LSU Health NEW ORLEANS

School of Allied Health Professions
Department of Communication Disorders

Department of Communication Disorders

SPEECH-LANGUAGE PATHOLOGY
CLINIC HANDBOOK

Updated Fall 2025

Table of Contents

Speech-Language Pathology Program 4

A. Vision Statement 4

B. Mission Statement 4

C. Strategic Plan 4

D. Speech-Language Pathology Program Goals 4

E. Sources of Information 4

General Policies 5

A. Timeliness/Attendance 5

B. Illness or Bereavement 6

C. Student Professional Leave 6

D. Dress Code 6

E. Required Clinical Activities 7

F. Department Resources 9

G. Confidentiality 11

H. Medical Records and Documentation Policy 11

I. Infection Control 13

J. Medical Emergencies or Accidents 14

Clinical Practicum 15

A. Professional Practice Competencies 15

B. Conduct Policies 15

C. SLP Clinical Practicum Expectations/ Requirements 16

D. Speech-Language and Hearing Screenings 21

E. Clinical Supervision 22

F. Clinical Assignments 25

G. Onsite COMD Clinical Procedures and Patient Care 26

H. Offsite Clinical Practicum 28

I. Recording Clinical Clock Hours in CALIPSO 29

J. CALIPSO Evaluations 30

K. Grading Policy for Students Enrolled in Clinical Practicum 30

L. Clinic Remediation/ Clinical Action Plan 31

M. Complaints, Comments and Concerns 32

APPENDECIES 33
Professional Organizations 33
ASHA Code of Ethics 33
LBESPA Code of Ethics 33
Call Scripts for Clinical Practicum 34
SLP Clinic Clean Up Protocol 35
Patient Satisfaction Survey 36
SLP Clinic Registration 37
SLP Clinical Excuse Request 42
Example Documentation Templates 43
Affiliation Agreement Template 48

Speech-Language Pathology Program

A. Vision Statement

I. The Department of Communication Disorders at LSU Health- New Orleans will provide educational excellence, innovative programming, clinical training, and research experiences for master's level students in speech-language pathology and doctoral students in audiology. The program will nurture future leaders who will advocate for individuals with communication disorders across the life span.

B. Mission Statement

I. The mission of the Department of Communication Disorders is to train master level speech-language pathologists and doctoral level audiologists using scientifically based curricula via a variety of instructional delivery models. Our students will be sensitive to individuals from varied cultural and socioeconomic backgrounds, all age ranges, and to trends and issues that affect the profession. They will be trained to incorporate best practices and use evidence-based practice.

C. Strategic Plan

I. Department of Communication Disorders Strategic Plan

D. Speech-Language Pathology Program Goals

I. The LSUHSC Speech-Language Pathology Program commits to:
   1. Recruit highly qualified applicants for enrollment to the master's level Speech-Language Pathology Program
   2. Maintain program completion rates and Praxis pass rates that are above accreditation thresholds.
   3. Graduate speech-language pathology students who:
      a. Practice in a variety of settings by providing comprehensive services to patients across the lifespan.
      b. Operate at the top of their professional license, maximizing the scope of their clinical expertise, and academic preparation to enhance patient care.
      c. Communicate effectively with patients, colleagues and other health care professionals.
      d. Will independently evaluate and critique new information and technology in the field of speech-language pathology.
      e. Are future leaders of the speech-language pathology profession who are knowledgeable and educated on the national policies regarding communication and swallowing practices.

E. Sources of Information

I. For information regarding the academic program, professional organizations and licensure, refer to the sources given as follows:
   1. LSUHSC Academic Catalog

a. General School Information; facility, fees, calendar
b. Scholastic requirements, dismissals, withdrawals
c. Student Academic Appeals
d. Communication Disorders; curriculum, grades, probation, course description and faculty

2. LSUHSC Department of Communication Disorders Speech-Language Pathology Webpage
3. American Speech-Language-Hearing Association (ASHA) Website
4. Louisiana Board of Examiners Speech-Language Pathology and Audiology (LBESPA) Website
5. Council on Academic Accreditation in Audiology and Speech-Language Pathology https://caa.asha.org/
6. LSUHSC SAHP Clinics website

General Policies

A. Timeliness/Attendance

I. The student is expected to attend all assigned clinical experience days and to always be punctual.

II. Students are not allowed to miss any days of the clinical experience without the approval from the clinical supervisor and the SLP Clinic Director. Submission of the Clinical Excuse Request is required. See Appendices.
   a. For specific information related to absence due to illness or bereavement, see section B.
   b. For any days missed, students may be required to make up those days to meet the requirements of the course.
      1. It may be necessary to extend the length of the clinical assignment to allow the student to make up the missed days.
   c. Failure to attend clinic without contacting the clinical supervisor and SLP Clinic Director prior to an absence may result in lowering the clinic grade or the development of a clinical action plan for repeated occurrences.
   d. Excessive absences or non-compliance with the attendance policy may result in failure of the clinical course and a potential delay in graduation.

III. The students will be prepared and on time for patient meetings, evaluation and treatment sessions, staffing, supervisory meetings, and special conferences.

IV. When a patient is late/absent for a clinical appointment, the student will wait for half the clinic period and check with their supervisor before leaving.

V. Students are expected to follow the inclement weather or disaster policy of the assigned affiliation. Students must never put themselves in peril while traveling to a clinical site. Time missed is to be made up at the discretion of the clinical supervisor and Clinical Director to meet the requirements of the course.

B. Illness or Bereavement

I. In case of student illness or Bereavement, it is the student's responsibility to:
   a. Notify their clinical supervisor and SLP Clinic Director directly via email. The student is responsible for having contact information for each supervisor.
   b. The student must contact the patient to cancel the appointment if instructed to by their clinical supervisor. Patient contact information can be found in the patient's EMR or saved on the LSUHSC secured p:drive.
   c. Re-scheduling of patients will be coordinated with the clinical supervisor.
   d. At their earliest convenience, the student must also complete the Clinical Excuse Request.
   e. If the student requires an absence for more than one day due to sickness or bereavement, the student is to contact their clinical supervisor to request permission to be absent for the extended period, contact the SLP Clinic Director, and submit a Clinical Excuse Request to keep all parties informed. Students will be required to make up those days to meet the requirements of the course.

C. Student Professional Leave

I. There will be instances when students seek leave to participate in professional educational experiences. Students are permitted to seek excused absences from clinic for the purposes of attending professional conferences, professional training, professional humanitarian experiences, and/or participating in professional presentations. Should a student be presented with the opportunity to participate in these types of events listed above, the student must:
   a. Notify their supervisor and SLP Clinic Director directly via email and supply the specific date(s) the student expects to be absent. The student is responsible for having contact information for each supervisor.
   b. The student must also complete the Clinical Excuse Request.

D. Dress Code

I. The concept of appropriate dress in clinic is relatively dependent on clinical site rather than absolute and may be addressed by your clinical supervisor(s). Students are expected to always maintain professional appearance and attire in both onsite and offsite clinic placements.

II. Students are expected to maintain a neat, clean, and professional appearance at all times, reflecting the image of a speech-language pathologist and the standards of LSU Health Sciences Center. Clothing must fit properly, provide full coverage of the trunk region, and be free of holes, tears, or offensive wording (per CM 69).
"Under no circumstances may employees wear halter tops, strapless tops, spaghetti straps, tank tops, cropped tops, t-shirts, clothing with offensive

wording, clothing that shows undergarments (sheer), torn clothing, or clothing with holes. All clothing must be clean, neat, and fit properly" (CM 69).

III. To maintain a professional and appropriate clinical environment, Flip-flops, shorts, sundresses, jeans, sweatpants, revealing or sheer clothing, and visible distracting tattoos or distracting non-traditional piercings are not permitted in clinical settings or areas where clients are present. If uncertain about the appropriateness of an outfit, students should consult their instructor or supervisor and bring a change of clothing. Instructors and supervisors have the authority to address inappropriate attire and may require students to change.

IV. The dress code while participating in clinical activity within the LSUHSC onsite clinic is established by LSUHSC Clinical Faculty. A standardized dress code is established for the onsite clinic to maintain professionalism, safety, and a cohesive appearance.

   i. Minimally appropriate clinical attire consists of the LSUHSC-NO SLP program polo shirt and black uniform pants or embroidered black program scrubs. Specific information regarding purchase of uniforms will be available at student orientation. Shoes should be clean walking/running shoes with neutral colors (i.e. black, gray, white). All clinical attire MUST be CLEAN and PRESSED. Care should be taken so that the body remains covered during normal clinic movement.

   ii. Hairstyles should be neat, well-groomed, and of a conservative color to present a professional appearance. Men must be clean-shaven; or if a beard/mustache is worn, they must be clean and neatly trimmed.

   iii. Fingernails should be kept clean and well groomed. Polish is permitted, but should be unchipped, in colors that blend with the clinic attire. Neon or fluorescent colors, nail decals and nail jewelry are not permitted.

   iv. ***LSUHSC-NO ID***- must be worn at all times during clinical activity.

V. Offsite clinical sites may have their own specific dress code policies based on their organizational standards and requirements. Student clinicians are expected to adhere to the dress code established by each offsite clinic to demonstrate respect for their guidelines and ensure a seamless integration into their clinical environment. By following the dress code of each respective site, students reflect the professionalism and adaptability expected in diverse clinical settings, contributing to a positive representation of our program and institution.

VI. The consequences for not coming into clinical areas in the appropriate attire can be any or all of those listed below:

   a. Being sent home
   b. Having your clinic grade lowered
   c. Forfeiture of certain remote site placement

E. Required Clinical Activities

I. Screening Assignments

a. All students are required to participate in speech-language and hearing screenings as assigned to meet minimum clock hour requirements for graduation.

II. Clinical Assignments
   a. All students enrolled in clinical courses SPTHAUD 6702, 6704, 6706, 6708, 6710 must participate in clinical practicum.
   b. Clinical sites will be assigned prior to the beginning of the semester unless extenuating circumstances require a delayed/changed assignment date.

III. Staffing and preparatory work
   a. All students are required to attend patient staffing as part of quality assurance and student instruction.
   b. Schedules will be given at the beginning of the semester and/or students will be notified of meetings as necessary. Attendance is mandatory unless your off-site placement conflicts with the staffing schedule.

IV. Instructional/Supervisory Meetings
   a. All students enrolled in clinical practicum are required to attend meetings as requested by their clinical supervisors and/or SLP Clinic Director.
   b. Students will meet with clinical supervisors for clinical instruction throughout the semester. Meeting times are arranged between the student and supervisor.
   c. Students will meet each semester with the SLP Clinic Director for clinical advising.
      i. These meetings are essential to ensure clear and open communication between the student and the SLP Clinic Director, fostering a collaborative approach to meeting both program requirements and individual student goals.
      ii. Through these discussions, the SLP Clinic Director will ensure that students are fulfilling the clinical requirements necessary for graduation, while also addressing any concerns or aspirations expressed by the student. Similarly, these meetings provide an opportunity to confirm that the SLP Clinic Director is meeting student expectations for guidance and support. This ongoing dialogue is designed to promote mutual understanding, support professional growth, and maintain alignment with the academic and clinical goals of the program.
      iii. Students will be provided with clinical registration forms, which can be found in the Appendices, to be completed before these meetings. This document is to be submitted to the Clinical Director before the designated meeting time for review.
      iv. Examples of topics discussed during semester meetings are:
         1. Review of the students' current clinical practicum experiences
         2. Explore areas of interest for future placements
         3. Submit any requests for specific clinical practicum sites

V. Clinic Clean-up:
    a. All students are scheduled for clinic clean-up and provided a list of duties. See Appendices.
    b. Students will be notified of their duties prior to the end of the semester, and it is up to students to complete responsibilities as part of their clinic practicum grade.
    c. Should a student fail to complete their assigned clinic clean-up day, the student may be required to complete an additional assignment.

VI. Clinical Compliance and Training
    a. All students are required to maintain current and compliant health records. Students should update health records within the compliance section of their CALIPSO profile.
    b. Students must complete regular compliance training including HIPAA and confidentiality training offered through LSUHSC's compliance platform. Students are notified of these requirements via LSUHSC email by the university's Compliance Officer, Frank Wasser.
    c. Failure to complete compliance training and upload records into the CALIPSO user portal within 30 days may result in lowering a clinical practicum letter grade and removal from clinical practicum until complete.

VII. Special Events
    a. Students will be informed in advance whether their participation in special events is optional or mandatory.
    b. Mandatory special events may include guest speakers, faculty presentations, departmental meetings, professional education courses, professional conferences or other workshops.
    c. Optional special events may include professional meetings at the local, state or national level.
    d. Financial assistance is often available through departmental funds or through NSSLHA for interested students.
        i. The Louisiana Speech-Language-Hearing Association meets in May/June.
        ii. The American Speech-Language-Hearing Association meets in November. Should a student wish to participate, they must submit a Clinical Excuse Request .
    e. Students must always maintain proper dress code for special events.

F. Department Resources

I. Phone
    a. The Department has several lines for outside calls and local lines for interdepartmental calls.
        i. To dial outside of the university, one must dial 9 then the phone number
        ii. For interdepartmental calls, one must dial 3 then the four digit extension of the individual one is trying to reach.

iii. If students use their personal phone, they must use *67 followed by the full 10 digit phone number to block the caller ID feature.

b. A phone is available in the front office, room 9A8. Messages taken by the office personnel will be forwarded to the clinic supervisor and then to the student.

II. Copy & Fax Machine

a. The photocopier in the front office and the large photocopier in the storage room are both off limits to students. **Students are NOT allowed to make copies without authorization**.

III. Materials Room/Equipment

a. It is the shared responsibility of all students and faculty to ensure that clinic materials/equipment is properly maintained, clean, and functioning effectively for clinical use. This equipment is essential for both clinical instruction and patient care, and its upkeep directly impacts the quality of education and services provided.

b. Students and faculty are expected to clean and handle equipment according to established protocols and report any malfunctions, damage, or maintenance needs promptly to the SLP Clinic Director via email. By collectively maintaining the integrity and functionality of clinic materials/equipment, the highest standards of professionalism, safety, and patient care can be offered to the patients served.

c. Checkout Procedures for Speech-Language Materials

i. The door to the Therapy/Diagnostic Materials Room should always be closed.

ii. Sign in/out all materials from the materials room using the in/out sheets or the computer scanning system.

1. Materials must be returned each day because of heavy use.
2. Materials are not to be left in therapy room cabinets overnight unless authorized by the clinical supervisor.

iii. Diagnostic Tests:

1. Diagnostic materials are inside cabinets in the materials room.
2. *Sign out the test* using the computer scanning system. Complete tests include all examiner and stimulus manuals, test objects, and forms. All items must be checked out.
3. Scan the test back in when returned to the materials room. If a part of the test is still needed for scoring, please sign that portion out and check the remainder back in.

iv. *Overnight checkout* starts at *5:00 p.m.* and materials must be turned back in by *8:00 a.m.* On Fridays, overnight check-out begins at 2:00 p.m. and the test must be turned back in by 8:00 a.m. on Monday morning.

v. Test forms are in the filing cabinets in the materials room. Use only one test form for each test administration. Please inform the Clinical Director via email when there are 5 or less forms in the file.

vi. Exceptions: If a student is unable to check out or return diagnostic materials as specified above due to an off-site placement, they may request special permission from the SLP Clinic Director via email.

G. Confidentiality

I. The LSUHSC Speech-Language and Hearing Clinic abides by the Code of Ethics of the American Speech-Language-Hearing Association (ASHA) and HIPPA regulations.

II. All information shared by a patient is considered confidential.
   a. The Authorization for Release of Medical Record Information form must be signed and completed specifying parties who are authorized to receive client information. Students should check at the time of the evaluation to ensure its accurate completion.
      i. Information obtained from an evaluation and/or treatment session cannot be released to others without written authorization of the patient/parents/legal guardian.
   b. Consent for Media Use
      i. In addition, the front office administrative staff will make sure that the Consent to Photography, Videotape, Audiotape form is signed prior to taking pictures or recordings that may be used for teaching purposes.
      ii. If patients/parents/legal guardian do not agree to its use for teaching purposes, verify clearance to record for purposes of collecting data only.
   c. Patient discussions
      i. Patient confidentiality must be observed at all times.
      ii. Patients are not to be discussed outside the diagnostic or management room, particularly not in public places or social situations.
      iii. Even in discussions with the supervisor, it is best to be in a private room and not in the hallway or a public area.
   d. Written communication/documentation
      i. Students should only use the LSUHSC secured p:drive for storage of working drafts of reports and notes that contain patient identifying information.
   e. All students must complete HIPAA and LSUHSC Compliance training before participating in observation, evaluation, or treatment in the clinic.

H. Medical Records and Documentation Policy

I. Electronic Medical Records (EMR)
   a. All patient records are maintained in LSUHSC's secure EMR system (EPIC)
   b. Students will be enrolled in the necessary EPIC trainings sponsored by the LSU Health Network's EPIC Training team by the SLP Clinic Director prior to beginning clinic. Students must complete the training before receiving a student user profile.
      a. Once training is complete, students will be given credentials to their

student clinician profile.

1. This profile gives students the ability to review the clinic schedule, enter diagnosis codes, and write chart notes that are reviewed and signed by the clinical supervisor.
2. Students may obtain remote access to the EMR via Citrix by eliciting the support of LSUHSC IT department.

c. Students must use only LSUHSC-approved platforms (e.g., EPIC or LSUHSC FileS) for creating, storing, and transmitting patient documentation.
d. Patient reports may not be emailed, stored on flash drives, or saved to personal devices.
e. Access to EPIC is restricted to authorized users, and each student must use their unique login credentials. **Sharing passwords and user information is strictly prohibited.**
f. Every chart note, telephone call, or encounter must be signed by the student and by the student's supervisor. Signatures must include your name and degree. (Example: Brad Jones, B.A./Sarah Sanderson, CCC-SLP.)
g. Documentation should be submitted to the clinical supervisor for editing prior to being co-signed by the student's clinical supervisor. Students are responsible for ensuring their documentation is timely, accurate, and complete. Incomplete or late documentation may result in consequences affecting clinical grades and/or the continuation in clinical practicum.
h. The clinical supervisor will review chart notes, check diagnosis codes, drop charges in the EMR billing portal and sign the encounter.
i. Failure to follow EMR security protocols may result in academic consequences, including grade reduction or referral for disciplinary action consistent with the SAHP Policies on Conduct,

II. Redaction
    a. Patient identifiers must be removed from any case material used for teaching, presentations, or research
    b. Identifiers include:
        a. Patient name
        b. Date of birth
        c. Residential or billing address
        d. Contact information
        e. Medical record number
        f. And other personally identifiable information
    c. Students should apply de-identification procedures consistent with HIPAA Compliance training
    d. Only LSUHSC-approved digital tools should be used for redaction or de-identification
    e. For class or research use, patient information must be fully de-identified and unrecoverable.

III. Access and Security of Patient Records

a. All patient records are securely maintained within EPIC. Physical records, when present (e.g., legacy files, signed consent forms), are stored in locked cabinets in restricted-access areas.
b. Unauthorized removal or reproduction of patient records is strictly prohibited.
c. Student access to EPIC is logged and monitored.
d. All clinical encounters, phone calls, and communications with patients documented in the EPIC, must be signed by the student and co-signed by the supervisor.

IV. Quality Assurance and Record Audits
a. The LSUHSC and the Department of Communication Disorders conduct regular **chart audits** to ensure compliance with documentation standards, HIPAA regulations, and quality of patient care.
b. The Department Head, Clinic Manager and SLP Clinic Director will periodically meet with the LSUHSC School of Allied Health Professions Clinic Operation Manager and LSUHSC Audit personnel to ensure all policies and procedures are being followed.

V. Offsite Clinical Practicum Documentation
a. Roles and responsibilities for completion of documentation at clinical practicum offsites are delegated by the clinical supervisor.
b. Clinical practicum offsites may use a variety of different Electronic Health Records (EHR) and EMR systems and it is left to the clinical supervisor's discretion if a student clinician is granted access to such systems.

I. Infection Control

I. LSUHSC is committed to the delivery of quality care to all patients, including those with infectious diseases. The Speech-Language and Hearing Clinic follows **universal** precautions to minimize the risk of exposure to infection by clinicians, students, patients, staff and faculty.

II. General Principles
a. Follow ASHA's Code of Ethics, HIPAA, and CDC/AAA guidelines for infection control.
b. Hand hygiene is the single most effective way to prevent infection. Use soap and water when hands are visibly soiled, otherwise use alcohol-based hand sanitizer available throughout the clinic.
c. Wear gloves when contact with bodily fluids is possible.
d. Dispose of potentially infectious items (e.g. tongue blades, tissues, microphone covers, etc.) immediately in lined waste containers.

III. Procedures
a. Daily Procedures:
i. Wash or sanitize hands **before and after every patient encounter**.
ii. Student clinicians must disinfect the tables in the treatment rooms with germicidal wipes after each treatment or diagnostic session.
iii. Clean any toys or materials that have been mouthed, coughed, or drooled on with disinfectant wipes before returning to circulation.
iv. Leave all clinic spaces orderly and ready for the next patient.
v. Report any missing or depleted supplies to faculty promptly.

IV. Annual Requirements
    a. Students must remain up to date with required vaccines and immunizations, as recommended by the LSUHSC Student Health office and their personal primary care physician.
    b. These updates should be reflected in students' CALIPSO compliance profiles.
V. Special Procedures
    a. Family Care – Diaper changing must occur only on the designated changing table in the restroom by family/caregivers.
    b. Special Events or Outbreaks – additional precautions (e.g. masks, enhanced sanitizing, etc.) may be implemented as directed by the SLP Clinic Director, LSUHSC, or the LSU Healthcare Network.
VI. Resources
    a. LSUHSC SAHP Clinics website

J. Medical Emergencies or Accidents

I. Medical Emergencies/Accidents
    a. Call 911 immediately if there is a life-threatening emergency
    b. Notify Campus Police at 504-568-8999 (*38999)
    c. Inform a faculty member after calling 911 and Campus Police. A student, staff, or faculty member should remain with the individual until emergency personnel arrive.
    d. If a student witnesses an accident, they may be required to complete an accident report.
    7. For injuries sustained on campus, refer to LSUHSC SAHP Clinics website
II. Fire or Smoke Emergencies
    a. If you discover fire or smoke:
        i. Activate the nearest fire alarm pull station.
        ii. Alert others in the area.
        iii. Call Campus Police (504-568-8999 or *38999) and provide:
            1. Location (building/room number)
            2. Your name and phone number
        iv. Close doors if safe to do so to contain the fire.
        v. Evacuate using stairwells only — elevators must not be used.
    b. Evacuation Procedures – When the fire alarm sounds:
        i. Evacuate the building promptly and calmly via stairwells.
        ii. Assist patients and visitors with disabilities whenever possible.
        iii. Non-ambulatory patients or visitors should be escorted to a fire stairwell; their location must be reported to Campus Police.
        iv. Faculty are responsible for ensuring clinic areas are evacuated and reporting any issues (e.g., refusal to evacuate) to Campus Police.

v. All faculty, staff, and students must report to the designated evacuation area: the exterior of the Library, Administration, & Resource Building at 433 Bolivar Street.
vi. **Do not return to the building until the "All Clear" is given by Campus Police.**

Clinical Practicum

A. Professional Practice Competencies

I. When participating in clinical practicum, students are expected to behave in a professional manner at all times, demonstrating appropriate behavior in all interactions with patients/clients, families, faculty, staff, and peers. Graduate students are expected to do so without instruction.
II. Professional behaviors include, but are not limited to, punctuality, professional dress, preparedness, taking responsibility for one's actions, completing all required tasks in a timely manner, honesty, integrity, respect for others, and maintaining confidentiality. Each student is expected to contribute to a positive learning environment and to respect the professional aspirations of peers and colleagues.
    a. Whenever in the presence of a patient, students must respect the dignity, individuality, and privacy of that patient. All patient information is considered confidential and may not be discussed outside of academic or clinical settings.
    b. Unprofessional conduct (e.g., failure to prepare, lack of communication, repeated tardiness, or disregard for supervisor instructions) may result in lowering clinical practicum grades. Persistent problems may lead to dismissal from the clinic site and/or program.
    c. A violation of the ASHA Code of Ethics may result in immediate dismissal from the program.
III. Competency Areas - In accordance with CAA Standard 3.1.1B, students in this program must demonstrate the following professional practice competencies:
    a. Accountability – accept responsibility for one's actions and decisions, ensure competence in assigned tasks, and place the needs of patients first.
    b. Effective Communication Skills – Demonstrate clear, respectful, and professional oral and written communication across clinical, academic, interprofessional, and interprofessional contexts.
    c. Evidence-Based Practice – Integrate research evidence, clinical expertise, and patient preferences into the process of making clinical decisions.
    d. Professional Duty – Act with integrity, ethical behavior, and commitment to professional standards in all academic and clinical activities.

B. Conduct Policies

I. LSUHSC Tobacco Use Policy CM-58 – The use of tobacco in any form is prohibited in all LSUHSC facilities and clinical sites.

II. LSUHSC Campus Security Policy – Firearms or other weapons are prohibited on LSUHSC property, clinical sites, and university-sponsored events, in accordance with Louisiana law and LSU Policy.
III. LSUHSC Information Technology (IT) Policy – Cell phones and electronic devices must be turned off or placed in silent mode during classes, labs and patient care. Emergency exceptions must be discussed with the clinical supervisor in advance.
IV. Civility and Inclusivity - Professional education requires a culture of mutual respect, inclusiveness, and cooperation. All members of the clinical and academic community — students, clinical supervisors, faculty, staff, and patients — are entitled to be treated with dignity and respect.
    a. Students - are expected to demonstrate civility in all interactions and to refrain from behavior that is disruptive, disrespectful, or unprofessional toward clinical supervisors, faculty, patients, or peers.
        1. If a student engages in conduct that is disruptive, unprofessional, or violates LSUHSC or site policies, the clinical supervisor has the authority to order the student's temporary removal from the clinic. Such incidents will be reviewed by the SLP Clinic Director, SLP Program Director and/or Department Chair to determine next steps.
    b. Clinical Supervisors and faculty are expected to foster a supportive learning environment and to avoid behavior that could be perceived as intimidating, demeaning, or discriminatory.
        1. The clinical supervisor maintains primary responsibility for supervision, clinical instruction, and ensuring professional and academic integrity in the clinic.
        2. Clinical supervisors are required to complete at least 2 hours of continuing education in the area of supervision to be eligible to supervise graduate student clinicians.

C. SLP Clinical Practicum Expectations/ Requirements

I. Professional Expectations
    a. Students are expected to be at your clinic site, available, and professionally dressed during clinic hours.
    b. Student clinicians should be prompt and prepared for all patient appointments. This includes but is not limited to reviewing patient referrals, chart notes, or prepping the clinic equipment/materials for the anticipated appointment.
    c. Students should be in the clinic at least 15 minutes ahead of their assigned clinic session to check all equipment and supplies, and to set up the clinic environment.
    d. Tardiness is unacceptable and will be reported to the SLP Clinic Director.
    e. If a patient cancels, the clinical supervisor may use clinic time to practice clinical skills, review documentation or discuss specific patient cases.

f. Students should use official communication channels to communicate with their clinical supervisors. It is up to the discretion of the clinical supervisor whether or not they would like to provide their personal phone numbers to their students. Students should not use texting as a means of communication with their supervisor, unless this communication method has been approved by the clinical supervisor. During clinical practicum hours, students should keep their cell phones muted and not engage in active cell phone activity.

II. Clock hour requirements
   a. The student must complete at least 400 clock hours of supervised clinical experience across the lifespan before graduating.
      1. 25 hours of observation
      2. 375 hours of clinical experience
         a. A maximum of 50 clinical clock hours may be transferred from an undergraduate program, providing the transferring program verifies that the observation hours meet ASHA Certification Standards.
            1. All undergraduate clock hours must be submitted to the Clinical Director for approval and input into Calipso for clock hour tracking.
         b. At least 325 clock hours must be at the graduate level.
         c. No more than 75 hours of simulated clock hours may be counted towards the required 375 hours.
   b. LSUHSC Clock hour minimums: Students must complete a minimum number of hours across the lifespan and across the major disorder types. Students track their clock hours each semester and submit the Worksheet for Minimum Clock Hour Requirements during clinic registration each semester. See Worksheet for Minimum Clock Hour Requirements in Clinic Registration section of the Appendices.

II. Observation Requirements
   a. The student must complete at least 25 clock hours of supervised observation before enrolling in clinical practicum.
   b. A maximum of 25 observation hours may be transferred from another program, providing the transferring program verifies that the observation hours meet ASHA Certification Standards.
   c. The required 25 observation hours can be completed through:
      1. Guided observations infused in graduate coursework.
      2. Asynchronous clinical observations via pre-recorded videos (i.e. Simucase, Master Clinician Network, Mediasite)
      3. Synchronous clinical observations within the LSUHSC Speech-Language and Hearing Clinic. Students may observe in the treatment room or in the computer observation room.
      4. Official undergraduate observation hours submitted to the Clinical Director for approval.
   d. All observation hours log sheets must be submitted to the Clinical Director for approval and input into Calipso for clock hour tracking.

III. Observation Expectations
    a. Students are expected to demonstrate professionalism, discretion, and preparedness throughout all observation experiences completed within the LSUHSC Speech-Language and Hearing Clinic.
        1. Preparation
            a. Arrive at least 15 minutes early unless instructed otherwise by the clinical supervisor.
            b. Review the client's medical record in advance of the session.
            c. Follow the clinic dress code and wear the LSUHSC ID badge at all times.
        2. Professional Conduct if in treatment room
            a. Introduce yourself appropriately to the client and family.
            b. Observe the entire clinical session attentively.
            c. Refrain from making comments, asking questions, or displaying reactions (verbal or nonverbal) during the session.
            d. Do not provide advice or answer questions from clients or families; politely explain that you are an observer.
            e. Hold questions and discussion until after the session, once the client has left.
        3. Confidentiality
            a. All patient information is confidential and may only be discussed with the supervisor or assigned clinician.
            b. Do not share patient details outside of the clinical/academic setting.
        4. Ethical and Responsible Behavior
            a. Follow ASHA's Code of Ethics and departmental professional standards.
            b. Treat patients, families, and colleagues with respect at all times.
        5. Skill Development
            a. Observation time may also be used to practice recording therapeutic data.
            b. No patient identifiers (PHI) should be included on observation notes.
IV. Evaluation Expectations
    a. Diagnostic appointments at LSUHSC Speech-Language and Hearing Clinic are scheduled by the clinical supervisors. Supervisors should keep the Clinical Director informed of any special student needs and of any diagnostic schedule changes. Once an evaluation has been scheduled, the student should then review the case history and any other incoming information in order to make a diagnostic plan.
    b. Clinic preparation
        1. Prior to the scheduled evaluation, the student should meet with their supervisor to review the case, to decide on appropriate interview questions, evaluation procedures, and if further information is needed from the client.

2. Scheduled evaluations are not to be changed at the discretion of the student clinician. Any necessary changes in the appointment schedule can only be made by the Clinic Supervisor.
3. Allotted time for evaluations varies from 1 to 3 hours.

c. Documentation
    1. The student is expected to complete a diagnostic report following the evaluation. Drafted versions of the report are required to be saved to LSUHSC's secured p:drive if not completed directly in the patient's EMR. See example template for an initial evaluation in the Appendices.
    2. Diagnostic protocols should be completed during the diagnostic appointment, reviewed with the clinical supervisor, and then placed in the front office for scanning into the patient's EMR.

d. Evaluation conference
    1. Once an evaluation is completed or a treatment plan is established, the student may conduct a conference with the patient/family to review the proposed plan of care for the semester.

V. Treatment Expectations

a. Therapy appointments at LSUHSC Speech-Language and Hearing Clinic are scheduled by the clinical supervisors. Supervisors should keep the Clinical Director informed of any special student needs and of any therapy schedule changes that would decrease the number of clock hours expected to be accrued. Once the therapy schedule has been established, the student should complete adequate clinical preparation in order to create an individualized therapy plan for each patient.

b. Clinic preparation
    1. Students are required to read the client's chart, making note of the information needed to initiate treatment, including recent evaluation, treatment plans, progress summaries, SOAP notes, goals, objectives and recommendations.
    2. Students are required to attend clinic staffing at the beginning of each semester to discuss patient assignments.
    3. Students must schedule an appointment with their clinical supervisor(s) to discuss student expectations, confirm their therapy schedule and discuss patient specific instruction.

c. Documentation
    1. Patient documentation is completed in the patient's electronic medical record. All student documentation must be co-signed by the faculty clinical supervisor.
        a. Students should include the statement: "*Services were provided by the student clinician under the supervision of a licensed and certified Speech-Language Pathologist" and signs (Student's name and credentials)*.
        b. Notes will be co-signed by the clinical supervisor with the statement: *Supervisor Faculty Co-Sign: (Supervisor name and credentials). "I have reviewed and agree with the graduate clinician's findings, including all diagnostic*

interpretations and treatment plans as written."

2. Encounter notes must be completed after each patient's session. The encounter note must at least include:
    a. Background information, medical information, initial diagnosis
    b. Objectives of treatment sessions and progress towards objectives
    c. Clinical interpretation/impressions, an update on goal status, any changes in diagnosis.
    d. Recommendations for continued treatment, change in objectives, education
    e. See example template for an encounter note in the Appendices.
3. Lesson plans/session outlines may be used as a teaching tool by some supervisors.
    a. Specific deadlines for submission of lesson plans will be communicated to the student by the individual supervisor.
    b. Following each session, results should be formulated and submitted to the supervisor, along with next week's plan.
    c. A lesson plan is the clinician's plan for what specific client behaviors are being targeted for the week and what procedures and activities are planned to accomplish this. It also serves as written communication between the student clinician and his/her supervisor about the planned session. Specific templates are provided by clinical supervisors.
4. A Plan of Care/Hierarchy of Goals and Objectives is a breakdown of semester goals and objectives into small steps, starting with the current level of the client and advancing to the final goal. Clinical Probes may also be noted as part of the hierarchy. The hierarchy will help set reasonable semester goals and keep therapy moving toward the final goal. This will assist clinicians in planning their weekly sessions and should be discussed with their supervisor. See example template for a Plan of Care in the Appendices.
5. Data & Clinical Probes
    a. All students will be required to develop their own data taking or recording procedures, upon which to base their program decisions.
    b. Clinical probes are conducted to determine if the target response has generalized.
6. A Progress Summary/Updated Plan of Care is completed at the end of the semester to summarize the patient's progress toward their target goals and objectives, procedures used in the treatment process, and recommendations for the next semester. See example template of an Updated Plan of Care in the Appendices.
7. A Discharge Summary is completed when a patient is being discharged from therapy. This report will summarize the patient's

treatment course. See example template for a discharge summary in the Appendices.

d. Treatment conference
    1. At the end of the semester/treatment plan, students will conduct a conference with the patient/family to share progress and recommendations.
e. End of semester duties must be completed before the end of the semester:
    1. Students must complete all make up therapy sessions and required clinic documentation.
    2. Students must return all borrowed clinic materials to the materials room or to their clinical supervisor.
    3. Students must complete their exit conference with their clinical supervisor
    4. Failure to complete required clinical duties will result in reduction of the clinical practicum grade. Any exception must be approved by the clinic supervisor in advance.
    5. A grade of **I** (Incomplete) may be used if academic/clinic responsibilities were incomplete for an unavoidable reason that is acceptable to the clinical supervisor. A student may not "choose" a grade of **I.**

D. Speech-Language and Hearing Screenings

I. Proficiency Requirements
    a. Prior to any screening assignment, students must attend the Speech and Hearing Screening lecture and lab.
    b. Students must pass two proficiency examinations:
        1. One for speech screening
        2. One for hearing screening

II. Competency Requirements
    a. After completing sufficient screening experience, students must demonstrate competence to the Speech and Hearing Screening Coordinators.
    b. Students must pass two competency evaluations:
        1. One for speech screening
        2. One for hearing screening
    c. Passing competencies indicates readiness for independent screening but does not preclude assignment to additional screenings throughout the program.

III. Equipment Responsibility
    a. The maintenance and safe use of clinic equipment is the shared responsibility of students and faculty.
    b. Equipment must be cleaned, handled, and stored according to established protocols.
    c. Any malfunctions, damage, or maintenance needs must be reported immediately by emailing the Audiology Clinic Director, Dr. Megan Guidry.

d. Proper equipment care ensures quality patient care, safety, and effective clinical instruction.

IV. Preparedness and Professionalism
   a. All screenings are assigned by the Speech-Language Coordinator. Assignments are based on clock hour needs and student availability.
   b. Site Address, instructions and arrival time will be sent to students by one of the Speech-Language or Hearing Coordinators before the screening date. Students must locate the screening site in advance and arrive on time.
   c. Students who are late, unprepared, or not in professional attire will not receive clinical clock hours for that screening and may be sent home.
   d. Attendance/Attire at Screenings: Same Requirements as On-site clinic.
   e. Students must wear their LSUHSC ID badge at all times during screening assignments
   f. Failure to be prepared and professional may negatively affect the student's clinical practicum grade.

V. Tracking Clinical Clock Hours
   a. Screening hours must be entered into **CALIPSO** for clinical supervisor's approval.
   b. Supervising faculty will confirm the correct number of hours to record.
   c. Submissions must include, in the comments section:
      1. Screening site
      2. Type(s) of screenings performed (e.g., tympanometry, pure-tone audiometry, PLS, CELF).
   d. Failure to record and submit all clock hours as required will result in the student receiving an "I" (Incomplete) in the Clinical Practicum course and may result in a loss of those clinic hours.

E. Clinical Supervision

I. AHSA Supervision Standards
   a. Clinical supervision must be sufficient to ensure the welfare of both the patient and the student, in accordance with the ASHA Code of Ethics.
   b. The amount of direct supervision is determined by the student's knowledge, skills, and experience.
      1. Must not be less than 25% of the student's total contact with each patient
      2. Must take place regularly throughout the practicum.
      3. The clinical supervisor must be on site and readily available to assist the student with in-person care.
      4. Clinical supervision can take place in person or by live circuit, real time recording.

II. Levels of Supervision

Anderson (1988) discusses three types of supervision. The three types, by their nature, require students to progressively function at an increasingly higher level.

   a. Direct Active Style of Supervision
      1. Stated very simplistically, this style involves an exchange in which the supervisor tells the student what to do and the student does it;

the supervisor then provides feedback on student performance, gives another directive and the cycle repeats.
2. This style is appropriate for the beginning clinician except if the clinician is capable of performing at a higher level.
3. It also is appropriate when time constraints and/or quality of patient care demands this type of interaction. This style is very time-efficient; however, it does not promote independent thought on the part of the clinician and, therefore, is not the best for higher level students.

b. Collaborative Style of Supervision
    1. This style places more responsibility on the student clinician for independent thought.
    2. The student clinician is expected to come to supervisor/clinician meetings having already done problem-solving and ready to make suggestions concerning patient care.
    3. The clinical supervisor may need to ask questions that lead the clinician to think in the right direction; however, considerable opportunity is provided for the student to state their thoughts before the clinical supervisor discusses relevant factors in the situation.
c. Consultative Style of Supervision
    1. In this style, the student clinician and clinical supervisor relate more as colleagues.
    2. The student clinician functions independently and consults with the supervisor when needed.
        i. The student clinician is responsible for problem-solving and decision-making “as if” they were a licensed and certified professional. The idea that all professionals consult with others in order to arrive at good solutions is fostered by this type of supervision.
        ii. Even though the student functions as if licensed/certified, the supervisor does not function with this mindset.
        iii. The minimum of 25% supervision(or more if needed) is still in effect; however, the supervisor, as much as is reasonable, refrains from intervening in order to see if the clinician will recognize those situations in which he/she needs to consult.

III. Supervisor Qualifications
    a. Must be a licensed speech-language pathologist who holds a current ASHA Certificate of Clinical Competence
    b. Must have at least 9 months of full-time experience working as a SLP after being awarded the CCC-SLP

c. Completed 2 hours of professional development in the area of supervision at least once in your career after being awarded the CCC-SLP.
d. The LSUHSC Clinical Coordinator for Speech-Language Pathology is responsible for ensuring that clinical supervisors are current with their ASHA certification.

IV. Supervisor Expectations
a. Discuss site specific goals and expectations for the student's experience at the start of the practicum.
b. Include modeling, guidance, feedback, and evaluative information regarding the student's performance throughout the semester
c. Support the student as they transition through the different levels of supervision.
d. Provide both constructive and positive feedback regarding student performance to assist in skill development
e. Register for a supervisor account in Calipso once instructed by the SLP Clinic Director. Review and sign off on all clinical clock hours submitted by the student regularly (at least by the midterm conference and at the end of the semester). Only a qualified clinical supervisor who observes the student in a clinical session is permitted to sign to give credit to the student for the clinical practicum hours.
f. Complete a midterm and end of the semester evaluation on the student's conduct/performance. Schedule a conference time to discuss the student's performance and set goals.
g. Report any questions or concerns regarding the student's performance to the SLP Clinic Director.

V. Student Expectations
a. Must have consistent attendance and timeliness related to the start of the day, meetings, and other time-dependent activities.
b. Maintain professional behavior and appearance that is appropriate to the offsite setting
c. Reflect a positive attitude and working relationship with the clinical supervisor, patients, clinical staff.
d. Demonstrate ability to bridge evidence-based information learned in the classroom into the clinical environment.
e. Submit clock hours earned through Calipso regularly to clinical supervisor for approval.
f. Complete midterm and final self evaluations on Calipso. Provide clinical supervisor with copies prior to midterm and final conferences.
g. Complete supervisor evaluations on Calipso at the end of the semester. These reports remain confidential and are available for review by the SLP Clinic Director. This feedback provides valuable input to the program and contributes to continuous quality improvement.
h. Students should not be reimbursed directly for the provision of clinical practicum services. However, students can receive traineeships, scholarships, and/or stipends.

VI. SLP Clinic Director Expectations

a. Complete clinical assignments before the beginning of each semester.
b. Begin the process of establishing affiliation agreements with new clinical offsites by establishing contact between LSUHSC contracts team and point of contact for the site.
c. Completion of paperwork required for student onboarding at various sites.
d. Verifying student paperwork required for clinical experience offsite per the LSUHSC Affiliation Agreement. See Appendices for template.
e. Serve as a liaison between the student and the clinical supervisor at the site in regard to specific problems that may arise during the semester.
f. Clinical supervisors can contact SLP Clinic Director by phone or email to set up an appointment to discuss any concerns or questions regarding the supervisory relationship or student performance.
g. Students can meet with SLP Clinic Director during office hours or email to set up an appointment to discuss any questions/concerns.
h. Guide the development of clinical action plans if needed due to inadequate student performance during clinical practicum.
i. Conduct site visits to support clinical supervisors and students if needed.
j. Verify and sign student clock hours upon completion of the graduate program for student's to submit for licensure requirements.

F. Clinical Assignments

I. General Policies

a. Students must complete Clinical Registration Forms including a personal data profile, minimum clock hour summary, and a checklist for documentation required for clinical placement. See Appendices.
b. Students will complete clinical advising with the Clinical Director prior to clinical placement to discuss academic course work completed, clinical experience, the student's clinical practicum needs, requirements of the clinical practicum sites, student availability and student preference.
c. Off-site supervisors may require review of the clinical resume/cover letter and/or interview students interested in pursuing a clinical experience within a particular site. Students will receive notification via email of interview details.
d. Clinical assignments are made before the beginning of the semester and are made based on academic course work completed, clinical experience, the student's clinical practicum needs, requirements of the clinical practicum sites, student availability and student preference
e. The student will receive notification of the clinic assignment through CALIPSO which designates the primary supervisor/additional supervisor(s) and their contact information, the site and type of clinical activity to which the student has been assigned, and the day and/or time of clinic. It is the student's responsibility to contact the clinical supervisor prior to the first day of the semester.
f. Students will receive a Clinical Agenda at the beginning of each semester that outlines important clinical dates/deadlines. Clinics will begin and end in accordance with the academic calendar. Students should be available for

departmental activities from the first day of class through the last day of exam week.

g. It is the student's responsibility to monitor clock hours throughout the semester. Any problems with scheduling or with patient attendance should be discussed first with the clinic supervisor. Changes in the assigned number and type of clock hours to be earned weekly may not be made without the approval of both the clinic supervisor involved and the SLP Clinic Director.
h. Concerns regarding clinical matters should be discussed with clinical supervisor first, and the Clinical Director.
i. Transportation to the remote site is the responsibility of the student.

II. Modification of Clinical Practicum Assignment
    a. Students may request a reduction or increase in the number of clock hours per week through a written request to the clinical supervisor, SLP Clinic Director, and SLP Program Director. A follow-up meeting will be scheduled to discuss specific implications of the student's change in clinic practicum responsibilities. The student will receive written notification of approval or denial within 5 working days from the meeting date.
    b. Clinical supervisors are responsible for reporting unsatisfactory performance at any time to the SLP Clinic Director through a formal report in writing and may be directed to complete an evaluation through CALIPSO if not done so already.
    c. The SLP Clinic Director and Clinical Supervisors reserve the right to dismiss or remove a student from clinical practicum if circumstances warrant such action. If a student is removed from clinical practicum due to unsatisfactory performance related to professionalism, clinical competence, safety, or any behavior that does not meet the standards of the LSUHSC SLP program, they will be required to complete a formal clinical action plan.

G. Onsite COMD Clinical Procedures and Patient Care

I. Patient Appointments
    a. Appointments are scheduled by the front office staff according to the time blocks provided by the clinical faculty.
    b. Students are not to request specific cases directly or request any changes in scheduling of patients unless specified by their clinical supervisor.
    c. The student clinician is responsible for reviewing chart history, referral orders and other pertinent histories in the clinic's EMR. The student clinician should use these tools to prepare for the clinic session.
    d. Students are expected to be present on time and dressed in clinic attire/clinic uniform for all clinical activities.

II. Pre-Appointment Planning
    a. Prior to the scheduled clinic session, the student should meet with his/her supervisor to review the case, to decide on appropriate interview questions, evaluation procedures, and if further information is needed from the client.
    b. Appointment Confirmation/Reminders

1. Students must confirm patient appointments at least the day before the evaluation using the clinic phone in the front office or their personal phone with *67 followed by the full 10-digit phone number to block the caller ID.
2. Students should use the ***Confirmation Call Script*** located in the Appendices of this handbook. The student should refrain from providing personal identification such as full name and personal phone number. The students should identify themselves as representatives of the LSUHSC Speech-Language and Hearing Clinic.
3. If a patient needs to cancel and reschedule, the student clinician must notify their clinical supervisor and the front office administrative staff
4. If there is a voicemail: leave a message asking the patient to call the clinic at **504-568-4346** to confirm or cancel. If there is no voicemail, continue attempts to reach the patient and document times of calls made.
5. Students must check their LSUHSC email daily for updates. The student clinician is directed to notify their supervisor immediately if a patient needs to cancel and reschedule their appointment.
6. Clinic administrative staff will notify supervisors if a patient cancels.

c. Greeting the Patient
   1. The clinic administrative staff will check-in patients, mark them as in the "waiting room" on the EMR system EPIC, and notify the clinical supervisor when the patient is present and ready for their appointment.
   2. Student clinicians are to greet their patients in the clinic waiting room and ensure the sign-in log is complete before the appointment.
   3. Students should introduce themselves in the following manner***: "Hello Mr./Ms. Patient's Last Name. I am Mr./Ms. Student's Name and this my supervisor, Dr./Ms. Supervisor's Last Name." For example: "Hello Mrs. Smith, I am Taylor, and this is my supervisor, Ms. Willis."***
   4. Briefly explain the services that will be provided during the scheduled appointment and invite the patient to ask any questions before initiating services.

d. Concluding the Evaluation/Treatment session
   1. All student clinicians should escort their patients to the front desk to check out if needed. The clinic administrative staff will ensure all payments and paperwork has been completed. Students should seek the clinical supervisor if there are any concerns (such as payment issues, consent issues, etc.)
   2. The Speech-Language and Hearing Clinic's Patient Satisfaction Survey is located in the clinic waiting room. All survey results will populate in the SLP Clinics Microsoft Team.

3. After services are rendered, the student clinician will meet with the supervisor to discuss test results, treatment data and/or observations.

e. Patient Counseling/Education
    1. The student will provide patient/parent/legal guardian counseling/education regarding patient progress/regression, generalization during or after therapeutic sessions only under the supervision of the clinical supervisor.
    2. At the end of the semester, a patient/parent/legal guardian conference will be held where the student will discuss test/ therapy results, recommendations, and answer the patient/family's questions.
    3. Student clinicians should confirm the Authorization of Release of Information for the patient is completed and accurate should the patient/legal guardian wish for an outside agency to receive a copy of any reports.

f. Patient Satisfaction Surveys
    1. To ensure the LSUHSC Speech-Language and Hearing Clinic maintains its mission of providing exemplary patient care, and to ensure continuous improvement of programmatic clinical education, patients are requested to complete a patient satisfaction survey for all clinical encounters. These electronic surveys are linked the SLP Clinic Microsoft TEAMS page so data can be monitored by the SLP Program Director, Clinic Director and Clinical Faculty.
    2. QR codes linked to the patient satisfaction survey are also available in the patient waiting room. Patients should be directed to these resources to increase participation rates.
    3. Patient satisfaction survey can be found in the Appendices of this handbook.

H. Offsite Clinical Practicum

I. Students may begin offsite clinical practicum as early as their first fall semester in the LSUHSC SLP program.
    a. Offsite clinical practicum assignments will be made based on numerous criteria as determined by the SLP Clinic Director and supporting faculty to be in the best interest of the student's clinical education.
    b. Academic responsibilities and schedules influence the frequency and duration of offsite clinical practicum assignments to ensure reasonable balance between academic and clinical responsibilities.
    c. All concerns regarding offsite clinical practicum assignments should be discussed with the SLP Clinic Director and should not be renegotiated with the offsite clinical supervisor.
    d. Both your offsite clinical supervisor **AND** the SLP Clinic Director must be notified at the earliest possible time in case of an emergency or illness when a clinic session is missed.

II. Students are required to keep their health records current and up to date.

a. All required documentation should be uploaded to Calipso by the student for clearance to participate in offsite practicum.
b. Failure to do so may require pulling the student from a clinical rotation and lowering the clinic practicum grade.
c. See instructions for required documentation and student check list in Appendices.

III. Affiliates require a drug screen and a criminal background check.
a. This process is initiated by the Office of Student Affairs who will initiate orders in the drug screen and background check platform, Certiphi.
b. The student will complete all orders within 7 days of receiving the notification and notify the SLP Clinic Director when the orders are complete.
c. Cost of these screenings is the responsibility of the student.

IV. Student clinicians may be requested and are required to fulfill additional requirements of clinical practicum offsites and should address any concerns regarding these requirements with the SLP Clinic Director.

V. The SLP Clinic Director confirms ASHA certification of all clinical practicum offsite supervisors and ensures the supervisor has met the ASHA requirements for supervision

VI. Offsite Examples:
a. University Medical Center
b. VA Medical Center
c. East Jefferson General Hospital
d. West Jefferson General Hospital
e. Ochsner Healthcare System
f. Jefferson Parish Public Schools
g. Nola Public Schools
h. Bright Start, LLC
i. Therapeutic Learning Center
j. Waldon Healthcare Center

I. Recording Clinical Clock Hours in CALIPSO

I. CALIPSO is a web-based application that manages key aspects of academic and clinical education designed specifically and exclusively for speech-language pathology and audiology training programs.

II. Students are provided Calipso accounts prior to beginning clinical practicum and must complete registration steps before entering clock hours. Calipso provides students with step-by-step instructions on how to complete registration and how to enter clock hours for tracking.

III. It is the student's responsibility to maintain a record of all clock hours earned in clinical practicum. Clock hours include observations, speech-language screenings, hearing screenings, and evaluation/ treatment patient interactions.

IV. After every clinic session, the student should log into CALIPSO to document the following:
a. Supervisor
b. Site
c. Semester

d. Clinical setting type
e. Completion month & year,
f. Date
g. Course #
h. Training Level
i. Type of clinical activity for which hours were earned for each client
j. Hours/Length of time earned for each session
k. Hours for which this information is not provided will not be counted.

V. Prior to submitting the form, the student must be certain that:
   a. The hours recorded accurately reflect patient contact hours only
   b. The student should record patient contact in hours and minutes.
   c. The student has accurately answered all required information

VI. Clinical practicum clock hours must be reviewed and approved by each clinical supervisor.

VII. All clinic and observation hours must be submitted to their supervisor for approval at the end of each week.

VIII. Screening hours are required to be submitted within 7 days of a screening.

IX. Failure to record and submit all clock hours as required will result in the student receiving an "I" (Incomplete) in any Clinical Practicum course and may result in a loss of those clinic hours.

J. CALIPSO Evaluations

I. Clinical Practicum Site Evaluations
   a. At the end of each semester, students may complete an electronic Evaluation of Site form through CALIPSO.
   b. The student submits this form electronically and the student's evaluation will remain confidential.

II. Clinical Supervisors Evaluation
   a. At the end of each semester, students are encouraged to complete an electronic evaluation of onsite and offsite supervisors form through CALIPSO or the Course Evaluation System used by the SAHP for onsite clinical faculty only.
   b. The student submits this form electronically and the student's evaluation will remain confidential.

III. Self-Evaluation
   a. Students are to complete a self-evaluation at midterm and the conclusion of the semester to allow student clinicians to analyze their strengths, weaknesses, and to identify their comfort level with clinical skills.
   b. These assessments are provided to clinical supervisors by the student and used to make appropriate changes based upon the student's own reflections and the feedback given from their clinical supervisor.

K. Grading Policy for Students Enrolled in Clinical Practicum

I. The overall practicum grade for the semester will be determined by the student's clinical performance during observations, screenings, clinical simulations, on-site clinic, and offsite clinic.

II. Students will receive regular feedback regarding performance during individual diagnostic/ therapy sessions and/or supervisory meetings.
III. Students will also receive feedback through mid-term and final clinical conferences and evaluations completed within the CALIPSO system.
IV. Students are designated a clinical expectation level (Beginning, Intermediate, or Advanced) based on their clock hours obtained. At midterm and at the end of the semester, all supervisors (if multiple) will provide the primary supervisor with a grade reflecting the student's performance. The primary supervisor will combine these ratings to determine the overall grade.
V. All clinic reports must be in final form and approved by the clinic supervisor by the last day of exam week. Each day that a report is late, the clinic practicum grade will be reduced by a letter grade. Any exception to this must be approved by the clinic supervisor in advance.
VI. If a student receives a grade of "D" or "F" in clinical practicum, *none* of the practicum hours earned that semester will count toward LSUHSC or ASHA requirements.
VII. A grade of "I" (incomplete) indicates that the student has not completed academic/clinic responsibilities for an unavoidable reason.

L. Clinic Remediation/ Clinical Action Plan

Designed to ensure that struggling students receive individualized instruction for optimum student training.

I. Step 1: Identification
    a. The primary clinical supervisor should monitor the clinical performance of assigned students on a weekly basis.
    b. Any student suspected of experiencing difficulty in Clinical Practicum should receive a written evaluation through Calipso indicating the level of performance at midterm or earlier if needed. Clinical difficulty is defined as obtaining a grade of C or below.
II. Step 2: Notification
    a. The clinical supervisor must discuss their concerns with the student and notify the SLP Clinic Director of concerns at any time.
    b. The SLP Clinic Director will notify the SLP Program Director and faculty of the student's clinical difficulty, so that faculty can assist in supporting that student if needed.
III. Step 3: Meeting and Documentation
    a. Within 7 days of notification, the SLP Clinic Director will meet with the student and clinical supervisor to review the concerns.
    b. Specific expectations for improvement will be outlined and documented.
IV. Step 4: Remediation Plan
    a. A remediation plan will be developed, outlining behavioral objectives reflecting skills that need to be developed, along with expectations,

timelines, and consequences for continued issues. Arrangements will be made for team supervision, if determined appropriate.

b. The plan will be signed by the student, supervisor, and SLP Clinic Director and placed in the student's program file.

V. Step 5: Monitoring
   a. The clinical practicum supervisor will monitor the student's adherence to the remediation plan.
   b. Failure to meet expectations may result in Clinic Probation for the following semester, in addition to grade penalties already assigned.

VI. Step 6: Completion
   a. Satisfactory performance toward accomplishment of these specific objectives in conjunction with acceptable overall performance, as delineated by a grade of A or B in Calipso will be expected by the end of the semester.
      i. Upon satisfactory completion of the remediation plan, completion of the remediation is documented and placed in the student's folder.
   b. If the student earns a final grade of C or below, the student is put on Probationary status, for next semester.
      i. The supervisor will send a letter to the student, the SLP Program Director, and Department Head notifying them of the student's Clinic Probationary status.
         1. The letter should advise the student that Probationary status is only for one semester.
         2. Should the student obtain a grade of C or below a second semester, then the student must appeal to the Review Committee to remain in the program.
      ii. In addition, the student must earn a grade of B or higher before being placed off- site for practicum.

M. Complaints, Comments and Concerns

I. Complaints, Comments and Concerns QR code is located in the student work area. These comments are monitored on a regular basis by the Department Head of Communication Disorders.

II. If there are specific procedures for complaints related to the Standards for Accreditation of Entry-Level Graduate Education Programs in Audiology and Speech Language Pathology. These can be found on- line at: http://www.asha.org/academic/accreditation/accredmanual/section8.htm#Complaints_programs.

III. If needed, complaints should be sent to:

Chair, Council on Academic Accreditation in
Audiology and Speech-Language Pathology
American Speech-Language-Hearing Association,
2200 Research Boulevard, #310
Rockville, MD 20850

APPENDECIES

Professional Organizations

ASHA: American Speech-Language Hearing Association
NSSLHA: National Student Speech-Language Association
For additional information: ASHA
10801 Rockville Pike
Rockville, Maryland 20852
Website: Contact ASHA (Refer to ASHA website for information regarding Certificate of Clinical Competence (CCC) and Praxis)
Action Line: (800) 638-6868

LSHA: Louisiana Speech and Hearing Association
8550 United Plaza Blvd. Suite 1001
Baton Rouge, Louisiana 70809
Website: Louisiana Speech Language Hearing Association - Home
(504) 922-4600

LBESPA: Louisiana Board of Examiners for Speech Pathology and Audiology
LBESPA is Louisiana State Licensing Board for both Speech Pathologists and Audiologists.
Licensure is mandatory in Louisiana for both professions.
Towne Park Centre,
37283 Swamp Road, Suite 3B, Prairieville, LA 70769.
Website: Louisiana Board of Examiners for Speech-Language Pathology and Audiology
Phone (225) 313-6358
Fax (225) 313-6991.

Code of Ethics

ASHA Code of Ethics

LBESPA Code of Ethics

Call Scripts for Clinical Practicum

No. 1: For Patient

Hello Mr./ Ms./ Mrs.

This is the LSU Health Sciences Center Speech-Language and Hearing Clinic calling to remind you of your appointment for a hearing test tomorrow. (give day of the week) at (give the time). Will you be able to keep this appointment?

If the answer is Yes, end with Thank-you, we will be looking forward to seeing you

(tomorrow). If the answer is No, instruct them to call 568-4346 to reschedule.

Always end with a thank you. If leaving a recorded message add: If you are unable to keep this appointment, please call 568-4346 to cancel and reschedule. Thank-you.

No. 2 For Parent/Guardian of Patient

Hello Mr./ Ms./ Mrs.

This is the LSU Health Sciences Center Speech-Language and Hearing Clinic calling to remind you of your (daughter/son's) appointment for a hearing test tomorrow. (give day of the week) at (give the time). Will you be able to keep this appointment?

If the answer is Yes, end with Thank-you, we will be looking forward to seeing your tomorrow (or applicable day).

If the answer is No, instruct them to call 568-4346 to reschedule.

Always end with a thank you. If leaving a recorded message add: If you are unable to keep this appointment, please call 568-4346 to cancel and reschedule. Thank-you.

Remember, NEVER, give your name, home phone number or other identifying information when making these reminder calls. Only identify yourself as a representative of LSUHSC Speech-Language and Hearing Clinic.

School of Allied Health Professions
Department of Communication Disorders

End of Semester Clinic Clean Up

Students	Room #

1. Disinfect all surfaces in room (tables, door handles, light switches, chair arms, etc.); Clean any chalk boards/white boards if present; Windex the windows/straighten the blinds

2. Make sure **ALL** materials are cleaned and returned to the materials room. Put all materials away in appropriate areas and notify supervisor of any broken materials or materials that are not in good condition.

3. Make sure the room has appropriate number of chairs (2 adult, 2 peds, same color). Let the SLP Clinic Director know if there is any staining on the chairs/carpets or any broken equipment.

4. Make sure that the supplies are stocked in the cabinets. (gloves (various sizes), tongue depressors, Kleenex, wipes, sanitizer)

_____ _____

Student Name **Room # cleaned**

_____ _____

Clinical Supervisor **Date**

Notes:

Patient Satisfaction Survey

LSU Health NEW ORLEANS

School of Allied Health Professions
Department of Communication Disorders

1. Were you addressed in a friendly/timely manner by the front desk?
2. Were you satisfied with the check-in process?
3. How satisfied were you with the overall appearance and condition of the clinic?
4. Please select the name of your clinician:

   Clinician 1

   Clinician 2

   Clinician 3
5. Please provide the name of your student clinician (if applicable):
6. Were assessments and treatments clearly explained to you?
7. Did you receive educational materials to take with you that will help you achieve your goals? Yes- No- N/A
8. Please rate the service you received from your clinician during your visit today or over the course of your treatment.
9. How likely are you to refer a friend to our clinic?
10. Please rate your overall experience with us.
11. Please feel free to enter any additional comments you have on your clinical experience.

LSU Health NEW ORLEANS

School of Allied Health Professions
Department of Communication Disorders

SLP Clinic Registration Data Sheet

Student Name:

Address:

E-mail Address:

Phone Number:

Birthday:

Last 4 of SS#:

Course Schedule:

Do you have any conflicts, besides class, that you would like for me consider when making your clinical assignments?

What kind of clinical experience would you like this semester?

Which supervisors would you like me to consider when making your placement? List up to 4.

Would you like to go offsite to the schools? (first year students)

What are your clinical strengths and weaknesses?

What concerns do you have about the upcoming clinic this semester?

LSUHSC Speech-Language Pathology
Required Documentation for Clinical Practicum Experience

The items mentioned below are at the expense of the student:

1. Personal Health and Accident Insurance: Student obtains insurance through student health service or other insurance carrier. Copies of insurance cards need to be uploaded to Calipso along with a copy of your driver's license or ID. Student keeps department updated on any changes in insurance.
2. Professional Liability Insurance: Under the LSUHSC's affiliation agreement with the External Clinical Sites, the student is required to carry their own personal professional liability insurance. Each student is responsible for acquiring professional liability insurance prior to clinical externship placement ($1,000,000/$3,000,000). Students are required to provide a copy of the professional liability coverage to the department. Upload policy # and expiration to Calipso. http://www.proliability.com/professional-liability-insurance/speech-language-pathologists/american-speech-language-hearing-association
3. CPR Certification: Under the LSUHSC's affiliation agreement with the External Clinical Sites, the student is required to hold CPR certification for Healthcare Providers. Upload e-card to Calipso.
4. Criminal Background Check: Each student will be sent a link to a web-based background checking system. Students are required to sign-on with this outside agency so that background clearance may be obtained, as required by affiliates for clinical externships.
5. Titers for Rubella, Mumps, Measles and Varicella: An immunization record must show current positive titers.
6. Tuberculosis Test: Student is responsible for having TB test performed every 12 months. This can be done at student health service or other medical site. Copies of the record of TB test results and dates are provided by the student to the department.
7. Completed series for Hepatitis B Vaccination: An immunization record must show completion of the series and/or positive titers.
8. Current Flu Vaccine: An immunization record must show flu vaccine or exemption.
9. Covid-19 Vaccine: Many sites require proof of full Covid-19 vaccination. Upload Covid-19 card to Calipso.
10. Negative Drug Screen: Students will have a drug screen ordered through Certiphi and must complete within 10 days for clinical site clearance. The Office of Academic Affairs for the School of Allied Health Professions will place orders and manage results. The SLP Clinic Director will receive notification for Pass/Fail for clinical site clearance. Some sites require a copy of the report. This will be provided by the student only.
11. HIPAA Training: Each student is required to complete the on-line HIPAA training course provided through the LSUHSC Office of Compliance. Students will complete the recommended compliance training as required. Training certificates need to be uploaded to Calipso.
12. OSHA Training & Bloodborne Pathogens Training: Students will complete on-line OSHA and Bloodborne Pathogens Training provided through the LSUHSC Office of Compliance. Training certificates need to be uploaded to Calipso by the student.

    Note: Students should be aware that some practicum sites require specific items prior to confirmation of practicum placement. Consequently, you may be required to submit certain documents, interview, or review/study particular terminology or guidelines far in advance of your practicum assignment.

CHECKLIST REQUIRED DOCUMENTATION FOR CLINICAL PLACEMENT

SPEECH-LANGUAGE PATHOLOGY

STUDENTS NAME: _____

GRADUATION DATE: _____

	DATE OF EXPIRATION/ COMPLETION	DOCUMENTS UPLOADED?	NOTES
PERSONAL HEALTH AND ACCIDENT INSURANCE			Copy of license and insurance card uploaded to Calipso
PROFESSIONAL LIABILITY INSURANCE			Upload certificate to Calipso with policy # and expiration.
CPR CERTIFICATION			Upload copy of card to Calipso
COMPLETE A CERTIFIED BACKGROUND CHECK			Completed through Certiphi
DRUG SCREEN COMPLETED			Completed through Certiphi
POSITIVE TITER: RUBELLA			Upload Health Record to Calipso
POSITIVE TITER: MUMPS			Upload Health Record to Calipso
POSITIVE TITER: MEASLES			Upload Health Record to Calipso
POSITIVE TITER: CHICKEN POX (VARICELLA)			Upload Health Record to Calipso
HEPATITIS B VACCINE SERIES COMPLETED (OR DECLINATION FORM SIGNED)			Upload Health Record to Calipso
TDAP (+18; PAST 10 YRS)			Upload Health Record to Calipso
COVID VACCINE			Upload Health Record to Calipso
NEGATIVE TB TEST			Upload Health Record to Calipso
CURRENT FLU VACCINE			Upload Health Record to Calipso
HIPPA TRAINING			Upload LSUHSC Compliance training transcripts to Calipso
OSHA TRAINING			Upload LSUHSC Compliance training transcripts to Calipso

Submit this form AND upload copies of required documentation to CALIPSO. All paperwork must be current on Calipso to begin clinical rotations.

By signing this form, I agree to having LSUHSC Dept. of COMD to disclose the above information required per the affiliation agreement between LSUHSC and the site.

_____ _____

Name Date

Worksheet for Clinical Requirements in Speech-Language Pathology

Student: ___ Graduation Date: May 2026

Articulation	
Completed a screening competency	
Completed at least 2 hours of articulation screenings	
Completed at least 3 hours of child articulation evaluations	
Completed at least 3 hours of adult articulation evaluations	
Completed at least 10 hours of child articulation treatment	
Completed at least 5 hours of adult articulation treatment	
Fluency*	
Completed at least 1 hour of fluency	
Completed at least 2 hours fluency treatment	
Voice*	
Completed at least 1 hour voice evaluation	
Completed at least 2 hours of voice treatment	
Language	
Completed a screening competency	
Completed at least 4 hours of screenings	
Completed at least 8 hours of child language evaluations	
Completed at least 5 hours of adult language evaluations	
Completed at least 15 hours of child language treatment	
Completed at least 10 hours of adult language treatment	
Hearing	
Completed a screening competency evaluation	
Completed a minimum of 8 hours of hearing screens	
*Completed at least 2 hours of Aural Rehab treatment	
Swallowing*	
Completed at least 3 hours of swallowing evaluation (MBSS, FEES or Clinical Swallow Evaluations)	
Completed at least 3 hours of swallowing treatment	
Cognitive Aspects*	
Completed at least 1 hour of cognitive evaluation	
Completed at least 5 hours of cognitive treatment	
Social Aspects*	
Completed at least 1 hour of social aspect evaluation	
Completed at least 3 hours of social aspect treatment	
Communication Modalities*	
Completed at least 1 hour of AAC Evaluation	
Completed at least 3 hours of AAC treatment	
Observation Hours	
Completed twenty-five hours in clinical observation.	
Restricted Hours	
Maximum 75 simulated hours	
Maximum of 187.5 Telepractice hours (less than 50% of total patient contact)	
Total Patient Contact Hours	
Completed 400 clock hours of supervised clinical experience in the practice of speech-language pathology. Including a minimum of 375 hours in direct client/patient contact and/or Alternative Clinical Education.	

Worksheet for Clinical Requirements in Speech-Language Pathology

Student: ___ Graduation Date: May 2027

Articulation	
Completed a screening competency	
Completed at least 2 hours of articulation screenings	
Completed at least 3 hours of child articulation evaluations	
Completed at least 3 hours of adult articulation evaluations	
Completed at least 10 hours of child articulation treatment	
Completed at least 5 hours of adult articulation treatment	
Fluency*	
Completed at least 1 hour of fluency	
Completed at least 2 hours fluency treatment	
Voice*	
Completed at least 1 hour voice evaluation	
Completed at least 2 hours of voice treatment	
Language	
Completed a screening competency	
Completed at least 4 hours of screenings	
Completed at least 8 hours of child language evaluations	
Completed at least 5 hours of adult language evaluations	
Completed at least 15 hours of child language treatment	
Completed at least 10 hours of adult language treatment	
Hearing	
Completed a screening competency evaluation	
Completed a minimum of 6 hours of hearing screens	
*Completed at least 2 hours of Aural Rehab treatment	
Swallowing*	
Completed at least 3 hours of swallowing evaluation (MBSS, FEES or Clinical Swallow Evaluations)	
Completed at least 3 hours of swallowing treatment	
Cognitive Aspects*	
Completed at least 1 hour of cognitive evaluation	
Completed at least 5 hours of cognitive treatment	
Social Aspects*	
Completed at least 1 hour of social aspect evaluation	
Completed at least 3 hours of social aspect treatment	
Communication Modalities*	
Completed at least 1 hour of AAC Evaluation	
Completed at least 3 hours of AAC treatment	
Observation Hours	
Completed twenty-five hours in clinical observation.	
Restricted Hours	
Maximum 75 simulated hours	
Maximum of 187.5 Telepractice hours (less than 50% of total patient contact)	
Total Patient Contact Hours	
Completed 400 clock hours of supervised clinical experience in the practice of speech-language pathology. Including a minimum of 375 hours in direct client/patient contact and/or Alternative Clinical Education.	

LSU Health NEW ORLEANS

School of Allied Health Professions
Department of Communication Disorders

SLP Clinical Excuse Request

Date submitted:

Name:

Supervisor:

Site:

Dates requested off:

Reason:

Example Documentation Templates

LSUHSC SPEECH-LANGUAGE PATHOLOGY

INITIAL EVALUATION/RE-EVALUATION

Patient Name: *** **Evaluation date:** ***

DOB: *** **Length of evaluation:** ***

ICD- 10 Dx Code: ***

Treatment Diagnosis: ***

Background/Presenting Information

***

Evaluation Information

***

Impressions

***

Recommendations

***

Rehab Potential: POOR/FAIR/GOOD/EXCELLENT

Recommended Treatment Plan * times a week for *** weeks**.

Long Term Goals: ***

Short Term Goals: ***

Clinician:

Date:

[Faculty co-sign]

LSUHSC SPEECH-LANGUAGE PATHOLOGY

PLAN OF CARE

Patient Name: ***

DOB: ***

ICD- 10 Dx Code: ***

Treatment Diagnosis: ***

Rehab Potential: POOR/FAIR/GOOD/EXCELLENT

Recommended Treatment Plan * times a week for *** weeks**.

Long Term Goals: ***

Short Term Goals: ***

Clinician:

Date:

[Faculty co-sign]

LSUHSC SPEECH-LANGUAGE PATHOLOGY

UPDATED PLAN OF CARE

Patient Name: ***

DOB: ***

ICD- 10 Dx Code: ***

Treatment Diagnosis: ***

Rehab Potential: POOR/FAIR/GOOD/EXCELLENT

Recommended Treatment Plan * times a week for *** weeks**.

Certification Time Frame: From * through *****

Long Term Goals: ***

Short Term Goals: ***

Status of Goals: ***

Updated Long Term Goals: ***

Updated Short Term Goals: ***

Clinician:

Date:

[Faculty co-sign]

LSUHSC SPEECH-LANGUAGE PATHOLOGY

THERAPY SESSION NOTE

Client Name: *** **Date of session:** ***

DOB: *** **Length of session:** ***

ICD- 10 Dx Code: ***

Treatment Diagnosis: ***

Subjective/Behavioral Observations: (A description of the client's physical and/or emotional state, including affect, mood, level of motivation, attention, and so on. It is also appropriate to report client or family concerns.)

Objective/Data: (Includes information regarding the goals and target behaviors, session goals, and data for each goal. If testing was done, name the tests administered and results here. Include any facts that may help support your subjective/behavioral observations.)

Assessment/Interpretation: (Includes an explanation of what your data means and factors that may have affected performance (i.e. type of stimuli, effectiveness of cues, and reinforcement. Include what you did here.)

Plan: (Include what is planned for next session and a rationale. You can include references to goals, cues, reinforcement or stimuli.)

Clinician:

[Faculty co-sign]

LSUHSC SPEECH-LANGUAGE PATHOLOGY

DISCHARGE SUMMARY

Patient Name: ***

DOB: ***

ICD- 10 Dx Code: ***

Treatment Diagnosis: ***

Rehab Potential: POOR/FAIR/GOOD/EXCELLENT

Treatment Plan Frequency: * times a week**.

Duration of Treatment: From * through *****

Long Term Goals: ***

Short Term Goals: ***

Discharge Status of Goals: ***

Discharge Recommendations: ***

Clinician:

Date:

[Faculty co-sign]

AFFILIATION AGREEMENT

This Affiliation Agreement, effective as of the **insert date** by and between

BOARD OF SUPERVISORS OF LOUISIANA STATE UNIVERSITY AND AGRICULTURAL AND MECHANICAL COLLEGE ON BEHALF OF ITS LOUISIANA STATE UNIVERSITY HEALTH SCIENCES CENTER, NEW ORLEANS

(hereinafter referred to as "University"), appearing through its authorized representative, whose mailing address is declared to be:

433 Bolivar Street

New Orleans, Louisiana 70112

and

INSERT LEGAL NAME

(hereinafter referred to as "Affiliating Entity"), appearing through its authorized representative(s), whose mailing address is declared to be

Insert full address
INSERT City, State, Zip

WHEREAS, this Affiliation Agreement (hereinafter "Agreement") is desired in order to provide the Affiliating Entity and its Professional Staff with the intellectual stimulation that comes from the support of and the participation in a vigorous program of undergraduate and/or graduate clinical education, or community service, and the affiliation contemplated by this Agreement should improve and enhance the care of the sick; and

WHEREAS, in a like manner, University recognizes the unique opportunities for clinical education, or community service, in Affiliating Entity's facilities, which will permit opportunities for enhancement of the quality of the educational experience enjoyed by the University.

NOW THEREFORE, in consideration of the terms and conditions set forth herein, the parties agree as follows:

1. TERM

This Agreement shall be effective as of **Start Date** for an initial term ending **End Date**, and may be renewed thereafter with the prior written consent of both parties hereto; provided however that either party shall, with or without cause, at any time give to the other party at least sixty (60) days written notice to the address(es) listed, this Agreement shall terminate on the future date specified in such notice. Upon termination of this Agreement as is hereinabove provided, neither party shall have any further obligation hereunderexcept for: (1) obligations accruing prior to the date of termination, including but not limited to the completion of any clinical education program which have commenced prior to the date of such termination for a period of not more than 12 months; and (2) obligations, promises, or covenants combined herein which are expressly made to extend beyond the term of this Agreement.

2. PROVISIONS OF CLINICAL EDUCATION

The parties enter into this Agreement to establish a mechanism by which University Students shall participate in clinical education or community services at Affiliating Entity. As applicable, clinical education or community service at the Affiliating Entity will be directed by the University under regulations and guidelines established by the University, and University shall be responsible for the general overall supervision of any Student educational activities at the Affiliating Entity.

Affiliating Entity shall accept Students assigned to Affiliating Entity by University, who shall be supervised by Affiliating Entity and if applicable, by University and to observe and assist in various aspects of patient care. All participants in the educational or

community service programs shall have a moral, ethical, and legal responsibility to the Affiliating Entity and the University for the responsible management of the care of patients.

3. AFFILIATING ENTITY OBLIGATIONS AND RESPONSIBILITIES

a. Affiliating Entity shall at all times retain ultimate control of the Affiliating Entity and responsibility for patient care.

b. Affiliating Entity shall designate, subject to the approval of University, a person to serve as a Liaison between Affiliating Entity and University.

c. Upon request of University, Affiliating Entity shall assist University in the evaluation of each Student's performance in the clinical education program. However, University shall at all times remain solely responsible for the evaluation and grading of participating Students.

d. Affiliating Entity agrees, prior to the commencement of each rotation, to provide the Student assigned to Affiliating Entity with a general orientation to the Affiliating Entity. Each Student will be informed of appropriate Affiliating Entity rules, regulations, policies and procedures and of his or her obligation to abide by same.

e. Affiliating Entity may require the withdrawal of a Student if presence of the Student in Affiliating Entity's facilities is disruptive or detrimental to Affiliating Entity's operations or patients.

f. Affiliating Entity shall provide emergency care, at Student's expense, in case of illness or accident to any participating Student.

g. Affiliating Entity shall permit Students and members of the University faculty connected with the educational program to use, at their own expense, any cafeteria or other dining facilities available to Affiliating Entity personnel.

h. Affiliating Entity shall maintain administrative and professional supervision of Students insofar as their presence and program assignments affect the operations of Affiliating Entity and its direct and indirect care of patients.

i. Affiliating Entity shall keep University informed of policy changes, which may affect University Faculty and/or Students.

j. Affiliating Entity shall comply with all applicable federal, state, and local laws, ordinances, rules and regulation; comply with all applicable requirements of any accreditation authority; and certify such compliance upon request by University.

4. UNIVERSITY OBLIGATIONS AND RESPONSIBILITIES

a. University agrees to provide Affiliating Entity with Course objectives and goals for students assigned to Affiliating Entity.

b. University shall select and assign for clinical experiences only those students who meet University requirements and qualifications and who agree to follow Affiliating Entity rules and regulations.

c. University shall designate a faculty member of the University who will coordinate the educational experience of the Students participating in the Program with the Affiliating Entity Liaison.

d. University shall provide a faculty member who will meet at least annually with the appropriate Affiliating Entity representative(s) to discuss and establish suitable clinical experience.

e. When applicable, University shall require all students prior to clinical education to have (and show proof to Affiliating Entity):

1) Health insurance;

2) Hepatitis B. Vaccine (or a signed waiver);

3) Negative TB/PPD skin test or Negative chest X-ray;

4) Current certification in CPR;

5) OSHA training in universal precautions;

6) Proof of MMR or immunity thereto; and

7) Proof of influenza vaccine

5. REVIEWS AND APPEAL

When differences or disagreements occur, a Review Committee will be convened consisting of the Chancellor of the University's Health Sciences Center, or designee thereof, the Deans of University's Schools, or designee thereof, the Medical Director of the Affiliating Entity, or equivalent thereof, and the Heads of the relevant Departments or Program Directors for that department. The purpose of the Review Committee is to discuss program issues and interests and to recommend solutions to differences which reaffirm mutual expectations in program directions. In addition, the Review Committee also can be convened and will be responsible for developing a review and monitoring process to evaluate program results and expectations.

6. APPLICABLE LAW AND VENUE

This Agreement has been executed and delivered in and shall be interpreted, construed, and enforced pursuant to and in accordance with the laws of the State of Louisiana. All duties and obligations of the parties created hereunder are performable in **insert Parish and State,** and, **Orleans Parish,** Louisiana state courts shall be the sole and exclusive venue for any litigation, special proceeding, or other proceeding as between the parties that may be brought or arise out of or in connection with or by reason of this Agreement.

7. AUTHORIZED REPRESENTATIVE

Except as may be herein more specifically provided, University and Affiliating Entity shall act with respect to all matters hereunder through the Dean and **insert name of Affiliating Entity representative.**

8. USE OF NAMES

Affiliating Entity shall make no use of University's name(s) or logo(s) in print without prior written approval of authorized University's representatives. Similarly, University shall make no use of Affiliating Entity's name(s) or logo(s) in print without prior written approval of Affiliating Entity, other than a joint public announcement of their affiliation. Notwithstanding the above, any Affiliating Entity professional may disclose to a patient that the patient will be seen by or treated by University who is providing Affiliating Entity services as an independent contractor, and, Affiliating Entity or University may at any time disclose affiliation with the other for informational purposes.

Subject to the foregoing, should Affiliating Entity refer to University and/or University Professional(s) in any form of communication, including but not limited to a joint public announcement of their affiliation, a disclosure of independent contractor services and/or a disclosure for informational purposes, Affiliating Entity shall use the "LSU Health" name and logo to clearly identify the status of and/or the affiliation with University or any University Professional(s) providing services pursuant to this Agreement.

When authority from University is necessary, it may be received from the Director of Information Services for LSU Health Sciences Center – New Orleans. When authority from Affiliating Entity is necessary, it may be received from **insert name of Affiliating Entity representative.**

9. INSURANCE

University agrees to furnish the Affiliating Entity, upon request, a Certificate of Insurance providing evidence that University is covered for statutory worker's compensation, employers liability, and commercial general liability under the plan administered by the Louisiana State Office of Risk Management.

The Affiliating Entity agrees to furnish the University, upon request, a Certificate of Insurance providing evidence that the Affiliating Entity is covered by policies of insurance providing statutory worker's compensation coverage, employer's liability coverage, and commercial general liability coverage with limits of liability of not less than $2,000,000 per occurrence.

The Affiliating Entity warrants to the University that it and each of its employees, professional and non-professional, who is not, and is not acting as, a University Professional is, and shall remain during the term of this Agreement, either: (1) insured against all claims of professional liability under one or more policies of insurance with indemnity limits of not less than $500,000 per occurrence or claim; or (2) duly qualified and enrolled as a health care provider with the Louisiana Patient's Compensation Fund pursuant to the Louisiana Medical Malpractice Act, Louisiana Revised Statutes 40:1237.1, et seq.

University shall provide to its Students, at the Students' costs, health insurance coverage for testing and prophylactic treatment of blood-borne diseases following at-risk contact with blood or other body fluids from human or animal sources. This contact may include but is not limited to needle sticks. University Students shall be responsible for the costs. In addition, University Students shall be required to purchase or provide proof of health insurance for exposure to infectious and environmental hazards, or other occupational injuries.

University warrants that it and its University employees providing services pursuant to this Agreement are provided professional liability coverage in accordance with the provisions of Louisiana Revised Statutes 40:1237.1, et seq., for the services to be provided pursuant to this Agreement. With respect to liability arising out of medical malpractice, the obligation of the University shall not exceed the amount payable by the State Health Care Provider Fund pursuant to the provisions of Louisiana Revised Statutes 40:1237.1, et seq.

If required by Affiliating Entity, the University agrees to inform the Student(s) participating in the education program under this Agreement that the Student shall provide, at his or her expense, professional liability coverage with limits of not less than $1,000,000 per occurrence, with insurance carriers or self- insurance programs approved by Affiliating Entity, in accordance with Affiliating Entity bylaws, rules and regulations. Student shall upon request, provide to Affiliating Entity proof of coverage.

University Students shall not be entitled to any employment benefits whatsoever from Affiliating Entity including, but not limited to, sick leave or the fringe benefits available to employees of the Affiliating Entity, and shall not be entitled to participate in any pension plan, life insurance, or any other compensation, welfare, or benefit plan maintained by Affiliating Entity.

10. STATUS OF UNIVERSITY FACULTY AND STUDENTS

University's services pursuant to this Agreement shall be as an independent contractor. University Faculty and/or Students, and other employees of University will be acting in the course and scope of their employment, appointment, or assignment for or on behalf of University, and shall not be entitled to receive or accept from Affiliating Entity any remuneration or other compensation whatsoever for services provided at the Affiliating Entity. It is expressly acknowledged and stipulated by University and Affiliating Entity that each University Faculty and/or Student assigned in any capacity to the Affiliating Entity pursuant to this Agreement is and shall be an employee or Student solely of University and shall not, for any purpose whatsoever, be considered an employee, representative, or agent of Affiliating Entity.

Nothing in this Agreement is intended nor shall be construed to create an employer/employee relationship, a joint venture relationship, or a lease or landlord/tenant relationship, or to allow Affiliating Entity to exercise control or direction over the manner or method in which University or University Faculty perform the Faculty Services which are the subject matter of this Agreement. University understands and agrees that (1) University and University Faculty will not be treated as employees for federal tax purposes; (2) Affiliating Entity will not withhold on behalf of University, University Faculty, or employees pursuant to this Agreement any sums for income tax, unemployment insurance, social security or any other withholding pursuant to any law, or make available to University or University Faculty any of the benefits afforded to employees of Affiliating Entity; and (3) all of such payments, withholdings, and benefits if any, are the sole responsibility of University. In the event the Internal Revenue Service or any other governmental agency should question or challenge the status of University, or University Faculty, the parties hereto mutually agree that both University and Affiliating Entity shall have the right to participate in any discussion or negotiation occurring with such agency or agencies, irrespective of whom or by whom such discussions or negotiations are initiated.

The parties hereto agree that the benefits to Affiliating Entity or its employees hereunder do not require and are not payment directly or indirectly in return for the recommendation, referral or any other arrangement for the provision of any item or service offered by University or its employees to any patient of Affiliating Entity Faculty members, employees or agents. Likewise, the parties agree that the benefits to University or its employees hereunder do not require and are not payment directly or indirectly in return for the recommendation, referral or any other arrangement for the provision of any item or service offered by Affiliating Entity or its employees or agents to any patient of University Faculty members, employees or agents, and the amount of fees retained by University represents the fair market value of professional services provided.

11. INDEMNIFICATION

University hereby agrees to hold harmless and indemnify Affiliating Entity from any claim, suit, or loss, other than expenses of litigation, sustained by Affiliating Entity, its officers, directors, or employees, or by any physician employed by the Affiliating Entity for any asserted injury to or death of any person to the extent that it results from or is caused by the asserted negligence, error, or omission of any University Student, employee, or agent. However, "agent" as used in this paragraph shall exclude any Affiliating Entity physician, employee, or agent.

Likewise, Affiliating Entity hereby agrees to hold harmless and indemnify University from any claim, suit, or loss, other than expenses of litigation, sustained by University for any asserted injury to or death of any person to the extent that it results from or is caused by the asserted negligence, error, or omission of Affiliating Entity, or of its officers, directors, employees, agents, or any other member of Affiliating Entity's Professional Staff. However "agent" as used in this paragraph shall exclude any University Student, employee, or agent.

12. ACCESS TO RECORDS AND RECORD RETENTION

University and Affiliating Entity agree to retain this Agreement (including all amendments and Supplements hereto) and any of their books, documents, and records which may serve to verify the costs of this Agreement for the longer of six (6) years after the fiscal year in which the services contemplated herein have been performed or six (6) years after all reference value, audit, and/or litigation related to this Agreement is concluded or as otherwise required by law. All parties agree to allow the Secretary of the Department of Health and Human Services and the Comptroller General access to the Agreement, books, documents, and records in the event that such access is requested in writing and is made in accordance with applicable federal regulations. Furthermore, University's auditors and the Louisiana Legislative Auditor's office shall have the right upon reasonable written notice to inspect and audit, during Affiliating Entity's regular business hours and at no expense to Affiliating Entity, the books and records of Affiliating Entity, but only to the extent necessary to verify compliance with this Agreement.

13. CONFIDENTIALITY

All parties hereby agrees that they shall comply with all applicable Federal and State laws, rules, and regulations which pertain to patient/client confidentiality, including the regulations implementing the Health Insurance Portability and Accountability Act of 1996, ("HIPAA"), 45 C.F.C. Parts 160 and 164 ("the Privacy Rule").

14. CIVIL RIGHTS

University and Affiliating Entity shall abide by the requirements of the following as applicable: Title VI and VII of the Civil Rights Act of 1964, as amended by the Equal Opportunity Act of 1972, Federal Executive Order 11246, the Federal Rehabilitation Act of 1973, as amended, the Vietnam Era Veteran's Readjustment Assistance Act of 1974, Title IX of the Education Amendments of 1972, the Age Discrimination Act of 1975, the Fair Housing Act of 1968 as amended, and the requirements of the Americans with Disabilities Act of 1990.

University and Affiliating Entity agree not to discriminate in their employment practices, and will render services under this Agreement without regard to race, color, religion, sex, sexual orientation, national origin, veteran status, political affiliation, disability or age. Any act of discrimination committed by University or Affiliating Entity, or failure to comply with these statutory obligations when applicable, shall be grounds for termination of this Agreement.

15. USE OF PREMISES

University covenants not to use or permit any University Student or other personnel of University acting within the Affiliating Entity to use any part of the premises of Affiliating Entity for any purpose other than those purposes related to the performance of clinical services hereunder, unless otherwise mutually agreed to by the parties in writing.

16. ASSIGNMENT

This Agreement may be assigned only by the written consent of all parties; provided, however, that claims for money due or to become due to the University from Affiliating Entity under this Agreement may be assigned to a bank, trust company, or other financial institution without such approval. Notice of any such assignment or transfer by one party shall be furnished promptly to the other party.

17. AMENDMENT

This Agreement and amendments hereto shall be in writing and may be executed in multiple copies on behalf of Affiliating Entity by its authorized representative and on behalf of University by the Chancellor and the Dean. Each multiple executed copy shall be deemed an original, but all multiple copies together shall constitute one and the same instrument. Any understanding between the parties, whether oral or written, not formally denominated and executed as an amendment to this Agreement, which authorizes or approves any course of performance deviating from the terms hereof, shall be presumed to be a temporary waiver revocable at the will of any party and not an amendment of the provisions of this Agreement. Both parties agree that this Agreement may be amended as needed to comply with state and federal regulations.

18. ENFORCEMENT

In the event either party resorts to legal action to enforce the terms and provisions of this Agreement, the party prevailing in such action shall be entitled to recover the cost of such action so incurred, including, without limitation, reasonable attorney's fees.

19. FORCE MAJEURE

Neither party shall be liable nor deemed to be in default for any delay or failure in performance under this Agreement or other interruption of service or employment resulting, directly or indirectly, from Acts of God, civil or military authority, acts of public enemy, war, accidents, fires, explosions, earthquakes, floods, failure of transportation, nonappropriation, strikes or other work interruptions by either party's employees, or any similar or dissimilar cause beyond the reasonable control of either party.

20. GENDER AND NUMBER

Whenever the context here requires, the gender of all words shall include the masculine, feminine, and neuter and the number of all words the singular and plural.

21. ADDITIONAL ASSURANCES

The provisions of this Agreement shall be self-operative and shall not require further Agreement by the parties except as may be herein specifically provided to the contrary.

22. SEVERABILITY

The invalidity or unenforceability of any terms or provisions hereof shall in no way affect the validity or enforcement of any other term or provision.

23. ARTICLES AND OTHER HEADINGS

The paragraph and other headings contained in this Agreement are for reference purposes only and shall not affect in any way the meaning or interpretation of this Agreement.

24. TIME OF ESSENCE

Time shall be of the essence with respect to this Agreement.

25. WAIVER OF BREACH

Neither payment nor lapse of time, nor any other action the part of either party or its agents, shall constitute a waiver of any breach by said party of the conditions and covenants of this Agreement.

26. NOTICE

Whenever any notice or demand is required or permitted under this Agreement, such notice or demand shall be given in writing and delivered in person or by certified mail to the following addresses:

To University: **And to:**

LSU Health Sciences Center – New Orleans
Attn: School of Allied Health Professions
411 S. Prieur Street; 4th floor
New Orleans, Louisiana 70112

LSU Health Sciences Center – New Orleans
ATTN: LSUHSC Contract Management
1900 Gravier Street, 8th Floor
New Orleans, Louisiana 70112

To Affiliating Entity:

Insert name
Address

Insert 2nd name
Address (optional - click the spacebar if not needed)

27.

DEFINITIONS

For purposes of this Agreement, the following terms shall have the meaning ascribed thereto unless otherwise clearly required by the context in which such term is used.

Affiliating Entity Policies - The term "Affiliating Entity Policies" shall mean and include the bylaws, policies, procedures, and practices of Affiliating Entity, all as are from time to time adopted, authorized, and approved by the governing authority of Affiliating Entity.

Head -The term "Head" in connection with University shall mean the head of a Department in the University's School of Allied Health Professions.

Department - The term "Department" shall mean the organized divisions at University established by its specialties.

President - The term "President" shall mean the person holding the position currently titled "President" of the Affiliating Entity or such other title as may be hereafter adopted to describe the executive exercising overall authority with respect to the day-to-day operation and management of the Affiliating Entity; provided; however, that with respect to University, the term "President" shall mean the Chief Executive Officer of Louisiana State University.

Program - The term "Program" shall mean a Student's Program of the University's Health Sciences Center.

Program Director -The term "Program Director" shall mean the University faculty, who shall be appointed by University or its designee to assume and discharge responsibility for the administrative and supervisory services related to a Program for a Department at University, as set forth in this Agreement. One or more Program Directors may be appointed with respect to each Affiliating Entity.

Student - The term "Student" shall mean an individual currently participating in a graduate and/or undergraduate clinical and/or other health care teaching program within the University including all programs administered under the auspices of the University's School of Allied Health Professions. Notwithstanding any of the foregoing, the term Student shall not include any Fellow and/or Resident of the University as defined in this Agreement.

28. ENTIRE AGREEMENT

This Agreement supersedes all previous contract s and constitutes the entire Agreement between the parties. Neither party shall be entitled to any benefits other than those specified herein. No oral statements or written material not specifically incorporated herein shall be of any force and effect and no changes in or additions to this Agreement shall be recognized unless incorporated herein by amendment as provided herein, such amendment(s) to become effective on the date stipulated in such amendments. Provided however, that any other language in this Agreement to the contrary notwithstanding, if there is an Exceptions Addendum, duly executed by all required authorities of the University and of the Affiliating Entity, appended to this Agreement, to the extent that the terms and conditions of said Exceptions Addendum vary from the terms or conditions of this Agreement, then the terms and/or conditions of the Exceptions

Addendum shall prevail. There **is not** an Exceptions Addendum to this Agreement, and if there is, it consists of **zero** (**0**) page(s) in length.

28. EXCLUSIONS CERTIFICATION

By executing this Agreement, each party, University and Affiliating Entity, hereby certify and represent that it and/or any of its officers, employees, or agents:

(a) has never been debarred or convicted of a crime for which an entity can be debarred under 21 USC Sec. 335a ("335a"); or excluded from any federal health care program under Sections 1128 and/or 1128A of the Social Security Act; nor threatened to be debarred or indicted for a crime or otherwise engaged in conduct for which a person can be debarred under 335a or excluded from any federal health care program under Sections 1128 and/or 1128A of the Social Security Act;

(b) agrees that it will promptly notify the other party to this Agreement in accordance with Section 1 above in the event of any such debarment, exclusion, conviction, threat or indictment occurring during the term of this Agreement; and;

(c) agrees not to employ any person in connection with any of the work to be performed under this Agreement who has been debarred, excluded, or convicted of a crime for which a person can be debarred or excluded from any federal health care program.

This section shall survive termination or expiration of this Agreement.

THE REST OF THIS PAGE INTENTIONALLY LEFT BLANK

SIGNATURE PAGE TO FOLLOW

IN WITNESS WHEREOF, the individuals authorized to enter into Agreements execute this Agreement as of the date first above written.

UNIVERSITY:

BOARD OF SUPERVISORS OF LOUISIANA STATE UNIVERSITY AND AGRICULTURAL AND MECHANICAL COLLEGE

By:_____ Date:_____
Steve Nelson, M.D.
Chancellor
LSU Health Sciences Center – New Orleans

By:_____Date:_____
Erin Dugan, Ph.D., NCC, CRC, LPC-S.
Dean
School of Allied Health Professions in New Orleans

AFFILIATING ENTITY:

FACILITY LEGAL NAME

By:_____ Date:_____
Insert name
Title

By:_____ Date:_____
Optional 2nd line
Title (optional – click the spacebar if not needed AND DELETE THE ADDITIONAL LINE ABOVE)