

# Clinical Education Policy 503

## Clinical-Academic Support Plan (CLASP)

Effective Date: August 1, 2024  
Supersedes Date: September 17, 2019  
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**Policy:** When a student does not meet a competency in a course or clinical experience, the areas of study requiring attention will be identified and goals and recommendations will be developed for the student to complete to demonstrate competency in the area(s).

**Procedure:**

I. Purpose

- a. Upon graduation, students intend to obtain the ASHA Certificate of Clinical Competence (CCC) in either Audiology or Speech-Language Pathology. To achieve this certification, a student must demonstrate a set of knowledge and skills as defined by ASHA certification standards. It is possible for a student to make a passing grade in a course/practicum and still not demonstrate all of the knowledge and skills covered in the course or practicum.
- b. The intent of this procedure is to identify, address, and monitor areas of knowledge and skill in which a student may require additional study, instruction, or experience to achieve the expected level of competency to obtain the CCC. The CLASP is a supportive process designed to enhance student success and is to be collaborative with the student.

II. Process of Initiation of a Clinical - Academic Support Plan

- a. There are three ways to initiate the Clinical – Academic Support Plan process:
  - i. Student initiated: Students may self-identify areas in which they believe they require additional support. A student discusses these concerns with either their instructor or advisor to develop a plan to address areas of need.
  - ii. Instructor initiated: The competencies associated with each course are identified in the CSD Handbook. If a student does not meet a competency in a course or clinic, the instructor may complete a Clinic – Academic Support Plan an Areas of Study Requiring Attention form identifying the knowledge or skills that have not been met and will recommend how the competency is to be met.
  - iii. Advisor initiated: A student’s Academic Advisor or Directors of Clinical Education can initiate a Clinical – Academic Support Plan process if areas of difficulty are observed across different courses, clinical performance, or both.

III. CLASP Severity

- a. A minor CLASP is self-initiated or involves a minor concern such as an isolated instance of an exam retake or assignment revision due to low grade; or focused practice related to a competency addressed in a single course.

- b. A major CIASP addresses a significant concern such as difficulties spanning more than one exam, assignment, course, instructor, or competency; or continuation of a previous CIASP.
- IV. Process Regarding Academic Knowledge and Skills
  - a. Minor CIASPs
    - i. These plans require notification of the students' advisor.
    - ii. A copy of the plan is signed by the initiator, the student, and the students' advisor.
    - iii. An electronic copy is placed in the student's academic folder.
    - iv. If the issue is related to clinic, the appropriate Directors of Clinical Education receives a copy as well.
  - b. Major CIASP's
    - i. The instructor or advisor initiating a major CIASP convenes a committee and communicates concerns to all committee members. If the CIASP is initiated by an instructor, the committee includes the instructor, the student, and student's advisor.
    - ii. If the major CIASP is initiated by the advisor, the committee includes the advisor and at least one other faculty member who serves as the student's advocate addressing competency concerns. The committee meets to discuss the concerns and create a plan.
    - iii. If the issue is related to clinic the committee also includes the Directors of Clinical Education
    - iv. The Associate Dean of Academic Programs receives a copy of all major CIASP's.
    - v. A copy of the plan is signed by and shared with all committee members. An electronic copy is placed in the student's academic folder. If the issue is related to clinic, the Directors of Clinical Education receives a copy as well.
  - c. Completion of the plan is assessed by the faculty involved at a predetermined date occurring not longer than one semester and noted in the student's academic folder.
- V. Process Regarding Clinical Knowledge and Skills
  - a. The faculty member who identifies the issue communicates the concerns to the appropriate Director of Clinical Education (DCE). The faculty member who identified the issue is free to convene a CIASP committee, with one of the committee members being the appropriate Director of Clinical Education.
  - b. The DCE convenes a committee of faculty currently working with the student and the student's academic advisor to develop the Clinical-Academic Support Plan.
  - c. The committee meets with the student to address the knowledge or skills that are not at the expected level and determine the best plan of action.
  - d. A copy of the plan is distributed to the student, the students' Academic Advisor, and the faculty who are involved in the implementation of the plan. An electronic copy is placed in the student's academic file.
  - e. The committee and student reconvene at or before a determined date to assess the progress and determine whether the plan has been achieved or further action needs to take place.
- VI. Graduate Assistant

- a. GA assignments will be reconsidered for students completing a CIASP that is not self-initiated.

## VII. Components of a Plan

- a. The student's name, advisor, semester of study, course name and number, and instructor(s) of the course.
- b. Areas of Study-This is a specific list of the knowledge or skills in which the student has not demonstrated minimal competency.
- c. Goals-Goals are to be measurable to determine whether the outcome sufficiently demonstrates the successful completion of the competencies in question.
- d. Recommendations
  - i. Specific steps of action as to how the goals can be accomplished.
  - ii. A date for an intermediate progress review may be set.
- e. Date-A specific date is indicated to note when the goals are to be completed. Duration of a CIASP should not be more than a single semester.
- f. Signatures-All the individuals formulating the plan, including the student, are to sign the CIASP.
- g. Outcome and Performance
  - i. Once the recommended period has lapsed, the faculty who are involved in the implementation of the plan note the outcome of the plan and determine the extent to which objectives have been met. Options for CIASP outcome include:
    - 1. Completed
    - 2. Continue plan
    - 3. Revise plan
  - ii. Options for evaluating the student's progress toward CIASP objectives and overall performance include:
    - 1. Satisfactory
    - 2. Persisting concerns
    - 3. Unacceptable
- h. A meeting is called with the student and the individuals involved in the initiation of the plan to discuss the outcome and recommendations. After the outcome meeting, the parties involved, including the student, sign the form to indicate recognition of the outcome(s) and recommendation(s).

## VIII. Time Constraints

- a. A plan addressing the same competencies should not extend beyond two semesters. If issues are critical and remain a concern:
  - i. The student will be informed of the strong likelihood that CCC may not be obtained.
  - ii. The student's options regarding program continuation will be reviewed with the student.
  - iii. Unsatisfactory completion of a CIASP, particularly one of major severity, will prompt faculty review of student's overall performance across content areas and clinic, and may be grounds for dismissal.