make a plan for growth that focuses on that individual student clinician's skills, strengths and competencies. Two students in the same cohort, at the same placement, may have very different plans for growth and require different levels of apprenticeship supervision and support. The goal is to move towards attaining competency levels and independence, but that rate will vary based upon the complexity of the placement and the student experience. For example, a student may be independent and highly competent in their first placement because it is less complex, and they have skills and competencies that meet the demands of the placement. In their second placement, they may face more complex clients, resulting in less independence and the need for more support from their Supervisor/Clinical Instructor/Clinical Educator. This model takes into account critical clinical attributes, as well as student behavior and response related to their competencies and plan for growth.

In addition to teaching the basic skills and values, our clinical training philosophy is to advocate and teach an approach to clinical services that is focused on values of collaboration, empowerment, and intervention. This means that faculty, Clinical Instructors, and students will focus on strengths and act as problem solvers. We ask Clinical Instructors and student clinicians to see themselves as agents of change and contributors to positive communication communities. To implement all the components of this philosophy, student clinicians must acquire more than a technical knowledge of skills and clinical competencies. They must also perceive themselves as playing a variety of clinical roles and execute these roles skillfully. In addition to the traditional medical, educational, and training roles associated with communication disorders assessment and treatment, clinicians must be flexible in their roles. These roles will include consulting, coaching, modeling, and counseling by both Supervisor/Clinical Instructors and student clinicians.

Student Clinician Role
To implement all of the components of this clinical philosophy, student clinicians must acquire more than technical knowledge and clinical competencies; they must also perceive themselves as playing various clinical roles and execute these roles skillfully.

In addition to the traditional medical, educational, and training roles associated with the diagnosis of a communication impairment and the symptom-oriented treatment of that impairment, clinicians must also creatively and flexibly play substantially different roles

Consultant
- Clinicians serve as consultants to everyday people in the client's life, and also to clients themselves, providing them with the technical assistance they may need to achieve their own goals and objectives.

Coach
- Clinicians must use the skills of a coach to inspire their clients to achieve lofty goals, to help their clients to identify their real-world obstacles, and to create a "game plan" that will enable them to achieve real-world success.

Model Communicator
- Clinicians show clients the way to improved communication in part by serving as models of exceptional communication, thereby inviting the client to serve an apprenticeship in communication with them.

Counselor
- The goals of empowerment and self-realization are achieved by using the skills of clinician-counselors. In this way, clinicians help their clients understand their own strengths and needs and their responsibilities to achieve their goals.

University Faculty and Supervisor/Clinical Instructor Roles

Supervisor/Clinical Instructor/Clinical Educator: Supervises students in the community placement.

- *Student Interaction:* Frequent

Clinical Coordinator: Assigns students to placements, assigns University Site Supervisor/Clinical Instructor. Instructor of record for clinical placement credits.

- *Student Interaction:* Frequent
- *Clinical Instructor Interaction:* Intermittent as needed during the semester

*University Site Supervisor/Clinical Instructor: Assigned by Clinical Coordinator to do minimally one site visit per semester where USC will provide scaffolded feedback (written and verbal) and support to student. Provides support to Supervisor/Clinical Instructor and student throughout placement semester. Documents communications, site visit observations and any other relevant information throughout the semester. Communicates closely with the Clinical Coordinator. USC may have additional roles be Clinical Coordinator or other faculty.

- *Student Interaction:* Frequent
- *Clinical Instructor Interaction:* Frequent throughout the semester

Placement Coordinator: Manages paperwork, affiliations, new community partners, onboards and vets Clinical Instructors eligibility for supervision.

- *Student Interaction:* Little to none
- *Clinical Instructor Interaction:* When developing community partners and prior to a working with student during onboarding for supervision

Clinic Assignments and Supervision

Students will participate in offsite clinical placements. The goal for these placements is to have experiences with prevention, assessment, and treatment of disorders within our scope of practice. This will include experience with diverse ethnic and cultural backgrounds as well as across the lifespan. Dates of clinical assignments may be flexible and may not correspond with semester dates. This may be especially true if a student is low on clinical hours beyond their second practicum. The Clinical Coordinator will communicate directly with the student and Clinical Instructor regarding dates and evaluations. The student's clinic schedule will be assigned by the Clinical Coordinator each semester. This schedule will include days, times, and expectations. Students will be required to fill out a Clinical Agreement for each placement. For information on ASHA certification go to https://www.asha.org/certification/.

Supervision Requirements
Per ASHA guidelines (www.asha.org), students may only be supervised by an individual holding a Certificate of Clinical Competence for a minimum of 9 months. ***The Clinical Instructor must be physically present in the facility at all times while a student is providing services to clients***. If you find it necessary to leave the facility and there is no other ASHA certified individual in the facility, do not leave the student alone with clients. Students must be directly supervised a minimum of 25% of the student's total contact with each client. Per ASHA, supervision must be "sufficient to ensure the welfare of the client." Please check Medicaid and Medicare guidelines for your facility as the minimum supervision requirements may be higher than 25%.

Students will be assigned to clinical placements by the Clinic Coordinator based upon placements deemed available and eligible by the Placement Coordinator. Placements will be made based on the skills that students need to obtain in order to satisfy ASHA requirements.
- Student preferences for population is not a primary factor in placement. Geographically accessible placements are strongly considered but may be altered due to student's clinical hours history, availability of quality placement, and supervision requirements.

- Geographically accessible placements include a drivable radius from either campus or the student's residence.
  - Students do
- Students will receive a placement no later than 45 days into the beginning of the semester the student is registered for the practicum or externship.
- Students will be responsible for transportation to and from clinical sites.
- Work schedule and personal schedules will not be accommodated for clinical placements.
- Students who refuse a clinical placement will not be assigned to another placement for that term and may not graduate on time.

Students must successfully meet all course prerequisites related to being assigned a clinical placement.
- Successful completion of SLP 526 Clinical Methods I is required for enrollment in SLP 517.
- Successful completion of SLP 546 Clinical Methods II is required for enrollment in SLP 528.
- Successful completion of Successful completion of SLP 517 Practicum I is required for enrollment in SLP 528.
- Successful completion of SLP 548 Clinical Methods III is required for enrollment in SLP 550.
- Must have successfully completed SLP 517 and SLP 528 before completing externship SLP 550.

Per the ASHA Certification Standards, students may obtain up to 75 clinical hours through alternative clinical education including the use of standardized patients and simulation technologies. Students are responsible for entering simulation hours into the clinical management system (CALIPSO) for approval by the faculty instructor by Friday every week. Students may carryover up to 50 clinical hours from undergraduate or unpaid experience. Signed documentation of those hours with a speech-language pathologist's ASHA number must be provided.

Students will be assigned a University Site Supervisor/Clinical Instructor who will observe the student at least once during the semester and provide written feedback. This visit may be virtual for externship. The University Site Supervisor/Clinical Instructor may be the Clinical Coordinator or another Jacksonville University faculty member.

Practicum Experiences

Per ASHA requirement, each student will participate in varied practicum experiences and a full-time clinical externship as detailed in the curriculum. With the exception of externship where students may be able to choose their placement, clinical experiences will be assigned by the Clinical Coordinator. Students may not contact practicum sites, prior to assignment, without the permission of the Clinical Coordinator. Hours accrued on-site will vary between semesters. Transportation to and from clinical sites is the

responsibility of the student. Jacksonville and surrounding areas are geographically large and will require flexibility with the distance to practicum/externship sites. <u>Again, distance to the site is not the primary concern when assigning placements</u>. Jacksonville cohort students will be placed for Practicum I and Practicum II in the greater Jacksonville area, including surrounding counties such as Baker, Nassau, St Johns and Clay. Palm Coast cohort students will be placed for Practicum I and Practicum II in a 60 mile range from either campus or their home address. Please note that this is a "best case scenario" and there are many factors that may contribute to students having a longer commute than described above. We strive for each student to have varied placements that may include different populations, settings, disorders, ages, etc., depending upon availability and student appropriateness for a placement. Externships may be anywhere in the United States.

Students will participate in varied clinical placements to obtain clinical experience across the lifespan. This may include different ages, populations, or settings. For example, one student may have an early intervention placement for Practicum I and be placed at a high school for Practicum II. Another student may be at a private practice that focuses on school age children for Practicum I and a rehab outpatient for Practicum II.

Placement in a practicum experience will not accommodate for a student's personal work schedule. Students will be assigned to a placement based upon their academic work, experience history, areas of competency still needed to demonstrate, and other factors. Hospital and medical placements will be assigned by the Clinical Coordinator based on availability and student appropriateness. Your performance in prior placements, related academic coursework, and overall professionalism (i.e., attendance, initiative, etc.) will be taken into consideration. Students will complete a Clinical Agreement for every placement where the expectations for their attendance and duties will be outlined.

- Students must submit their Clinical Agreement signed by both the student and their Clinical Instructor as directed by the Clinical Coordinator.
- A student who does not submit their Clinical Agreement by the due date will trigger a clinical intervention plan and Professional Qualities Assessment.
- Changes in a student's clinical schedule require immediate notification to the Clinical Coordinator immediately for approval. This includes any change to expectations in the Clinical Agreement. This includes a change in their Supervisor/Clinical Instructor's schedule or availability. Students are not able to make changes to their determined clinical schedule unless they receive approval from the Clinical Coordinator. A new Clinical Agreement may be requested.
- If a student changes their clinical schedule and does not notify the Clinical Coordinator, this may result in a grade of Fail for the placement.
- Examples of schedule change:

- Student asks Clinical Instructor if they can change their hours or days (not permissible without Clinical Coordinator pre-discussion and permission).
- Clinical Instructor has a change in schedule or availability (student should notify Clinical Coordinator immediately).

Externships

Each non-thesis student will complete a clinical externship during their last semester of the master's program. <u>This is a full-time placement. Even if you have reached the minimum 375 hours, you will still complete the entire externship as indicated on your signed clinical contract.</u> Students chose their extern site in conjunction with the Clinical Coordinator. The site must agree to take the student. The faculty reserves the right to final approval of the placement if the student has not demonstrated pre-requisite competencies for the experience. Externships can be completed at any facility in the United States as long as Jacksonville University has a current contractual agreement with the facility. <u>For all cohorts and externship sites, contact the Clinical Coordinator for the policies and procedures before making contact, especially for medical sites as most require contact to be made by the Clinical Coordinator first. Other sites may have their own application and interview process</u>.

Once an externship is approved by the Clinical Coordinator, onboarding for an externship is the student's responsibility. The Clinical Coordinator does not have any authority over the external sites and their requirements. Students need to be timely, proactive, and follow through on onboarding tasks in order to start their externship. The Clinical Coordinator will not be able to override those requirements. Facilities may require students to register for fee-based programs such as My Clinical Exchange (myCE) or Castlebranch Bridges. The Clinical Coordinator will notify you if your site uses a system. There is a fee to register with this system which is paid by you. It is your responsibility to upload all records requested so that you may be cleared for placement by the site. All required documents must be completed in the system before starting the practicum. <u>If you are required to complete this process for your clinical placement, please be proactive with completing the necessary requirements as you CANNOT start your clinical assignment until all requirements are completed. Failure to complete these components may result in delaying your graduation date.</u>

Thesis students will request a meeting with the Clinical Coordinator the semester they identify themselves as completing a thesis.

The externship process is initiated in CSD 517 where students are required to submit a list of potential placements to the Clinical Coordinator. Once approved by the Clinical Coordinator, students may contact externship preceptors to request placement. Typical preceptors may include Rehabilitation Managers, Directors, and/or Lead Speech-Language Pathologists. The student will notify the Clinical Coordinator once their externship request has been accepted by the preceptor. The Clinical Coordinator will

pursue affiliation with the externship site if one is not in place. Initial affiliation requests must be initiated at least 4 months prior to the practicum start date for a local placement and 6 months for an out-of-area placement to ensure timely execution.

For Jacksonville University to initiate an affiliation agreement, please provide the following information to the Clinical Coordinator:
- ✓ Name of person at facility that will handle the agreement.
- ✓ Full legal name of the facility – sometimes this is different than the name you know.
- ✓ E-mail address of any contacts (e.g., Supervisor/Clinical Instructor, therapy manager, SLP), phone number, and mailing address
- ✓ Website info if available

Required Personal Documentation
Students must file the following documents in CALIPSO. Documents must be on file prior to starting clinics.
- ✓ Log of Observation Hours – ASHA requires 25 observation hours. Observation hours must be signed by a licensed and certified speech pathologist or audiologist. Verification of observation hours from your undergraduate program is acceptable.
- ✓ Record of Clock Hours from Other Universities – you may count up to 50 hours from undergraduate work toward the required graduate ASHA clock hours as long as the documentation is signed by a licensed and certified speech-language pathologist from the undergraduate program.
- ✓ Immunization record
- ✓ Background Check and Fingerprinting
- ✓ Clinical Agreement (each semester)

Students must comply with the requirements of each facility for the following and are responsible for any costs associated with the requirements:
- ✓ Additional background check and fingerprinting beyond the submitted documentation when admitted to the MS SLP program.
- ✓ HIPAA training
- ✓ Health Screening and/or additional drug testing
- ✓ Vaccinations

These requirements may be in addition to ones that the student completed at the start of the graduate program and/or for other placements. Whenever possible, the faculty will support the use of previous documentation. However, the requirements are specific to the facility/placement and Jacksonville University must follow those requests to place students. If a student refuses to provide additional documentation requirements, they are not guaranteed a placement and may have to extend their graduation timeline. The MS-SLP program must ensure that speech-language pathology students can complete clinical placements as part of the curriculum. Therefore, positive drug screens (even if a student is prescribed medical marijuana) will prohibit a student from complying with the policies of our local clinical affiliates.

Guidelines and Expectations for Working in Practicum Settings

Clock Hours
Students are required to do the following:
- ✓ Maintain their clock hours by entering them into CALIPSO daily or at least by each Friday by 11:59 p.m. It is highly recommended that daily logs should be maintained.
- ✓ By the 5th of every month, the student is responsible for making sure the submitted clock hours were approved by their Clinical Instructors.
- ✓ Within 48 hours of the last day of practicum for the semester, the student should have all clock hours logged into CALIPSO and approved by the clinical educator. This may be paired with the student's final evaluation. This is the student's responsibility to communicate with their Clinical Instructor to make sure this task is completed.
- ✓ If hours are not approved, this may lead to an incomplete for that semester.
    - o The clock hour will include the type of disorder each patient has, the amount of time spent with each client, and the type of activity for the session (assessment or treatment or both).
- ✓ Report clock hours in actual time, not rounding to the nearest quarter or half hour.

Students will be required to keep a copy of the clock hours they earn for their own protection if they ever have to prove that these hours were earned. Students may only count clock hours with direct contact with the client or the client's family in screening, assessment, intervention, training for a home program (if the activities are directly related to the evaluation and or treatment of a client), and/or counseling. This includes co-treatment with their Clinical Instructor or meetings with patients, families, and other professionals where the student is actively participating. Students are responsible for entering the correct hours and keeping a copy of the clock hours log for future reference.

According to 2016 revisions to certification standards, students may count clinical simulation for up to 20% of direct client hours (75 hours total). Only time spent in active engagement with the simulation may be counted. Debriefing time may not be counted. Your instructors for courses containing simulation will advise you regarding the amount of time that may be counted for each simulation in which you participate.

Per ASHA, "The graduate program may count up to 50 hours of supervised clinical practicum that were completed within the undergraduate program. Programs may count hours earned during an SLPA program as part of the permitted undergraduate hours if the activities were within the scope of practice of an SLP and were supervised in accordance with the standards."

You must complete the 375 clock hours required by ASHA prior to graduation. If a student does not complete these hours by the end of the externship, they will be required to register for an additional semester in order to complete this requirement. It is the student's responsibility to work hard at obtaining hours and to closely monitor the total hours earned. If a student has questions or concerns about their hour accrual, it is recommended they schedule a meeting with the Clinical Coordinator to discuss. Licensure is state specific. Upon admission, students received a letter informing them of state licensure preparation. If a student plans to work in a specific place following graduation, please check https://www.asha.org/advocacy/state/ for the state-by-state requirements. If your state requires a specific clinical requirement, make an appointment with the Clinical Coordinator to discuss.

In accordance with ASHA regulations, when students conduct assessment or intervention sessions as a team, the time will be divided by the time in which the student is actively engaged as the primary clinician in any given activity with the patient. For example, if Student A conducts a 15-minute interview with a patient, Student B does a 30-minute language assessment with the patient, and Student C follows with a 15-minute articulation assessment, the hours would be divided as follows: Student A and Student C each record 0.25 clock hours and Student B records 0.50 clock hours. The Supervisor/Clinical Instructor's observation and signature will serve as verification of the accuracy of the time reported by each student. If the student participates in teletherapy at their placement as a team of two, then both may equally count the time spent in the session.

It is up to the individual student to contact the state's department of health to ensure compliance with all documentation for licensure. This may include the documentation of clock hours.

Attendance

Attendance at the clinical placement is mandatory. Tardiness will not be tolerated. The only acceptable reasons for missing clinic are; a death or crisis in the immediate family, illness, active military or jury duty, or religious holy days. Documentation may be requested by your Clinical Coordinator. All other absences (weddings, family reunions, vacations, etc.) will be considered unexcused.

- <u>One unexcused absence will be allowed in clinical placements per semester.</u>
- Excused absences require medical documentation, bereavement documentation, or exceptional situation permission from the Clinical Coordinator and Program Director.
    - o If a student requires extended leave from a placement beyond one week, a meeting with the Clinical Coordinator and Program Director is necessary to determine a clinical re-entry plan.
    - o If a student has a medical need, please see the University's Medical Leave Policy and contact the Department Chair and Clinical Coordinator. Students who take medical leave from the clinical placement *may*

_be_ required to re-take the practicum course to meet the clinical clock hours requirement for graduation and ASHA certification. Options will be evaluated on a case-by-case basis.

- Unexcused absences are defined as absences unapproved by the Clinical Coordinator lacking medical or appropriate documentation.
- Students are required to submit excusal documentation to the Clinical Coordinator as soon as possible.
- Students' attendance will be monitored by both the Clinical Instructor and Clinical Coordinator. However, students are responsible and accountable for their attendance and timeliness and should immediately notify both Clinical Instructor and Clinical Coordinator if they are going to be late or absent.

We recognize that there may be an unusual circumstance that results in a student being late. However, if this occurs more than once after the Clinical Instructor has addressed it, we ask that Clinical Instructors notify the appropriate Clinical Coordinator of the student's unprofessional, repeated tardiness to the clinical placement. Students are expected to be communicative and professional if they have a valid reason for missing clinic or being late. They are expected to contact both their Clinical Instructor and their Clinical Coordinator prior to their absence. Their Clinical Coordinator will ask the student to email them to notify them of an impending absence. They should also contact their Clinical Instructor using a predetermined method of communication.

- Patterned tardiness, leaving placement early, or absences will initiate a Professional Qualities Assessment with the faculty.
- Failure to provide prior notification of an absence to the Clinical Instructor or Clinical Coordinator will initiate a Professional Qualities Assessment with the faculty and count as an unexcused absence.

Health and Immunizations
Prior to admission to the Master of Science program in Speech-Language Pathology, a health screening is required as well as immunization records. Entering a healthcare or educational profession includes certain public health requirements to which students are expected   to adhere. The following immunizations must be up to date when you enter our program.

- Tuberculin skin test within the past 12 months or documentation as a previous positive reactor; and
- Proof of Rubella and Rubeola immunity by positive antibody titers or 2 doses of MMR; and
- Varicella immunity, by positive history of chickenpox or proof of Varicella immunization; and

- Proof of Hepatitis B immunization or declination of vaccine if patient contact is anticipated; and
- Tetanus shot within last 5 years; and
- Flu shot during each active flu season. If you are unable to take the flu shot, you must have documentation of this from your physician. Sites may require you to wear a face mask at all times during flu season if you have not had the current vaccine.
- Clinical placements may have additional vaccines (e.g., COVID vaccine) or medical requirements.

People who are not correctly immunized pose a significant public health risk to their patients, co-workers, and themselves. ***TB tests must be renewed each year. It is your responsibility to update your TB test and any immunizations that have expired during your time at the university.*** If immunizations and TB tests are not up to date, or have been waived for religious reasons, students may not be able to participate in clinical experiences and will not complete the degree program as a result. Failure to comply with healthcare documentation and requirements may result in limiting clinical placements options that will provide students with the opportunity to demonstrate competencies and ASHA standards.

Background Checks

Background Check, Drug Screen, Fingerprinting: All students must complete a background check and drug screening upon entering the graduate program. If any flags appear on these checks, acceptance to the program can be rescinded. The Admissions Coordinator provides instructions on how to access and complete the background check using the CastleBranch system to all admitted students. This process needs to be completed by the specified deadline (out-of-state students can complete fingerprinting after this time, but it must be completed prior to the beginning of the semester).

Clinical sites will require additional background checks and/or fingerprinting at the *expense of the student*. These are site specific requirements.

Students must sign a waiver allowing the Department of Communication Sciences and Disorders to send a copy of background checks, clinical compliance paperwork and course/preceptor information to clinical sites and Supervisor/Clinical Instructors on the student's behalf. This waiver is presented as part of Orientation.

Participation in clinical placements may be contingent upon results of the background check. Any student with concerns regarding their background check must meet with the Program Director. The Admissions Coordinator and the Program Director review all background checks. Any item of concern, regardless of adjudication, will be shared with the clinical facility. The clinical agency will determine if the student may participate in clinical practicum at their facility. If the student is denied clinical access by an agency, and a comparable clinical assignment cannot be made, the student will not be able to meet the course objectives and will therefore be dismissed from the MS SLP program.

Enrolled students are required to notify the Program Director if they are charged and/or convicted of a crime during the time the student is enrolled in the MS SLP program.

Student Safety/Well Being

Our mission is to provide a safe environment for our students. If you may be pregnant or suffer from any autoimmune diseases, please confidentially notify the Clinical Coordinator as you may be compromised during your rotation through community placements, either via exposure to pathogens or to radiation. Commonly encountered pathogens include VRE (vancomycin resistant enterococci), C. Diff (clostridium difficile), MRSA (methicillin-resistant Staphylococcus aureus), and CMV (cytomegalovirus), the latter of which is particularly harmful to babies in utero. Other pathogens you may encounter include, but are not limited to chickenpox, shingles, TB (tuberculosis), and LRE (linezolid-resistant enterococci). Students also participate in fluoroscopic swallow studies, exposure to which may be harmful to fetuses. Students wear leaded aprons, and special maternity aprons are available; however, we must be aware of your pregnancy to provide you with this option. Students are expected to follow all CDC guidelines and best practices of their sites to maintain their health and the health of the clients. The link to the CDC is: https://www.cdc.gov/covid/index.html

Latex Allergies

As part of a student's clinical education, students may participate in simulations using low and high-fidelity manikins. When participating in these labs, students may be exposed to products containing latex. If a student has a known allergy to latex, they should make their instructor aware so that alternative options are provided for simulation.

Required Supplies

Each clinician is expected to purchase the following supplies that he/she will be using at their placement location.
> The following are examples, but are not an exhaustive list of what may be required:
> - Additional background checks, fingerprinting, or other onboarding documentation.
> - Hospital Scrubs or clinic uniform– you may be required to obtain scrubs, or a uniform based on the criteria of the facility to which you are assigned. Each facility may have different requirements so be prepared for these purchases.
> - Stopwatch or other timing device (iPhone/iPad may be used in some settings with facility permission)
> - Penlight and batteries
> - Mask or face shield

Student Dress Code

When observing, evaluating, or treating clients in any clinical setting, students are expected to dress and behave in a professional manner. Students must follow the any dress code established by the practicum/externship site. If site-specific attire is required, this will be at the student's expense. If no dress code is specified, you are expected to follow the guidelines listed below. Additionally, business casual may be required for

class when presenting or when hosting guest speakers. You will be asked to leave a clinical site if you do not follow these guidelines. Repeated dress code preparedness violations could result in a Professional Qualities Assessment and possibly even removal from the placement or a grade of Fail for the placement.

Speech-Language Pathology Clinical Grading Scale

Clinical skills evolve during a student's course of study, and each new clinical placement brings with it a different set of required knowledge and skills. As students move through the master's program at Jacksonville University, they are expected to develop increased levels of clinical competence. CSD 517, CSD 528, and CSD 550 are graded Pass/Fail.

Clinical Grading

Grades are assigned based upon a clinical rating scale that reflects a merging of competencies and skills in the areas of assessment, treatment, and professionalism. Clinical Instructors/Supervisors provide students with a combination of verbal and written feedback, as well as feedback on a midterm/final using the scale below, which is utilized toward their final course grade.

Practicum Course	Passing Grade
SLP 517	2.75 or above
SLP 528	3.0 or above
SLP 550	3.25 or above

1.0   Very Early Emerging: Skill not evident most of the time. Student requires direct instruction to modify behavior and is unaware of the need to change. Supervisor/Clinical Instructor/Clinical Educator must model behavior and implement the skill required for client to receive optimal care. Supervisor/Clinical Instructor/Clinical Educator provides numerous instructions and frequent modeling. Critical thinking/problem solving is very early emerging. Student primarily observes and states limited facts. (skill is present <25% of the time).

2.0   Early Emerging: Skill is emerging but is inconsistent or inadequate. Student is beginning to show awareness of need to change behavior with Supervisor/Clinical Instructor/Clinical Educator input. Supervisor/Clinical Instructor/Clinical Educator frequently provides instructions and support for all aspects of case management and services. Critical thinking/problem solving is early emerging. Student primarily observes and states a few facts. (skill is present 26-38% of the time).

2.5   Emerging: Skill is emerging but is inconsistent or inadequate. Student shows awareness of need to change behavior with Supervisor/Clinical

Instructor/Clinical Educator input. Supervisor/Clinical Instructor/Clinical Educator frequently provides instructions and support for all aspects of case management and services. Critical thinking/problem solving is emerging. Student primarily observes and states several facts. (skill is present 39-50% of the time).

3.0   Developing with Ongoing Monitoring/Feedback: Skill is present and needs further development. Student is aware of need to modify behavior, but does not do this independently. Supervisor/Clinical Instructor/Clinical Educator provides on-going monitoring and feedback; focuses on increasing student's critical thinking on how/when to improve skill. Critical thinking/problem solving is developing. The student is identifying and analyzing problems and is beginning to reach conclusions. (skill is present 51-63% of the time).

3.5   Developing with Intermittent Monitoring/Feedback: Skill is present and needs further development. Student is aware of need to modify behavior but does not do this independently. Supervisor/Clinical Instructor/Clinical Educator provides intermittent monitoring and feedback; focuses on increasing student's critical thinking on how/when to improve skill. Critical thinking/problem solving is developing. The student is identifying and analyzing problems and is beginning to reach conclusions. (skill is present 64-75% of the time).

4.0   Beginning to Refine: Skill is developed/ implemented most of the time and needs continued refinement or consistency. Student is aware and is modifying behavior in-session some of the time, and beginning to self-evaluate. Problem solving is refining. The student analyzes problems and more consistently reaches appropriate solutions. Supervisor/Clinical Instructor/Clinical Educator acts as a collaborator to plan and suggests possible alternatives. (skill is present 76-83% of the time)

4.5   Refining: Skill is developed/ implemented most of the time and needs continued refinement or consistency. Student is aware and is modifying behavior in-session and is self-evaluating. Problem solving is refining. The student analyzes problems and more consistently reaches appropriate solutions. Supervisor/Clinical Instructor/Clinical Educator as a collaborator to plan and suggests possible alternatives. (skill is present 84-90% of the time)

5.0   Consistent: Skill is consistent and well developed. Student can modify own behavior as needed and is consistently problem solving. The student analyzes problems and consistently reaches appropriate solutions. Student can maintain skills with other clients, and in other settings, when appropriate. Supervisor/Clinical Instructor/Clinical Educator serves as consultant in areas

where student has less experience. Supervisor/Clinical Instructor/Clinical Educator guides ideas initiated by student (skill is present >90% of the time).

Professional Practice, Interaction and Personal Qualities: If a student fails the Professional Practice, Interaction and Personal Qualities section of the CALIPSO Final Evaluation, the student will fail the placement. Passing in this section of the CALIPSO Final is a 3.0 or above. Failure of this section of the CALIPSO final is determined by a failing average grade in this section or a score below passing (please see grading scale for each placement course) in 4 or more categories.

Violation of HIPAA or ASHA Code of Ethics: If a student violates HIPAA or the ASHA code of ethics in the clinical setting, they may be dismissed from the program (see Process for Dismissal from the Program section). The Course Remediation and Clinical Intervention Policy do not apply as these are considered egregious violations of professionalism and integrity. Any violation may trigger a failing grade and/or an Academic Integrity and Misconduct report.
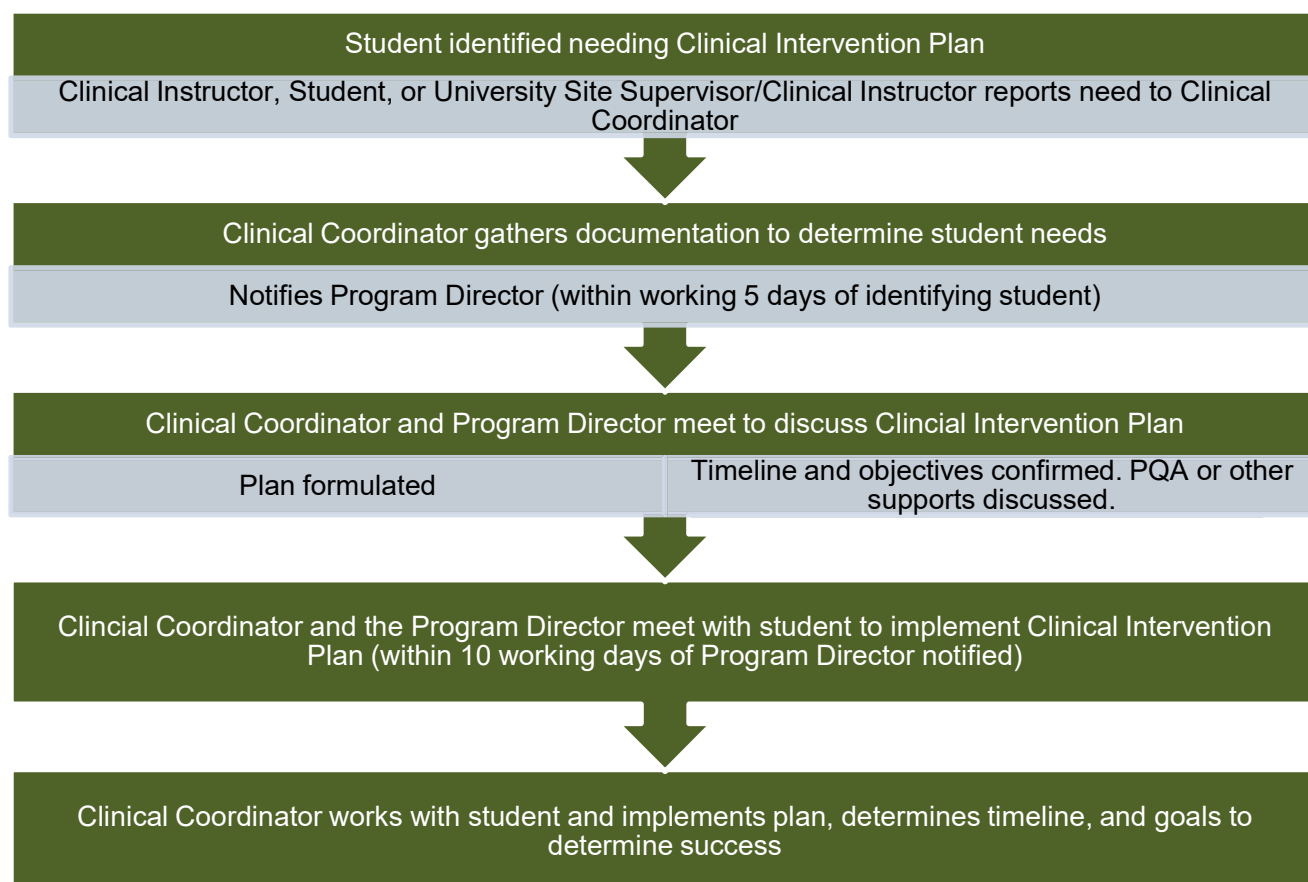
Clinical Intervention Policy

Students who need intervention to meet clinical expectations for the acquisition of knowledge and skills will be identified in the following manner. The student's University Site Supervisor/Clinical Instructors will identify a student who is struggling during site visits, conversations with Clinical Instructors, and/or self-reporting from the student. Clinical Coordinators will identify these students by using written documentation (i.e., midterm evaluations of concern that indicate possible failure, written observations, etc.) from the University Site Supervisor/Clinical Instructor/Clinical Educator or Clinical Coordinator. The companion practicum seminar will include opportunities for students to demonstrate the acquisition of knowledge and growth of skills that may identify areas of need or struggle.

The Clinical Coordinator will notify the Program Director within 5 work days of a student being identified as needing intervention. When the Program Director is made aware of a student who is struggling in clinic/practicum, a meeting will be scheduled within 10 work days with the Clinical Coordinator and the student to develop a Clinical Intervention Plan. The Clinical Coordinator will work with the student and placement to execute the plan. If the student does not meet the requirements of the plan AND the course in total, he/she will not receive credit for the course and cannot count the clock hours obtained in that practicum. The student will be required to repeat the practicum in a similar setting before advancing to other clinical settings. If a student has a final grade of Fail in a practicum or externship course, the student will follow the Course Remediation Policy. All clinical practicum course remediations are a repetition of the practicum to achieve a grade of Pass. This assumes that this is the student's first failed course (see Course Remediation Policy). A student who fails the Professional Skills,

Interactions and Qualities section of a placement's final grade must repeat the placement regardless of their grade in other areas of knowledge and skills.

Clinical Intervention Pathways

Student identified needing Clinical Intervention Plan
Clinical Instructor, Student, or University Site Supervisor/Clinical Instructor reports need to Clinical Coordinator

Clinical Coordinator gathers documentation to determine student needs
Notifies Program Director (within working 5 days of identifying student)

Clinical Coordinator and Program Director meet to discuss Clincial Intervention Plan	
Plan formulated	Timeline and objectives confirmed. PQA or other supports discussed.

Clincial Coordinator and the Program Director meet with student to implement Clinical Intervention Plan (within 10 working days of Program Director notified)

Clinical Coordinator works with student and implements plan, determines timeline, and goals to determine success

Clinical intervention triggered by the identified pathways listed above may be due to a difficulty with a specific ASHA competency or due to failure of the clinical practicum. Professional qualities can also impact clinical success. The following steps will be taken to determine an intervention plan, implementation and documentation to provide students with support for increasing and improving skills and knowledge.

If a student is identified, the following steps will be taken:

- Identify areas of weakness related to competencies, evaluation, treatment, and/or professional qualities.

- The plan will target specific measurable outcomes or tasks for the student and a determined timeline (See Appendix for Clinical Intervention Plan Documentation).
  - Example: The student may be asked to write professional detailed session plans with a specific focus on the specific areas of weakness (i.e. behavior management). The plan will be submitted to the Clinical Instructor and possibly the University Site Supervisor/Clinical Instructor to review prior to sessions and to approve that the student is prepared to conduct the session.
  - Example: The student may be directed to practice assessments and review manual procedures, demonstrated by a practice video before being approved to conduct an assessment with a client.
- Support will also be provided to the Clinical Instructor as appropriate to which may include scaffolding suggestions, supervision techniques, or other resources.

If a student does not meet the outcomes for the intervention plan, they may be required to finish the semester just observing, repeat the practicum, or fail the course.
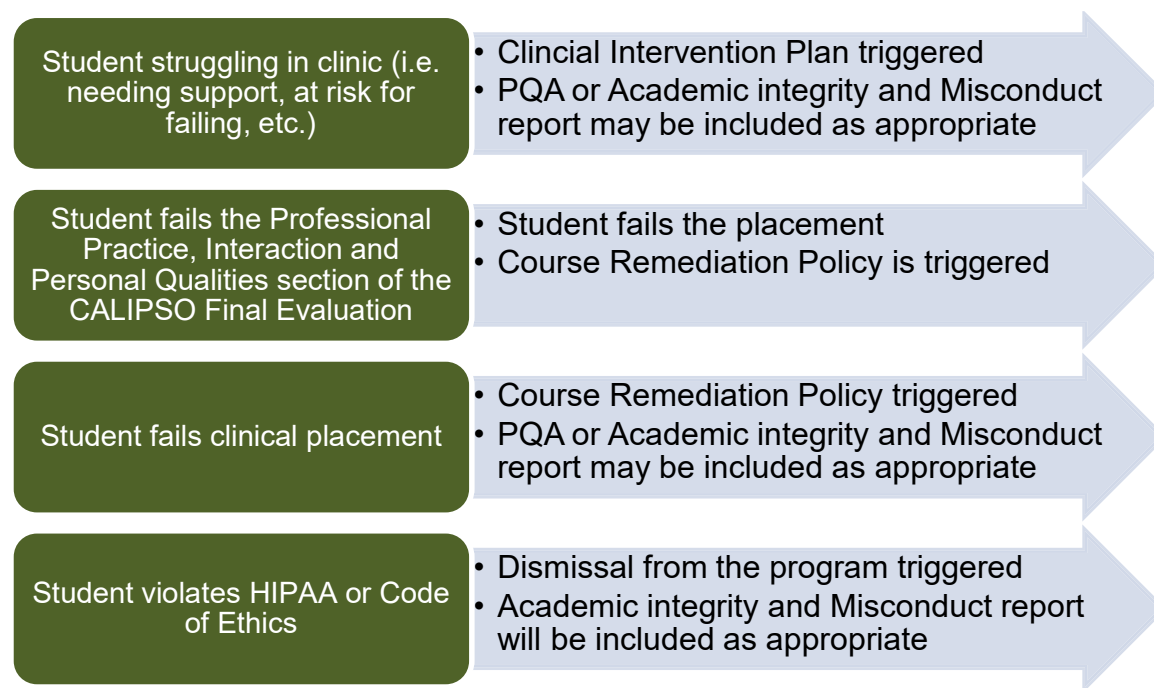
Student intervention plans may include:

- Change in supervision model.
  - Increase or intensity change in supervision.
- Requirement for the student to review ASHA Competencies and Standards related to academic content material (i.e., self-study, attending a training etc.)
- Professional Qualities Assessment (PQA)
  - Example: The University Site Supervisor/Clinical Instructor/Clinical Educator or Clinical Coordinator provides concrete suggestions or clear expectations, and student does not follow through, the student may also have a PQA documented.
- Increased contact with the University Site Supervisor/Clinical Instructor/Clinical Educator or Clinical Coordination (i.e., weekly check-in meetings).
- Activities or assignments to show growth of skill and acquisition of knowledge as it pertains to clinical practice.

If a student violates HIPAA or the ASHA code of ethics in the clinical setting, they may be dismissed from the program (see *Process for Dismissal from the Program* section). The Course Remediation and Clinical Intervention Policy do not apply as these are considered egregious violations of professionalism and integrity. Any violation may trigger a failing grade and/or an Academic Integrity and Misconduct report.

Clinical Course Remediation Policy

If a student does not pass Practicum I, Practicum II, or Externship with a grade of Pass, they will be considered in course remediation and must retake that clinical course. Following the departmental policy, they will be able to take only one failed course over. This includes clinical practicum and externship courses, as they follow the academic course remediation policy.

Student struggling in clinic (i.e. needing support, at risk for failing, etc.)	• Clincial Intervention Plan triggered • PQA or Academic integrity and Misconduct report may be included as appropriate
Student fails the Professional Practice, Interaction and Personal Qualities section of the CALIPSO Final Evaluation	• Student fails the placement • Course Remediation Policy is triggered
Student fails clinical placement	• Course Remediation Policy triggered • PQA or Academic integrity and Misconduct report may be included as appropriate
Student violates HIPAA or Code of Ethics	• Dismissal from the program triggered • Academic integrity and Misconduct report will be included as appropriate

Evaluation of Clinical Instruction

Students will be required to complete an evaluation for each Supervisor/Clinical Instructor/Clinical Educator at the end of the semester. Evaluation forms are available on CALIPSO and will be monitored by the Clinical Coordinator. Student feedback is valuable for the Supervisor/Clinical Instructor and for the program. Please be honest and thorough in providing feedback.

Clinical Accidents or Injuries

In the unlikely event of an accident, injury, allergic reaction, or toxic exposure during clinical placements, please notify your Clinical Coordinator Immediately. You will be asked to complete the injury form in the appendix and send it to the Clinical Coordinator.

Tips for Succeeding in Clinical Practicum

- Communicate regularly with your Clinical Instructor. Be sure you understand his/her expectations.
- Check your Jacksonville University email daily, even when in your externship.
- Take advantage of opportunities to learn. If you have the chance to attend a special workshop, observe a surgery, or meet with an expert, please do so if your schedule permits. Initiate observations with various disciplines at the facility.
- Be a willing and eager participant in clinic. Be helpful and assist your Supervisor/Clinical Instructor without being asked.
- Take the initiative to learn. If you hear a term you do not understand, be resourceful and find out what it means. If you are presented with a diagnosis you are not familiar with, research it.
- Be resourceful and take accountability for your professional learning. What did you do to find the answer or figure out the problem before you went for help?
- Use flexible thinking. Working in allied health and educational environments means that we have to be ready to adapt, change expectations, and change the plan for sessions.
- Prepare and prepare some more. Your Clinical Instructor will not expect you to provide treatment or conduct evaluations perfectly, but they will expect you to come prepared.
- Follow through on what you agreed to or what you said during a conversation with your Clinical Instructor.
- Have unconditional positive regard for the clients that you are providing services for. Patients always come first.
- If you have a question, avoid interrupting your Supervisor/Clinical Instructor and make a plan to discuss when there is an appropriate break in the session.
- Ask your Clinical Instructor questions but be sure to do so professionally. There may be questions or situations where you wait to ask privately so as to not upset a client, caregiver, or look as if you are challenging your Clinical Instructor.
- Keep your composure and behave in a professional manner. Conflicts or upsetting circumstances can occur in allied health. Maintain the tone of calm and professional for your patients.
- Work to find a balance between being professionally friendly and too intimate. There may be times when you need to share personal information with your clinical Supervisor/Clinical Instructor, but that should be situation specific and not overshadow the good work of providing services to patients.
- Turn your cell phone off. Check it only during your break.
- Do not take schoolwork to your clinical site. If you have free time on-site, use it for clinically related tasks.
- Be persistent. Applying academic knowledge to the clinical setting requires practice.
- Give yourself space to make errors and embrace them. You will make mistakes but use them as a learning opportunity, grow your skills and become an agent of change.

GRADUATION PROCEDURES

Please read this document carefully and pay close attention to the deadlines. You will be responsible for making sure that you have completed all paperwork for graduation.

APPLY FOR GRADUATION

You should apply for Graduation 4 to 5 months prior to your expected date of completion. For students graduating in the Spring semester, you should apply for graduation prior to beginning your externship. You may apply for Graduation by printing the Graduation Application and submitting it to the Registrar's Office.
http://www.ju.edu/registrar/graduation-application.php

DEPARTMENTAL REQUIREMENTS

1. Plan to take the Praxis examination in Speech-Language Pathology (5331) from the Educational Testing Service. (See www.ets.org for more information.) We recommend that you take this in the semester preceding graduation or while you are completing your externship. Enter the Jacksonville University code (5299) to have your scores sent to the department. We are required to track these scores for accreditation.

2. Complete all paperwork as required by the department regarding your mastery of program objectives. You will be provided with details of this in your last semester on campus.

3. Verify that you have submitted all of your clock hours and that you have met or exceeded the required 375 hours. All hours will be verified by your clinical supervisors and the program director. Following that verification, you will be provided with an official letter that you then give to ASHA and to state licensure agencies.

4. All students must complete an exit interview with the Program Director and selected faculty at least three weeks prior to graduation.

GRADUATION AWARDS

Awards nominated by faculty will be brought to vote by the department to determine the student receiving the award. Students will not be notified of their nominations prior to graduation. There may be some graduating cohorts that do not have a student nominee for a particular category. That category will not be awarded for that year.

Clinical Award- a student who showed exceptional *growth* in clinical skills during their clinical placements. This may include facing adverse clinical situations with professionalism, going above and beyond by engaging in additional training or clinical education, or demonstrating exemplary flexibility in their clinician thinking skills. This student would have modeled the trait of unconditional positive regard for their clients.

This student would have passed all placements with a grade of A. This student would be nominated by faculty based upon clinical feedback and performance.

Academic Award- a student who showed not only exceptional academic performance, but *consistent* participation in classes and demonstrated the application of course knowledge outside of the classroom. This student would have strong GPA and demonstrate additional qualities related to participation and application of knowledge.

Leadership Award- a student who showed exceptional leadership to the Jacksonville University community and/or their student cohort. This may include leadership in the student organization or the modeling of leadership and professionalism as demonstrated by their own behavior. This student would be nominated by faculty and would have demonstrated consistent leadership during their graduate studies, *including their last two semesters.*

Cohort Award- a student who was chosen by their peers as an influential member of the cohort who modeled behavior and collegiality commensurate with graduate student expectations. These behaviors may include being a resource or support for their peers. This student would be nominated and then voted on by their cohort using Qualtrics.

Trailblazer Award- a student who demonstrated innovative and entrepreneurial traits related to academics and/or clinical experiences. This student showed high resilience, resourcefulness, and creativity. This was a student who may have embraced critical thinking and knowledge application in nontraditional ways. This student would be nominated by the faculty.

ASHA CERTIFICATION PROCEDURES

Certification information is available on the ASHA website. The application is electronic and you will see an "Apply Now" tab on the ASHA site under certification. You may apply for certification after graduation. You will be asked to upload Praxis exam scores and verification of clock hours. When you complete the application, the Program Director is notified electronically and will verify that you have met certification requirements. It is the responsibility for individual students to contact the state health department to adhere to that state's requirements for licensure.

FORMS FOR SIGNATURE

Please sign each of the following and return during orientation.

Handbook Acknowledgement

I have received the 2025-2026 Department of Communication Sciences and Disorders Distance Education Student Handbook and I understand I am responsible for reading, understanding, and abiding by all of the policies contained within the handbook.

Student's Signature _____

Printed Student's Name _____

Date _____

Information Release Form added this to orientation

I hereby authorize the Department of Communication Sciences and Disorders to release the following documents to my clinical placements as needed: Criminal Background Check, Verification of Immunizations, and any other clinical compliance paperwork.

Student's Signature _____

Printed Student's Name _____

Date _____

Consent to Use Student Papers

I, _____, give permission to the faculty of the Jacksonville University Department of Communication Sciences and Disorders to use, for the purpose of promoting or meeting the goals of the University or the department, tests, papers, projects or other materials created by me. I have the right to withhold permission to use any materials that I specify, as long as I give notification to faculty at the time the material is submitted for evaluation. No reason need be given for withholding. Anonymity of material will be maintained, unless authorized by the above named to publish the name.

_____   _____
Student's signature   Date

Consent to Video/Photograph Students in Learning Settings

I, _____, give permission to the faculty of the Jacksonville University to take and make public visual images of me for the purpose of promoting or meeting the goals of the University while in the learning setting (i.e. classrooms, labs, school-related field trips, etc.) Without notification to me, the images may be used in any manner or media, including but not limited to, JU-sponsored websites, publications, promotions, advertisements, or posters. I waive the right to inspect, approve, or be compensated for the use of such images.

_____   _____
Student's signature   Date

JACKSONVILLE UNIVERSITY
COMMUNICATION SCIENCES AND DISORDERS
Clinical Accident, Injury, Exposure or Allergic Reaction Form

Student Name: _____ **Supervising Clinical Faculty:** _____

Student ID: _____ **Clinical Course:** _____

Address/Phone #: _____ **Incident Date:** _____

Email: _____ **Incident Time:** _____

Summary of Events:
_____
_____
_____

Interventions Taken:

_____
_____
_____

Next Steps: It may be required for the student to provide written clearance from a Physician before participating I external clinical sites or in lab activities at Jacksonville University.

_____
_____
_____

 I have provided this information voluntarily and it is true to the best of my knowledge.

Signatures-

Student: _____ **Date:** _____

Supervising Clinical Faculty: _____ **Date:** _____