Speech and Language Clinic Handbook

BYU McKay School of Education
COMMUNICATION DISORDERS

Revised July 2022
BYU Speech and Language Clinic

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The Master of Science (M.S.) education program in speech-language pathology (residential) at Brigham Young University is accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) of the American Speech-Language-Hearing Association, 2200 Research Boulevard #310, Rockville, Maryland 20850, 800-498-2071 or 301-296-5700.
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Introduction To The Speech And Language Clinic Handbook

Congratulations on your admission to the Graduate Program in the Department of Communication Disorders (ComD) at Brigham Young University. As part of the graduate program in ComD, each graduate student will be required to complete several clinical rotations both in the BYU Speech and Language Clinic as well as at externship sites located in and around the Wasatch Front area of Utah. This handbook contains important policies and procedures that will instruct students on important professional matters ranging from dress and grooming expectations to attendance and non-discrimination policies. The policies and procedures are most often written to help students have a clear understanding of what the professional expectations are in the field of Speech-Language Pathology and thus, in the Department of Communication Disorders and the BYU Speech and Language Clinic.

Many of the policies contained in this handbook have been adopted from Brigham Young University policies and are written just as they appear on BYU’s web pages. BYU wording will be indicated in quotation marks. Other policies have been created due to the special circumstances regarding treatment of clients. There are also policies that have been adapted based on input from external agencies (e.g., Council on Academic Accreditation, Council for Clinical Certification in Audiology and Speech-Language Pathology) that review for accreditation and certification purposes.

The current Clinic Director of the BYU Speech and Language Clinic is responsible for the content of this handbook. All policies and procedures have been reviewed and approved by the faculty of the ComD department. Please direct all comments and/or questions regarding this handbook to the BYU Speech and Language Clinic Director, Clinical Professor Lee Robinson, MS, CCC-SLP 801-422-7650 lee_robinson@byu.edu.

One final note of introduction; as King Mosiah states in chapter 4:29-30 (Book of Mormon), I cannot tell you all the possible ways you could act contrary to policy. It is imperative that you begin to develop a sense of professionalism, which includes taking responsibility for your actions. Take responsibility for your actions by reading and understanding the policies and procedures contained in this Handbook. I know you will be blessed with success as you strive to understand and apply these policies while working as a graduate student clinician in the BYU Speech and Language Clinic.

1.1 BYU Communication Disorders’ Mission Statement

The mission of the Department of Communication Disorders is to build belonging, achievement, and growth through Christlike service to:

- Empower lifelong learners
- Engage in impactful research
- Provide compassionate, evidence-based clinical care

The department’s core values are Belonging, Becoming, Collaboration and Kindness.
1.1 Orientation

1.1.1 Off-campus orientation packet
Prior to arriving on campus, you must complete several tasks that will prepare you to work in the BYU Speech and Language Clinic. The off-campus orientation packet was sent to you via email during the summer term prior to your first fall semester. Click here to access the off-campus orientation packet.

The table below outlines the topics and tasks covered in the off-campus orientation packet.

<table>
<thead>
<tr>
<th>Task Description</th>
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</thead>
<tbody>
<tr>
<td>Section 1 Registration</td>
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<tr>
<td>Section 2 ASHA Code of Ethics</td>
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<tr>
<td>Section 3 Scope of Practice in Speech-Language Pathology</td>
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<tr>
<td>Section 4 Confidentiality Form</td>
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<td>Section 5 HIPAA Training</td>
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<tr>
<td>Section 6 FERPA Training</td>
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<tr>
<td>Section 7 BYU Minor Protection Policy</td>
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<tr>
<td>Section 8 FBI Background check</td>
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<tr>
<td>Section 9 5 Panel Drug Screening (SAM)</td>
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<td>Section 10 Immunization Requirements</td>
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<tr>
<td>Section 11 Obtaining and Documenting 25 Observation Hours</td>
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<tr>
<td>Section 12 ASHA Taking Action Against Microaggressions Micro Course Series</td>
</tr>
<tr>
<td>Section 13 QPR Suicide Prevention Training (Gatekeeper Training)</td>
</tr>
<tr>
<td>Section 14 Systems Checklist</td>
</tr>
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</table>

1.1.2 On campus orientation
The first two weeks of fall semester you will participate in an on-campus orientation between the hours of 1-6pm M-Th. Click this link to access the most recent schedule and topics.

1.2 Clinical Education Sequence
The graduate student clinician clinical training experience will begin at the BYU Speech and Language Clinic (a.k.a. clinic or the BYU clinic) located in the Taylor Building. Students will complete a Fall/Winter/Spring clinical sequence during their first year of graduate school.

Students are required to complete 5 credits of ComD 688R, 3 of which will be completed in the BYU clinic (section-001). Students should expect to earn approximately 100-120 direct client contact hours during the first year of graduate school. Earning between 100-120 hours includes Simucase hours associated with clinic and courses.

The sequence of clinic assignments in the clinic is designed to a) provide an appropriate amount of scaffolding for the novice clinician, while also teaching the graduate student clinician the necessary skills to become an independent SLP, b) prepare you for your externships, and c) assist you in obtaining approximately one third of your required clinical hours. See the table below for a general sequence of clinical assignments a first-year graduate student clinician might expect.

<table>
<thead>
<tr>
<th>Fall ComD 688R Section 1</th>
<th>Winter ComD 688R Section 1</th>
<th>Spring ComD 688R Section 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Team diagnostic case (paired with another novice SLP student clinician)</td>
<td>1 Team treatment case (usually a continuation of the Fall DX)</td>
<td>1 independent treatment case (may be a continuation from previous semester)</td>
</tr>
<tr>
<td>1 Team treatment case</td>
<td>1 Team treatment case (new case, different partners)</td>
<td>1 independent treatment case (new case)</td>
</tr>
<tr>
<td>1 Independent treatment case</td>
<td>1 Independent treatment case (may be new or same as Fall case)</td>
<td>*Spring cases may be assigned based on required hours or experience needed</td>
</tr>
<tr>
<td>------------------------------</td>
<td>---------------------------------------------------------------</td>
<td>---------------------------------------------------------------------</td>
</tr>
<tr>
<td>Assigned simulations associated with course work or clinic</td>
<td>Assigned simulations associated with course work or clinic</td>
<td>Assigned simulations associated with course work or clinic</td>
</tr>
<tr>
<td>Complete (prior to starting clinic) and document in CALIPSO (by the end of the semester) 25 observation hours</td>
<td>Assigned simulations associated with course work or clinic</td>
<td>Assigned simulations associated with course work or clinic</td>
</tr>
</tbody>
</table>

* Total hours expected to earn during first year Fall/Winter/Spring: 25 observation hours + 100-120 contact hours equals 125-145 hours.

**Please see the Covid guidelines published by CFCC for the latest updates regarding counting hours when working in teams of 2 SLP graduate student clinicians. The guidelines stipulate that 2 SLP graduate student clinicians may count the contact hours equally while working with one client if both students are equally engaged in working with the client. This policy is currently in effect until December 31, 2022. This policy is subject to change based on Covid guidelines published by the CFCC.

*** as per standard 3.7B

2. Clinic Assignments

Clinic assignments are made under the direction of the Clinic Director. The clinic TA and the Clinical Educators (CEs) provide information to help the Clinic Director make clinic assignments.

2.1 Policy

Students are assigned disorder cases when they have completed a course or are currently enrolled in a course addressing the disorder type. If a student is assigned a case where they have not yet had the course, supervising CEs are required to provide extra supports such as learning modules in the disorder type, video models, simulated cases, co-assess and/or treat with the student clinician, extra consultation, supervision, and feedback time for the student. These extra measures stay in place until the CE and student(s) are comfortable with the disorder type.

2.2 Procedure

Prior to Fall semester clinic, the Clinic Director sends a survey to the incoming cohort. The survey asks the students to describe their clinical experiences. The graduate coordinator reviews transcripts of students and notifies the Clinic Director of any student who is deficient in disorder types. CEs also ask student clinicians about their familiarity and comfort level with disorder types at the beginning of each supervisory relationship.

The process of making clinic assignments varies, depending on the semester/term. For example:

1. Prior to Fall semester the Clinic Director will send out a survey to incoming graduate student clinicians. The purpose of the survey is to assess each graduate student clinician’s clinical experiences and interest areas.
2. Fall semester: The Clinic Director pre-selects and reviews client cases with CEs, students, and the clinic TA. The Clinic Director, with the help of the clinic TA, assigns the cases based on student input and CE input.
3. Winter semester: The Clinic Director pre-selects and reviews client cases with CEs, students, and the clinic TA. Diagnostic cases from fall semester will be assigned as treatment cases during winter semester when appropriate.
4. Spring: Students are assigned cases based on required hours or experience needed.
3. Alternative Clinical Education Hours (ACE)

3.1 Policy

Alternative Clinical Education experiences should allow students to:
1. interpret, integrate, and synthesize core concepts and knowledge
2. demonstrate appropriate professional and clinical skill
3. incorporate critical thinking and decision-making skills while engaged in identification, evaluation, diagnosis, planning, implementation, and/or intervention

3.2 Acceptance of Clinical Simulation for up to 20% (75 Hours) of Direct Client Hours

Up to 20% (i.e., 75 hours) of direct contact hours may be obtained through clinical simulation (CS) methods. Only the time spent in active engagement with the CS may be counted. CS may include the use of standardized patients and simulation technologies (e.g., standardized patients, virtual patients, digitized mannequins, immersive reality, task trainers, computer-based interactive). Debriefing activities may not be included in the ASHA direct client contact hours.

3.3 Procedure

Clinic assignments are made under the direction of the Clinic Director. The clinic TA and the CEs provide information to help the Clinic Director make clinic assignments. The process of making clinic assignments varies, depending on the semester/term.

Alternative clinical experiences may include the use of standardized patients and simulation technologies (e.g., standardized patients, virtual patients, digitized mannequins, immersive reality, task trainers, computer-based interactive). The most common type of alternative clinical experiences we use in our clinic are Simucase assignments.

4. Obtaining and Documenting 25 Observation Hours

Please see the off-campus orientation packet for detailed instructions regarding obtaining and documenting your 25 observation hours. A copy/PDF of your signed observation hours must be provided to the Clinic Director and the department office manager to be put into your student records.

5. Standards for Clinical Hours

5.1 Policy

We adhere to the ASHA Standards for the Certificates of Clinical Competence (see the current ASHA Membership & Certification Handbook: Speech-Language-Pathology, standard V-8). These, however, are minimum requirements. By the time you complete the clinical training program, you should have acquired hours well above the minimum standards. The most up-to-date Standards for Clinical Hours are located at this link. We must follow these standards so that students may be eligible for professional credentialing upon completion of their clinical training program.

Students are responsible for tracking their 400 clinical hours. You will input your hours in CALIPSO. Your supervising CE will approve the hours. Students must submit their clinical hours weekly using the CALIPSO application. Clinical educators will approve hours weekly.
This table provides you with a breakdown of when and how you will earn your 400 clinical hours.

<table>
<thead>
<tr>
<th>Type of hour</th>
<th>Time Frame</th>
<th>Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>25 observation hours</td>
<td>Earned prior to starting, or early in, Fall semester</td>
<td>Master Clinician Network, Simucase, undergraduate courses</td>
</tr>
<tr>
<td>100-120 client contact hours</td>
<td>Fall/Winter/Spring</td>
<td>BYU Speech and Language Clinic</td>
</tr>
<tr>
<td>Approximately 130 hours</td>
<td>Second year externship placement</td>
<td>*Pediatric</td>
</tr>
<tr>
<td>Approximately 130 hours</td>
<td>Second year externship placement</td>
<td>*Adult</td>
</tr>
</tbody>
</table>

*Not sequential, students can do pediatric or adult placements first or second

- At least 375 hours must be in direct client/patient contact.
- ASHA certification standards require a total of 400 clock hours of supervised clinical practicum.
- You may complete a minimum of 25 clock hours of observation prior to beginning the initial clinical practicum (only 25 observation hours can contribute towards the 400-clock hour total hours).
- Your first 100 clinical practicum hours must be obtained at Brigham Young University in the BYU Speech and Language Clinic.
- Under the ASHA 9 Speech-Language Pathology disorder areas you must earn a minimum of 5 clinical hours for each of the areas.

A minimum of 325 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. 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 that should be adjusted upward if the student’s level of knowledge, experience, and competence warrants. A supervisor must be available and on-site to consult with the student for the clients/patient’s safety. 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.

Only direct contact with the client or the client’s family in assessment, management, and/or counseling can be counted toward practicum. Typically, only one student should be working with a given client. Covid protocols that allow two students to work with a client at one time are currently in place.

5.2 Procedure

All clinical hours will be documented using CALIPSO: [https://www.calipsoclient.com/byu/account/login](https://www.calipsoclient.com/byu/account/login)

Follow the instructions as indicated in the Student Step-by-Step instructions to set up your account. The clinic director and the department office manager monitor student clinical hours by providing a periodic update to students of their hours earned each semester or term students are enrolled in the BYU Speech and Language Clinic.

6. Clinical Educator Responsibilities

6.1 Qualifications

Clinical educators are licensed speech-language pathologists who hold the Certificate of Clinical Competence (CCC). Each clinical educator has completed at least 2 hours of supervision training. Our clinical educators have several years of experience working in a wide variety of clinical settings and with a variety of clinical cases.

6.2 Responsibilities, Expectations and Policy

Clinical educators have many graduate student clinician related responsibilities. These responsibilities include:

1. Direct and indirect supervision of graduate student clinicians
2. Consult with graduate student clinicians weekly or more to support and teach students
3. Consult with students regarding session planning prior to students working with clients
4. Provide students with an adequate amount of support commiserate to the student’s experience level
5. Protect the welfare of the client
6. Provide both written and verbal feedback to students pre/post sessions with clients minimally once a week
7. Read, edit, grade, and sign off on all paperwork associated with each case
8. Co-treat and demonstrate appropriate diagnostic and treatment techniques
9. Provide students with an adequate amount of support commiserate to the student’s experience level
10. Document via CALIPSO if or when students are struggling to meet competencies
11. Increase direct and indirect supervision time for students who are struggling to meet competencies
12. Develop, implement, and document remediation plans for students
13. Approve clinical hours
14. Always conduct themselves in a professional manner
15. Adhere to the ASHA Code of Ethics and all policies and procedures of the BYU ComD department and speech and language clinic
16. Follow ASHA standards regarding supervision requirements

6.3 Supervision Requirements

ASHA’s Scope of Practice Standard V-E states that the amount of direct supervision must be commensurate with the student’s knowledge, skills, and experience; must not be less than 25% of the student’s total contact with each client/patient; and must take place periodically throughout the practicum. Supervision must be sufficient to ensure the welfare of the individual receiving services. Direct supervision must occur in real time. A clinical educator must be present on-site during real-time sessions for support and consultation purposes.

See ASHA standards V-E and V-C for more detail: https://www.asha.org/certification/2020-slp-certification-standards/

7. Graduate Student Clinician Responsibilities

7.1 Student Interactions with CEs and Clients

Students work with clients under the direction and license of their clinical educator (CE). The following list of policy statements must be followed by students who work as clinicians in the BYU Speech and Language clinic.

1. Students must stay in regular contact with their CEs regarding client care
2. Students must include their CE in all forms of written communication with a client (e.g. texts, emails)
3. Students must talk with their CE before initiating contact with a client to schedule, review assessment information or for any other reason
4. Students are responsible to make and keep appointments with clinical educators
5. Students must seek input from CEs regarding session planning, data collection planning, making changes to treatment plans, and all things related to client assessment and treatment
6. Students must read all written feedback within 24 hours of completion of a session
7. Students must always ensure the safety of their client while the client is in the clinic
8. Students must read, understand, and follow the ASHA Code of Ethics about all clients and client information
8. Policy & Procedure Violations

Any student or faculty found in violation of the policies and procedures found in this handbook while working in the BYU Speech and Language Clinic may face sanctions. If a student is found in violation of policies and procedures, the sanctions may include a failing grade for the course. The ASHA Code of Ethics is an essential part of this handbook. Any student or faculty found in violation of the ASHA Code of Ethics may face sanctions.

9. Confidentiality Policy

9.1 Policy

Law and the Code of Ethics of the American Speech-Language-Hearing Association mandate client confidentiality. All students taking part in clinical rotation must sign a confidentiality statement stating that they will protect the confidentiality of clients. If you have not already signed a confidentiality statement at BYU, please see the secretary in room 136 to do so immediately.

9.2 Procedures

All client records at the BYU Speech-Language Clinic are confidential and are kept on the electronic medical records system (EMR) system known as ClinicNote. All information regarding clients is privileged communication. Students are granted access to clinic information for only those individuals that they are treating. Reports and other clinical writing can be transmitted via email in PDF format with a password. Files, videos, language sample transcriptions, data sheets, and anything else pertaining to your client should be stored on Box (HIPAA compliant) or the file drawers under the student boxes located in Clinic Preparation Room (room 150 TLRB). Do not store sensitive material in lockers. Destroy (shred) all paperwork regarding clients when it is no longer required. A shredding bin is in Room 136 and at the student secretary’s room. Password protect your personal computers. Keep all passwords for our electronic clinic systems safe and secure.

Discussions of a client’s case should never take place in the hallways or other unsecured locations. Use a therapy room or office. Client names should only be used when necessary. Clients should never be discussed with roommates, family, or others not directly associated with the client’s case. Do not invite friends, family members, or others to observe you or be invited to any sessions. It is appropriate for graduate student clinicians to discuss their cases with other graduate student clinicians, CEs, and faculty, in class or in the student prep room, as necessary, and with minimal disclosure of client information. It is inappropriate for students to gossip, complain or “chat” about clients casually.

If you must leave a message for a client over the phone, leave only your name, that you are calling from the BYU Speech-Language Clinic, and your phone number. Do not mention the client’s name or why you are calling; the person receiving the message will usually understand why you are calling. If you use your cell phone to communicate with your client, do not identify the client in your contacts as a client.

Information regarding a client, including the fact that the client is receiving treatment at the clinic, can only be released to an outside agency with the written permission of the client or a person responsible for the client as per HIPAA requirements. Release of information forms can be found by clicking on this link.

When communicating with your client or the caregiver via email or text, include the supervising CE in the text or email thread. Students may not share assessment information with clients without discussing the assessment results with CEs first. Use your BYU Email when communicating with your clients and CEs.

9.3 Client Confidentiality and VPNs
For security and confidentiality purposes, without a VPN, the comdobserve system (recordings of clinic sessions) cannot be accessed remotely. BYU offers free access to VPNs for all faculty, staff, and students. Our policy is that students must access comdobserve in a secure room. A secure room is a room that only students or faculty associated with the BYU Speech and Language Clinic can access while you are using comdobserve. For example, if you are accessing a recording of your client at home, using the BYU VPN, you must be in a room by yourself and you must ensure that no one, including family, friends, roommates, etc. can access the room while you are accessing comdobserve or any other confidential information found on ClinicNote, Box folders, or other confidential systems we currently use or may use in the future to protect client confidentiality.

All students must read and sign the Client Confidentiality and VPN policy. This will be a class assignment to be completed Fall semester and turned into Learning Suite.

9.4 Recording in Class

Policy
Due to the confidential nature of the content of our ComD 688R course materials (e.g., client information), students cannot audio or video record lectures for this course (ComD 688R sections 1 or 2) without written permission from the instructor. Failure to have written consent from the instructor may result in a failing grade for the course.

The exception to this policy would be if the student has an academic accommodation. There may be other exceptions to this policy on a case-by-case basis.

Procedure
Email the instructor well in advance regarding the request for recording. Include in your request the following: Date of recording, reason for the recording such as excused absence or illness, etc. The recording must be kept in a Box folder created by the instructor. Recordings cannot be kept on a personal device or portable hard drive. Recordings will be deleted at the end of each semester or term. The instructor has the right to record the class or have the student or TA record. Regardless of who records the lecture, the recording must be stored in a Box folder provided by the instructor.

10. Client and Clinician Safety Guidelines

The Taylor Building is located at the edge of campus so that the community at large has easy access to the many services we provide in the building. Many of the clients seen by Marriage and Family Therapy or Counseling Psychology are people who have severe emotional issues. Because so many of our clients are small children/minors or adults with severe communication disorders we need to be very conscious of their safety.

Follow this policy to keep yourself and your client safe from harm or accident.

1. All student clinicians and any faculty who interact with minor children while working in the BYU Speech and Language Clinic, must complete the Minor Protection Training and undergo an FBI Background Check. The individual’s name must then be cleared by Human Resources before the individual can work with minor children. See the Off-Campus Orientation packet for step-by-step directions.
2. Do not leave a client alone in the therapy room. If you forgot something and need to go to the materials room, take the client with you.
3. Do not allow a client to stand on any furniture or materials bins.
4. Deliver clients (adult and children) to their caregivers at the end of the session. Make sure the caregiver knows that the client is back in the care of the caregiver. The exception to this rule is if an adult client travels to and from the clinic without a caregiver.
5. If a client needs to use the bathroom, have the caregiver take them. If the caregiver is unavailable, have a supervisor or another student clinician assist you.
6. Sometimes our young clients form attachments to you. They may demonstrate that affection in a physical way. High fives, knuckle snaps, handshakes are all appropriate ways to express appreciation or excitement. Use good judgment and consult with your supervisors regarding ways to handle clients who may wish to give you a hug.

7. Do not send a minor client to get a drink of water without you. You must always watch your minor clients and accompany them anywhere in the building.

8. Before and after each session, follow the cleaning and disinfecting protocols posted in each therapy room. Click this link for a full list of procedures.

9. Follow the materials room cleaning and disinfecting protocols for toys and other materials.

10. Keep backpacks and personal belongings out of the hallways or other unattended areas.

11. Do not give your keycard/student ID card to your clients to open doors. The locks on the doors are intended to keep the rooms protected and safe from those unauthorized to use the therapy rooms. When you give the code to an unauthorized person it compromises the safety of our clinic.

12. Please always keep yourself safe. Graduate students often spend long hours in the Taylor Building long after the outer doors are locked. Please do not prop outer doors open after hours.

13. If you are studying alone in the Taylor Building late at night, please protect yourself by staying in locked areas such as the therapy rooms, room 150, 151, or room 125.

14. Ensure that your immunization records are up to date. For Covid, discuss with your client both their immunization status and your immunization status. If there is a discrepancy between your Covid status, consult with your CE and the Clinic Director regarding appropriate protocols to follow.

15. Keep all electronic systems passwords safe and secure.

10.1 Client Safety in the Event of an Evacuation

Policy
Graduate student clinicians are responsible for a client’s safety in the event of an evacuation from the building or any other emergency.

Procedure
Student clinicians must stay with the client, escort them to safety and ensure the client is delivered to the parent or caregiver. Our designated gathering spot is the picnic table to the left of the entrance to the clinic. Meet the parent or caregiver of the client in this area. If you cannot find the parent or caregiver, stay with the client until you can find the parent or caregiver or until the emergency is over. If we are unable to return to the building, report to the Clinic Director the status of your client (e.g., you returned the client to the custody of the parent, or the adult client left BYU campus with their caregiver, etc.).

11. Clinical Attendance Policy

The clinical attendance policy is one of the most important policies we have in the handbook. It is essential that students entering the field of speech-language pathology understand that part of being a professional involves making and keeping commitments. When a graduate student is assigned a client, the student is making a commitment to be prepared for that client each time the client comes to the clinic for therapy. It is inappropriate for a student to have a cavalier attitude about their clinic assignments.

11.1 Policy

Failure to attend a clinical assignment at the BYU Speech and Language clinic without notifying the Clinic Director and the supervising CE may result in a failing grade. Students may also be subject to an immediate dismissal from the clinic assignment and will not be allowed to return to that assignment in the future. NOTE: If a student receives a failing grade in any section of COMD 688R ALL clinical practicum hours earned during the semester or term become invalid and cannot be submitted as hours toward certification with ASHA. Students are required to attend all scheduled diagnostic and treatment sessions, even if they are paired with a partner.
11.2 Procedure: Requests for Time Off

If a student has a special circumstance and needs to arrange time off during a clinical assignment for any reason, the student must:

1. Submit a written request via email stating the reason for the time off and dates of the absence to the Clinic Director. The Clinic Director will notify your CE if approval is given for the request.
2. The request must be submitted prior to placement at a site, including the BYU Speech and Language Clinic.
3. If the request is approved, then the student must arrange the time off with the clinical educator during the first week of the semester or term.
4. Failure to obtain Clinic Director approval before taking time off will result in a failing grade.
5. Written requests for time off do not guarantee approval.
6. If the student is not satisfied with the Clinic Director’s decision the student may submit the request to the department chair.
7. The department chair’s decision is final.
8. Requests for time off will not be granted for thesis related activities, personal activities, or other non-related internship activities.
9. This procedure must be followed, even if you are paired with another clinician and the session will not be cancelled due to your requested absence.

12. Scheduling A Client

12.1 Policy

The clinic is open M-Th from 12-6pm. Your CE must be able to watch one scheduled session live. Do not schedule clients during University Devotional (Tuesday 11AM) or Department Faculty Meetings (Thursday 11AM). You must schedule your diagnostic and treatment sessions with your CE’s approval.

Students may not cancel a session to work on homework, study for a quiz, hold a thesis meeting or any other obligation.
If you cancel a session for a university excused absence (e.g., attending a conference) then you do not need to make up the session.
Students may only cancel sessions for illness or family emergencies. Students must attempt to make up the session if they are canceling for non-university excused absences.

12.2 Procedure

Students are responsible to schedule their own diagnostic and treatment sessions. Always check with your CE to make sure your clinical schedule will fit their schedule. If they do not approve your clinical schedule, you must change your clinical schedule.

12.3 Cancellations and Re-Scheduling

If there are changes to the client’s regular schedule due to illness or no-show, etc., it is your responsibility to inform your clinical educator of the change. Do not make changes to the client’s regular treatment schedule without clearing the change with your CE first.

If the client cancels the session, students may offer to schedule a make-up session.

13. Scheduling A Clinic Room
13.1 Policy

If there is a scheduling conflict, rooms will be scheduled based on the priorities below. For example, if both a clinic session and a TA session are competing for a spot in the clinic, the clinic session is the priority.

Clinic Room Scheduling Policies:
1. Graduate student clinician activities including diagnostic sessions and treatment sessions, group sessions, planning for clinic, set up, clean-up and other clinical activities
2. Graduate student activities including preparing for clinic (see #1), student and/or faculty research
3. Graduate student group projects or study time
4. TA time (help sessions, tutoring, etc.), student make-up exams/quizzes
5. Other faculty needs
Activities listed in #2, 3, 4, & 5 are not to be scheduled during M-TH 12-6pm. Exceptions must be approved by the Clinic Director.

13.2 Procedure

Contact the department office manager and/or the student secretaries to reserve a clinic rooms. You can view the scheduling Google doc found here to plan your schedule (but cannot edit the schedule). Once your clinic schedule is set for the semester, record your schedule in the ClinicNote database.

14. Scheduling A Recording Using Comdobserve

14.1 Policy

All therapy and diagnostic sessions are to be recorded using comdobserve.

14.2 Procedure

Our department office manager (136 TLRB) and the student secretaries (140 TLRB) will set up your semester treatment session recordings to start and stop automatically. Have the days, dates, start times, and supervisor information available when you schedule a recording.

15. Client Participation Forms

15.1 Policy

During the first week of clinic, student clinicians need to review the client contract with the adult client and or caregiver or the parent or caregiver of a minor.

15.2 Procedure

The client, parent or caregiver must sign and or initial the contract. Once the contract is signed by all parties (supervising CE, client, parent or caregiver and the student clinician) make a copy of the form to give to the client, parent, or caregiver. Turn the original copy into our office manager.

<table>
<thead>
<tr>
<th>Client Participation Forms</th>
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<tbody>
<tr>
<td>Adult Participation Form</td>
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<tr>
<td>Child Participation Form</td>
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</table>
16. Graduate Student Clinician Evaluation Procedures

16.1 Performance Evaluation

Development of clinical skills and characteristics is a process. Evaluation of clinical work is based on several factors, including professional conduct, growth toward independence, development of clinical competencies, and demonstration of professional commitment.

Please note: If any of the following occur, your final clinic evaluation will be negatively impacted, and you may be placed on marginal status for progress in your graduate program (see Graduate Handbook): poor professionalism (2 or lower on CALIPSO final evaluation); unexcused absences from colloquium or clinic assignments; inadequate file(s); missing the deadline at the end of the semester/term for turning in final reports and checked out materials.

17. CALIPSO Evaluations

Using CALIPSO, each CE will rate student performance at two points during the semester; midterm, and final evaluation. Only the final evaluations ratings count towards the final ComD 688R grade. The rating scale definitions can be found by clicking this link.

<table>
<thead>
<tr>
<th>GRADE</th>
<th>Fall ComD Section 1</th>
<th>Winter ComD Section 1</th>
<th>Spring ComD Section 1</th>
</tr>
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<tbody>
<tr>
<td>A</td>
<td>4.00-5.00</td>
<td>4.27-5.00</td>
<td>4.27-5.00</td>
</tr>
<tr>
<td>A-</td>
<td>3.66-3.99</td>
<td>3.96-4.26</td>
<td>3.96-4.26</td>
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<tr>
<td>B+</td>
<td>3.35-3.65</td>
<td>3.65-3.95</td>
<td>3.65-3.95</td>
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<tr>
<td>B</td>
<td>3.04-3.34</td>
<td>3.34-3.64</td>
<td>3.34-3.64</td>
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<tr>
<td>B-</td>
<td>2.73-3.03</td>
<td>3.03-3.33</td>
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<tr>
<td>Remediation</td>
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<td>C+</td>
<td>1.00-2.41</td>
<td>2.72-3.02</td>
<td>2.72-3.02</td>
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</tbody>
</table>

17.1 Policy

If the student receives an individual domain rating below 2.5 on the midterm, the clinical educator will specifically address the concern(s) in the CALIPSO midterm evaluation form. The CE will provide the student with specific goals for the student to resolve the deficiency. The student and CE must review the student’s progress for each 2.5 or lower domain rating during the final evaluation.

Students must receive a final overall rating for each clinical assignment within the B- range to continue to the next semester or term. If the final rating for any clinical assignment is below the B- range, the student will be placed on marginal status and remediation will be required. The student will be informed what must be done to remove the marginal status and to be able to continue in the clinical program. The condition for status change will depend on the nature of the clinical problem. Students may be required to review and pass a tutorial, complete a case study, pass another clinical assignment in the BYU SL Clinic, or perform another activity designed by the faculty, clinical faculty, or clinic director.

17.2 Procedures
Midterm Evaluation Procedures

Students are responsible to make an appointment with their clinical educators for a midterm evaluation. Students are required to fill out a CALIPSO Self Evaluation for each client prior to meeting with their CE. We ask students to rate their own skills for two reasons: a) to help gauge how students view their own clinical growth and b) ensure that students have read the CALIPSO checklist and know what skill areas their clinical educators are evaluating. A student’s self-rating is not calculated into the final grade. Students should convert their midterm Self Evaluation into a PDF file and send it to their CE, as their CE does not have access to this information through CALIPSO.

After reviewing the CALIPSO rating form, the clinical educator and the student will review what the clinical educator sees as the student’s areas of strength as well as areas where the student can make improvements. The clinical educator and the student will then set one to three goals targeting identified improvement areas. The goals will be recorded in CALIPSO. The student will be asked to report on the progress of these goals at the final evaluation meeting.

Remediation half-step

If the clinical educator has rated the student lower than a 3 on any of the essential competencies (i.e., individual CALIPSO domains), the clinical educator and the student must address each domain by writing a goal for the student as well as a plan for how the student is going to work to improve on that area between the midterm and final evaluation. The student and clinical educator should work together to formulate the goal(s) and plan for improvement.

Final Evaluation Procedures

Students will meet with the clinical educator to review the CE’s evaluation of the student’s clinical performance. The CE will review areas of strength as well as areas that need improvement in CALIPSO. The clinical educator will ask the student to report on their progress with the goals they set at midterm. The final rating given will be factored into the final grade for the course. Please see your current syllabus for an explanation of how grades are issued/calculated using CALIPSO.

Remediation half-step follow-up

If the student had one or more domains rated lower than a 3 at midterm, during the final evaluation the clinical educator and the student must report in writing in CALIPSO on the student’s progress and improvements. If the student continues to receive a rating lower than a 3 at the final evaluation, a remediation plan will be developed (see section 19 Student Review Plan).

Please see CALIPSO for a review of the competencies students are expected to acquire throughout their clinical rotations in the BYU ComD master’s program. https://www.calipsoclient.com/byu/account/login

18. B- Or Better Policy

18.1 Policy

If a student earns lower than a B- in any section of ComD 688R, they must re-take the same clinical experience (e.g., the student must retake the course during another semester, a spring term would not count). The clinical hours for the semester or term in which a student earns a C+ or lower are invalid and cannot count towards ASHA hours.

18.2 Procedure

Under the direction of the Clinic Director, the clinical team reviews the progress of each student clinician at midterm and final points in the semester. Students who are struggling or in danger of failing the course and clinical
assignments associated with the course are carefully reviewed. See Midterm Evaluation Procedures and Remediation half-step procedures for review (section 17. CALIPSO Evaluations).

**19. Student Review Plan (Remediation)**

A student clinician may struggle with a clinical assignment to the point that the student may be at risk of not meeting an essential competency(s) (i.e., individual CALIPSO domains). In such cases, the clinical educator may ask for the assistance of the clinical team, including the clinic director, in providing feedback to the student, additional readings, co-treatment, simulated cases, video examples, etc.

If at the end of the semester or term, the student has not met competency with a score of a 3 or better in each essential competency (i.e., individual CALIPSO domains), a Student Review Plan will be developed by the clinical faculty and the clinic director (click here for an example form).

### 19.1 Student Review Plan Procedure

- The clinical educator will meet with the student to discuss the concern and plan how to resolve it.
- The student will write a one-page summary of what they think the problem is and a plan for improvement. We ask students to write the one-page summary for two reasons; a) ensure that the student understands the problem and b) help the student gain insight into how they can self-reflect and take steps to self-improve.
- If necessary, other faculty or clinical faculty will observe the clinician in a session (live or on video) and provide feedback focusing on the stated concern.
- The clinical educator will meet with the student (and with the observers, if required) to go over the feedback and design a plan of action. Specific performance criteria will be set as needed.
- Once the plan is created, the student will be informed as to the current grade and what consequences will result if the student fails to meet the performance criteria.
- The student and the clinical educator then sign the Student Review Plan to indicate their agreement with the plan of action.
- The student and the clinical educator must periodically discuss the student’s progress toward meeting the goals of the Review Plan so that modifications can be made as appropriate.
- When specific performance criteria are achieved, the clinical educator and one of the observers should initial their agreement.
- At the end of the semester/term, the clinical educator should complete the Evaluation of Plan section to indicate the effectiveness of the plan and if any further action will be necessary.
20. Important Clinic Resources and Procedures

20.1 Clinical Resources
Debra Hogan, MS, CCC-SLP (CE) manages the following clinical resources and can assist with all questions and concerns.

20.1.1 The Materials Room
This is the physical location of all tests, protocols, and clinical materials. It is a vast and extremely assistive resource that has been organized and systematized to support your clinical experience as a new student clinician. An introductory tour will be given during orientation to familiarize you with its contents and procedures, and student staff will assist you in your use of the MR. However, to maximize your success, please make time to explore all that is offered. The Clinic Database includes a tab that identifies all tests and assessments in the MR.

20.1.2 The Clinic Database
This comprehensive and functional database includes the following clinical resources categorized in the content tabs at the bottom of the spreadsheet:

- Formal Tests and Assessments located in the MR
- Informal Assessments and Procedures available in the MR or through various sources
- Clinical Resources available electronically or through various sources
- Craft Materials available in the MR
- Reinforcers for clients available in the MR

Additional tabs for CE and office use include:
- CE Wish List of tests and materials requested/curated by Clinical Educators
- Additional organizational and documentation tabs

20.1.3 BYU Clinical Writing Conventions (CWC)
This is an indirect learning and support tool of standardized formats, procedures, technicalities, content, and professional language for the five clinical writing/clinical reports which are completed by graduate student clinicians in the BYU Speech and Language Clinic. While initial training will take place during orientation, you will also be supported by your personal study, efficient knowledge, and consistent use of this resource.

20.2 Resources For Session Planning
Use the Session Planning Worksheet provided in Learning Suite to guide your session planning. The best approach to planning for your client is to make sure you understand the treatment goal(s). Once you understand the treatment goals, the planning goes much faster. Make sure you know what the ASHA Practice Portal is and how to access it. The ASHA Practice Portal is full of amazing ideas for treatment. Talking with your fellow graduate student clinicians to get ideas may be a good idea. Always review your plans with your CE to make sure your ideas will fit within the treatment approach you are using with your client. The clinical faculty have compiled a list of some of their favorite treatment resources. You can find the link on Learning Suite. Each CE also has a page on Learning Suite where they like to post treatment ideas and other resources. Be sure to check out the CE resources pages.

Use materials from your classes too. Ask for ideas in colloquium. Ask the internet. Look at the apps available on our iPads. Look through the materials room. Ask parents and caregivers what your clients like to do or what they enjoy playing. Use the information to help you plan interesting and fun activities.
20.3 Student Resources

There are many resources available to students on campus and in our department. Our Belonging and Equity Committee has a webpage filled with links that may be of help to you while you are at BYU. Here is a link to our resource page: Student Resources Be sure to scroll all the way to the bottom of the page to see all the resources available to you.

20.4 ASHA Code of Ethics

Please click on the link provided to find the most current copy of the ASHA Code of Ethics. Each student is expected to read, understand, and adhere to the ASHA Code of Ethics in any clinical placement. Faculty, student, or site supervisor failure to comply with the ASHA Code of Ethics may be subject to sanction. Please see the most recent version of the ASHA Code of Ethics at this link.

Any student or faculty found in violation of the ASHA Code of Ethics while working in the BYU Speech and Language Clinic may face sanctions. If a student is found in violation of the ASHA Code of Ethics, sanctions may include a failing grade for the course. A student’s ethical behavior is tracked using CALIPSO ratings. A rating of 3 or better is required for each final evaluation during a clinical rotation.

20.5 Concerns About the Clinical Training Program

If a student has a concern or complaint about the clinical training program or any aspect of working in the BYU Speech and Language Clinic, they can file an anonymous complaint using this Qualtrics survey link. Students may also speak to the graduate student representative or the Clinic Director. If after speaking with the graduate student representative or the Clinic Director, the student feels their concern has not been resolved, they may speak to the chair of the department.

Students also have the right to file complaints with the Council on Academic Accreditation at this link.

20.6 Client Rights

Clients seen either in the BYU Speech and Language Clinic or in an affiliated internship site are entitled to speech and language services in an environment free from unlawful discrimination. Any student, staff employee, or faculty member who unlawfully discriminates against a client or caregiver on the basis of race, ethnicity, sex, gender identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language, or dialect (ASHA Code of Ethics, Principle of Ethics I, Rule C) may be subject to sanction.

If a client or caregiver feels they have been discriminated against, please contact the Clinic Director, Clinical Professor Lee Robinson, MS, CCC-SLP at 801-422-7650 or email at lee_robinson@byu.edu.

20.7 Referring Clients to the Clinic

Use these forms to refer clients to the clinic.

<table>
<thead>
<tr>
<th>Intake Online Forms</th>
<th>Printable PDF Intake Forms</th>
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<tbody>
<tr>
<td>Pediatric Intake English</td>
<td>Pediatric Intake English</td>
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<tr>
<td>Pediatric Intake Spanish</td>
<td>Pediatric Intake Spanish</td>
</tr>
<tr>
<td>Adult Intake English</td>
<td>Adult Intake English</td>
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<tr>
<td>Adult Intake Spanish</td>
<td>Adult Intake Spanish</td>
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</tbody>
</table>
20.8 HIPAA
All students are required to pass HIPAA training through the State of New York online course. Please see the ComD Department Office Manager, to sign up for the course. Please note that most file sharing services such as Google docs are not HIPAA compliant and therefore, cannot be used to share client confidential information. Box and Learning Suite are HIPAA compliant. Please use this link to start the HIPAA training process.

20.9 FERPA
Free BYU FERPA Training for Staff can be accessed using this link. All students will need to login using their BYU netID and password. Make sure to scroll down the page to find the blue button that looks like this>

Upon completing the training, visit https://byu.myabsorb.com/#/login and save the transcript as a PDF. Make sure the transcript shows your name and that the training was completed by you. Upload your transcript to Learning Suite in the fall to complete the assignment. We will discuss FERPA as it pertains to our clinic during Fall semester. FERPA training is required before beginning to work in the clinic.

20.10 Fragrance Free Policy
A fragrance-free environment helps create a safe and healthy clinic and workspace. Fragrances from personal care products, air fresheners, candles and cleaning products have been associated with adversely affecting a person’s health including headaches, upper respiratory symptoms, shortness of breath, and difficulty with concentration. People with allergies and asthma report that certain odors, even in small amounts, can cause asthma symptoms. The BYU Speech and Language Clinic recognize the hazards caused by exposure to scented products and we have a policy to provide a fragrance-free environment for all faculty, student clinicians, staff, and visitors to keep a safe and healthy clinic environment.

20.11 Acceptable Alternatives to Universal Precautions
Universal precautions are an approach to infection control to treat all human blood and certain human body fluids as if they were known to be infectious for HIV, HBV and other blood borne pathogens (OSHA). In the BYU Speech and Language Clinic, student clinicians may be exposed to minimal amounts of blood, saliva, vomit, mucus, urine or fecal material. Because exposure is minimal, we use acceptable alternative procedures to protect ourselves and our clients.

20.11.1 Acceptable Alternatives
The Blood Borne Pathogens Standard allows for hospitals to use acceptable alternatives to Universal Precautions. For example: Body Substance Isolation (BSI) and Standard Precautions. These precautions apply to blood, all body fluids, secretions, and excretions, except sweat, regardless of whether or not they contain visible blood, non-intact skin, and mucous membranes.

20.11.2 Standard Precautions
Hand washing, appropriate personal protective equipment such as gloves, gowns, masks, whenever touching or exposure to patients’ body fluids is anticipated. For the purposes of working in the BYU SL clinic the Standard Precautions will be adapted.
20.11.3 Hand Washing
Wash your hands before and after every session. Take rings off and wash with hot water and scrub for at least one minute. Turn off water with paper towel and open the bathroom door with a paper towel. Hand sanitizer is available in the cabinets of every therapy room. If the hand sanitizer is missing or needs to be replaced, please tell the clinic TA.

20.11.4 Oral Peripheral Examination
Wash hands and table before performing the oral peripheral examination. Wear gloves during the exam. Set your materials on a paper towel. Throw all your materials away. Wash your hands and table again after the exam is completed. Have the client wash their hands before and after the exam.

20.11.5 Cleaning Supplies
Cleaning supplies are in the upper cabinet of each therapy room in the form of 409 spray and paper towels. Clean as you go during the therapy session. Make cleaning a part of the therapy routine. Wipe the doorknobs and table and chairs at the conclusion of the session. Many studies show that cleaning doorknobs and table surfaces reduces the spread of germs that cause colds and flu-like symptoms. If you notice cleaning supplies are low, please inform the clinic TA.

20.12 The Taylor Building Park
To the south of the Taylor Building there is a gated park—lawn and pavement area. Under the directions of their CE, students may take a client to the park for therapy purposes. The side gate is normally open. Please close the gate if you take a client into the park. Students are welcome to study in the park or use the park for lunch or other activities.

20.13 ComD - Fostering an Environment of Belonging and Equity
“‘We feel the depth of God’s love for His children, we care deeply about every child of God, regardless of age, personal circumstances, gender, sexual orientation, or other unique challenges’ (President Russell M. Nelson, "The Love and Laws of God," September 2019). As a university community we strive to foster an educational environment that promotes the personal dignity of every student and accept individual responsibility to eliminate racism, sexism, and nationalism. We create learning environments in which every individual is motivated to express their opinions and perspectives and ask questions to augment discussions and learning.” BYU Diversity and Inclusion in the Classroom Syllabus Statement

Harmful comments/microaggressions have no place in our classrooms. Microaggressions are intentional or unintentional words, behaviors, or aspects of an environment that communicate negative insults toward individuals from minoritized groups. In this class, we agree to name microaggressions and together, articulate why they are harmful and how to begin to repair the damage they caused. For more information about what a microaggression is, please visit https://www.cambridgema.gov/-/media/Files/officeofthemayor/2019/deepmicroaggressionsworksheetfilledin012619.pdf. As both faculty and students continue to foster a sense of belonging and equity, we hope to become more comfortable addressing these hurtful behaviors and their impact on students. If you have experienced or witnessed microaggressions and want to communicate your experience in a safe space, please use this anonymous survey link. https://byu.az1.qualtrics.com/jfe/form/SV_3K1Hrcc6JH3P1k
21. University Policies And Procedures

21.1 Liability Insurance
The University provides liability insurance for students working with clients in the clinic. To be covered under the University Liability Insurance students must be enrolled in 1 credit of 688R.

21.2 Student Nondiscrimination Policy At BYU
“Brigham Young University (BYU) is a private university sponsored by The Church of Jesus Christ of Latter-day Saints (LDS). Qualified, active members of the LDS church are encouraged to attend BYU. All students are welcome, regardless of religious affiliation.

Brigham Young University is committed to providing academic and employment environments that are free from unlawful discrimination. Unlawful discrimination on the basis of race, color, sex, national origin, religion, age, veteran status, and/or disability will not be tolerated. The university policies and procedures with respect to nondiscrimination as it applies to faculty members and administrative and staff employees are outlined in the BYU Student Nondiscrimination Policy.”

21.3 Students’ Rights
“Students are entitled to study in an environment free from unlawful discrimination. Any student, staff employee, faculty member or site supervisor who unlawfully discriminates against a student on the basis of race, color, national origin, religion, age, gender, veteran status, or disability may be subject to sanction.

The University’s Nondiscrimination and Equal Opportunity Policy is found here and the Sexual Harassment Policy is found here.

Where to Report
“A report of Discrimination can be made verbally or in writing to the Equal Opportunity Manager, D-259 ASB, 801-422-5895 or eo_manager@byu.edu
Individuals may also submit Reports through EthicsPoint, the university 24-hour hotline provider, by telephone at 888-238-1062 or by submitting information online at EthicsPoint.”

21.4 Students With Disabilities (Standard 4.2)
Brigham Young University is committed to providing a working and learning atmosphere that reasonably accommodates qualified persons with disabilities. If you have any disability, which may impair your ability to complete the clinical training program successfully, please contact the University Accessibility Office (UAO) (801-422-2767). Reasonable academic accommodations are reviewed for all students who have qualified documented disabilities. Services are coordinated with the student and instructor by the UAO Office. **Students are required to notify the instructor of the disability prior to deadlines, test dates or any other class requirement where accommodations need to be arranged.** For the purposes of all sections of ComD 688R students must notify Professor Robinson in writing during the first week of class if they are registered with UAO or if they have a disability that will require accommodations.

21.5 Grievances
"The UAC strives to operate in accordance with disability law and BYU policy. BYU's grievance procedures can be found in the Accommodation of Persons with Disabilities at BYU Procedures. Additional information may be found in the Discrimination Compliant Procedures.

Where to Report a Grievance
1. For concerns about the accessibility of physical or virtual BYU Campus, see Accessibility Concerns
2. For concerns about the implementation of academic accommodations, contact your UAC coordinator at (801) 422-2767
3. For concerns about an academic grievance, see the Academic Grievance Policy
4. To file a formal disability discrimination grievance, contact the Equal Opportunity Manager D-295 ASB, (801) 4225895, eo_manager@byu.edu.”

21.6 Students Who Speak English as a Second Language (Standard 3.1.1b, 4.2)

21.6.1 Policy
All students must demonstrate that they can communicate with clients/patients, families, communities, and interprofessional team colleagues and other professionals in written and verbal form in English and other languages of instruction in a responsive and responsible manner that supports a team approach to maximize care outcomes.

21.6.2 Procedure
Verified by CALIPSO ratings under professional practice, interaction and Personal Qualities items 4, 9, 10, 12.

21.7 Preventing Sexual Harassment
“All forms of sexual harassment, including sexual assault, dating violence, domestic violence, and stalking are contrary to the teachings of The Church of Jesus Christ of Latter-day Saints and the Church Educational System Honor Code. Brigham Young University prohibits sexual harassment by its personnel and students and in all its education programs or activities.”

21.8 BYU Honor Code
“In keeping with the principles of the BYU Honor Code, students are expected to be honest in all of their academic work. Academic honesty means, most fundamentally, that any work you present as your own must in fact be your own work and not that of another. Violations of this principle may result in a failing grade in the course and additional disciplinary action by the university.

Students are also expected to adhere to the Dress and Grooming Standards. Adherence demonstrates respect for yourself and others and ensures an effective learning and working environment. It is the university’s expectation, and my own expectation in class, that each student will abide by all Honor Code standards. Please call the Honor Code Office at 801-422-2847 if you have questions about those standards.

Honor Code expectations also extend to all reporting of clinical hours earned on the green sheets. The times recorded on the green sheets must be an accurate reflection your work and your work alone. All recorded time must also meet ASHA standards and guidelines. Please see the BYU Honor Code webpage for additional information: https://honorcode.byu.edu/.”