

Clinical Education Policy 506

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Policy: Students are to be familiar with the clinic procedures for conducting evaluations and treatment.

Procedure:

I. Diagnostic Evaluations

a. Pre-Evaluation Procedures

- i. A student logs into the electronic medical records (EMR) system to determine their diagnostic schedule for the week and the patient(s) they will serve.
- ii. The student assigned to conduct the evaluation will review the patient's records and the available medical/educational information before meeting with their assigned clinical educator.
- iii. Students will develop an evaluation plan to ensure all necessary diagnostic tests are completed.

II. Day of Evaluation

a. The student prepares the diagnostic/sound room and selects appropriate materials before the evaluation.

- i. The student is notified that the patient is ready via the EMR check-in screen after the front desk has ensured the paperwork is completed by the patient.
- ii. The assigned clinical educator and student meet the patient and/or parents in the lobby and escort them to the testing/sound room.
- iii. If a patient over 36 months old is being seen for speech-language testing, their hearing is screened first, if possible, unless they have previously been evaluated by audiology. Adult patients and any present partners in care are taken to the evaluation room for the initial interview. Parents of young children being tested have been instructed to bring someone who can sit with their child in the lobby while they are with the examiners.
- iv. Following the interview, the clinician may choose to have the caregiver return to the lobby or remain to observe the evaluation. Parents are to stay in the building during the entire evaluation in case of emergency.
- v. The student and clinician complete the testing.
- vi. Testing is completed, and tests are scored and analyzed. The student and clinician discuss the results and recommendations and plan for counseling.
- vii. The parent/patient is informed of the test results and recommendations by the student and clinician. If the patient is interested in therapy services, the clinician adds them to the MSHC wait list for therapy and provides them with a list of other local therapy resources.
 1. Regarding evaluations for Disability Determination Section (DDS), clinicians do not share any information related to results or testing. This information should be provided to the patient by the Social

Security Office directly, and they will determine the qualification of benefits and any recommendations.

2. Some evaluations, particularly specialty diagnostics, may require a separate results meeting or a follow-up visit on a separate day.
- viii. The student is responsible for restoring the room to its previous condition. This includes putting away all materials and cleaning as needed.
- ix. IMMEDIATELY following the evaluation:
 1. All patients will be escorted to the business office window to ensure payment is received for the services provided and additional appointments may be made at this time.
 2. FORM(S) MUST BE TURNED IN BY THE END OF THE DAY OF EVALUATION.
- x. If the patient is not in the lobby at the designated evaluation time, the student will wait in the lobby for 15 minutes. Students should remain in the building during their clinic slot at the faculty member's discretion.
- xi. A clinic note should be entered the day of the evaluation appointment.
 1. See Clinical Operations Policy 205 regarding documentation.

III. Therapy

a. Preparation for Therapy

i. Initial Student and Faculty Member Conference

1. The student is responsible for reviewing all information pertinent to planning a therapy program prior to the conference. The student and clinical faculty member will discuss the patient's current status and prognosis and will plan the initial treatment session.

ii. Therapy Materials

1. The student is responsible for the preparation of materials and organization of the therapy room prior to and following each therapy session.
2. Therapy materials are available for student checkout in the SLP Materials room in the clinic. Items are to be returned at the end of the day. Additional materials are in rooms for specific programs and are to remain in the rooms in which they are located.

b. Therapy Procedures

i. Weekly Student/Faculty member Conferences

1. Students meet with their clinical faculty weekly to discuss their patients' progress and plan therapy. Clinical faculty may choose to meet their students as a group or individually or discuss clients via email, in accordance with HIPAA policies.

2. Student Absences

- a. Attendance is mandatory for all scheduled diagnostic and therapy sessions.
- b. If the student is ill, they should notify the clinical faculty member in charge.
 - i. If the student is not able to attend the session, they must personally contact the faculty member in sufficient time to make the necessary adjustments. Leaving a message is not acceptable.

- ii. The student is responsible for finding a substitute for the therapy and for providing a therapy plan for the session(s).
 - iii. If a substitute cannot be found, and the faculty member is available to cover the session, then the patient is seen at their regular time. The student is to provide the faculty member with the therapy plan.
- c. A student may request to miss clinic in certain cases and approval is granted by the clinical faculty member and Director of Clinical Education. The student is expected to find a replacement clinician.
- d. Please refer to appropriate policies regarding clinical experiences (AuD Policy 201, SLP Policy 301).

3. Meeting the Patient

- a. The student is responsible for meeting the patient on time in the lobby and accompanying them to the therapy room.
- b. If the patient is not in the lobby at the designated appointment time, the student will wait in the lobby for 15 minutes.
- c. The student should remain in the building during their clinic slot at faculty member's discretion. The student or faculty member will inform parents/family members or patient of policy regarding unattended children and excessive tardiness or absences.

4. Length of Sessions

- a. Therapy sessions are scheduled in 15-minute units. Length of session is determined by the individual clinician.

c. Returning the Patient to the Lobby

- i. All patients (adult or child) are to be escorted to the lobby by the student.

IV. Beginning and Ending Dates for the Clinic Semester

a. Beginning

- i. All students are required to attend the general orientation meeting each semester, as well as orientation meetings specific to their clinical assignments, prior to the beginning of each semester.

b. Ending

- i. Each student is required to remain available until the last day of finals each semester.

c. Breaks

- i. Students can volunteer to see patients or complete research duties during the semester breaks unless the University is closed.

V. Grade Reduction for Missing Orientation Meetings

- a. Missing the general orientation and/or any individual orientation meetings with a clinical educator will automatically result in a reduction of the student's grade for the Professionalism/Administrative Accountability section.
- b. If an emergency or outstanding circumstance occurs that conflicts with orientation, the student must submit a written explanation to the appropriate Director of Clinical Education at least two weeks prior to the general orientation meeting.

- c. The AuD/SLP Directors of Clinical Education will determine if the student is excused from attending orientation.
 - i. If excused, there will be no grade penalty, but the student will be responsible for any information missed during the general orientation and/or individual orientation meetings.
 - ii. If unexcused, the student's grade for Professional/Administrative Accountability section will be reduced. The student will be responsible for any information missed during the general orientation and/or individual orientation meetings.
- d. Individual clinical educators will use their discretion in determining how they want the student to access missed information (recorded orientation, virtual participation, notes from a fellow student, etc.).