Chapter 4
Clinical Practicum Policies and Procedures

**Blood Borne/Airborne Pathogens Exposure Policy and Procedure**

An accidental puncture injury, mucous membrane or non-intact skin exposure to blood/body fluids should be considered potentially infectious, regardless of the source. In the event of an accidental exposure to blood/body fluid, the site should immediately and thoroughly be washed with soap and water, or the eye/mucous membrane with water or saline. The incident should be reported to a supervisor, faculty, or university authority. If the exposure occurs at a clinical site, the student should immediately notify his/her clinical supervisor and seek medical attention at that site. The student shall also notify the Director of Clinical Education to report the incident.

A student who has experienced an exposure should immediately assess the level of risk for transmission of blood borne pathogens. If exposure is considered **high risk** for transmission of HIV or Hepatitis B, the student should IMMEDIATELY (WITHIN TWO (2) HOURS) BE EVALUATED AT A HOSPITAL EMERGENCY ROOM.

If the student is uncertain whether injury warrants an Emergency Room visit, the student should:

a. Call the Post Exposure Prophylaxis (PEP) hotline at 18884484911
b. Call an Emergency Room for advice
c. Call the Student Health Center (during open hours) at 5033522269.

**IMPORTANT:** High risk exposure requires immediate post exposure prophylaxis treatment. Do not delay in seeking advice.

**PLEASE NOTE:** Do not attempt to clean up any spills of human blood or other potentially infectious body materials. Campus Public Safety, (CPS), Custodial Staff and Resident Directors have been trained for spill cleanups. For assistance dealing with spills of bodily fluids containing visible blood, contact Custodial at:

503-352-2213 during business hours, Campus Public Safety
503-352-2230 during off hours (or the Resident Director if the spill is in an on campus housing Area)

**Professional Behavior**

Professional behavior is vital to the success of each student. The process of becoming an effective speech-language pathologist involves attaining competency, not only in knowledge and skills, but in professional behavior as well. Professional behaviors essential for success in both the classroom and the clinical arena include:

- Commitment to learning
- Interpersonal skills
- Communication skills
- Effective use of time and resource
- Use of constructive feedback
- Problem solving
- Professionalism
- Responsibility
- Critical thinking
- Stress management

To facilitate development of competency in professional behaviors, academic and clinical faculty provide formal and informal feedback to all students. Professional behavior will be assessed throughout the graduate program.

Students are encouraged to recognize the importance of self-assessment in their development as students and professional speech-language pathologists. Students are encouraged to seek feedback from fellow students, clinical educators, and faculty.

If a student demonstrates behaviors inconsistent with professional behavior expectations, the following will occur:

1. The student will be provided feedback regarding perceived inappropriate behavior(s) and relevant expectations of the clinical supervisor and/or faculty.
2. If a change to more appropriate behavior(s) does not occur, the student will be subject to appropriate consequences as determined by the faculty ranging from remediation to dismissal from the program.

**Placement of Students in Practicum Sites**

Graduate students in speech-language pathology will complete a variety of clinical experiences in many different clinical settings. Students will be placed in clinical sites only when they have had the appropriate academic background in preparation for the site. The academic curriculum and clinical program were designed to allow for coursework to occur before placement with a specific clinical population. (see Curriculum and Clinical Program, semester by semester, in Appendix)

The process of assigning students to clinical sites is the responsibility of the Director of Clinical Education and clinical faculty to insure that all students have the opportunity to meet the skill competencies required for ASHA certification as outlined in Chapter 3 of the Student Handbook. Students may not contact sites and arrange their own practicum, however, students will have the opportunity to provide input regarding their clinical placements.

In cases where the clinical site has an application and interview process for students, the clinical faculty will inform students of the application process and timelines.

**Transportation**

All students are responsible for their own transportation to the campus of Pacific University and to clinical sites. If a student experiences difficulty arriving at and departing from clinical sites on a timely basis, the result may be academic warning, probation, or dismissal.
**Professional Dress**
Graduate student clinicians are expected to abide by the dress code established by each clinical facility. In general, attire should be appropriate for the setting as well as the activity in which the student is involved. It is also important that patients, families, visitors and colleagues be able to easily identify students. Graduate students will be provided with a name tag and are expected to wear this name tag during all clinical work.

**Clinical Hours**
Students will earn a minimum 375 clock hours in the areas of prevention, assessment and intervention of clients across the life span through completion of clinical practica throughout the graduate program. Students must be registered for the practicum in order to obtain clock hours for that experience. Students much receive a course grade of Pass in order to complete the practicum course satisfactorily, earn clock hours, and meet clinical skill competencies. If a student does not earn a Pass in the practicum course, they may not be able to progress in the program and a remediation plan will be developed.

**Evaluation of Clinical Practicum**
Clinical practicum will be graded on a Pass/No Pass basis. During each semester that a student is involved in clinical practica, a midterm and final evaluation will be completed by their site clinical supervisor. Evaluations include competencies in the areas of:

- Evaluation skills
- Intervention skills
- Preparedness, interaction, and personal qualities

*The Evaluation of Student in Clinical Practicum is available in the Appendix.*

**Evaluation of Practicum Site by Student**
Students will complete an evaluation of the practicum site at the completion of each practicum. The evaluation will include descriptions of the clinical populations at the site and the types of clinical activities the student was engaged in. In addition, the student will indicate their level of preparedness for the site, strengths and weaknesses of the experience, and have the opportunity to make additional comments regarding their experience at the site. *The Evaluation of Practicum Site by Student is available in the Appendix.*

**Evaluation of Student in Clinical Practicum Scoring Rubric**
Graduate student clinicians will have the opportunity to evaluate and provide speech-language intervention to clients of all ages who present with a wide variety of communication challenges. A student who is just beginning their clinical experience is expected to require more supervision and assistance than one with more experience.

The complete scoring rubrics with guidelines for student and supervisor can be found in the Appendix.

**Assistance for Student Clinicians who Demonstrate the Need for Clinical Remediation**
Students who are experiencing difficulty acquiring and/or demonstrating satisfactory clinical skills will have the opportunity to have a structured and individualized clinical remediation program with intensive input from clinical faculty. The process for the remediation is as follows:
1. The need for clinical remediation will be identified by the scheduled midterm evaluation week. Student clinicians whose clinical performance is below expectations will be identified for remediation as soon as possible. An exception may occur if there is decreased performance after the midterm evaluation. Remediation will be recommended for any student earning below the required scores for their clinical level.

2. A meeting will be scheduled with the student clinician and supervising faculty member and/or Director of Clinical Education to review the midterm evaluation and to discuss the need for a remediation plan. The site supervisor may also be involved in the meeting. The remediation procedure will be reviewed.

The remediation procedure is as follows:

1. The student, supervisory faculty member and/or Director of Clinical Education will set up a remediation planning meeting within one week of the previous meeting. The site supervisor may also attend the meeting. The student may invite another student or faculty member to the meeting.

2. A formal remediation plan will be developed to address each area of concern and will include specific goals and objectives and an indication of the means and methods to be used. A timeline for meeting the goals and objectives will be included in the plan. The plan will be signed and dated by the student, supervisory faculty member and the Director of Clinical Education.

3. The supervisory faculty member or the Director of Clinical Education and the student will meet weekly, or more often if necessary. The remediation meeting may take place at the clinic site or at the University. The purpose of the remediation meeting is to facilitate and monitor progress toward the stated goals and objectives.

4. If a student receives an overall final grade of No Pass for the clinical practicum, the student will not receive clock hours for the practicum and may not progress to the next level of clinical practicum. The remediation plan will include expectations and timelines for progression to the next clinical level.

Policy for Student Grievances in the Clinical Arena

In some cases, a student may disagree with a faculty member or clinical educator to the extent that the situation warrants communication and action to reach an optimal resolution. The following policies and procedures have been established to guide the students and clinical faculty members:

1. Students are encouraged to meet with the specific clinical faculty member who is directly involved in the situation. Both parties will discuss the concern and attempt to come to an agreement of the appropriate way to handle the situation. The student and/or clinical faculty member may invite the Clinic Director to this meeting.

2. If the issues are not able to be resolved at this level, the student should meet with the Director of Clinical Education to share the concerns. The Director of Clinical Education and the student
can then discuss the situation and attempt to come to an agreement of the appropriate way to resolve the situation.

3. In situations that are not resolved satisfactorily following the meeting with the Director of Clinical Education, a student may meet with the Director of the School of Communication Sciences and Disorders.

4. Students have the option to appeal any decisions made by the Director and/or faculty of the School of Communication Sciences and Disorders by following the Appeals Procedures outlined in Chapter 2 of the CSD Student Handbook.