

UNIVERSITY *of* HOUSTON

**DEPARTMENT of COMMUNICATION
SCIENCES and DISORDERS**

**GRADUATE PROGRAM
STUDENT HANDBOOK**



2012-2013

*Department of Communication Sciences and Disorders
100 Clinical Research Center
Houston, TX 77204-6018
713-743-2897*

Dear Graduate Student:

Welcome to the Department of Communication Sciences and Disorders at the University of Houston. The faculty and staff are proud of our department and we are delighted that you have chosen to study with us. As you know, the Master's program in Communication Sciences and Disorders is designed to prepare you for a career as a speech-language pathologist. These professionals provide diagnostic and treatment services to individuals who exhibit a variety of communication disorders, and our program will provide you with experience with many of these. In addition, a degree in Communication Sciences and Disorders includes in-depth study of normal speech and language development across the lifespan, speech and hearing science, cultural differences in communication, and prevention of speech and hearing disorders. These are exciting and evolving fields of study and you will find yourself constantly challenged to learn new information.

Our department has excellent academic and clinic offerings. The curriculum is designed to provide you with the knowledge needed to pursue an advanced degree in Speech-Language Pathology or Audiology. The University Speech, Language, and Hearing Clinic: A United Way Facility serves a wide range of clients offering you the opportunity to observe individuals with a variety of speech and hearing impairments. Our program also has numerous affiliations with local schools, hospitals, and rehabilitation facilities. Many of our faculty are also engaged in research related activities that may add to your educational experience. We hope that you avail yourself of these opportunities to achieve a well-rounded academic and clinical education that prepares you for further study.

The purpose of this handbook is to provide information about the department and the requirements for your program. It includes essential information that you will need during your course of study, and it is important that you review these materials carefully, including the appendices. This handbook will be augmented by other information from the clinic in the Clinic Handbook, your specific academic advisor, and the graduate catalogue of the University of Houston, which can be found on line via a link from our home page at www.ComD.uh.edu. It is your responsibility to know the procedures for this program and university policies, and the faculty will make every effort to work with you to ensure your success. We are looking forward to guiding you in your academic and professional development.

Sincerely,

A handwritten signature in cursive script, reading "Lynn M. Maher".

Lynn M. Maher, Ph.D.
Chair and Professor

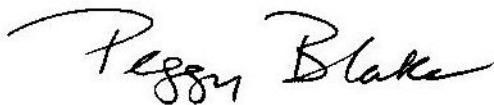
Dear Graduate Student,

I'd like to add my warm welcome to the University of Houston's graduate program in Communication Sciences and Disorders. We are excited to have each of you here. As you know, acceptance into UH ComD is competitive, and you are some of the best of those who applied. But don't think that you can relax now that you've been accepted! The ComD graduate program is a rigorous one. We have confidence that you can be successful in our program and out in the "real world" as a speech-language pathologist. We would not have accepted you into the program if we didn't think you could make it. We believe you will become respected clinicians and researchers in the field of Speech-Language Pathology, and will continue to strengthen the reputation of UH ComD.

As the graduate program coordinator, I encourage all of you to drop in now and then, and to come to me with questions or concerns that you may have about the graduate program.

I look forward to getting to know all of you better as you learn and grow over the next few years.

Sincerely,

A handwritten signature in black ink that reads "Peggy Blake". The signature is fluid and cursive, with the first name "Peggy" and last name "Blake" clearly distinguishable.

Peggy Blake, Ph.D.
Graduate Program Coordinator

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ComD MISSION STATEMENT

The mission of the Program in Communication Sciences & Disorders at the University of Houston is to advance the understanding of typical and disordered speech, language, and hearing through excellence in teaching, scholarship and service to the community.

PROGRAM GOALS

Goal 1: Teaching

The educational focus of our mission includes pre-professional training in communication disorders for undergraduate and post baccalaureate students, research and professional training in Speech - Language Pathology for graduate students, and continuing education opportunities for professionals.

Undergraduate level: Our goal is to recruit and retain highly capable, academically qualified, broadly educated individuals from a variety of backgrounds. They will be educated to be: knowledgeable about culturally diverse groups of all ages, especially as they exist in an urban environment, 2) critical thinkers, and 3) well-prepared for graduate study in communication disorders.

Graduate level: Our goal is to provide the highest quality instruction, laboratory experiences and clinical practica to prepare students to function competently as speech-language pathologists in all professional settings. Graduates of the program will meet eligibility requirements for licensure by the state of Texas and certification by the American Speech-Language-Hearing Association. Graduates of the program will be prepared to pursue a terminal degree in Communication Sciences and Disorders or a related field.

Goal 2: Scholarship

The scholarship component of our mission consists of fostering an environment that encourages and supports students and faculty to participate in scientific inquiry. The research activities will increase basic and applied knowledge in the areas of normal and disordered speech, language, and hearing sciences.

Goal 3: Service

The goal of the service component is to provide high quality speech, language and hearing services to the community. Services will be provided on the University of Houston campus and at community outreach centers to individuals from all cultures, ages, and abilities.

The University of Houston is accredited by the Southern Association of Colleges and Schools (SACS), and the UH graduate program in ComD is accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA). The standards for accreditation can be found in Appendix G.

FACULTY AND STAFF

Lynn M. Maher, Ph.D. CCC-SLP. Professor and Department Chair. Dr. Maher is Professor and Chair of the Department of Communication Sciences and Disorders at the University of Houston. Dr. Maher has faculty appointments at Baylor College of Medicine, Rice University and the University of Oslo, Norway. She is a Research Health Science Specialist at the Michael E. DeBakey VA Medical Center, Houston and an Investigator in the VA Brain Rehabilitation Research Center of Excellence in Gainesville, FL. Her research interests, funded by the NIH and previously by the VA Rehab R & D, are in the understanding and rehabilitation of aphasia and related disorders.

Margaret Lehman Blake, Ph.D. CCC-SLP. Associate Professor and Graduate Program Coordinator. Dr. Blake received her master's degree from Arizona State University and her doctorate from the University of Pittsburgh. She completed a post-doctoral fellowship at the Mayo Clinic. Dr. Blake teaches undergraduate and graduate courses in disorders of communication and cognition in adults. Her primary research interests are cognitive-communication disorders due to right hemisphere brain damage and mild traumatic brain injury. In addition to serving as graduate program coordinator she is one of the graduate advisors.

Melissa Bruce, MS CCC-SLP, BRS-FD. Clinic Director. Melissa Bruce has 30 years of clinical and teaching experience. Ms. Bruce began her clinical teaching career at the University of Houston, and after having been Clinic Director at the University of Vermont for eleven years, she returned to the University of Houston in 2007, where she oversees the clinical program, teaches the graduate course in fluency disorders and directs the Fluency Specialty Clinic. Ms. Bruce has presented locally, regionally, and nationally in the areas of family-centered service delivery, clinical training, and stuttering intervention. She is an ASHA Fellow, a Board Certified Fluency Specialist and Mentor, and a charter member of the Lidcombe Program Trainers Consortium.

Ferenc Bunta, Ph.D., Assistant Professor. Dr. Bunta received his Ph.D. from Arizona State University, Department of Speech and Hearing Science and completed a postdoctoral fellowship in the Department of Communication Sciences and Disorders at Temple University with a joint appointment in the Bilingual Language Laboratory and the Eleanor M. Saffran Center for Cognitive Neuroscience. His research focuses on bilingual and cross-linguistic phonological acquisition. Dr. Bunta has taught courses on phonetics, phonology, speech and language acquisition, and speech science. He serves as one of the graduate advisors.

Laura Cizek, MA CCC-SLP. Clinical Assistant Professor. Ms. Cizek teaches the undergraduate Clinical Procedures course. She also supervises graduate students at the University Speech, Language and Hearing Clinic: A United Way Facility. Her experiences include supervision as well as diagnosis and treatment of children and adults with various speech and language differences and disorders.

Stephanie Daniels, PhD, CCC-SLP. Visiting Associate Professor Dr. Daniels received her Ph.D. from Louisiana State University. She is a research speech pathologist at the Michael E. DeBakey VA Medical Center and has a faculty appointment at Baylor College of Medicine. Dr. Daniels is a Board Recognized Specialist in Swallowing and Swallowing Disorders. Her research, funded by the Department of Veterans Affairs, is focused on neurogenic dysphagia. She teaches the graduate course in dysphagia and provides supervision in adult communication disorders. She serves as one of the graduate advisors.

Martha Dunkelberger, Ph.D. CCC-SLP. Clinical Assistant Professor and Undergraduate Program Coordinator. Dr. Dunkelberger earned her master's degree from Governors State University near Chicago, IL and her PhD from the University of Houston College of Education. She joined the University of Houston Department of Communication Sciences and Disorders in 1997 following eight years of clinical practice. Her research interests concern the developmental progression of phonological systems and literacy skills in preschool and school aged children. Dr. Dunkelberger is a recipient of a 2011 UH Teaching Excellence Award.

Monica McHenry, Ph.D. CCC-SLP. Associate Professor and Post Bachelors Program Coordinator Dr McHenry received a master's degree from Pennsylvania State University and a Ph.D. from the University of Washington. She teaches an undergraduate research seminar in the disciplines and graduate courses in voice, motor speech disorders and research. Her areas of interest include motor speech disorders and the professional voice. Dr. McHenry was previously employed at the Transitional Learning Community in Galveston.

Jennifer Meeks, Au.D. CCC-A, F-AAA. Staff Audiologist for the University Speech, Language and Hearing Clinic: A United Way Facility. Dr. Meeks provides diagnostic and rehabilitative audiological services, including complete audiological evaluations, hearing aid fitting and aural rehabilitation. She develops and implements clinical procedures and marketing programs. In addition she supervises graduate students for hearing screenings at City of Houston agencies.

Marla Moreno-Jordan, BS. Undergraduate Academic Advisor for Communication Sciences and Disorders and American Sign Language Interpreting. Ms. Moreno-Jordan received her BS in Psychology from University of Houston Clear Lake with a particular interest in adult learning styles. Formerly, she was an Instructional Assistant for the School of Business at the University of Houston-Clear Lake.

Byron Ross, Ph.D., CCC-SLP, Clinical Assistant Professor. Dr. Ross earned his M.S. from the University of Central Arkansas, and his Ph.D. from the University of Nebraska. His interests include school aged children, adolescents, and young adults with autism spectrum disorders. He also has an interest in assessment and intervention using augmentative/alternative communication with individuals with severe disabilities.

Michelle Ivey, Ph.D., CCC-SLP Clinical Assistant Professor. Dr. Ivey received her bachelor and master's degrees from the University of Cincinnati and her doctorate at Georgia State University. She has over 18 years of pediatric therapy experience with a specialty in research and therapy with children who have social pragmatic language disorders such as autism. She is a Clinical Educator in the University Speech, Language and Hearing Clinic: A United Way Facility, and has taught courses in language development and pediatric language disorders.

Janet Eckert, MS CCC-SLP, Externship Coordinator & Clinical Educator. Ms. Eckert earned her B.A. from Baylor University, and her M.S. from Texas Woman's University. Her experience primarily includes public schools and private practice, specializing in the assessment and treatment of the preschool population. Additionally, she is a Hanen certified facilitator addressing both family focused programs for parents and early childhood educators.

ADJUNCT FACULTY

Ingrid Bowling, MA CCC-SLP. Clinical Educator Ms. Bowling is a Clinical Educator at the University Speech, Language and Hearing Clinic: A United Way Facility. She also supervises graduate students at New Horizon Head Start. She has experience working in early childhood intervention, private practice, and public schools. Her areas of interest are pediatric speech and language disorders and adult accent modification.

Rebecca Gonzalez, MS CCC-SLP, Clinical Educator. Ms. Gonzalez is a part-time Clinical Educator at the University Speech, Language and Hearing Clinic. Her area of expertise is the evaluation and treatment of speech and language disorders in children and adults who are culturally and linguistically diverse. Ms. Gonzalez' experience comes from working in the public schools and private practice. In addition, she served on the TSHA Financial Advisory Committee from 2008-2011 and participates on TSHA's CLD Task Force.

Dena Linda, MA CCC-SLP. Clinical Educator. Ms. Linda is a part-time Clinical Educator in the Language Learning Group at the University Speech, Language and Hearing Clinic: A United Way Facility. She has

experience working with Alternative and Augmentative Communication Systems in addition to working with the preschool population.

Carmen McGee, MA CCC-SLP, Clinical Educator Ms. McGee is a part-time Clinical Educator in the University Speech, Language and Hearing Clinic: A United Way Facility. . She is experienced in the evaluation and treatment of child language, articulation, and literacy disorders.

Patricia Reed, M.A. CCC-SLP. Clinical Educator Ms. Reed is a part-time Clinical Educator at the University Speech, Language and Hearing Clinic: A United Way Facility. . She is working in the fluency specialty Clinic. The majority of her experience is in public schools working with all ages 3-21. Areas of interest include fluency, language disorders and social communication.

Liza A. Sánchez, M.A.; CCC-SLP. Clinical Educator. Mrs. Sánchez is a part-time bilingual clinical supervisor at the University of Houston Speech, Language, and Hearing Clinic. She primarily serves bilingual populations in local school districts in the area of assessment and also supervises bilingual Clinical Fellows annually in various school districts.. She has extensive experience working with culturally and linguistically diverse populations from ages 3-18 in public schools. Mrs. Sánchez has worked for 10 years with Bilingual Therapies where she is also the Gulf Coast Team Leader for various bilingual clinicians working in that geographical area. Her areas of interest are Spanish-English bilingual learners, speech and language disorders in bilingual populations, and language differences in children acquiring a second language.

Stefanie Trachtenberg, MA CCC-SLP. Clinical Educator. Mrs. Trachtenberg is a part-time clinical educator at the University of Houston Speech, Language, and Hearing Clinic and at Neighborhood Centers, Inc. (NCI) outreach settings for the University. She has experience working in public school, private school, and private practice settings. Her primary area of interest is treatment of speech and language disorders in preschool and school-age populations.

EMERITUS FACULTY

Martin Adams, Ph.D. CCC-SLP. Professor Emeritus. Dr. Adams is former Chair of the program in Communication Sciences and Disorders, with an area of expertise in fluency.

Lynn S. Bliss, Ph.D. CCC-SLP. Professor Emeritus. Dr. Bliss was chair of the Communication Sciences and Disorders Department from 1997-2006. Dr. Bliss' research focuses on the oral personal narratives of children with language impairments. She has published articles on the cultural influences of narration. She is the author of two books, *Discourse Impairments* and *Narrative Patterns*. Dr. Bliss is an ASHA Fellow and was a Fulbright Scholar on the Island of Cyprus.

Susann Dowling, Ph.D. CCC-SLP. Professor Emeritus. Dr. Dowling taught in the areas of anatomy and physiology, phonology and supervision. Her research focused on phonological disorders, the supervisory process and clinical training. Dr. Dowling is an ASHA Fellow, a teaching award winner and recipient of the Supervisor of the Year Award.

SCHOLARSHIPS AND TRAINEESHIPS

Martin Adams Endowed Scholarship

This scholarship honors a previous head of the program in Communication Disorders. Award is for a UH post-bachelors student who plans to attend graduate school in Communication Sciences and Disorders at the University of Houston.

- **Eligibility:** UH ComD Post-bachelor's students who apply to the UH ComD graduate program will be considered for this scholarship.
- **Award amount:** \$500
- **Application deadline:** Feb 15th (with on-line admission)
- **Award date:** August of first semester in graduate program.

Genevieve Arnold Scholarship

This scholarship honors Dr. Genevieve Arnold who developed the University of Houston's program in Communication Disorders over thirty years ago. It is awarded to a graduate student.

- **Eligibility:** Students applying to the ComD graduate program.
- **Award amount:** \$1,000
- **Application deadline:** February 15th (with on-line admission)
- **Award date:** August of first semester in graduate program.

The Beck Endowed Fellowship

This honors Drs. Jack and Tina Bangs. Four recipients are identified each year. Recipients commit to work a minimum of 10 hours a week for 6-months (January through June or July through December) at a local community clinic under the supervision of a UH Clinical Educator, Reappointment can be made one time. Selection of awardees is based on academic and clinical skills. Fluency in Spanish is an advantage.

- **Eligibility:** Applicants must have completed at least one semester of clinic at the UH Speech, Language & Hearing Clinic.
- **Fellowship amount:** \$14.00 per hours, minimum of 10 hours a week for six months, not to exceed \$4,000 per fellow.
- **Responsibilities:** Recipient works 10 hours/week for 6 months in a local community clinic. This placement fulfills the requirement for a school/child externship.
- **Application deadline:** April and October of each year. Application consists of a letter of interest and resume. Selected individuals will be interviewed for the position.
- **Award date:** January and July of each year.

The Tina E. Bangs Memorial Scholarship

The Bangs Memorial scholarship is awarded every other year to a graduate student interested in early childhood education. It honors the legacy of Dr. Bangs who was a strong advocate for young children with language and learning disorders.

- **Eligibility:** Students applying to the graduate program with an interest in child language and learning disorders.
- **Award amount:** \$2,500 for 2 years of graduate study.
- **Responsibilities:** In the first fall semester, the awardee must "volunteer" with the Language Learning Group (LLG) at the University Speech-Language-Hearing Clinic: a United Way facility. The awardee's spring semester clinic assignment will be the LLG. The awardee will then write a paper that will focus on an area of early childhood education, and incorporate their LLG experience.
- **Application deadline:** Nomination by Admissions Committee

- **Award date:** First semester in graduate program.

The Margaret C. Crabtree Scholarship

This scholarship honors Dr. Margaret C. Crabtree for her outstanding contributions to the field of Speech-Language Pathology. This scholarship is awarded to a graduate student who is committed to working in the public schools.

- **Eligibility:** Students who successfully complete the first semester of the graduate program and express desire to work in the public schools after graduation.
- **Award amount:** \$500
- **Application deadline:** Application and letter of intent are due around December 1
- **Award date:** March of first year in the graduate program: award announced at the TSHA Annual Convention (link to TSHA).

The University of Houston Communication Disorders Alumni Association Scholarship

This scholarship is funded by the Communication Disorders Alumni Association. The award is granted to a graduate student who demonstrates excellence in the Evidence-Based Practice Reports requirement.

- **Eligibility:** All students in the ComD Master's program
- **Award amount:** \$500
- **Application deadline:** Evidence-Based Practice Reports will be assessed in mid-Fall and mid-Spring each year.
- **Award date:** Graduation Reception in May.

Outstanding Graduate Student Clinician Award

This cash award (generally \$500) is given by the Houston Association for Communication Disorders (HACD) to recognize the achievements of a graduate student with remarkable clinical skills enrolled in the Communication Sciences and Disorders program at the University of Houston.

Selection Process

- UH faculty members in the Communication Sciences and Disorders Department make recommendations to the scholarship committee based on the student's diagnostic work, therapy planning and implementation, and related abilities
- The award is presented at the HACD May Awards Banquet.

HACD Scholarship Provided through the Texas Speech Language Hearing Foundation Endowment Fund

This cash award (generally \$1,000) is presented to a full time student currently enrolled in a graduate program in Communication Sciences and Disorders at either the University of Houston or Lamar University

Criteria for selecting the scholarship recipient shall include, but is not limited to the following:

- letters of recommendation
- academic excellence

- written statement of professional goals and how award will further academic & professional interest
- interview with the HACD Scholarship Committee

Selection:

- Selected by the HACD scholarship committee under the direction of the Awards Chairperson who will be appointed by the Vice President for Public Relations
- Presented at the TSH Foundation Banquet for the current year. In addition the recipient will be announced at the May HACD Awards Banquet

ASSISTANTSHIPS

Students interested in applying for an assistantship need to complete an application and turn it into Mr. Whitley. Applications are available on the ComD website in the financial aid section. Interviews may be required for some assistantship positions. Unless otherwise specified, positions are for 1 semester.

Clinical Teaching Assistants

At least two second year graduate students are selected to serve as assistants in the clinic. Students are selected on the basis of their clinical performance. The stipend is \$9/hour. Seven to ten hours a week are required.

Department and Clinic Assistants

Generally, 3-5 assistants are needed to support departmental and clinical work, such as manning the front desk and assistants for the post-bachelor's, undergraduate, and graduate program coordinators. The stipend is \$9/hour. Time commitment varies, with a maximum of 10 hours per week.

Academic Teaching Assistants

Generally 2-6 teaching assistants are needed each semester to conduct labs and tutoring sessions for undergraduate courses. Students are selected by individual faculty. The stipend is \$9/hour. Time commitment varies with a maximum of 10 hours per week.

Research Assistants

Generally, 2-6 research assistants are needed to work on specific research projects conducted by faculty. Students are selected by individual faculty. Stipends and time commitments vary, with a maximum of 10 hours per week.

University Funds. The University offers a variety of financial assistance packages to undergraduates and graduates. For further information, contact the Student Financial Services Office at (713) 743-9090. <http://www.uh.edu/admissions/financial/graduate/>

PREREQUISITES FOR THE GRADUATE PROGRAM

Successful completion of the graduate program requires satisfactory acquisition of the knowledge and skills set forth by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (See Appendix G). To meet these standards necessitates acquisition of knowledge in basic communication science and processes typically achieved in an undergraduate program in Communication sciences and Disorders. The following classes or their equivalent must be obtained prior to beginning of the graduate program:

ComD 2338 Phonetics
ComD 2339 Speech and Language Development
ComD 2376 Anatomy & Physiology for Communication
ComD 3381 Fundamentals of Audiology
ComD 3375 Speech & Language Disorders in Children
ComD 4385 Speech Science
ComD 4489 Clinical Procedures

As part of the standards for certification, the American Speech-Language Hearing Association also requires coursework in college level math, biological science, physical science, and behavioral science.

In addition, ComD 4382 Management of Individuals with Hearing Impairment or its equivalent must be taken prior to the completion of the graduate program if it was not taken at the undergraduate level.

Incoming graduate students must complete 25 hours of guided observation under the direction of an ASHA certified speech-language pathologist, and must pass a speech, language and hearing proficiency exam prior to the start of clinic.

Students who are returning after a seven-year or greater lapse in their education will need to take the following classes (or their equivalents) before applying to graduate school:

- ComD 2339 – Speech and Language Development
- ComD 3375 Speech & Language Disorders in Children
- ComD 4382 – Management for Individuals with Hearing Impairment
- ComD 4385 – Speech Science
- ComD 4489 – Clinical Procedures

Applicants with a bachelor's degree in a field other than Communication Disorders must complete a post bachelors (PB) program and may apply for admittance to the graduate program only after completing at least one semester of PB coursework. More information on the UH PB program can be found on the UH ComD website.

Applicants should review the eligibility requirements provided in Appendix I.

PETITIONING FOR GRADUATE CREDIT

Six credits of graduate course work that has been taken at a post-baccalaureate or undergraduate level can be petitioned for graduate credit. Written approval must be obtained by the graduate advisor and Chair of the department. A student may submit a written petition to have an extra three credits transferred by midterm of their first semester. The faculty will consider and vote on such petitions and the decision made by the faculty is final.

ACADEMIC ADVISING

There are specific coordinators and advisors for each of our programs. Dr. Dunkelberger is the Undergraduate Coordinator and Ms. Marla Moreno is the Undergraduate Advisor. Dr. Blake is the Graduate Coordinator. Drs Ross, Blake, Bunta & Daniels are the graduate advisors. Ms. Cizek is the Coordinator and Advisor for the Post Bachelor's program. All advisors will have set office hours which will be posted.

Graduate students are required to attend orientation prior to their first semester to obtain initial information and orientation to the ComD programs and professions. You will be assigned to an advisor prior to orientation. Once each semester there will be both a mandatory group advising meeting and individual advising meetings. **It is the obligation of every graduate student to meet with his/her advisor at the beginning of each semester.** Individual advising sessions must be completed by the end of the third week of each semester. Graduate students are also required to attend periodic graduate student meetings. Additionally, graduate students are expected to monitor their progress through the graduate program via the Student Assessment and Management System (SAMS), a web-based on-line tracking program designed for this purpose.

All students complete a clinic assignment in each semester they are enrolled in the graduate program. (With the exception of part-time students, who have one "free" summer semester.) Full-time students take 11 required content courses (total of 28 credits), two elective content courses (total six credits) and a minimum of five practicum courses (15 credits) for a total of 49 credits of graduate study.

Part-time students take 11 required content courses (total of 28 credits) and two elective content courses (total six credits). Clinic loads for part-time students do not increase as rapidly as for full-time students. Because of the smaller clinic loads, part-time students complete 7 practicum courses.

ComD offers 2-3 electives each in the spring and the summer semesters in conjunction with the Specialty Tracks. See below for more information about tracks and electives. .

In addition to their coursework graduate students must: (a) complete a minimum of 25 guided observation hours and 375 clinical practicum hours supervised by an ASHA certified Speech-Language Pathologist; (b) pass a minimum of 1 (thesis students) or 2 (non-thesis students) Evidence Based Practice Report Activities; and (c) pass a comprehensive exam or successfully complete a master's thesis. A graduate program checklist is available in the back of this handbook for your convenience.

SPECIALTY TRACKS

Students in the graduate program have the option to complete one of three Specialty Tracks. Two are clinical specialty tracks and the third is a research track. Specialty Tracks do not take the place of the core graduate curriculum, but rather they fulfill the 6-credit elective requirement. These tracks facilitate additional, focused knowledge and skills in...

- (1) Medical Speech-Language Pathology,
- (2) Pediatrics or
- (3) Research

The specialty track credentials must be earned through coursework, clinic assignments, and benchmark activities. These will be compiled into a portfolio. Specialty track status is maintained through performance in relevant classes, clinic assignments, and completion of the benchmarks. Details about the credentialing process and activities will be provided during the Fall 2012 semester.

Students who decide not to complete a specialty track complete any 2 elective courses. These may be the electives offered in ComD, or graduate-level courses offered by other departments at UH (courses outside ComD must be approved by your advisor and the department chair).

Students who complete a thesis will not have a specialty track, as their thesis credits take the place of the 6 elective credits. These students develop a specialty in research and the area in which they are completing their research project.

Electives: Priority for registration in Spring semester elective courses is given to 2nd year students. If space is available in the courses, then 1st years can be considered. First year students generally are advised to begin taking electives during their first summer in the program.

SPECIAL NEEDS

If you are a person with a disability and you need accommodations to perform successfully in the program, you are required to contact the Center for Students with DisAbilities, (713) 743-5400. The Center will evaluate each student and identify his or her needs. Appropriate paperwork related to accommodations must be given to each instructor at the beginning of each semester for which you are requesting accommodations. Accommodations are negotiated between the person making the request, the instructor and the Center for Students with DisAbilities.

ComD RULES FOR COPYING AND PRINTING

A copier is available for student use in the student computer lab. Students are not allowed to use the faculty/staff copier in the mail room except for jobs assigned by a faculty/staff as part of an assistantship.

A printer is available for student use in the student computer lab. Students are required to supply their own paper for printing. The department provides the toner. Students are not allowed to print materials for personal (non-ComD) use. Large printing jobs, such as class handouts or articles, should be done either at home, or at the library.

Library Printing Information: Each semester (including summer), UH students will receive a \$25.00 printing credit on their Cougar 1Card. This credit will allow you to print up to 500 single-sided pages or 333 double-sided (duplex) pages per semester at no charge. Once the \$25 printing credit has been used, additional printing is only \$0.05/pg (\$0.075/pg duplex), debited from your Cougar 1Card Flex Account. See <http://info.lib.uh.edu/services/computers-printing> for more information.

SOCIAL MEDIA POLICY

“Social media” is an umbrella term that encompass the various activities that integrate technology, social interaction, and content creation. Social media encompasses many technologies and forms, such as blogs, wikis, photo and video sharing, podcasts, social networking, mashups, and virtual worlds.

Students should use caution and good judgment when posting information to electronic communications and social networking sites, both personal and those that are related to the University of Houston and/or the Department of Communication Sciences and Disorders. Per HIPAA regulations, no information, pictures, videos or descriptions of clients/families can be posted on social media sites. Violation of HIPAA regulations may result in appropriate disciplinary action being taken by the University against the student. Please visit the following link and become familiar with the University social media policy. Sections 3 and 4 were designed specifically for students. <http://www.uh.edu/policies/social-media/index.php>

UH is committed to fostering a learning environment that allows for freedoms of speech and expression in accordance with the First Amendment to the U.S. Constitution (See MAPP 13.01.01 - Freedom of Expression at <http://www.uh.edu/mapp/13/130101.pdf>). Please be aware, however, that UH will not tolerate any activity or posting that loses First Amendment protection such as any unlawful, defamatory, or obscene activity or posting. UH reserves the right to remove any such posting without notice.

Currently many employers and extern supervisors review Facebook and other social media pages as part of the screening process. A good practice is to make sure the persona you present online is one that you are proud to share with current faculty and future employers.

Finally, please use social media responsibly. Remember, there is no such thing as a “private” social media site. A good rule of thumb is to assume that anyone, anywhere, can get access to anything you put on the internet at any time, no matter what privacy settings you use. This includes fellow students, UH faculty and staff, externship supervisors, and prospective employers.

COMPLAINT POLICY

Complainants are expected to file complaints at the appropriate level so that all due process procedures may be followed.

- Students should take issues regarding grades and class policies to the course instructor/clinical educator first. It is always important to begin with the “offending person” so that she or he can have the opportunity to rectify the situation or to provide an explanation or rationale. If the student is not satisfied after talking with the “offending person,” the student may appeal to the next higher level within the administrative structure. For academic issues that would be the Graduate Program Coordinator, and for clinic issues that would be the Clinic Director. If the student is still not satisfied, the student may appeal to the Department Chair. If the issue continues to be unresolved, the student may file a

formal grievance with the department. The details of the formal grievance process for the Department of Communication Sciences and Disorders can be found in Appendix B of this handbook. If the student is not satisfied with the outcome of the grievance process, the student may file a formal grievance with Dean of the College of Liberal Arts and Social Sciences (CLASS). Information on the CLASS formal grievance policy can be found on the CLASS website: http://www.class.uh.edu/advising_grad_gpolicy.html The Dean and the Provost are final levels of appeal at the University.

- A complaint concerning an off-campus externship supervisor should begin with that person. Again, this is to give the “offending person” the opportunity to rectify the situation or to provide an explanation or rationale. If you still have a concern after discussing it with the “offending person,” then you should direct your complaint to your externship faculty liaison or to the Externship Coordinator, and barring satisfaction at that level, to the Graduate Program Coordinator and/or Department Chair of ComD.
- Other non-grade related complaints or suggestions should be directed to the Chair of ComD. There is also a suggestion box in the ComD computer lab for anonymous complaints or suggestions.
- Complaints about the program related to the Standards of Accreditation should be made in writing to the Council on Academic Accreditation in Audiology and Speech-Language Pathology.
 - Such complaints must meet the following criteria:
 - be against an accredited graduate education program or program in candidacy status in audiology and/or speech language pathology,
 - relate to the Standards for Accreditation of Entry-Level Graduate Education Programs in Audiology and Speech Language Pathology,
 - clearly describe the specific nature of the conduct being complained about, which must have occurred at least in part within 5 years of the date the complaint is filed, the relationship of the complaint to the accreditation standards, and provide supporting data for the charge.
 - Procedures for filing a complaint with the CAA can be found at: <http://www.asha.org/academic/accreditation/accredmanual/section8.htm#complaint1>

WITHDRAWAL FROM PROGRAM

Upon beginning the program, continuous enrollment is expected for the fall, spring and summer semesters until the degree is completed. Students have five years to complete all the requirements for the master’s degree. Leaves from the program for medical or other exceptional reasons must be submitted in writing to the Graduate Program Coordinator and approved by the faculty and the college. Requests are considered on an individual basis. Graduate and professional students who receive medical withdrawals must provide medical documentation indicating they are able to return, and obtain permission from their college Dean to enroll again at the University of Houston.

ACADEMIC PROGRESS

The UH Graduate Catalogue (<http://www.uh.edu/graduate-catalog/>) states: *A satisfactory rate of progress toward the degree is required throughout a student's enrollment. A department may terminate enrollment at any time if the rate of progress is not satisfactory. A student whose enrollment is terminated will be notified, with an explanation, in writing by the chair of the department of the major. Copies of this notice and explanation will be sent to the dean of the student's college.* <http://www.uh.edu/graduate-catalog/planning-the-graduate-program/termination-enrollment/index.php>

A minimum grade point average (GPA) of 3.00 (B) for all graduate courses attempted is required for all graduate degree programs at the University of Houston. Failure to maintain a 3.00 GPA may result in a warning, probation, suspension, loss of financial support, or dismissal. Students with a conditional admission status must earn a minimum GPA of 3.00 during the first 12 hours of graduate level course work attempted at the University of Houston. For more information on the UH Graduate School's requirements please see <http://www.uh.edu/graduate-catalog/policies/summary-of-university-regulations-and-requirements/index.php>

In UH ComD, satisfactory performance is defined as grades of B- or higher for academic courses and B or higher for clinic assignments. Any ComD clinic course for which a grade of B- or lower is earned must be repeated. Additionally, students will not earn clinical hours obtained during a clinic course if the final grade is B- or lower.

Graduate students who earn 2 or more unsatisfactory grades will be dismissed from the program. This can be any combination of academic and/or clinic courses (e.g., two C's in academic courses, two B-'s in clinic courses, or one C in an academic course and one B- in a clinic course).

PETITIONING FOR REINSTATEMENT

If a student is dismissed from the graduate program, (s)he has the right to petition the faculty to reverse the decision. A written petition must be submitted to the faculty within approximately three weeks of the initial notice (a specific deadline will be given in the dismissal letter, so that a decision may be made prior to the beginning of the subsequent semester). Ideally, the petition should contain the following: the student's view of what led to his/her poor performance, a request to be re-admitted to the program, and what changes the student will make to improve performance. The petition will be discussed and voted on by a majority of the faculty. Each petition is considered individually. Conditions for reinstatement, if approved by the faculty, will be determined on an individual basis. The student will be informed of the faculty's decision in a written letter. If the student is not satisfied with the decision, (s)he may file a formal grievance, following the procedures described in Appendix B.

FERPA

The Family Education Rights and Privacy Act of 1974, commonly known as FERPA, is a federal law that protects the privacy of student education records. Students have specific, protected rights regarding the release of such records and FERPA requires that institutions adhere strictly to these guidelines. FERPA restricts faculty and staff from the releasing student information to parents. This information often surprises parents since they are paying college tuition. If you would like to allow your parents access to your records refer to the following link:

THESIS OPTION

Graduate students have the option of completing a Master's Thesis under the direction of one of the faculty members. Students who are considering a Master's Thesis must obtain consent from a faculty member who is willing to act as the thesis committee chair. Students who opt to complete a thesis must register for six thesis credits, and must be registered for thesis credits in the semester their thesis is completed and defended. Students who complete a thesis do not have to take elective courses (the 6 thesis credits take the place of the 6 credits of electives). They are not required to complete the second and fourth semester Evidence Based Practice Reports (described below), and they are exempt from taking the comprehensive examination. Guidelines for completing a Master's Thesis can be found in Appendix C of this handbook.

EVIDENCE BASED PRACTICE REPORTS

All graduate students complete at least two formative Evidence Based Practice Reports (EBPRs) as part of their clinical training. These are scheduled for the 2nd and 4th semesters of the program for Full-Time students, and in the 5th and 7th semesters for Part-Time students. Instructions for how to complete EBPRs and the grading rubrics used for the written paper and oral presentation are distributed in a mandatory group advising meeting at the beginning of the semesters in which they are required. Progress through the EBPR requirements is maintained in SAMS.

CERTIFICATION of CLINICAL COMPETENCE-SPEECH-LANGUAGE PATHOLOGY

The complete list of standards for the Certification of Clinical Competence-Speech-Language Pathology may be found in Appendix F. These standards have been established by the Council for Clinical Certification.

The achievement of these standards may be summarized as follows:

Your knowledge of the field is not assumed based on acquiring a specified number of courses or credits in specific areas. Rather, you need to obtain knowledge that has been reflected in specific learning markers (student learning outcomes) for each of the standards.

Every required course that you take will specify the standards and learning markers that will be addressed. You will be assessed by your ability to meet these goals through a variety of assessment tools (e.g., exams, quizzes, papers, presentations).

If you do not demonstrate knowledge of a learning marker, a remediation plan will be developed for you so that you can demonstrate successful acquisition of the learning marker. Each remediation plan is developed on an individual basis. Please see the Remediation Plan section on page 18 for a more complete discussion.

UH ComD uses the Student Assessment and Management System (SAMS) software program to track students' progress in terms of acquisition of knowledge and skills as well as clinical hours. You are expected to monitor progress of your learning via SAMS, and to keep your contact information updated in SAMS, as it is often used for emailing advising

notices. An electronic record of your learning marker form will be kept in the department for the duration of your master's program and for ten years following your graduation. The SAMS web address is: <http://sams.slpasoft.com/>

Skills Assessment:

A Practicum Evaluation Form, listing the knowledge and skills necessary for completion of the graduate program, will be used for clinical and externship practicum experiences. Specific details relating to expectations, documentation of experiences and acquisition of skills can be found in the Clinic Handbook.

An electronic record of skill acquisition is maintained to chart your progress throughout the masters program using SAMS. It is your responsibility to monitor your skill acquisition and clinic hour accrual in SAMS, and to work with the Clinic Director to obtain the necessary experiences for certification.

Knowledge and Skills Acquisition (KASA) Summary Form for Speech-Language Pathology:

Students who are applying for certification in Speech-Language Pathology must use the KASA to track their acquisition of knowledge and skills required for ASHA certification. UH ComD uses SAMS to track progress of knowledge and skills acquisition. The learning markers that indicate the Knowledge and Skills required for graduation and certification are listed in SAMS. At the conclusion of your program, the chair of the department will review your KASA and complete the Verification by Program Director page of the ASHA application for certification.

You will be able to print a copy of your completed KASA form via SAMS. BE SURE TO KEEP THIS FORM FOR FUTURE REFERENCE. You will NOT have to submit the entire KASA form to ASHA when you apply for certification.

The Verification by Program Director page, appropriately completed and signed, must accompany any application submitted for ASHA certification.

Formative Assessment:

Your knowledge and skills must be assessed throughout your graduate education. In some cases, full knowledge of a learning marker may not be achieved until all of the classes related to that learning marker have been completed. Partial completion of a learning marker, i.e. learning that is in progress, is indicated by a yellow triangle next to that knowledge marker. Evidence Based Practice Reports (see page 16) are another means of formative assessment related to the application of your knowledge acquisition to clinical performance.

Summative Assessment:

This type of assessment taps the comprehensive knowledge you have obtained throughout your graduate education.

Your ability to write a thesis or to pass an internal comprehensive examination is the summative assessment that will be used in this program. More information concerning Comprehensive

Exams can be found on page 24. You will receive further information about preparation for the Comprehensive Exam as you near the final semester of your program.

Remediation Plans:

Students who do not initially demonstrate acquisition of knowledge or skills in academic coursework, clinic assignments, practica, or other graduate program activities, will need to complete a remediation plan to demonstrate acquisition of the specified learning markers.

Academic coursework: Students who do not demonstrate adequate knowledge of specific learning markers on coursework (including, but not limited to, exams, quizzes, presentations, written work) will be assigned a remediation plan by the instructor. The plan is constructed by the instructor, and may include an oral and/or written component. Completion of the remediation is necessary for learning markers to be met and signed off in SAMS. Completion of remediation plans will not change a student's grade. In most cases, remediations must be completed by the end of the semester in which the course is taken. When this is not possible (e.g., if a student does not demonstrate knowledge acquisition on a final exam or project), the instructor will set a deadline within the first few weeks of the following semester. Students cannot be assigned a client until all learning markers for coursework related to that disorder are met (e.g., if a student has an outstanding remediation for the aphasia course, he/she cannot be assigned a client with aphasia until the remediation is completed).

Clinical Practicum: Remediation Plans are required for any student who earns a grade below a B in ComD 7391 or 7392. The following semester of practicum will be a probationary semester. A Clinical Remediation Plan will be developed by the Clinical Educator(s) who assigned the grade below a B. Specific behavioral objectives reflecting skills that need to be developed will be outlined with recommended remediation strategies. At the beginning of the probationary semester, the student's clinical educator(s) will be provided with the remediation documentation and a remediation plan tracking sheet, to be reviewed weekly with the student. The student will receive written feedback on his/her progress on the remediation plan at the midterm conference, and the end-of-semester conference. All objectives of the remediation plan must be met before the end of the semester in order to successfully fulfill the remediation plan. Inconsistent performance of the targeted skills will not satisfy the requirements of the remediation plan.

Evidence-Based Practice Reports: Remediation plans for failed portions of the EBPR activity will be constructed individually depending on the area(s) failed by the student (e.g., knowledge of a disorder or treatment of the disorder, writing issues, etc). Remediation plans must be completed before the subsequent EBPR can be assigned. If a student fails the third semester EBPR, the resulting remediation will be to complete a 4th semester EBPR.

Comprehensive Exam: Remediations will be required for any student who fails one or more content area(s) of the comprehensive exam. Remediations will focus on the failed area(s), and will be constructed by the relevant instructor. Remediations may involve an oral and/or written component, and must be completed prior to graduate exit interviews. A student who fails 3 or more content areas will be required to re-take the comprehensive exam in the following semester, which may involve the student staying for an additional semester of graduate school. If this occurs, the student will be required to enroll in at least 1 credit of coursework in addition to re-taking the comprehensive examination to be in compliance with university requirements for graduation.

UNIVERSITY *of* HOUSTON
DEPARTMENT of COMMUNICATION
SCIENCES and DISORDERS

Full Time Graduate Curriculum

First Year

Fall 1

ComD 6261 - Research Methods
ComD 6372 - Language Disorders
ComD 6334 – Aphasia
ComD 7322 - Phonological Disorders
ComD 7391 CLINIC I

Spring 1

ComD 7221 - Fluency
ComD 6326 - Motor Speech
ComD 6321 – Dysphagia
ComD 6230- Autism
ComD 7391 CLINIC II
Evidence based reports 1

Summer 1

ComD 7381/7383 Elective*
ComD 7391 Clinic III

Second Year

Fall 2

ComD 6387 – Voice

ComD 6398 - Cognitive Disorders
ComD 7392 Externship 1
Evidence based reports 2

Spring 2

ComD 7381/7383 Elective*
ComD 7170 Grad Seminar
Comprehensive Exams
ComD 7392 Externship 2
Evidence based reports 3 (as needed)

Summer 2

(as needed to complete clinical experiences, thesis, electives, outstanding remediations, etc.)

*Students must take 6 credits of elective. ComD electives are offered in the spring and summer semesters.

Part Time Graduate Curriculum

1. Students who begin part-time cannot graduate earlier than the spring semester of their third year. Selecting the part-time program entails enrolling in and completing more clinic experiences (7 semesters) than the full-time program (5-6 semesters).
2. Once a student has declared part-time status, that status cannot be changed back to full time at any point for the remainder of the program.
3. Part-time students will not have to enroll in clinic their 1st summer in the program. During this semester they have the option to take an elective, but would not be required to take any classes.
4. The workload in the part-time program will increase in the first to second years, and second to third years. While students will take no more than 2 academic courses in any semester, the number of client contact hours increases each year (from clinic I to II to III, to externship). The final 2 semesters will require full-time externship placements or equivalent (i.e., 30-40 hour/week workload).
5. Students in the part-time program, just as in the full-time program, need to make graduate school their priority. Although the course & clinic loads are reduced, students need to be flexible in the times they are able to spend at UH, particularly for clinic scheduling. The more restrictive a student's schedule, the fewer clients s/he can be assigned, and the less variety s/he is likely to get in the program. Given current client scheduling procedures, it is very difficult to place students who are not available multiple full days (e.g., Mondays and Tuesdays).
6. Due to the extended nature of the part-time program, many students will earn the required 375 client contact hours and all required competencies before they are finished with their final semester in the program, or before they have enrolled in, or finished their final externship placement. Despite this, students are not allowed to graduate earlier than the spring semester of their 3rd year, and are not allowed to have a shortened spring externship.
7. Requests for leaves of absence must be formally filed with your graduate advisor and are considered on a case-by-case basis. Leaves may result in the extension of the program by one or more semesters.

First Year

Fall 1

ComD 7322 - Phonological Disorders
ComD 6372 - Language Disorders
ComD 7391 CLINIC I

Spring 1

ComD 7321 - Fluency
ComD 6230- Autism
ComD 7391 CLINIC I

Summer 1

0

Second Year

Fall 2

ComD 6334 Aphasia
ComD 6261 - Research Methods
ComD 7391 Clinic II

Spring 2

ComD 6321 - Dysphagia
ComD 6326 - Motor Speech
ComD 7391 Clinic II
Evidence based report 1

Summer 2
7382/7383 Elective*
ComD 7391 Clinic III

Third Year

Fall 3
ComD 6387 - Voice
ComD 6398 - Cognitive Disorders
Evidence based report 2
Externship 1

Spring 3
Externship 2
ComD 7381/7383 Elective*
Comprehensive Exams
ComD 7170 Grad Seminar

*Students must take 6 credits of elective. ComD electives are offered in the spring and summer semesters.

Dropping Courses

UH ComD Graduate program is designed to prepare you academically for clinical experiences. It is difficult to insert a dropped course later into the program. Withdrawal from a course may result in extension of the graduate program. The University policies concerning dropped courses are as follows:

- The last day to drop or withdraw from a course without receiving a grade is before the Official Reporting Day (ORD). Please see the academic calendar for the exact date. www.uh.edu/academics/catalog/general/academic_calendar.html.
- The last day to drop or withdraw from a course with a grade of W or U (in the case of S/U grade) will be the last day to drop a course for each semester (i.e. four weeks prior to the last class day of a fall or spring semester, six class days prior to the last class day of summer I, II, or IV, and three weeks prior to the last class day of summer III). Consult the academic calendar for specific dates, www.uh.edu/academics/catalog/general/academic_calendar.html.
- Enrollment in a course may be terminated by graduate students in one of the following ways:
 - An instructor may drop students through the last day for dropping courses for the following reasons: excessive absences; if the prerequisites or co-requisites for the course listed in the current catalog have not been met; or for causes which tend to disrupt the academic process (except those actions involving academic honesty which come under the jurisdiction of the Academic Honesty Policy).
 - Students may not receive a W for courses in which they have been found guilty of a violation of the Academic Honesty Policy. If a W is received prior to a guilty finding, the student will become liable for the Academic Honesty penalty, including F grades.

For more information on the University policy on dropping courses, visit:
<http://www.uh.edu/graduate-catalog/policies/dropping-courses/index.php>

CLINICAL PROGRAMS

ON-CAMPUS CLINIC

The University Speech-Language and Hearing Clinic: A United Way Facility is the training clinic housed within the Department of Communication Sciences and Disorders at the University of Houston. Graduate students enrolled in ComD are required to enroll in a minimum of 3 semesters of on-campus clinic, consisting of treatment, diagnostic and screening experiences.

Participation in the on-campus clinic is contingent upon passing speech/language and hearing proficiency examinations. Students must complete a Practicum Enrollment Form and attend graduate orientation prior to the first graduate practicum experience.

ASHA sets forth specific guidelines regarding practica that address ethical behavior (see the ASHA Code of Ethics in Appendix H), supervision requirements during practica, the number and types of

clock hours students must earn as part of the pre-certification process, and the clinical competencies that must be demonstrated in nine areas of clinical practice. Students who **successfully** complete clinics and externships during their matriculation through the UH ComD graduate program should accrue a sufficient number of hours and demonstrate all clinical competencies required to begin their Clinical Fellowship after graduating from the Master's program. However students are responsible for ensuring they obtain the types of clinical experiences they need and that they demonstrate entry-level clinical competence across the age span and in all disorder areas.

The Clinic Handbook outlines policies and procedures for the clinic. All students admitted to the graduate program are required to be familiar with the information provided in the Handbook.

Students must submit the required 25 clinical observation hours, with appropriate signatures and ASHA certification numbers prior to beginning graduate practica. Documents that do not include the required signatures or ASHA certification numbers will not be accepted. Students who have clinical hours from other universities are responsible for submitting a record of those hours to the Clinic Director prior to their first graduate practicum experience. Students may submit up to 50 hours of clinical practicum obtained at another accredited institution. The clock hours record must be signed by the supervisor with CCC-SLP or CCC-AUD and ASHA certification number .

Any student who drops clinic after his/her practicum has been assigned will not be assigned clients during the next twelve-month period unless prior approval was granted by the Clinic Director.

AUDIOLOGICAL SCREENINGS

Students are required to complete hearing screening and aural rehabilitation/management clinical experiences. *Hearing screening* hours will be obtained by participating in hearing screening contracts (Head Start, preschools) with the University Speech, Language and Hearing Clinic: A United Way Facility.

Typically, *aural habilitation/rehabilitation/management* hours are obtained at externship sites. Students are encouraged to seek these clinical experiences in their extern placements.

OFF-CAMPUS EXTERNSHIPS

Externships are available for students to do practica off campus. Students should be prepared to work a minimum of 20 hours per week at an externship site, although many sites require students to work 30-40 hours/week. Many externship sites require students to attend five days a week. The graduate program is designed to minimize the number of academic courses taken concurrently with externships. Students who are off track are ***strongly encouraged*** not to take more than two lecture type course on campus during the externship semesters. Approval from the Graduate Program Coordinator must be obtained to enroll in more than 2 academic courses concurrent with externship placement. ***Prior to enrollment in an externship experience, you need to have successfully completed an in-house diagnostic team assignment with a grade of B or better.***

Specific regulations for the externship experience are found in the externship handbook which is distributed to students in a mandatory Pre-externship meeting.

The minimum number of hours you must accrue at your site is 50 clock hours. If this number is not achieved, you will earn a grade of incomplete. You must complete your hours at the current site or be assigned another site by the Externship Coordinator.

COMPREHENSIVE EXAMINATIONS

The master's comprehensive examination (COMPS) is one of the requirements of your graduate education. Full-time graduate students must take the comprehensive exam during their 5th semester. The exam consists of complex clinical scenarios with multiple-choice questions regarding the scenarios. The goal is to assess how you integrate material across content areas rather than simply regurgitating facts. Integrating the major issues of our field across disorder categories that are within the scope of practice of the profession encourages you to "think like a clinician." Questions probe etiology, assessment, and treatment of a variety of communication disorders, as well as research, professional, and ethical issues.

If you have done well in your courses and clinical practica, you should not have difficulty with this format. You already know the information. The exam will help you feel more confident with your knowledge and will help prepare you for your Clinical Fellowship. Your ability to integrate information that you have acquired throughout your program will prepare you for a successful career in speech-language pathology, regardless of your employment setting. Further information concerning preparing for COMPS will be discussed at a mandatory group advising meeting during the fourth semester.

PRAXIS II

The PRAXIS II is the national exam for speech-language pathology (SLP). It is required for ASHA certification and for Texas SLP licensure. It is not required for graduation from UH ComD. The examination should be taken during your second year, spring semester. Students register by packet or on-line. It is a 2 hour timed test consisting of 150 questions and a passing score is 600 or higher. Students must indicate that they are from the University of Houston, Main Campus (or University Park), code 0300, and request that their score be sent to the UH ComD department (code 0300) so that we can keep that for our files. Further information concerning preparing for the PRAXIS II will be discussed at a mandatory group advising meeting during the fourth semester.

GRADUATION

Graduation applications should be filed early in the semester in which the student plans to graduate. Applications are available in the Office of Registration and Academic Records, 108 Ezekiel W Cullen Building or online at www.uh.edu/enroll/rar/graduation_appl.pdf. Deadlines for filing the application for graduation are listed in the academic calendar at www.uh.edu/academics/catalog/general/academic_calendar.html. **If you do not register for graduation, you will not be allowed to graduate**, even if all degree requirements have been met. Candidates for graduation who have been previously disapproved must reapply for graduation (but will not be charged an additional fee).

Any student who expects to graduate in a given semester must be enrolled for that semester. This regulation applies to students who have not submitted a thesis or dissertation by the deadline of the previous semester. Certification for graduation is performed by the dean's office in the college of the student's major. Diplomas usually are mailed about one month after graduation. However, students may indicate on the graduation application form that they will pick up their diplomas in the Office of Registration and Academic Records.

GRADUATION EXIT PROCEDURES

You must schedule your final exit appointments in the following order:

- 1: Advisor checkout and knowledge verification (SAMS/KASA review)
- 2: Clinic Director checkout, clinic hours and skills verification (SAMS review)
- 3: Chair checkout and exit interview

To be eligible for exit checkout you must have completed (a) all coursework (received a grade and completed all remediations); (b) all clinic assignments (received a Supervisors Report for your externship supervisor); and (c) the preliminary GA clinic check out. For specifics on checkout procedures from clinic please refer to the Clinic Handbook. You will be able to print out a final copy of your clinic hours on SAMS for checkout. The Clinical Director will ensure that you have met all the clinical competencies.

A letter will be prepared for you to present to the Texas State Board of Examiners for Speech-Language Pathology or to an alternate governing agency if you plan to obtain a license elsewhere. This letter will feature your final grades and total clinic experience hours, and verify that you have completed all graduate degree requirements. We will also have the Speech-Language Pathology and Audiology Coursework and Clinical Experience confirmation form, F76-10787 found at http://www.dshs.state.tx.us/speech/sp_cwork.pdf , completed and signed by the Department Chair.

In addition to the forms required by the State, we will have the final page (3) of the ASHA Application form for Certification in Speech-Language Pathology prepared for your inclusion with the other pages required for your submission. This application can be found at <http://www.asha.org/certification/SLPCertification.htm>

An exit interview and check out appointment schedule will be posted for you to select a time for your exit interview with the Department Chair. Appointments for exit interviews will only be made after you have scheduled your final meeting with your advisor and confirmed your clinical hours with the Clinic Director. You should bring a printed copy of your completed KASA form with you for the exit interview.

TEXAS LICENSURE

The link for online license applications is:

http://www.texasonline.state.tx.us/app/orig/index.jsp?AGENCY_NAME=tdshs&CONFIG_ID=TD SHS SPA&LICENSE_ID=03 . Follow the directions for license applications. The details for this process change frequently, so it is best to check the website before you begin.

Professionals licensed within the State of Texas must adhere to the Rules/Regulations set by the State Board of Examiners for Speech-Language Pathology and Audiology. These can be found at: http://www.dshs.state.tx.us/speech/sp_rules.shtm

Beginning in December 2009, all individuals applying for or renewing SLP licensure in the State of Texas must take a Jurisprudence Examination. This on-line examination can be taken at the time of application. Details are available at: <http://www.dshs.state.tx.us/speech/>

A master's degree is required for certification by ASHA and by the State of Texas for Professional Licensure. The master's degree and ASHA certification are now considered the minimal credentials in the area of Speech-Language Pathology. The State of Texas Board of Examiners for Speech-Language Pathology and Audiology licenses certified speech-language pathologists and audiologists as well as interns (persons completing their clinical fellowship under the supervision of a licensed, certified SLP) and speech-language pathology assistants (SLPA). A Speech-Language Pathology license is granted to applicants who have completed their master's degree at an accredited school, have completed their intern requirements working under the supervision of a licensed SLP and who have passed the PRAXIS II, the national examination in speech-language pathology. An individual must hold one of the licensure credentials to practice speech-language pathology in the State of Texas. Speech-language pathology assistants work under the direct supervision of a licensed SLP and are required to have completed the undergraduate major coursework in Communication Sciences and Disorders and have obtained 25 hours of observation and 25 hours of supervised clinical experience.

PROFESSIONAL ORGANIZATIONS

ComD ALUMNI ASSOCIATION

The Communication Disorders Alumni Association was created to fund scholarships; promote networking among alumni; provide continuing education opportunities; and to support the program, its faculty and students. All graduates, former students and friends of the ComD Program are eligible for membership. For more information, contact the Houston Alumni Organization at (713) 743-9548 or <http://www.alumniconnections.com>

AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION (ASHA)

The American Speech-Language Hearing Association is the professional organization for speech-language pathologists and audiologists (the American Academy of Audiology also serves audiologists). One function of ASHA is to offer an accreditation program for academic and clinical institutions. The academic accreditation agency is called the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA). It examines academic programs and determines their eligibility for accreditation. The Communication Sciences and Disorders Program of the University of Houston is accredited by CAA. This means that the program must adhere to guidelines in administering the academic and clinical programs. You may contact the CAA at: 2200 Research Boulevard #310, Rockville, MD 20850-3289 (800) 638-8255. There are certain academic requirements that students must fulfill as well as clinical requirements that are mandatory. ASHA also has a public code of ethics. It is the responsibility of every student and professional to follow the code of ethics. This code is presented in the Appendix H of this handbook. It will be discussed in several of your classes. Please read it.

NATIONAL STUDENT SPEECH-LANGUAGE-HEARING ASSOCIATION (NSSLHA)

The National Student Speech-Language-Hearing Association is affiliated with ASHA. There is a National NSSLHA chapter, as well as local, university-based chapters. At the University of Houston, there is a local chapter which is very active. It is an excellent way to learn about professional issues and have fun, too. Students are encouraged to participate in this association. Activities that UH NSSLHA has sponsored include: providing opportunities to visit professional work settings, presenting lectures from professionals in the community, and raising funds for tests for the clinic and scholarships for clients in the clinic and the students. One advantage to membership is reduced ASHA certification fees if you have been a National NSSLHA member for 2 consecutive years prior to applying for ASHA certification. Additionally, as a National NSSLHA member, you are able to access all member-only areas of the ASHA website, which includes on-line access to all ASHA journals. To get the most out of these benefits, students are strongly encouraged to join the National chapter early in their program, as there can be some delays in account activation.

TEXAS SPEECH-LANGUAGE-HEARING ASSOCIATION (TSHA)

The Texas Speech-Language-Hearing Association is the state professional organization. Students are encouraged to join at a reduced student rate. TSHA offers excellent educational and professional opportunities for students at its annual convention. Annual Conventions are held in Houston, Dallas, Corpus Christi and Austin on a rotating basis. TSHA offers financial support to students for research and education.

HOUSTON ASSOCIATION FOR COMMUNICATION DISORDERS (HACD)

The Houston Association for Communication Disorders is the local professional organization. It is the largest regional organization in Texas, with several hundred members. The main mission is to provide continuing education for its members. HACD supports students through mentoring programs and scholarships for ComD students. HACD is a useful network for students, a way to meet and know local professionals. Reduced membership dues and workshop fees are available for students.

ASSOCIATION OF HOUSTON AUDIOLOGISTS (AHA)

The Association of Houston Audiologists is a professional organization for audiologists living in the greater Houston Gulf Coast area. Meetings are held approximately bi-monthly for networking and socializing. The major continuing education events are the Fall and Winter conferences when nationally known speakers in audiology are invited to present current research and clinical information.

<p style="text-align: center;">APPENDIX A UNIVERSITY OF HOUSTON POLICY ON ACADEMIC DISHONESTY</p>

The information below came from the UH on-line catalogue at: <http://www.uh.edu/graduate-catalog/>, Article 3. Categories of Academic Dishonesty

APPLICATION of the ACADEMIC HONESTY POLICY: This policy applies only to those acts of dishonesty performed while the student is enrolled in the university.

ACADEMIC DISHONESTY PROHIBITED: “Academic dishonesty” means employing a method or technique or engaging in conduct in an academic endeavor that the student knows or should know is not permitted by the university or a course instructor to fulfill academic requirements. Academic dishonesty includes, but is not limited to, the following:

- a. Stealing, as theft of tests or grade books, from faculty offices or elsewhere;
- b. Using “crib notes,” as unauthorized use of notes or the like to aid in answering questions during an examination;
- c. Securing another to take a test in the student’s place; both the student taking the test for another and the student registered in the course are at fault;
- d. Representing as one’s own work the work of another without acknowledging the source (plagiarism);
- e. Changing answers or grades on a test that has been returned to a student in an attempt to claim instructor error;
- f. Giving or receiving unauthorized aid during an examination, such as trading examinations, whispering answers and passing notes;
- g. Openly cheating in an examination, as copying from another’s paper;
- h. Using another’s laboratory results as one’s own, whether with or without the permission of the owner;
- i. Falsifying results in laboratory experiments;
- j. Mutilating or stealing library materials; miss-shelving materials with the intent to reduce accessibility to other students;
- k. A student’s failing to report the instructor or department chair an incident which the student believes to be a violation of the academic honesty policy; and
- l. Misrepresenting academic records or achievements as they pertain to course prerequisites or corequisites for the purpose of enrolling or remaining in a course for which one is not eligible.

- m. Any other conducts which a reasonable person in the same or similar circumstances would recognize as dishonest or improper in an academic setting.

<p style="text-align: center;">APPENDIX B DEPARTMENT of COMMUNICATION SCIENCES and DISORDERS GRIEVANCE POLICY</p>
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The following procedures will be used concerning a grievance:

- The Department Chair will be responsible for conducting all stages of the process, except as noted below. If the Department Chair is named in the grievance, the Graduate Program Director will take over these responsibilities.
- The student must file official notice of an intention to grieve within 30 days of the point in time when the grievant has knowledge or should have had knowledge of the problem being grieved. Within 60 days of filing the intent to grieve notice, the grievant must submit a formal grievance.
- In filing the formal grievance, the grievant must state 1) when he/she discovered the issue being grieved, 2) what issue is being grieved and provide evidence to support the grievance, 3) what is the desired resolution.
- Upon receipt of the formal grievance, the Department Chair will inform the person(s) to whom the grievance is directed and provide them with a confidential copy of the formal grievance.
- The person(s) to whom the grievance is directed will have 21 days to produce a written response to the grievance.
- The grievant will receive a copy of the response.
- A grievance panel will be constructed by the Department Chair, who also will assign a panel chairperson.
- The Grievance panel will include:
 - 3 ComD faculty members
 - 1 faculty from outside ComD
 - 1 student from outside the department
 - One of the faculty members will serve as the Chair of the grievance panel.

A hearing will be scheduled within four weeks of receipt of the formal grievance. The Departmental secretary will arrange a date, time and place for the hearing.

All members of the grievance panel will have access to the formal grievance, the written response, and any evidence provided, one week prior to the hearing.

The following hearing guidelines will be in effect:

- The grievant may invite an advocate to accompany him/her.

- The grievant, an advocate, the person(s) to whom the grievance is directed, and the full panel will be present at the hearing.
- The grievant, the advocate, the person(s) to whom the grievance is directed may speak at the hearing.
- The panel members only will be allowed to ask questions
- Recording of the hearings is allowed.

The amount of time each party is allowed for presentation will be determined by the chair of the panel, and all involved will be informed of the procedures prior to the date of the hearing. Each party is to direct their comments to the panel only. Discussion between grievant, advocate and the person(s) to whom the grievance is directed is prohibited.

After both sides have presented their cases and all questions from the panel have been answered to the satisfaction of the panel members, the grievant, advocate, and opposing party (parties) will be excused and the panel will discuss the findings. The panel's discussion will not be recorded unless agreed upon by the panel.

The outcome of the grievance process will be a written report from the panel which articulates, at a minimum, a brief summary of the allegations made and the respondent's rebuttal, the findings of the panel (i.e., the panel's judgment of the facts), and the recommendations of the panel. The report will be completed within one week after the hearing has been conducted. The decision will be sent to the grievant, the opposing party, and the Department Chair.

The grievant has the right to appeal the decision of the departmental grievance panel. This must be done in accordance to college procedures (http://www.class.uh.edu/advising_grad_gpolicy.html)

Appendix C
THESIS GUIDELINES
STEPS FOR COMPLETION

Please note that the following should be used as a guideline only. Each thesis committee is different, and the thesis committee may deem it necessary to make changes in particular procedures or timelines. At each stage of the process you should confirm the procedures and timeline with your committee.

This following timeline is based on a 5 semester program.

Semester 1 – 2: Find thesis committee members, including: committee chair (person in the department who has expertise of your project subject area; this is the person with whom you will work most closely), a second committee member from the department, at least one committee member from outside the department (can be from another U of H department, another university, or the community). Your committee chair can help you select appropriate committee members.

Semester 1 - 2: Write the first two chapters: Literature Review and Methods chapters. You may have started these in the Research Methods class. If so, you will need to expand them by increasing the depth, complexity, and number of citations. These will be the basis for your prospectus meeting. As a general guideline, use the most recent edition of the *Publication Manual of the American Psychological Association* as you are writing the thesis.

Semester 2: Complete Initial Thesis Approval Form

Semester 2 – 3: Contact your committee members to find a time when all can meet for your Prospectus Meeting.

Semester 2 - 3: Consult with your chair early and maintain an open line of communication with her/him. Request your chair's approval before submitting your working drafts to the rest of the committee. After your chair's approval, Turn in first two chapters to committee members, allowing approximately two weeks for the committee to review the chapters before the Prospectus Meeting.

Semester 2 – 3: At the Prospectus Meeting, present a brief outline of the findings of your literature review, your proposed project, and your rationale for completing this experiment.

- Bring the proper paperwork (what you need is the Committee Appointment Record—you can get this from the program administrator) to the Prospectus Meeting to obtain signatures from committee members. Keep one copy of the paperwork and turn the other page in to the program administrator.
- Committee members will discuss their concerns/suggestions for your project, and will bring their revisions of your first two chapters to the meeting.

Semester 2 – 3: Prepare the application to the Committee for the Protection of Human Subjects (CPHS). If you are participating in research that already has IRB approval, submit an addendum stating your role on the research project. See

http://www.research.uh.edu/Departments/Policies_Compliance_Committees/Committees_for_the_Protection_of_Human_Subjects) for their upcoming application review dates.

- The CPHS only convenes once per month, so make sure you keep an eye on upcoming deadlines for submission.

- Follow guidelines for on-line submission via RAMP on the UH Division of Research Website.
- Be ready to submit CPHS application as soon as you complete the prospectus meeting, as this approval process can take a long time (you cannot start your data collection until you have received approval from the CPHS).
Be sure to incorporate any changes recommended by your committee.
- Semester 2 - 3: While you are waiting for approval from the CPHS, make revisions to the first two chapters suggested by the committee members.
- Semester 2 – 3 and beyond:
- After you get approval from CPHS, carry out your research protocol; collect and analyze your data.
- Register for Thesis COMD 6399 - You must register for a total of 6 credit hours. You must be registered in the semester you defend your thesis.
- Write Results and Discussion chapters. As you compose your thesis, ensure that it adheres to the preferred CLASS format. As a general guideline, use the most recent edition of the *Publication Manual of the American Psychological Association*.
- Set a date for Thesis Defense with committee members.
- Before the Defense:
 - Obtain your chair's approval for the final draft of your thesis.
 - Submit all chapters to committee members (*approximately two weeks before the defense*) for their review.
 - Some committee members will submit their feedback to you before the defense—make revisions as needed.
 - Prepare a PowerPoint presentation to use in a 20 - 30 minute presentation of your project. Focus on the results and discussion sections in your presentation.
 - Prepare three signature pages on 100% cotton paper for the committee members to sign at the defense (see attached signature page example).
 - Begin to prepare your manuscript to meet the guidelines of the CLASS Dean's office.
- At the Defense:
 - You will give your presentation first, and then your committee chair will open up the floor to questions (from your thesis committee first, then from the general audience). Please note that defenses are public and other members of our academic, local, or larger community may attend the presentation.
 - After the question and answer period, the committee members will discuss your thesis privately and conclude whether or not you passed.
 - Then they will return, and if you passed, they will then sign your signature pages.
 - Minor or major changes may be requested by the committee (please see the next section for details on revisions).
- After the defense, prepare your total manuscript for submission to the CLASS Dean's office. Allow yourself time after the defense to make revisions brought to light in the defense discussion. Minor changes may only require adjustments that do not need to be verified by the entire committee. Major changes may need to be approved again by the committee.

- Contact the Graduate Program director (713-743-4012, 402 E Cullen) to schedule an appointment to drop off your manuscript for submission and review by personnel in the Dean's office.
- When submitting your manuscript: place one review copy in a manila envelope with an extra copy of the title page stapled to the outside of the envelope. You also need to place a typed sheet with your contact information (name, program, telephone number, email address) in the manila folder. Place the signed signature pages in a file folder, as well as the copyright page and any permission letters, if applicable.
- After you turn in your manuscript to the Dean's office, allow 5 days for the Associate Dean to review your manuscript—if you do not need to make any changes, the signature pages will be available for you to pick up.
- If the Associate Dean has changes for you to make, you will have to resubmit your manuscript and wait another 5 days for an additional review.
- After you pick up the signature pages, you have 5 days to print 3 copies of your thesis: one copy on 100% cotton paper; two copies on 25% cotton paper (You can buy this at Office Depot or other office supply stores).
- After you have printed the three copies and have placed all the pages in the order outlined by the Dean's Office, take the three copies to the book binder (the Graduate Program Director will have information about what company U of H is using and how to get there—this changes from time to time).
- Have the book binder fax the receipt to U of H, or you can deliver a copy of the receipt to the Dean's office yourself.
- At this point you are free to graduate!
- After 4-6 weeks, or whenever your bound copies of your thesis are ready, go back to the book binders, pick up the copies, and drop them off at the Dean's office.
- Please hand-deliver the copy of your thesis that goes to the COMD department to the Department Chair or Program Coordinator.

APPENDIX D

ADDITIONAL GRADUATE STUDENT FINANCIAL AID

Introduction

Despite budget cuts and increased competition for scarce financial resources, funds are available to students determined to explore every avenue in pursuit of an education. The application process can be frustrating and the information on funding sources is scattered. For these reasons, UH has prepared general information on financial aid at:

<http://www.uh.edu/financial/undergraduate/forms/index.php>.

Helpful Hints

The process of applying for financial aid can be confusing and time consuming, especially for the first-time applicant. You can increase your chances of receiving aid by doing the following:

- n Apply to as many sources as you can find.
- n Ask for information and help.
- n Apply as early as possible.

Sources of Information

Academic Job Announcements

H-Net: <http://www.h-net.org>

Chronicle of Higher Education: <http://chronicle.com/section/Jobs/61/>

MLA: http://www.mla.org/main_jil.htm

Many valuable sources of information on grant and fellowship support for education are easily available on-line. Some of the most useful are:

1. **Fastweb** (free scholarship searches): www.demo.studentservices.com/fastweb/
A searchable database of more than 180,000 private sector scholarships and grants.
2. **The Financial Aid Information Page:** www.finaid.org/
Comprehensive information about sources of student financial aid.
3. **The Foundation Center:** www.fdncenter.org/
4. **Foundation and Funders:** www.finaid.org
5. **Foundations On-Line:** www.foundations.org/
6. **Mach25:** www.collegenet.com/mach25/
CollegeNet's database of scholarships.
7. **Scholarship and Fellowship Databases:** <http://www.finaid.org/scholarships/>
Links to many scholarship databases.
8. **Student Guide:** <http://www2.ed.gov/fund/landing.jhtml>
The Department of Education's guide to all major federal aid programs.

For information on Texas and federal assistance, consult the following guides and databases:

1. **Texas Guaranteed Student Loan Corporation:** <http://www.tgslc.org/students/>
3. **The Scholarship Database:** <http://www.aie.org>
The Web's most comprehensive, up-to-date, no fee, searchable database of student financial aid.
4. **Texas Higher Education Coordinating Board WebSite:** www.theccb.texas.gov

Information regarding state loan, work and grant programs for Texas residents.

More than a dozen federal agencies fund fellowship and traineeship programs. The amounts and types of assistance vary considerably.

One of many federal initiatives is the **Jacob Javits Fellowship Program**, which provides grants to students in the arts, humanities and social sciences. Application requests should be addressed to the Director, Jacob Javits Fellowship Program, U.S. Department of Education, Mail Stop 3327, 400 Maryland Ave., SW, ROB-3, Washington, DC 20202, (202) 732-4415.

The G.I. Bill of the past has been replaced by a series of programs. Veterans may use their educational benefits for training at the graduate level and should contact their regional Veterans Administration Office.

UH's Office of Grants and Contracts provides information about federal direct subsidized and unsubsidized loans and federal work-study programs.

Funding for Minority Students

The foundations listed below are only a few examples of the types of funding sources available to minority students.

Bureau of Indian Affairs offers aid to students who demonstrate financial need, who are at least one-fourth American Indian or Alaskan native, and who are from a federally recognized tribe. To obtain more information, contact the Bureau of Indian Affairs, PO Box 8327, Albuquerque, NM 87198. The BIA Higher Education Program has need-based scholarships and loans. Contact the Indian Resource Center, PO Box 1788, Albuquerque, NM 87103.

National Hispanic Scholarship Fund provides scholarships for undergraduate and graduate students of Hispanic background. The application period is June 5 to October 5 each year. Send a self-addressed, stamped envelope to Selection Committee, National Hispanic Scholarship Fund, PO Box 738, San Francisco, CA 94101.

Additional Useful Internet Resources

1. **Academe This Week**, A service of the Chronicle of Higher Education: <http://chronicle.com/section/Home/5>
2. **Academic Advising Resources** on the Internet: <http://www.nacada.ksu.edu/resources/index.htm>
3. **Fund Finder Scholarship Search**: www.finaid.org/finaid/expans.html
4. **Search for Scholarships by Major**: www.studentservices.com
5. **Grants Search** through Carnegie Mellon University: www.cs.cmu.edu

APPENDIX E
EMERGENCY PROCEDURES FOR COMD, CLINICAL RESEARCH SERVICES AND
THE UNIVERSITY SPEECH, LANGUAGE, & HEARING CLINIC

All Department members and students are responsible for reviewing the evacuation map (See inside front cover of Handbook) and being familiar with the exits for every area of the Department. The Department is equipped with smoke detection systems and fire alarms throughout the building. The alarms emit sound and a flashing red light. All exits are clearly marked with red EXIT signs.

If you are notified of an emergency situation either through the alarm system or verbally, while engaged in clinical services, you are responsible for leading your client to the nearest exit. Do not leave a client in a treatment room, lab, audiology test booth, or restroom while you investigate the problem. Move to the nearest exit to the outside of the building until you are notified by a UH official that it is safe to return.

Areas of the building should be checked for occupants as follows:

Front Office Staff escort all work study students and waiting room clients out of the building as they evacuate. Notify Dr. Bienenstock to evacuate. Check Room 104 file room, student and faculty lounges, copy/mail room, and waiting room restroom as you go. Instruct anyone you see to leave the building immediately. Await further instructions from a UH official outside the building.

Audiology Staff and clinicians escort any audiology clients out of the test booths and audiology clinic rooms to the nearest exit. Await further instructions from a UH official outside the building.

Clinicians/students evacuate the clinician workroom, computer lab, faculty labs, library, NSSLHA Office, classroom and clinic materials rooms immediately by going to the nearest exit*. Do not delay by continuing working on a computer document or saving files. Await further instructions from a UH official outside the building..

Clinicians/Clinical Educators in the clinic rooms escort their clients and families out of the building taking the nearest exit. Await further instructions from a UH official outside the building.

Faculty/Staff with offices near the conference room and restrooms sweep these areas as they leave the building, seeing that anyone they find comes with them. Await further instructions from a UH official outside the building.

PERSONS IN WHEELCHAIRS MUST EXIT THE MAIN ENTRANCE
DO NOT RE-ENTER THE BUILDING UNTIL THE ALL CLEAR SIGNAL HAS BEEN GIVEN
BY THE UNIVERSITY OF HOUSTON POLICE.

FIRE DRILL EXIT PROCEDURES

1. .Evacuate in a calm, orderly manner.
2. .Begin evacuating immediately upon hearing the alarm.
3. .Move away from the building once outside.
4. .Do not interfere with Fire Dept. personnel or equipment.
5. .DO NOT return to the building until notified by University Police that it is safe to do so.

The Department houses an Automated External Defibrillator (AED) located in the back clinic hallway near room 136 in case of emergency.

In the event of an actual emergency, the PIER notification system will be used in concert with the siren system to disseminate further information to the U of H community. Only those persons that have current contact information in PeopleSoft will be able to receive these emergency messages. You can find instructions for updating your cell phone number, email address and other contact information at www.uh.edu/emergency.

All students are encouraged to update their emergency contact information in the PeopleSoft system so they may be notified during severe weather conditions or other emergency situations. Information concerning school closing will be posted on the UH website, and will be broadcast on major TV networks and radio stations.

Faculty and staff need to be aware of medical emergency conditions requiring immediate attention. These would include, but are not limited to:

- Chest pain
- Difficulty breathing
- Symptoms of stroke
- Altered mental status
- Loss of consciousness
- Seizures
- Overdose-accidental or intentional
- Major trauma-including head trauma with loss of consciousness or altered mental status, and injuries involving more than one body part
- Severe allergic reactions with facial swelling and difficulty breathing
- Severe pain

In each of the above medical emergency conditions, **immediately notify University Police at 713-743-3333 or dial 9-1-1 from a campus phone and report the nature and severity of the medical problem and the location of the individual needing emergency medical care.** University Police will meet emergency care providers and direct them to the individual needing medical assistance. If possible, someone should stay with the individual until the University Police officer or EMT arrives. Do not move the individual unless there is an immediate threat to life (i.e. fire, dangerous fumes).

Notifying the University Health Center or transporting the individual experiencing the medical emergency conditions to the Health Center instead of immediately notifying University Police is not an appropriate, life-saving response. The Health Center is neither staffed for, nor supplied with, medications or devices to administer Advanced Life Support.

In case of an ocular (eye) emergency, please notify the University Eye Institute Ocular Diagnostic and Medical Eye Service at 713-743-2010 immediately. Symptoms that require prompt attention include sudden loss of vision, seeing flashes of light, unusual light sensitivity, extreme pain, and/or redness of the eye(s). Licensed practitioners are on call 24 hours a day, seven days a week.

APPENDIX F

STANDARDS AND IMPLEMENTATION FOR THE CERTIFICATE OF CLINICAL COMPETENCE IN SPEECH-LANGUAGE PATHOLOGY

The Standards for the Certificate of Clinical Competence in Speech-Language Pathology are shown in bold. The Council For Clinical Certification implementation procedures follow each standard.

Standard I: Degree

Effective January 1, 2005, the applicant for certification must have a master's or doctoral or other recognized post-baccalaureate degree. A minimum of 75 semester credit hours must be completed in a course of study addressing the knowledge and skills pertinent to the field of speech-language pathology.

Implementation: Verification of the graduate degree is required of the applicant before the certificate is awarded. Degree verification is accomplished by submitting (a) an application signed by the director of the graduate program indicating the degree date, and (b) an official transcript showing that the degree has been awarded. Individuals educated in foreign countries must show official transcripts and evaluations of their degrees and courses to verify equivalency.

All graduate course work and graduate clinical practicum required in the professional area for which the Certificate is sought must have been initiated and completed at an institution whose program was accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) of the American Speech-Language-Hearing Association in the area for which the Certificate is sought.

Automatic Approval. If the graduate program of study is initiated and completed in a CAA-accredited program and if the program director or official designee verifies that all knowledge and skills requirements have been met, approval of the application is automatic provided that the application for the Certificate of Clinical Competence is received in the National Office no more than three years after the degree is awarded.

Evaluation Required. The following categories of applicants must submit a completed application for certification that includes the Knowledge and Skills Acquisition (KASA) summary form for evaluation by the Council For Clinical Certification (CFCC):

- a. those who apply more than three years after the completion of the graduate degree from a CAA-accredited program
- b. those who were graduate students and were continuously enrolled in a CAA-program that had its accreditation withdrawn during the applicant's enrollment
- c. those who satisfactorily completed graduate course work, clinical practicum, and knowledge and skills requirements in the area for which certification is sought in a program that held candidacy status for accreditation
- d. those who satisfactorily completed graduate course work, clinical practicum, and knowledge and skills requirements in speech-language pathology in a CAA-program, but: 1) received a

graduate degree from a program not accredited by CAA; 2) received a graduate degree in a related area, or 3) received a graduate degree from a non-U.S. institution of higher education

The graduate program director must verify satisfactory completion of both undergraduate and graduate academic course work, clinical practicum, and knowledge and skills requirements.

Standard II: Institution of Higher Education

The graduate degree must be granted by a regionally accredited institution of higher education.

Implementation: The institution of higher education must be accredited by one of the following: Commission of Higher Education, Middle States Association of Colleges and Schools; Commission on Institutions of Higher Education, New England Association of Schools and Colleges; Commission on Institutions of Higher Education, North Central Association of Colleges and Schools; Commission on Colleges, Northwest Association of Schools and Colleges; Commission on Colleges, Southern Association of Colleges and Schools; or Accrediting Commission for Senior Colleges and Universities, Western Association of Schools and Colleges.

Individuals educated in foreign countries must submit documentation that course work was completed in an institution of higher education that is regionally accredited or recognized by the appropriate regulatory authority for that country. In addition, applicants educated in foreign countries must meet each of the Standards that follow.

Standard III: Program of Study – Knowledge Outcomes

The applicant for certification must complete a program of study (a minimum of 75 semester credit hours overall, including at least 36 at the graduate level) that includes academic course work sufficient in depth and breadth to achieve the specified knowledge outcomes.

Implementation: The program of study must address the knowledge and skills pertinent to the field of speech-language pathology. The applicant must maintain documentation of course work at both undergraduate and graduate levels demonstrating that the requirements in this standard have been met. The minimum 75 semester credit hours may include credit earned for course work, clinical practicum, research, or thesis/dissertation. Verification is accomplished by submitting an official transcript showing that the minimum credit hours have been completed.

Standard III-A: The applicant must have prerequisite knowledge of the biological sciences, physical sciences, mathematics, and the social/behavioral sciences.

Implementation: The applicant must demonstrate through transcript credit (which could include course work, advanced placement, CLEP, or examination of equivalency) for each of the following areas: biological sciences, physical sciences, mathematics, and the social/behavioral sciences. Appropriate course work in biological sciences could include, among others, biology, general anatomy and physiology, neuroanatomy and neurophysiology, and genetics. Course work in physical sciences could include, among others, physics and chemistry. Course work in behavioral sciences could include, among others, psychology, sociology, and cultural anthropology. Course work in math could include, among others, statistics and non-remedial mathematics. The intent of

this standard is to require students to have a broad liberal arts and science background. Courses in biological and physical sciences specifically related to communication sciences and disorders (CSD) cannot be applied for certification purposes in this category. In addition to transcript credit, applicants may be required by their graduate program to provide further evidence of meeting this requirement.

Standard III-B: The applicant must demonstrate knowledge of basic human communication and swallowing processes, including their biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases.

Implementation: This standard emphasizes the basic human communication processes. The applicant must demonstrate the ability to integrate information pertaining to normal and abnormal human development across the life span, including basic communication processes and the impact of cultural and linguistic diversity on communication. Similar knowledge must also be obtained in swallowing processes and new emerging areas of practice. Program documentation may include transcript credit and information obtained by the applicant through clinical experiences, independent studies, and research projects.

Standard III-C: The applicant must demonstrate knowledge of the nature of speech, language, hearing, and communication disorders and differences and swallowing disorders, including the etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates. Specific knowledge must be demonstrated in the following areas:

- articulation
- fluency
- voice and resonance, including respiration and phonation
- receptive and expressive language (phonology, morphology, syntax, semantics, and pragmatics) in speaking, listening, reading, writing, and manual modalities
- hearing, including the impact on speech and language
- swallowing (oral, pharyngeal, esophageal, and related functions, including oral function for feeding; orofacial myofunction)
- cognitive aspects of communication (attention, memory, sequencing, problem-solving, executive functioning)
- social aspects of communication (including challenging behavior, ineffective social skills, lack of communication opportunities)
- communication modalities (including oral, manual, augmentative, and alternative communication techniques and assistive technologies)

Implementation: The applicant must demonstrate the ability to integrate information delineated in this standard. Program documentation may include transcript credit and information obtained by the applicant through clinical experiences, independent studies, and research projects. It is expected that course work addressing the professional knowledge specified in Standard III-C will occur primarily at the graduate level. The knowledge gained from the graduate program should include an effective balance between traditional parameters of communication (articulation/phonology, voice, fluency, language, and hearing) and additional recognized and emerging areas of practice (e.g., swallowing, upper aerodigestive functions).

Standard III-D: The applicant must possess knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates of the disorders.

Implementation: The applicant must demonstrate the ability to integrate information about prevention, assessment, and intervention over the range of differences and disorders specified in Standard III-C above. Program documentation may include transcript credit and information obtained by the applicant through clinical experiences, independent studies, and research projects.

Standard III-E: The applicant must demonstrate knowledge of standards of ethical conduct.

Implementation: The applicant must demonstrate knowledge of, appreciation for, and ability to interpret the ASHA Code of Ethics. Program documentation must reflect course work, workshop participation, instructional module, clinical experiences, and independent projects.

Standard III-F: The applicant must demonstrate knowledge of processes used in research and the integration of research principles into evidence-based clinical practice.

Implementation: The applicant must demonstrate comprehension of the principles of basic and applied research and research design. In addition, the applicant should know how to access sources of research information and have experience relating research to clinical practice. Program documentation could include information obtained through class projects, clinical experiences, independent studies, and research projects.

Standard III-G: The applicant must demonstrate knowledge of contemporary professional issues.

Implementation: The applicant must demonstrate knowledge of professional issues that affect speech-language pathology as a profession. Issues typically include professional practice, academic program accreditation standards, ASHA practice policies and guidelines, and reimbursement procedures. Documentation could include information obtained through clinical experiences, workshops, and independent studies.

Standard III-H: The applicant must demonstrate knowledge about certification, specialty recognition, licensure, and other relevant professional credentials.

Implementation: The applicant must demonstrate knowledge of state and federal regulations and policies related to the practice of speech-language pathology and credentials for professional practice. Documentation could include course modules and instructional workshops.

Standard IV: Program of Study—Skills Outcomes

Standard IV-A: The applicant must complete a curriculum of academic and clinical education that follows an appropriate sequence of learning sufficient to achieve the skills outcomes in Standard IV-G.

Implementation: The applicant's program of study should follow a systematic knowledge- and skill-building sequence in which basic course work and practicum precede, insofar as possible, more advanced course work and practicum.

Standard IV-B: The applicant must possess skill in oral and written or other forms of communication sufficient for entry into professional practice.

Implementation: The applicant must demonstrate communication skills sufficient to achieve effective clinical and professional interaction with clients/patients and relevant others. For oral communication, the applicant must demonstrate speech and language skills in English, which, at a minimum are consistent with ASHA's most current position statement on students and professionals who speak English with accents and nonstandard dialects. For written communication, the applicant must be able to write and comprehend technical reports, diagnostic and treatment reports, treatment plans, and professional correspondence.

Individuals educated in foreign countries must meet the criteria required by the International Commission of Healthcare Professionals (ICHP) in order to meet this standard.

Standard IV-C: The applicant for certification in speech-language pathology must complete a minimum for 400 clock hours of supervised clinical experience in the practice of speech-language pathology. Twenty-five hours must be spent in clinical observation, and 375 hours must be spent in direct client/patient contact.

Implementation: Observation hours general precede direct contact with clients/patients. However, completion of all 25 observation hours is not a prerequisite to begin direct client/patient contact. For certification purposes, the observation and direct client/patient contact hours must be within the scope of practice of speech-language pathology.

For certification purposes, observation experiences must be under the direction of a qualified clinical supervisor who holds current ASHA certification in the appropriate practice area. Such direction may occur simultaneously with the student's observation or may be through review and approval of written reports or summaries submitted by the student. Students may use videotapes of the provision of client services for observation purposes. The applicant must maintain documentation of time spent in supervised observation, verified by the program in accordance with Standards III and IV.

Applicants should be assigned practicum only after they have acquired sufficient knowledge bases to qualify for such experience. Only direct contact with the client or the client's family in assessment, management, and/or counseling can be counted toward practicum. Although several students may observe a clinical session at one time, clinical practicum hours should be assigned only to the student who provides direct services to the client or client's family. Typically, only one student should be working with a given client. In rare circumstances, it is possible for several students working as a team to receive credit for the same session depending on the specific responsibilities each student is assigned. For example, in a diagnostic session, if one student evaluates the client and another interviews the parents, both students may receive credit for the time each spent in providing the service. However, if one student works with the client for 30 minutes and another student works with the client for the next 45 minutes, each student receives credit for the time he/she actually provided services—that is, 30 and 45 minutes respectively, not 75 minutes.

The applicant must maintain documentation of time spent in supervised practicum, verified by the program in accordance with Standards III and IV.

Standard IV-D: At least 325 of the 400 clock hours must be completed while the applicant is engaged in graduate study in a program accredited in speech-language pathology by the Council on Academic Accreditation in Audiology and Speech-Language Pathology.

Implementation: A minimum of 325 clock hours of clinical practicum must be completed at the graduate level. The remaining required hours may have been completed at the undergraduate level, at the discretion of the graduate program.

Standard IV-E: Supervision must be provided by individuals who hold the Certificate of Clinical Competence in the appropriate area of practice. The amount of supervision must be appropriate to the student's level of knowledge, experience, and competence. Supervision must be sufficient to ensure the welfare of the client/patient.

Implementation: Direct supervision must be in real time and must never be less than 25% of the student's total contact with each client/patient and must take place periodically throughout the practicum. These are minimum requirements and should be adjusted upward if the student's level of knowledge, experience, and competence warrants. A supervisor must be available to consult as appropriate for the client's/patient's disorder with a student providing clinical services as part of the student's clinical education. Supervision of clinical practicum must include direct observation, guidance, and feedback to permit the student to monitor, evaluate, and improve performance and to develop clinical competence.

All observation and clinical practicum hours used to meet Standard IV-C must be supervised by individuals who hold a current CCC in the professional area in which the observation and practicum hours are being obtained. Only the supervisor who actually observes the student in a clinical session is permitted to verify the credit given to the student for the clinical practicum hours.

Standard IV-F: Supervised practicum must include experience with client/patient populations across the life span and from culturally/linguistically diverse backgrounds. Practicum must include experience with client/patient populations with various types and severities of communication and/or related disorders, differences, and disabilities.

Implementation: The applicant must demonstrate direct client/patient clinical experiences in both diagnosis and treatment with both children and adults from the range of disorders and differences named in Standard III-C.

Standard IV-G: The applicant for certification must complete a program of study that includes supervised clinical experiences sufficient in breadth and depth to achieve the following skills outcomes:

1. Evaluation

- a. Conduct screening and prevention procedures (including prevention activities).
- b. Collect case history information and integrate information from clients/patients, family, caregivers, teachers, relevant others, and other professionals.

- c. Select and administer appropriate evaluation procedures, such as behavioral observations, non-standardized and standardized tests, and instrumental procedures.
- d. Adapt evaluation procedures to meet client/patient needs.
- e. Interpret, integrate, and synthesize all information to develop diagnoses and make appropriate recommendations for intervention.
- f. Complete administrative and reporting functions necessary to support evaluation.
- g. Refer clients/patients for appropriate services.

2. Intervention

- a. Develop setting-appropriate intervention plans with measurable and achievable goals that meet clients'/patients' needs. Collaborate with clients/patients and relevant others in the planning process.
- b. Implement intervention plans (involve clients/patients and relevant others in the intervention process).
- c. Select or develop and use appropriate materials and instrumentation for prevention and intervention.
- d. Measure and evaluate clients'/patients' performance and progress.
- e. Modify intervention plans, strategies, materials, or instrumentation as appropriate to meet the needs of clients/patients.
- f. Complete administrative and reporting functions necessary to support intervention.
- g. Identify and refer clients/patients for services as appropriate.

3. Interaction and Personal Qualities

- a. Communicate effectively, recognizing the needs, values, preferred mode of communication, and cultural/linguistic background of the client/patient, family, caregivers, and relevant others.
- b. Collaborate with other professionals in case management.
- c. Provide counseling regarding communication and swallowing disorders to clients/patients, family, caregivers, and relevant others.
- d. Adhere to the ASHA Code of Ethics and behave professionally.

Implementation: The applicant must document the acquisition of the skills referred to in this Standard applicable across the nine major areas listed in Standard III-C. Clinical skills may be developed and demonstrated by means other than direct client/patient contact in clinical practicum experiences, such as academic course work, labs, simulations, examinations, and completion of independent projects. This documentation must be maintained and verified by the program director or official designee.

For certification purposes, only direct client/patient contact may be applied toward the required minimum of 375 clock hours of supervised clinical experience.

Standard V: Assessment

The applicant for certification must demonstrate successful achievement of the knowledge and skills delineated in Standard III and Standard IV by means of both formative and summative assessment.

Standard V-A: Formative Assessment

The applicant must meet the education program's requirements for demonstrating satisfactory performance through on-going formative assessment of knowledge and skills.

Implementation: Formative assessment yields critical information for monitoring an individual's acquisition of knowledge and skills. Therefore, to ensure that the applicant pursues the outcomes stipulated in Standard III and Standard IV in a systematic manner, academic and clinical educators must have assessed developing knowledge and skills throughout the applicant's program of graduate study. Applicants may also be part of the process through self-assessment. Applicants and program faculties should use the on-going assessment to help the applicant achieve requisite knowledge and skills. Thus, assessments should be followed by implementation of strategies for acquisition of knowledge and skills.

The applicant must adhere to the academic program's formative assessment process and must maintain records verifying on-going formative assessment. The applicant shall make these records available to the Council for Clinical Certification upon its request. Documentation of formative assessment may take a variety of forms, such as checklists of skills records of progress in clinical skill development, portfolios, and statements of achievement of academic and practicum course objectives, among others.

Standard V-B: Summative Assessment

The applicant must pass the national examination adopted by ASHA for purposes of certification in speech-language pathology.

Implementation: Summative assessment is a comprehensive examination of learning outcomes at the culmination of professional preparation. Evidence of a passing score on the ASHA-approved national examination in speech-language pathology must be submitted to the National Office by the testing agency administering the examination.

Standard VI: Speech-Language Pathology Clinical Fellowship

After completion of academic course work and practicum (Standard IV), the applicant then must successfully complete a Speech-Language Pathology Clinical Fellowship (SLPCF).

Implementation: The Clinical Fellow may be engaged in clinical service delivery or clinical research that fosters the continued growth and integration of the knowledge, skills, and tasks of clinical practice in speech-language pathology consistent with ASHA's current Scope of Practice. At least 80% of the Clinical Fellow's major responsibilities during the CF experience must be in direct client/patient contact, consultations, record keeping, and administrative duties. For example, in a 5-hour work week, at least 4 hours must consist of direct clinical activities; in a 15-hour work week, at least 12 hours must consist of direct clinical activities; in a 35-hour work week, at least 28 hours must consist of direct clinical activities.

The SLPCF may not be initiated until completion of the graduate course work and graduate clinical practicum required for ASHA certification.

It is the Clinical Fellow's responsibility to identify a mentoring speech-language pathologist (SLP) who holds a current Certificate of Clinical Competence in Speech-Language Pathology to provide the requisite on-site and other monitoring activities mandated during the SLPCF experience. Before beginning the SLPCF, the Clinical Fellow must contact the ASHA National office to verify the mentoring SLP's certification status. The mentoring SLP must hold ASHA certification throughout the SLPCF period. Should the certification status of the mentoring SLP change during the experience, the Clinical Fellow will be awarded credit only for that portion of time during which the mentoring SLP held certification. It is, therefore, incumbent on the Fellow to verify the mentoring SLP's status not only at the beginning of the experience but also at the beginning of each new year.

A family member or individual related in any way to the clinical fellow may not serve as a mentoring SLP.

Standard VI-A: The mentoring speech-language pathologist and Speech-Language Pathology Clinical Fellow will establish outcomes and performance levels to be achieved during the Speech-Language Pathology Fellowship (SLPCF), based on the Clinical Fellow's academic experiences, setting-specific requirements, and professional interests/goals.

Implementation: The Clinical Fellow and mentoring SLP will determine outcomes and performance levels in a goal-setting conference within four weeks of initiating the SLPCF. It is the Clinical Fellow's and the mentoring SLP's responsibility to each retain documentation of agreed-upon outcomes and performance levels. The mentoring SLP's guidance should be adequate throughout the SLPCF to permit the CF to achieve the stated outcomes, and to ensure that the Clinical Fellow can function independently by the completion of the SLPCF. At the conclusion of the experience, the Clinical Fellow will submit the Clinical Fellowship Report and Rating Form to the Council For Clinical Certification (CFCC). Prior to submitting documentation to the CFCC, the Clinical Fellow and mentoring SLP should make copies of all forms for their files.

Standard VI-B: The Clinical Fellow and mentoring SLP must engage in periodic assessment of the Clinical Fellow's performance, evaluating the Clinical Fellow's progress toward meeting the established goals and achievement of the clinical skills necessary for independent practice.

Implementation: Assessment of performance may be both formal and informal means. The Clinical Fellow and mentoring SLP should keep a written record of assessment processes and recommendations. One means of assessment must be the Clinical Fellowship Report and Rating Form.

The mentoring SLP must engage in no fewer than 36 supervisory activities during the clinical fellowship experience. This supervision must include 18 on-site observations of direct client contact at the clinical fellow's work site (1 hour = 1 on-site observation; a maximum of 6 on-site observations may be accrued in one day). At least six on-site observations must be conducted during each third of the CF experience. On-site observations must consist of the clinical fellow engaged in screening, evaluation, assessment, and/or habilitation/rehabilitation activities.

Additionally, supervision must also include 18 other monitoring activities. At least six other monitoring activities must be conducted during each third of the CF experience. Other monitoring activities are defined as evaluation of reports written by the Clinical Fellow, conferences between

the mentoring SLP and the Clinical Fellow, discussions with professional colleagues of the Fellow, etc., and may be executed by correspondence, telephone, or reviewing of video and/or audio tapes.

On very rare occasions the CFCC may allow the supervisory process to be conducted in other ways. However, a request for other supervisory mechanisms must be submitted in written form to the CFCC ***before*** the CF is initiated. The request must include the reason for the alternative supervision and a description of the supervision that would be provided. At a minimum, such a request must outline the type, length, and frequency of the supervision that would be provided. If the request is to use videotapes instead of direct observations, the outline must indicate how many hours will be videotaped, how often the tapes will be made, and how feedback from the mentoring SLP will be provided. Whenever possible, the mentoring SLP and the Clinical Fellow should make arrangements to view the tapes together so that communication about the feedback being provided is immediate.

Standard VI-C: The Speech-Language Pathology Clinical Fellowship (SLPCF) will consist of the equivalent of 36 weeks of full-time clinical practice.

Implementation: Full-time clinical practice is defined as a minimum of 35 hours per week in direct client/patient contact, consultations, record keeping, and administrative duties relevant to a bona fide program of clinical work. The Clinical Fellowship experience must total no less than 1,260 hours, accumulated within 48 months of the beginning date of the experience.

Professional experience of less than five hours per week does not meet the requirement and may not be counted toward the SLPCF. Similarly, experience of more than 35 hours per week cannot be used to shorten the SLPCF to less than 36 weeks. *NOTE: Clinical Fellows are strongly urged to contact their state regulatory agency/state licensing board to determine licensure requirements for the Clinical Fellowship. State licensure requirements may differ from those for ASHA certification. Failure to comply with state requirements may lead to fellowship experience that is considered invalid for licensure.*

Once initiated, the Clinical Fellowship experience must be completed within four years (48 months). Clinical Fellows working less than full-time should be aware that they will need to extend their experience for a longer period of time to meet the CF requirement of 1,260 hours. If the CF is not completed within 48 months of initiation, the Clinical Fellow will be required to reapply for certification and must meet the standards in effect at the time of reapplication.

Standard VI-D: The Clinical Fellow must submit evidence of successful completion of the Speech-Language Pathology Clinical Fellowship (SLPCF) to the Council For Clinical Certification.

Implementation: Once the Clinical Fellow has accumulated the requisite 1,260 hours, the <http://www.asha.org/uploadedFiles/SLP-CF-Report-Rating-Form.pdf> [PDF], which includes the Clinical Fellowship Skills Inventory (CFSI), must be submitted. This report must be completed by both the Clinical Fellow and mentoring speech-language pathologist.

Standard VII: Maintenance of Certification

Demonstration of continued professional development is mandated for maintenance of the Certificate of Clinical Competence in Speech-Language Pathology. The renewal period will be three years. This standard will apply to all certificate holders, regardless of the date of initial certification.

Implementation: Individuals who hold the Certificate of Clinical Competence (CCC) in Speech-Language Pathology must accumulate 30 contact hours of professional development over the 3-year period in order to meet this standard. Individuals will be subject to a random review of their professional development activities.

If renewal of certification is not accomplished within the 3-year period, certification will lapse. Reinstatement of certification will be required, and certification standards in effect at the time of submission of the reinstatement application must be met.

In preparation, accrual and submission of the professional development activities during the certification maintenance interval, all activities must be guided by adherence to the ASHA Code of Ethics.

Continued professional development may be demonstrated through one or more of the following options:

- Accumulation of 3 Continuing Education Units (CEUs) (30 contact hours) from continuing education providers approved by ASHA. ASHA CEUs may be earned through group activities (e.g., workshops, conferences), independent study (e.g., course development, research projects, internships, attendance at educational programs offered by non-ASHA CE providers), and self-study (e.g., videotapes, audiotapes, journals).
- Accumulation of 3 CEUs (30 contact hours) from a provider authorized by the International Association for Continuing Education and Training (IACET).
- Accumulation of 2 semester credit hours (3 quarter-hours) from a college or university that holds regional accreditation or accreditation from an equivalent nationally recognized or governmental accreditation authority.
- Accumulation of 30 contact hours from employer-sponsored in-service or other continuing education activities that contribute to professional development.

The ASHA Clinical Certification Standards define professional development as an instructional activity

- where the certificate holder is the learner;
- that is related to the science or contemporary practice of speech-language pathology, audiology, and/or the speech/language/hearing sciences;
- that results in the acquisition of new knowledge and skills or the enhancement of current knowledge and skills necessary for independent practice in any practice setting and area of practice;
- where the certificate holder is responsible for determining that the professional development activity is appropriate, relevant and meaningful to any practice setting and area of practice;

- in which the certificate holder's attendance can be documented by a third party such as an employer, educational institution, or sponsoring organization.

If you were initially certified (or reinstated):	You'll need 30 hours of professional development between:
Before January 1, 1980	January 1, 2005 and December 31, 2007
Between January 1, 1980 and December 31, 1989	January 1, 2006 and December 31, 2008
Between January 1, 1990 and December 31, 1999	January 1, 2007 and December 31, 2009
Between January 1, 2000 and December 31, 2004	January 1, 2008 and December 31, 2010
After January 1, 2005	January 1 (of the year following your certification effective date) and December 31 (three years from that date)
<i>Example:</i> Certified anytime in 2005	<i>Example:</i> First maintenance interval will be between January 1, 2006 and December 31, 2008
Certified anytime in 2007	First maintenance interval will be between January 1, 2008 and December 31, 2010

APPENDIX G
STANDARDS FOR ACCREDITATION OF GRADUATE EDUCATION PROGRAMS
IN AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY

Approved July 2006 Implementation date: January 1, 2008

Introduction

The Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) of the American Speech-Language-Hearing Association (ASHA) accredits graduate¹ programs that prepare individuals to enter professional practice in audiology and/or speech-language pathology. The CAA was established by ASHA and is authorized to function autonomously in setting and implementing standards and awarding accreditation. The CAA is recognized by the Council for Higher Education Accreditation and by the U.S. Secretary of Education as the accrediting agency for the accreditation and preaccreditation (accreditation candidate) of education programs leading to the first professional or clinical degree at the master's or doctoral level and for the accreditation of these programs offered via distance education, throughout the United States.

The intention of accreditation is to promote excellence in educational preparation while assuring the public that graduates of accredited programs are educated in a core set of knowledge and skills required for independent professional practice. Quality education can be achieved in a variety of ways, and the CAA wishes to support programs in the achievement of the highest quality possible. These standards identify basic elements that must exist in all accredited graduate education programs while encouraging flexibility in the ways in which programs pursue excellence.

The CAA has identified the following six components as essential to quality education in the professions and has established its accreditation standards accordingly:

- administrative structure and governance
- faculty
- curriculum (academic and clinical education)
- students
- assessment
- program resources

Accreditation Standards

The CAA has adopted the following standards as necessary conditions for accreditation of eligible graduate education programs. The CAA is responsible for evaluating the adequacy of an applicant program's efforts to satisfy each standard. Compliance with all standards represents the minimum requirement for accreditation.

Recognizing that the entry-level degree programs in audiology and speech-language pathology are different in scope and delivery, Standard 3.0 (Curriculum) is divided into two separate components, 3.0A for audiology and 3.0B for speech-language pathology, to clarify the curricular distinctions between the professions. Programs that apply for accreditation in both areas must address both Curriculum sections. Separate reporting may be necessary for other standards where distinct

¹ *Graduate* refers to programs leading to a master's or doctoral degree, including a clinical doctoral degree, offered through graduate or professional schools.

differences exist between the audiology and speech-language pathology programs. Standards for accreditation appear in bold. Italicized information following each standard provides interpretations or explanations of the standard and/or guidance to applicants on how to document compliance.

Standard 1.0

Administrative Structure and Governance

1.1 The applicant institution of higher education holds regional accreditation.

The institution of higher education within which the applicant audiology and/or speech-language pathology program is housed must hold regional accreditation from one of the following six regional accrediting bodies: (1) Middle States Commission on Higher Education; (2) New England Association of Schools and Colleges, Commission on Institutions of Higher Education; (3) The Higher Learning Commission of the North Central Association of Colleges and Schools; (4) Northwest Commission on Colleges and Universities; (5) Southern Association of Colleges and Schools, Commission on Colleges; or (6) Western Association of Schools and Colleges, Accrediting Commission for Senior Colleges and Universities. For programs with components located outside the region of the home campus, the program must verify to the CAA that all locations in which its academic components are housed, including official satellite campuses outside of the United States, are regionally accredited.

1.2 The program's mission and goals are consistent with CAA standards for entry into professional practice (3.1A and/or 3.1B) and with the mission of the institution.

The mission statements of the institution, college, and program must be presented as evidence to support compliance with this standard. The program's faculty must regularly evaluate the congruence of program and institutional goals and the extent to which the goals are achieved.

1.3 The program develops and implements a long-term strategic plan.

The plan must be congruent with the mission of the institution, have the support of the university administration, and reflect the role of the program within the community. Components of a plan may include long-term program goals, specific measurable objectives, strategies for attainment, a schedule for analysis, and a mechanism for regular evaluation of the plan itself and of progress in meeting the plan's objectives. The plan and the results of the regular evaluation of the plan and its implementation must be shared with faculty, students, staff, alumni, and other interested parties.

1.4 The program's faculty² has authority and responsibility for the program.

The institution must indicate by its administrative structure that the program's faculty is recognized as a body that can initiate, implement, and evaluate decisions affecting all aspects of the professional education program, including the curriculum. The program's faculty has reasonable access to higher levels of administration. The program must describe how substantive decisions regarding the academic and clinical programs are initiated, developed, and implemented by the program faculty. Programs without independent departmental status must be particularly clear in describing these aspects of the organizational structure.

1.5 The individual responsible for the program(s) of professional education seeking accreditation holds a graduate degree with a major emphasis in speech-language pathology, in audiology, or in speech, language, and hearing science and holds a full-time appointment in the institution. The individual effectively leads and administers the program(s).

Individuals without earned graduate degrees in the areas listed in the standard but with earned graduate degrees in

² In this document, the term *faculty*, unless otherwise qualified, is meant to include faculty members (tenure-track and non-tenure-track), lecturers, clinical supervisors, and all other instructional staff members who are employees of the program. This term does not apply to off-site clinical supervisors, preceptors, internship mentors, or similar personnel who do not hold employment contracts with the institution of higher education.

other areas of major emphasis, such as linguistics, deaf education, special education, reading, administration, speech communication, or otolaryngology, typically do not satisfy this standard. A department chair who is not serving as the program director need not meet this standard, but it must be clear in this situation that the program director is indeed responsible for the program(s) of professional education.

Regular evaluation of the program director's effectiveness in advancing the goals of the program and institution and in leadership and administration of the program must be documented.

1.6 Students, faculty, staff, and persons served in the program's clinic are treated in a nondiscriminatory manner—that is, without regard to race, color, religion, sex, national origin, participation restriction, age, sexual orientation, or status as a parent. The institution and program comply with all applicable laws, regulations, and executive orders pertaining thereto.

The signature of the institution's president or designee on the application for accreditation affirms the institution's compliance with all applicable federal, state, and local laws prohibiting discrimination, including harassment, on the basis of race, color, religion, sex, national or ethnic origin, physical or mental disability or condition, age, sexual orientation, status as a parent, and status as a covered veteran, including, but not limited to, the Americans with Disabilities Act of 1990, the Civil Rights Act of 1964, the Equal Pay Act, the Age Discrimination in Employment Act, the Age Discrimination Act of 1975, Title IX of the Education Amendments of 1972 (to the Higher Education Act of 1965), the Rehabilitation Act of 1973, the Vietnam-Era Veterans Readjustment Assistance Act of 1974, and all amendments to the foregoing. The program demonstrates compliance through its policies and procedures.

1.7 The program provides information about the program and the institution to students and to the public that is current, accurate, and readily available.

Web sites, catalogs, advertisements, and other publications/electronic media must be accurate regarding the program's accreditation status, standards and policies regarding recruiting and admission practices, academic offerings, matriculation expectations, academic calendars, grading policies and requirements, and fees and other charges. Data on the following student outcome measures must be available to the public: program completion rates, Praxis examination pass rates, and employment rates. (See Standard 5.3 below.)

Standard 2.0 Faculty

2.1 All faculty members, including all individuals providing clinical education, are qualified and competent by virtue of their education, experience, and professional credentials to provide academic and clinical education assigned by the program.

Qualifications and competence to teach graduate-level courses and to provide clinical education must be evident in terms of appropriateness of degree level, practical or educational experiences specific to responsibilities in the program, and other indicators of competence to offer graduate education. All individuals providing clinical education, both on-site and off-site, must have appropriate experience and credentials for the professional area in which clinical education is provided. The faculty must possess appropriate qualifications and expertise to provide the depth and breadth of instruction for the curriculum, consistent with the institutional expectations for clinical graduate programs. Academic content is to be taught by doctoral-level faculty except where there is a compelling rationale for instruction by an individual with other professional qualifications that satisfy institutional policy.

2.2 The number of full-time doctoral-level faculty in speech-language pathology, audiology, and speech, language, and hearing sciences and other full- and part-time faculty is sufficient to meet the teaching, research, and service needs of the program and the expectations of the institution. The institution provides stable support and resources for the program's faculty.

A sufficient number of qualified doctoral-level faculty with fulltime appointments is essential for accreditation. This number must include research-qualified faculty (e.g., PhDs). The program must document that the number of doctoral-level and other faculty is sufficient to offer the breadth and depth of the curriculum, including its scientific and research components, so that students can complete the requirements within a reasonable time period and achieve the expected knowledge and skills. The faculty must have sufficient time for scholarly and creative activities, advising students, participating in faculty governance, and other activities consistent with the institution's expectations.

Faculty must be accessible to students. Institutional commitment to the program's faculty is demonstrated through documentation of stability of financial support for faculty, evidence that workload assignments are consistent with institutional policies, and evidence of positive actions taken on behalf of the program's faculty. The program must demonstrate that faculty members have the opportunity to meet the institution's criteria for tenure, promotion, or continued employment, in accord with the institution's policies.

2.3 Faculty members maintain continuing competence.

Faculty can demonstrate continuing competence in a variety of ways, including course and curricular development, professional development, and research activities. Evidence of each faculty member's professional development activities must appear in faculty vitae.

The program must demonstrate that support, incentives, and resources are available for the continued professional development of the faculty. Examples of evidence include release time for research and professional development, support for professional travel, and professional development opportunities on campus.

Standard 3.0B Curriculum (Academic and Clinical Education in SPEECH-LANGUAGE PATHOLOGY)

3.1B The curriculum (academic and clinical education) is consistent with the mission and goals of the program and prepares students in the full breadth and depth of the scope of practice in speech-language pathology.

The program must provide a curriculum leading to a master's or other entry-level graduate clinical degree with a major emphasis in speech-language pathology. The program must offer appropriate courses and clinical experiences on a regular basis so that students may satisfy the degree requirements within the published time frame.

The intent of this standard is to ensure that program graduates are able to acquire the knowledge and skills needed for entry into professional practice and to meet relevant licensure and certification standards. Programs of study in speech-language pathology must be sufficient in depth and breadth for graduates to achieve the knowledge and skills outcomes identified for entry into professional practice as listed below. Typically, the achievement of these outcomes requires the completion of 2 years of graduate education or the equivalent.

The curriculum in speech-language pathology must provide the opportunity for students to complete a minimum of 400 clinical education hours, 325 of which must be attained at the graduate level. The program must provide sufficient breadth and depth of opportunities for students to obtain a variety of clinical education experiences in different work settings, with different populations, and with appropriate equipment and resources in order to acquire and demonstrate skills across the scope of practice in speech-language pathology, sufficient to enter professional practice.

It is the responsibility of the program to plan a clinical program of study for each student. The program must demonstrate that it has sufficient agreements with supervisors or preceptors and clinical sites to provide each student with the clinical experience necessary to prepare them for independent professional practice. It is the program's responsibility to design, organize, administer, and evaluate the overall clinical education of each student. The program must provide an academic and clinical curriculum that is sufficient for students to acquire and demonstrate, at a minimum, knowledge of basic human communication and swallowing processes, including their biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases.

The program must provide opportunities for students to acquire and demonstrate knowledge of the nature of speech, language, hearing, and communication disorders and differences, as well as swallowing disorders, including etiologies, characteristics, and anatomical/physiological, acoustic, psychological, developmental, linguistic, and cultural correlates. These opportunities must be provided in the following areas:

- articulation
- fluency
- voice and resonance, including respiration and phonation

- receptive and expressive language (phonology, morphology, syntax, semantics, and pragmatics) in speaking, listening, reading, writing, and manual modalities
- hearing, including the impact on speech and language
- swallowing (oral, pharyngeal, esophageal, and related functions, including oral function for feeding; orofacial myofunction)
- cognitive aspects of communication (e.g., attention, memory, sequencing, problem solving, executive functioning)
- social aspects of communication (e.g., behavioral and social skills affecting communication)
- communication modalities (e.g., oral, manual, and augmentative and alternative communication techniques and assistive technologies)

The program must provide opportunities for students to acquire and demonstrate knowledge in the following areas:

- principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders across the life span, including consideration of anatomical/physiological, psychological, developmental, linguistic, and cultural correlates of the disorders
- standards of ethical conduct
- interaction and interdependence of speech, language, and hearing in the discipline of human communication sciences and disorders
- processes used in research and the integration of research principles into evidence-based clinical practice
- contemporary professional issues
- certification, specialty recognition, licensure, and other relevant professional credentials

The program must provide opportunities for students to acquire and demonstrate skills in the following areas:

- oral and written or other forms of communication
- prevention, evaluation, and intervention of communication disorders and swallowing disorders
- interaction and personal qualities, including counseling, collaboration, ethical practice, and professional behavior
- effective interaction with patients, families, professionals, and other individuals, as appropriate
- delivery of services to culturally and linguistically diverse populations
- application of the principles of evidence-based practice
- self-evaluation of effectiveness of practice

3.2B Academic and clinical education reflects current knowledge, skills, technology, and scope of practice. The curriculum is regularly reviewed and updated. The diversity of society is reflected throughout the curriculum.

The program must provide evidence that the curriculum is regularly and systematically evaluated and updated to reflect current knowledge and scope of practice in the profession. Sensitivity to issues of diversity should be infused throughout the curriculum. Evidence of regular and systematic evaluation may include institutional program evaluations, exit interviews, alumni and employer input, and faculty and administrative review of student performance and outcomes.

3.3B The scientific and research foundations of the profession are evident in the curriculum.

The program must demonstrate how it verifies that students obtain knowledge in the basic sciences (e.g., biological, behavioral, physical science, and mathematics), basic science skills (e.g., scientific methods and critical thinking), and the basic communication sciences (e.g., acoustics; physiological and neurological processes of speech, language, and hearing; linguistics). The curriculum must provide opportunities for students to become knowledgeable consumers of research literature. The curriculum must reflect the scientific bases of the professions and include research methodology, research literature, and opportunities to participate in research and scholarship activities, consistent with the mission and goals of the program and institutional expectations.

3.4B The academic and clinical curricula reflect an appropriate sequence of learning experiences.

The program must provide evidence of appropriate sequencing of course work and clinical education. Appropriate sequencing must be evident in examples of typical programs of study, including clinical placements.

3.5B Clinical supervision is commensurate with the clinical knowledge and skills of each student, and

clinical procedures ensure that the welfare of each person served by students is protected, in accord with recognized standards of ethical practice and relevant federal and state regulations.

The program must demonstrate how the nature and amount of supervision are determined and adjusted to reflect the competence of each student. The program's written policies must describe the extent to which students are supervised and have access to supervisor or preceptor consultation when providing services to client/patients. Procedures for client/patient safety, confidentiality, and security of client/patient records must also be clearly described in the program's written policies, in accordance with relevant federal and state regulations. Ethical standards must be clearly documented in the program's published materials.

3.6B Clinical education obtained in external placements is governed by agreements between the program and the external facility and is monitored by program faculty.

The program must provide examples of its written agreements with external facilities, its policies regarding the identification and ongoing evaluation of external facilities, procedures for selecting and placing students in external clinical sites, and evidence that clinical education in external facilities is monitored by the program to ensure that educational objectives are met.

3.7B The clinical education component of the curriculum provides students with access to a client/patient base that is sufficient to achieve the program's stated mission and goals and includes a variety of clinical settings, client/patient populations, and age groups.

The program must describe how it ensures that each student is exposed to a variety of populations across the life span and from culturally and linguistically diverse backgrounds. Clinical education must include experience with client/patient populations with various types and severities of communication and/or related disorders, differences, and disabilities. The program must provide information about the size and diversity of the client/patient base and describe the clinical populations available in the facilities where students are placed.

3.8B The program must provide evidence that all curriculum standards are met, regardless of mode of delivery.

Distance education and other modes of education delivery must be examined to ensure that the course work and clinical education are equivalent to that offered in the existing program, including number of credits, availability and sequencing of courses, supervision, coordination of placements with external facilities, and diversity of client/patient population. The overall quality of the program must be equivalent across modes of delivery.

Standard 4.0 Students

4.1 The program criteria for accepting students for graduate study in audiology and/or speech-language pathology meet or exceed the institutional policy for admission to graduate study.

The program's criteria for admission must meet or exceed those of the institution and be appropriate for the degree being offered. The admissions standards of the program and of the institution must be described and a rationale presented for any differences between the two sets of criteria. Policies regarding any exceptions to the criteria (such as "conditional" status) must be clearly explained and consistently followed.

4.2 The program makes reasonable adaptations in curriculum, policies, and procedures to accommodate differences among individual students.

The program must provide evidence that its curriculum and its policies and procedures for admission, internal and external clinical placements, and retention of students reflect a respect for and understanding of cultural and individual diversity. The program must provide its policy regarding proficiency in English and/or other languages of service delivery and all other performance expectations.

4.3 Students are informed about the program's policies and procedures, degree requirements, requirements for professional credentialing, and ethical practice. Students are informed about documented complaint processes.

Programs may provide this information to students through student handbooks or other written means. The program

must maintain a record of student complaints and make these available to the CAA upon request. Students must be made aware of the contact information for the CAA in the event they wish to file a complaint related to the program's compliance with standards for accreditation.

4.4 Students receive advising on a regular basis that pertains to both academic and clinical performance and progress. Students also are provided information about student support services.

The program must describe how students are advised on a timely and continuing basis regarding their academic and clinical progress. In addition, the program must describe how students receive information about the full range of student support services available at the institution.

4.5 The program must provide evidence that all student standards are met, regardless of mode of delivery for curriculum.

The program must ensure that students enrolled in distance education or other modes of education delivery are held to equivalent standards and afforded equivalent access to advising, student support services, and program resources.

Standard 5.0 Assessment

5.1 The program conducts ongoing and systematic formative and summative assessment of the performance of its current students.

The program identifies student learning outcomes and uses a variety of assessment techniques, administered by a range of program faculty and supervisors or preceptors, to evaluate students' progress. Students are provided regular feedback about their progress in achieving the expected knowledge and skills in all academic and clinical components of the program, including all off-site experiences. The program documents the feedback mechanisms (e.g., grade definitions, performance rubrics) used to evaluate students' performance and applies those mechanisms consistently. The program documents guidelines for remediation (e.g. repeatable courses and/or clinical experiences, provisions for re-taking examinations) and implements remediation opportunities consistently.

5.2 The program documents student progress toward completion of the graduate degree and professional credentialing requirements and makes this information available to assist students in qualifying for certification and licensure.

The program must maintain accurate and complete records throughout each student's graduate program. It is advisable that forms or tracking systems be developed and used for this purpose. Responsibility for the completion of the records and timetable for completion must be clearly established. Records must be readily available to students upon request. Records must be available to program graduates in accordance with the institution's and program's policies for retention of student information, and those policies must be described. The program must maintain documentation on each student in sufficient detail so that completion of all academic and clinical requirements can be verified.

5.3 The program conducts regular and ongoing assessments of program effectiveness and uses the results for continuous improvement.

The program must document the procedures followed in evaluating the quality, currency, and effectiveness of its graduate program and the process by which it engages in systematic self-study. The documentation must indicate the mechanisms used to evaluate each program component, the schedule on which the evaluations are conducted and analyzed, and the program changes and/or improvements that have resulted from assessments.

The program collects and evaluates data on its effectiveness from multiple sources (e.g., students, alumni, faculty, employers, off-site supervisors or preceptors, community members, persons served). The data must include students' and graduates' evaluations of courses and clinical education.

Although many types of data may be used, the following measures of student achievement are required and will be evaluated relative to established benchmarks:

- *percentage of students passing the Praxis examinations by year*

- percentage of students completing the program within the program's published time frame
- percentage of program graduates employed in the profession or pursuing further education in the profession within 1 year of graduation

These required student achievement measures must be presented to the public in program information materials (e.g., Web site, brochures) that are regularly updated and readily available.

Results of the assessments must be used to plan and implement program improvements that are consistent with the program's mission and goals.

5.4 The program regularly evaluates all faculty members and faculty uses the results for continuous improvement.

The program must describe the mechanism for regular evaluation of its faculty by program leadership (e.g. director, chair, evaluation committee) in accordance with institutional policy and guidelines. Students also must have the opportunity to evaluate faculty in all academic and clinical settings on a regular and ongoing basis. The program must demonstrate how results of all evaluations are communicated to the faculty and used to improve performance.

Standard 6.0 Program Resources

6.1 The institution provides adequate financial support to the program so that the program can achieve its stated mission and goals.

The program must provide evidence that budgetary allocations received for personnel, space, equipment, research support, materials, and supplies are regular, appropriate, and sufficient for its operations.

6.2 The program has adequate physical facilities (classrooms, offices, clinical space, research laboratories) that are accessible, appropriate, safe, and sufficient to achieve the program's mission and goals.

The program must demonstrate that its facilities are adequate and reflect contemporary standards of ready and reasonable access and use. This includes accommodations for the needs of persons with disabilities consistent with the mandates of the Americans with Disabilities Act of 1990 and the Rehabilitation Act of 1973.

6.3 The program's equipment and educational/ clinical materials are appropriate and sufficient to achieve the program's mission and goals.

The program must provide evidence that the amount, quality, currency, and accessibility of equipment and materials are sufficient to meet program goals and that the equipment is maintained in good working order. The program must provide evidence of calibration of equipment on a regular schedule, including evidence that the equipment meets standards specified by the manufacturer, the American National Standards Institute, or other appropriate agencies.

6.4 The program has access to clerical and technical staff, support services, and library and technology resources that are appropriate and sufficient to achieve the program's mission and goals.

The program must demonstrate access to appropriate and sufficient resources for faculty and students, such as library resources, interlibrary loan services, access to the Internet, computer and laboratory facilities, and support personnel. The program must describe how the adequacy of support is evaluated and how these resources are addressed in the program's strategic plan.

<p style="text-align: center;">APPENDIX H ASHA CODE OF ETHICS</p>

Preamble

The preservation of the highest standards of integrity and ethical principles is vital to the responsible discharge of obligations by speech-language pathologists, audiologists, and speech, language, and hearing scientists. This Code of Ethics sets forth the fundamental principles and rules considered essential to this purpose.

Every individual who is (a) a member of the American Speech-Language-Hearing Association, whether certified or not, (b) a nonmember holding the Certificate of Clinical Competence from the Association, (c) an applicant for membership or certification, or (d) a Clinical Fellow seeking to fulfill standards for certification shall abide by this Code of Ethics.

Any violation of the spirit and purpose of this Code shall be considered unethical. Failure to specify any particular responsibility or practice in this Code of Ethics shall not be construed as denial of the existence of such responsibilities or practices.

The fundamentals of ethical conduct are described by Principles of Ethics and by Rules of Ethics as they relate to the responsibility to persons served, the public, speech-language pathologists, audiologists, and speech, language, and hearing scientists, and to the conduct of research and scholarly activities.

Principles of Ethics, aspirational and inspirational in nature, form the underlying moral basis for the Code of Ethics. Individuals shall observe these principles as affirmative obligations under all conditions of professional activity.

Rules of Ethics are specific statements of minimally acceptable professional conduct or of prohibitions and are applicable to all individuals.

Principle of Ethics I

Individuals shall honor their responsibility to hold paramount the welfare of persons they serve professionally or who are participants in research and scholarly activities, and they shall treat animals involved in research in a humane manner.

Rules of Ethics

1. Individuals shall provide all services competently.
2. Individuals shall use every resource, including referral when appropriate, to ensure that high-quality service is provided.
3. Individuals shall not discriminate in the delivery of professional services or the conduct of research and scholarly activities on the basis of race or ethnicity, gender, gender identity/gender expression, age, religion, national origin, sexual orientation, or disability.
4. Individuals shall not misrepresent the credentials of assistants, technicians, support personnel, students, Clinical Fellows, or any others under their supervision, and they shall inform those they serve professionally of the name and professional credentials of persons providing services.
5. Individuals who hold the Certificate of Clinical Competence shall not delegate tasks that require the unique skills, knowledge, and judgment that are within the scope of their profession to assistants, technicians, support personnel, or any nonprofessionals over whom they have supervisory responsibility.
6. Individuals who hold the Certificate of Clinical Competence may delegate tasks related to provision of clinical services to assistants, technicians, support personnel, or any other persons only if those services are appropriately supervised, realizing that the responsibility for client welfare remains with the certified individual.
7. Individuals who hold the Certificate of Clinical Competence may delegate tasks related to provision of clinical services that require the unique skills, knowledge, and judgment that are within the scope of practice of their profession to students only if those services are appropriately supervised. The responsibility for client welfare remains with the certified individual.
8. Individuals shall fully inform the persons they serve of the nature and possible effects of services rendered and products dispensed, and they shall inform participants in research about the possible effects of their participation in research conducted.
9. Individuals shall evaluate the effectiveness of services rendered and of products dispensed, and they shall provide services or dispense products only when benefit can reasonably be expected.
10. Individuals shall not guarantee the results of any treatment or procedure, directly or by implication; however, they may make a reasonable statement of prognosis.
11. Individuals shall not provide clinical services solely by correspondence.
12. Individuals may practice by telecommunication (e.g., telehealth/e-health), where not prohibited by law.
13. Individuals shall adequately maintain and appropriately secure records of professional services rendered, research and scholarly activities conducted, and products dispensed, and they shall allow access to these records only when authorized or when required by law.
14. Individuals shall not reveal, without authorization, any professional or personal information about identified persons served professionally or identified participants involved in research and scholarly activities unless doing so is necessary to protect the welfare of the person or of the community or is otherwise required by law.
15. Individuals shall not charge for services not rendered, nor shall they misrepresent services rendered, products dispensed, or research and scholarly activities conducted.
16. Individuals shall enroll and include persons as participants in research or teaching demonstrations only if their participation is voluntary, without coercion, and with their informed consent.

17. Individuals whose professional services are adversely affected by substance abuse or other health-related conditions shall seek professional assistance and, where appropriate, withdraw from the affected areas of practice.
18. Individuals shall not discontinue service to those they are serving without providing reasonable notice.

Principle of Ethics II

Individuals shall honor their responsibility to achieve and maintain the highest level of professional competence and performance.

Rules of Ethics

1. Individuals shall engage in the provision of clinical services only when they hold the appropriate Certificate of Clinical Competence or when they are in the certification process and are supervised by an individual who holds the appropriate Certificate of Clinical Competence.
2. Individuals shall engage in only those aspects of the professions that are within the scope of their professional practice and competence, considering their level of education, training, and experience.
3. Individuals shall engage in lifelong learning to maintain and enhance professional competence and performance.
4. Individuals shall not require or permit their professional staff to provide services or conduct research activities that exceed the staff member's competence, level of education, training, and experience.
5. Individuals shall ensure that all equipment used to provide services or to conduct research and scholarly activities is in proper working order and is properly calibrated.

Principle of Ethics III

Individuals shall honor their responsibility to the public by promoting public understanding of the professions, by supporting the development of services designed to fulfill the unmet needs of the public, and by providing accurate information in all communications involving any aspect of the professions, including the dissemination of research findings and scholarly activities, and the promotion, marketing, and advertising of products and services.

Rules of Ethics

1. Individuals shall not misrepresent their credentials, competence, education, training, experience, or scholarly or research contributions.
2. Individuals shall not participate in professional activities that constitute a conflict of interest.
3. Individuals shall refer those served professionally solely on the basis of the interest of those being referred and not on any personal interest, financial or otherwise.

4. Individuals shall not misrepresent research, diagnostic information, services rendered, results of services rendered, products dispensed, or the effects of products dispensed.
5. Individuals shall not defraud or engage in any scheme to defraud in connection with obtaining payment, reimbursement, or grants for services rendered, research conducted, or products dispensed.
6. Individuals' statements to the public shall provide accurate information about the nature and management of communication disorders, about the professions, about professional services, about products for sale, and about research and scholarly activities.
7. Individuals' statements to the public when advertising, announcing, and marketing their professional services; reporting research results; and promoting products shall adhere to professional standards and shall not contain misrepresentations.

Principle of Ethics IV

Individuals shall honor their responsibilities to the professions and their relationships with colleagues, students, and members of other professions and disciplines.

Rules of Ethics

1. Individuals shall uphold the dignity and autonomy of the professions, maintain harmonious interprofessional and intraprofessional relationships, and accept the professions' self-imposed standards.
2. Individuals shall prohibit anyone under their supervision from engaging in any practice that violates the Code of Ethics.
3. Individuals shall not engage in dishonesty, fraud, deceit, or misrepresentation.
4. Individuals shall not engage in any form of unlawful harassment, including sexual harassment or power abuse.
5. Individuals shall not engage in any other form of conduct that adversely reflects on the professions or on the individual's fitness to serve persons professionally.
6. Individuals shall not engage in sexual activities with clients, students, or research participants over whom they exercise professional authority or power.
7. Individuals shall assign credit only to those who have contributed to a publication, presentation, or product. Credit shall be assigned in proportion to the contribution and only with the contributor's consent.
8. Individuals shall reference the source when using other persons' ideas, research, presentations, or products in written, oral, or any other media presentation or summary.
9. Individuals' statements to colleagues about professional services, research results, and products shall adhere to prevailing professional standards and shall contain no misrepresentations.
10. Individuals shall not provide professional services without exercising independent professional judgment, regardless of referral source or prescription.
11. Individuals shall not discriminate in their relationships with colleagues, students, and members of other professions and disciplines on the basis of race or ethnicity, gender, gender identity/gender expression, age, religion, national origin, sexual orientation, or disability.

12. Individuals shall not file or encourage others to file complaints that disregard or ignore facts that would disprove the allegation, nor should the Code of Ethics be used for personal reprisal, as a means of addressing personal animosity, or as a vehicle for retaliation.
 13. Individuals who have reason to believe that the Code of Ethics has been violated shall inform the Board of Ethics.
 14. Individuals shall comply fully with the policies of the Board of Ethics in its consideration and adjudication of complaints of violations of the Code of Ethics.
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Reference this material as: American Speech-Language-Hearing Association. (2010). *Code of Ethics* [Ethics]. Available from www.asha.org/policy.

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<p style="text-align: center;">APPENDIX I ELIGIBILITY REQUIREMENTS AND ESSENTIAL FUNCTIONS</p>
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*Adapted from a draft document of the
Council of Academic Programs in Communication Sciences and Disorders (2007)*

In order to acquire the knowledge and skills requisite to the practice of speech-language pathology, to function in a broad variety of clinical situations, and to render a wide spectrum of patient care, individuals must have skills and attributes in five areas: communication, motor, intellectual-cognitive sensory-observational, and behavioral-social. These skills enable a student to meet graduate and professional requirements as measured by state licensure and national certification. Many of these skills can be learned and developed during the course of the graduate program through coursework and clinical experience. The starred items (*), however, are skills that are more inherent and should be present when a student begins the program.

COMMUNICATION

A student must possess adequate communication skills to:

- Communicate proficiently in both oral and written English language. *
- Possess reading and writing skills sufficient to meet curricular and clinical demands.*
- Perceive and demonstrate appropriate non-verbal communication for culture and context.*
- Modify communication style to meet the communication needs of clients, caregivers, and other persons served. *
- Communicate professionally and intelligibly with patients, colleagues, other healthcare professionals, and community or professional groups.
- Communicate professionally, effectively, and legibly on patient documentation, reports, and scholarly papers required as a part of course work and professional practice.
- Convey information accurately with relevance and cultural sensitivity.

MOTOR

A student must possess adequate motor skills to:

- Sustain necessary physical activity level in required classroom and clinical activities.*
- Respond quickly to provide a safe environment for clients in emergency situations including fire, choking, etc.*
- Access transportation to clinical and academic placements.*
- Participate in classroom and clinical activities for the defined workday.*
- Efficiently manipulate testing and treatment environment and materials without violation of testing protocol and with best therapeutic practice.
- Manipulate patient-utilized equipment (e.g., durable medical equipment to include AAC devices, hearing aids, etc) in a safe manner.
- Access technology for clinical management (i.e., billing, charting, therapy programs, etc.).

INTELLECTUAL / COGNITIVE

A student must possess adequate intellectual and cognitive skills to:

- Comprehend, retain, integrate, synthesize, infer, evaluate and apply written and verbal information sufficient to meet curricular and clinical demands.*
- Identify significant findings from history, evaluation, and data to formulate a diagnosis and develop a treatment plan.

- Solve problems, reason, and make sound clinical judgments in patient assessment, diagnostic and therapeutic plan and implementation.
- Self evaluate, identify, and communicate limits of one's own knowledge and skill to appropriate professional level and be able to identify and utilize resources in order to increase knowledge.
- Utilize detailed written and verbal instruction in order to make unique and dependent decisions.

SENSORY/OBSERVATIONAL

A student must possess adequate sensory skills of vision, hearing, tactile, and smell to:

- Visually and auditorily identify normal and disordered: fluency, articulation, voice, resonance, respiration characteristics; oral and written language in the areas of semantics, pragmatics, syntax, morphology and phonology; hearing and balance disorders; swallowing; social interaction; and cognition related to communication.
- Identify the need for alternative modalities of communication.
- Visualize and identify anatomic structures.
- Visualize and discriminate imaging findings.
- Identify and discriminate findings on imaging studies.
- Discriminate text, numbers, tables, and graphs associated with diagnostic instruments and tests.
- Recognize when a client's family does or does not understand the clinician's written and or verbal communication.

BEHAVIORAL/ SOCIAL

A student must possess adequate behavioral and social attributes to:

- Display mature empathetic and effective professional relationships by exhibiting compassion, integrity, and concern for others.*
- Recognize and show respect for individuals with disabilities and for individuals of different ages, genders, race, religions, sexual orientation, and cultural and socioeconomic backgrounds.*
- Conduct oneself in an ethical and legal manner, upholding the ASHA Code of Ethics and university and federal privacy policies.*
- Maintain general good physical and mental health and self care in order not to jeopardize the health and safety of self and others in the academic and clinical setting.*
- Adapt to changing and demanding environments (which includes maintaining both professional demeanor and emotional health).
- Manage the use of time effectively to complete professional and technical tasks within realistic time constraints.
- Accept appropriate suggestions and constructive criticism and respond by modification of behaviors.
- Dress appropriately and professionally.

NOTES