



**MOLLOY
UNIVERSITY**

***Clinical Policies and Procedures Manual
Communication Sciences and Disorders***

Graduate Student Clinicians

Introduction

Welcome to clinical practicum at the Molloy University Speech, Language and Hearing Center. You are about to embark on an exciting and rewarding experience. This experience will be educational and valuable for each student clinician but, as with anything worthwhile, also comes with a great deal of hard work and responsibility. For the first time in your academic career, your success is not the only thing dependent on your hard work. For most students, for the first time, another person, another family, who has sought the help of an expert, will look to you for help. Your clients and their families are counting on you to make their lives better. You will do this by researching, preparing, and executing the most effective treatment each week. You will do this by conducting informal and formal assessments. You will do this by writing comprehensive and professional lesson plans, session notes, treatment plans and progress reports, so that you, your client, and the next clinician will have the information they need going forward. You will do this by presenting yourself in a mature, confident, and professional manner and communicating effectively and respectfully with your clients, their families, and other professionals in order to participate in interprofessional practice.

Of course, no one expects perfection overnight. What is expected, however, is a commitment to your practicum experience. This commitment is to your clients, your clinical educators, and the Molloy University Speech, Language and Hearing Center. For students to have successful experiences, they will use this manual as a resource and adhere to the following guidelines.

Please carefully read through this manual and refer to it on a regular basis to refresh your working knowledge of the policies.

Table of Contents

I Practicum Policy	4-7
II Clinician Rights and Responsibilities	7
III Code of Ethics/Client Confidentiality	7-8
IV Professional Appearance and Demeanor/Dress Code	8-9
V Clinical Procedures	9-10
VI Timelines and Requirements	10-12
VII Shadowing	12
VIII Attendance	12
IX Grading	13
X Parent/ Family Contact and Generalization/Homework Activities	13
XI Clinical Seminar/Lecture Meetings	13
XII General Supervisory Guidelines	13
XIII Clinical Educator/Clinician Meetings	13
XIV Day to Day Operations and Security	13
XV Transportation	14
XVI Equipment and Supplies	14
XVII Photocopy Policy	14
XVIII Video Recording	14
XVIV Client Records	15
XVV Use of Generative Artificial Intelligence	15
Appendix A: Identifying Information	16-18
Appendix B: Infection Control Policies and Procedures	19
Infection Control Quiz	20
Infection Control Acknowledgement Form	21

I Practicum Policy

All clinicians should be familiar with all policies and procedures for all clinical practica and for the Molloy University Speech, Language and Hearing Center. **Participation in clinical responsibilities is mandatory during every semester of the graduate program including the summer and first intersession. There are no exceptions to this policy. Regarding summer, students typically do not have clinical responsibilities during the two weeks immediately preceding the start of the fall semester. This would be a time to schedule trips. Please do not schedule them during times when you will have clinical responsibilities. Please keep this in mind when scheduling trips. Please note that there may be exceptions to this at particular externship sites.** Clinical responsibilities will be assigned at the discretion of the speech center director and/or the clinical coordinator. Please note that externship syllabi require participation in speech center based clinical activity, weekly class meetings and attendance at colloquia, guest lectures, and continuing education events.

Please refer to your graduate handbook and/or the course sequence requirements in the course catalog for a list of the necessary coursework to enroll in clinical practicum. Remember all courses and practica must be completed with no less than a grade of “B-” to continue in the graduate program.

A. Before beginning any clinical hours, the required 25 hours of guided observation must be documented by your undergraduate program. These hours must be completed with an ASHA certified speech-language pathologist who has the required 2 hours of professional development/continuing education units in clinical education/supervision. If observation hours were accrued after 1/1/2021, the 25 hours must be *guided observation* hours in accordance with ASHA’s guidelines. *This documentation must be in the form of a signed letter from your undergraduate program. This letter may be emailed directly from the undergraduate program to the Clinic Director, or a hard copy of the letter may be provided to the Clinic Director. Observation logs signed by the undergraduate program will also be accepted.* Students who completed their observation hours outside of an undergraduate program will also be required to provide signed documentation from their sites of observation. These sites may be contacted by the speech center director to confirm. Proof of observation hours will be kept in the student clinician’s file.

B. The sequence for practicum enrollment is as follows:

- SLP 5900/Clinical Practicum in Assessment (SLP 5275 must be taken prior to or simultaneously with this course.)
- SLP 5910/Clinical Practicum I
- SLP 5911/ Clinical Practicum II
- SLP 5912/Clinical Practicum III

* Note: The sequence of SLP 5911 and SLP 5912 is reversible with clinic director approval. The sequence of SLP 5900 and SLP 5910 is reversible with clinic director approval.

C. A meeting with the clinic director is mandatory before enrolling in each clinical practicum course. This meeting is to ensure that the student has met the necessary requirements to enroll in the course. The first meeting must take place one semester prior to enrolling in clinic. Students are expected to bring the following to this meeting:

- Proof of completion of the necessary coursework (from your advisor)
 - Please note, entrance into practicum will be denied if all necessary coursework and requirements are not completed. Grades of “incomplete” are not acceptable.
 - Proof of observation hours as noted above
 - Clinical writing sample (e.g. observation report)
 - *Adequate flexibility for the scheduling of clinic clients in order to obtain enough experience to potentially be placed in an externship*
 - All provided/necessary agreements signed
 - Proof of liability insurance (memorandum of insurance). The insurance must be provided prior to entering the program and must be maintained and current throughout the program. Students must maintain liability insurance in the amount of \$1,000,000/\$3,000,000. Two popular companies from which students obtain this insurance are as follows:
 - <https://www.Proliability.com>
 - <https://www.HPSO.com>
 - HIPAA Training: Students will observe the video entitled *HIPAA for Allied Health Professionals* on Simucase (www.simucase.com). **This needs to be completed in Interactive Mode.** Please note that students must subscribe to Simucase for this and the following mandatory OSHA training. Simulations will be used at least throughout the first year of graduate school and is therefore necessary for all students to have a membership. Students must use their Molloy email address so that proof of training can be checked by the clinic director.
 - OSHA Training: Students must observe the video entitled *Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens Standards: What You Need to Know*. This can also be found on Simucase (see above) and must be completed in Interactive Mode.
 - Students must read the Infection Control Policy in Appendix B, sign the Infection Control Acknowledgement Form and complete and submit the Infection Control Quiz.
 - Students must sign the required agreements/quizzes (e.g. confidentiality, manual, manual quiz, use of materials form, video permission form and telepractice form) and can fail/be asked to leave clinic for violations of the policies and procedures outlined in this document. These can be found in the student class Canvas shell.
- D. As part of the university’s mission, all students will engage in community-based clinical service through the Molloy University Community Care Clinic. Details regarding sign-up will be provided, and participation will be tracked.
- E. When preparing to enroll in SLP 5911 and SLP 5912 for off-site clinical experiences, additional requirements apply. Students must complete a minimum of 50 hours clinical experience with Molloy faculty in or associated with the Molloy University Speech, Language and Hearing Center prior to being considered for an off-site placement. Progression of students with less than 50 hours, and/or inclusion of undergraduate hours towards the 50 hour minimum requirements, will be at the discretion of the SLHC director. Students who are not judged as prepared for an

externship placement will spend additional time under the supervision of Molloy clinical faculty in order to satisfactorily complete SLP 5910 and related requirements, and be provided interview opportunities for SLP 5911 and/or 5912.

- F. Additionally, in preparation for SLP 5911 and SLP 5912, all students must meet with the Clinical Coordinator in the beginning of the semester prior to the placement or in the spring for a summer or fall placement to discuss their role in the selection and assignment of the externship site(s). This may include but is not limited to the students' interests, concerns and any transportation issues in order to obtain appropriate externship sites. Please note that in this geographical area, externship placements are highly competitive, and the student(s) and clinical coordinator will also discuss appropriate sites which will meet the students' interests, prerequisite courses, along with the specific supervisory needs of the students. Consideration of geographical areas and transportation will be given but is *not* always possible. A written confirmation form for such a meeting will be completed at the end of each meeting and will be signed and dated by both the Clinical Coordinator and the student. Such confirmation will be filed in the student clinician's file maintained by the Clinic Director.
- G. The Clinical Coordinator will regularly meet with the Clinic Director, who will monitor each student's success in academic courses in collaboration with the Graduate Program Director to determine when each student will be ready to attend an externship. The Clinic Director will review each student's clinical ratings throughout the semester of all practica and discuss student's knowledge and skills with clinical educators and/or applicable course instructors/faculty in consideration of an externship placement. This information will be discussed with the Clinical Coordinator to determine the readiness of the student for the externship.
- H. All clinical educators, both onsite and offsite, must hold an ASHA Certificate of Clinical Competence and state licensure. The Clinic Director and Clinical Coordinator maintain compliance of such on Calipso, a web-based clinical management system. Compliance will take place via ASHA and state website verifications and/or hard copies of certificates and licensures or uploaded certificates and licensures on Calipso. Additionally, information on each site's clinical population and clinical personnel will be maintained on Calipso, including ASHA Appendix VI-B in order to assure that each site offers an appropriate and diverse clinical experience. Information such as but not limited to multicultural and multilingual populations, severities, interprofessional collaboration, diverse age population and diverse settings will be maintained for each student on Calipso.
- I. As per the most current ASHA, CAA and CFCC Standards, the Clinic Director and Clinic Coordinator will verify via the ASHA website or request hard copies of continuing education certificate(s) to assure that each clinical educator, both onsite and offsite, has obtained the required minimum of 2 hours of professional development/continuing education in clinical instruction/supervision. Records of this requirement will be maintained on Calipso.
- J. If a student declines an externship offered by the Clinical Coordinator, that student will sign a Declination of Externship form and will forfeit that semester's opportunity for externship opportunities.

- K. All students must get fingerprinted in order to be ready for their externships.
<http://www.nysed.gov/educator-integrity/fingerprint-process%20>
- L. All students must set up their TEACH accounts. <http://www.highered.nysed.gov/tcert/teach/>
- M. As mentioned, some externships require background checks, drug tests and FIT testing for N95 masks. This information will be shared with you if required by the externship site.

II Clinician Rights and Responsibilities

- Knowledge of ASHA Code of Ethics and Scope of Practice
- Compliance with Clinic Policies and Procedures/Guidelines
- To recognize and be respectful of each client's personal and cultural beliefs
- To be prepared and organized for each clinical session
- To attain a working knowledge of necessary diagnostic instrumentation and use appropriately
- To develop appropriate treatment objectives
- To maintain accurate client records and clinical hours records
- To engage in self-analysis
- To apply information learned in academic courses to clinical practicum
- To engage in research to benefit your clients and bring ideas to practicum
- To ask questions and seek assistance as needed
- To maintain open communication with clinical educators, Clinic Director and Clinical Coordinator
- To attend weekly clinical seminar/lecture meetings
- To maintain client confidentiality

III Code of Ethics

All student clinicians (and their clinical educators) will abide by all ASHA guidelines including the Code of Ethics. Copies of the ASHA Code of Ethics can be found in the Molloy University Speech, Language and Hearing Center, and on main campus. Students are also encouraged to refer to the ASHA website to obtain ASHA's Code of Ethics and/or additional information distributed by ASHA. Any breaches of academic integrity and/or ethical conduct may negatively impact the student's progression in the program.

*Student clinicians and observers are **not allowed**, under any circumstances, to share their personal contact information or engage in any manner other than professionally with current speech center clients and their caregivers.*

A. Client Confidentiality

Maintaining client confidentiality at all times is of the utmost importance. Students are expected to adhere to ASHA and HIPAA guidelines and must provide proof of the Molloy required HIPAA training prior to participating in any observation or clinical practicum experiences. Students must also sign a confidentiality agreement before taking part in the aforementioned activities in or supervised by the Molloy University Speech, Language and Hearing Center. The confidentiality agreement will be kept on file with all other requisite paperwork for entering clinical practicum.

Information regarding a client is not to be shared with anyone without written permission from the client or guardian/power of attorney. Students must confirm with their clinical educators and/or the Clinic Director that the appropriate permissions have been attained before sharing *any* information via a signed release form.

Written and/or hard copies of clinical documentation *cannot* be removed from the Molloy University Speech, Language and Hearing Center. Any documentation or planning materials with identifying client information must be kept at the center and may not be saved or sent electronically other than on the approved, HIPAA compliant electronic health records system utilized (ClinicNote). Hard copies of clinical paperwork may be used during outside screenings rather than ClinicNote. In this case, the documents must be provided to the Clinical Educator at the end of the screening. Please refer to Appendix A of this manual for additional information regarding identifying information that must be removed from electronically submitted documentation.

All client conferences and interactions must take place in a confidential environment and never in a public setting (For example, meetings with caregivers must not be conducted in the waiting room after the session.) Violations of client confidentiality are taken seriously and consequences for violations will be determined on an instance-by-instance basis.

Please see the Artificial Intelligence section regarding HIPAA concerns.

B. Accurate Documentation

Maintaining accurate records is an essential responsibility as a student clinician and as you progress into your clinical fellow and licensed and ASHA-certified speech-language pathologist. Students must document goals, procedures, materials, rationales, and data collected on their clients. While students are provided with opportunities to view previous semesters' documentations, students must not use them to document their *own* work for that semester.

IV Professional Appearance and Demeanor

All student observers and clinicians are representatives of the Molloy University Speech, Language and Hearing Center, the Communication Sciences and Disorders program and the university. As such, they are expected to dress and behave professionally at all times. Clothing should be neat and professional but comfortable as clinicians may sit on the floor with their clients. Interactions with clients, their family members and any professionals and staff should be formal and respectful with professional boundaries maintained. Interactions amongst student peers should be professional at all times.

A. Dress Code: The following guidelines must be adhered to and are applicable for activities within the speech center as well as off site:

- Perfumes/colognes are not to be worn by student clinicians. (This is in the best interest of the clients.)
- During treatment/evaluation sessions and community events, students are to wear the Molloy University Speech-Language Pathology polo shirt and black scrubs.
- Piercings, jewelry and other accessories such as scarves are permitted at the discretion of the clinical educator and/or speech center director. For example, there are particular

instances when jewelry/piercings might create a danger or interfere with the client's therapy. For example, tongue jewelry is never permitted during clinical sessions.

- Flip flops and beach attire of any type are not permitted.
- Footwear should be clean and neat.
- When entering the speech center during non-direct client experiences, students are to be professional in their attire.
 - Skirts and dresses must be an appropriate length. (Hemlines must not be above your fingertips regardless of what is worn underneath: tights, pantyhose or leggings.)
 - Stomachs, backs and cleavage must be covered at all times.
 - Camisole type tank tops are not permitted
 - Undergarments must be concealed completely
 - Casual tee shirts are not permitted.

V Clinical Procedures

A. When assigned a client for evaluation or treatment at the Molloy University Speech, Language and Hearing Center, clinicians are to:

1. Attain all necessary background and medical information from client's electronic file and paper file. Access to client's file is made on a client-by-client basis.
2. Confirm the first appointment date/contact with the assigned clinical educator, Clinic Director and/or administrative assistant.
3. Make an initial appointment to meet with their clinical educator to discuss each client, any initial planning and the student's supervisory meeting schedule. Clinical educators are available by appointment and/or during specified office hours. Please be considerate of the clinical educators and schedule appointments in advance. A draft of the initial lesson plan is expected to be completed by the time of the initial meeting with the clinical educator.
4. For all evaluation appointments, provide the Clinic Director or clinical educator with a case history form to be sent to the client following approval by the assigned clinical educator if time allows.
5. The Clinic Director or Administrative Assistant will be responsible for making semester files in the electronic health records (ClinicNote). Students MUST NOT take it upon themselves to create any new folders on ClinicNote.
6. Student clinicians will be responsible for tracking attendance on the ClinicNote schedule and maintaining record of client contact outside of the clinical sessions on the Contact Notes and Messages section of ClinicNote. For Head Start children, students will maintain a *Client Contact Log* which will be an inventory of all finalized paperwork.
7. Use of ClinicNote will be conducted in a private, remote area. Students must log off of ClinicNote when leaving their computers and use password protection.
8. As mentioned, paper client files will remain at the speech center at all times.
9. Student clinicians are NOT to contact clients unless specifically instructed to do so. In such a case, this contact would take place via a Speech Center telephone line. Again, student clinicians are NOT to provide clients with any personal contact information and/or email clients/caregivers directly.

10. Students must act professionally, respectfully and ethically at all times, maintaining confidentiality and acting in the best interest of the client.
11. Students will prepare themselves in order to work with each client: Ask questions of the clinical educator, research diagnoses and treatment strategies and prepare appropriate materials. When appropriate permissions have been attained, phone calls to other professionals and/or school staff will be discussed with each supervisor and executed by the supervisor or supervised student clinician as appropriate.
12. STUDENTS MUST BE PRESENT AT EVERY SCHEDULED TREATMENT SESSION. ABSENCES ARE UNACCEPTABLE EXCEPT IN THE CASE OF EXTREME EMERGENCY. IN THE EVENT OF SUCH AN EMERGENCY, THE CLINICIAN MUST CONTACT THE CLINIC DIRECTOR at jascher@molloy.edu, SPEECH CENTER at SLHC@molloy.edu, and the specific CLINICAL EDUCATOR IMMEDIATELY. Consequences for missed treatment sessions are stated in section IX.
13. Students are to follow all timelines set forth by the Molloy University Speech, Language and Hearing Center and/or each individual clinical educator. Speech Center Guidelines are stated in section VII. Grades will not be submitted until all clinical paperwork is finalized and all clinical hours are approved.
14. Students must obtain prior and specific approval from their clinical educator before making referrals to any other professionals.

VI Molloy University Speech, Language and Hearing Center Paperwork Timelines and Requirements

Students are to adhere to the timelines set forth by the speech center, on the course syllabi, and individual clinical educator for documents including but not limited to lesson plans, session notes, treatment plans, progress reports, and evaluation reports. Failure to adhere to these guidelines will be reflected in the student's grade and may result in loss of clients and clinic course failure. All paperwork and assignments must be provided directly to the clinical educator via ClinicNote. All documentation must be done on ClinicNote. **Students are not to use another form of document (e.g. Google Docs or Word) and then cut and paste into ClinicNote. This is a HIPAA violation. Additionally, ClinicNote's system does not allow for correct pasting which results in format changes.** If ClinicNote is not being used (e.g. for community screenings), then hard copies of documentation will be utilized and provided to the Clinical Educator at the end of the screening.

A. Evaluations

There is a turn-around time of **1 week** to submit an evaluation report to the clinical educator for approval and/or revisions during the fall, spring and summer semesters. Reports are due sooner during the brief winter semester. Revised reports will be resubmitted promptly to the clinical educator by the date determined by them. All evaluation reports will be shared with the client **no more than 2 weeks from the evaluation date. All testing materials including testing protocols/booklets, case history forms, oral peripheral forms, etc. must be filed in the client's paper file.**

Please note: A second student clinician may also score/check any testing that is completed. This assigned student must inform the clinical educator when this is completed and also verify completion by initialing any test protocols.

B. Revisions

As a rule, revisions will be due back to the supervisor 2 days from when they are returned to the student clinician. This timeline will be shortened during the winter semester. A clinical educator may, however, request that revisions be submitted sooner.

C. Lesson Plans

Lesson plans are due within 48 hours of the previously completed session unless otherwise indicated by the supervisor. It may be due earlier to adequately prepare for the client's next session.

D. Lesson Plan/Session (SOAP) Note Protocol

As stated above, lesson plans are due approximately 5 days prior to the scheduled treatment session (48 hours following the session). Session notes are to be completed immediately following each completed treatment session. Session numbers are required on lesson plans and session notes. Please note that this will not be auto populated on ClinicNote, and students will need to insert the session number. **Additionally, please change the date of the lesson plan and SOAP note to the date of the session, rather than the auto populated date of writing the plan or note.**

E. Client Contact Notes

As mentioned, all contact between clinician and client outside of the session is to be recorded on the ClinicNote in the Contact Notes/Messages section, as it occurs. This should be filled out over the course of the semester indicating phone calls.

F. Record of Supervised Clinical Hours

Students are required to maintain records of their direct contact clinical hours on the Calipso web application. Student instructions on Calipso usage will be distributed, and a review will be conducted during the beginning of SLP 5910 Clinical Practicum I. Please note that the student is required to submit the date and time (in minutes and/or hours) on Calipso, along with site, type of setting, whether it was an evaluation or intervention session, course, semester and noting that hours were obtained during graduate studies. Additionally, mode of delivery will be noted (face to face, telepractice, or simulation). Furthermore, students will note whether the session was conducted with a child or an adult. Areas such as cultural and linguistic diversity, severities, and interprofessional collaboration will be noted on students' midterm and final evaluations on Calipso by the clinical educator. This is in accordance with ASHA, CAA and CFCC Guidelines which necessitate that all students demonstrate knowledge and competency in cultural and linguistic correlates of speech, language, hearing and communication disorders.

G. Other Paperwork Requirements and Guidelines

All paperwork is to be completed comprehensively and professionally using accurate personal information as well as observations and gathered data. This may include:

- Personal and identifying information, including but not limited to correct address and phone number, at the top of all reports
- Medical and developmental history

- Current educational and/or therapeutic setting and services
- Accurate chronological age
- Informal assessment measures and behavioral observations
- Formal assessment results when appropriate
- Working semester electronic folder

VII Shadowing Clinicians

In addition to each student clinician's own clients, students may also be assigned one or more clients and clinicians to shadow. Shadowing a client and clinician is important because the shadowing clinician may be called upon in an emergency to administer treatment for that client. Shadowing incorporates many of the same responsibilities attached to treating the student's own clients. When assigned a case to shadow, the student clinician is responsible for:

1. Reading the client's chart and being familiar with weekly lesson plans and progress.
2. Being available each week at the client's treatment time
3. Observing at least one of client's sessions with the student clinician during the semester
 - Documented completion of this requirement must be provided to the speech center director
4. Completing the session note for any sessions completed and any additional paperwork which may be requested by the clinic director in the event of an emergency.

VIII Attendance Requirements for Clinical Practicum

A. On-site practicum:

1. All students are expected to provide supervised clinical services at the speech center and/or in the community. Each semester, these services (e.g. treatment sessions, evaluation and screening sessions) will be assigned at the discretion of the Clinic Director. Students may be assigned clients during the daytime, evening hours and/or on the weekend. **Students must give enough availability in order to obtain a diverse experience.** Students will discuss exemptions (e.g. religious exemptions) with the Clinic Director well in advance.
2. Attendance at evaluations, screenings/health and wellness/outreach events, treatment sessions, supervisory meetings, guest lectures and colloquia are a requirement of clinical practicum. Absences from clinical sessions are unacceptable and may result in being asked to leave clinic and/or failing the course.
3. Student clinicians are expected to arrive a *minimum of 30 minutes* prior to their scheduled clinical session to allow for adequate preparation time.

B. External practicum:

Offsite practica will be arranged one semester prior to registration or in the summer for fall placements. All previous requirements apply, and liability insurance must be maintained. Students must comply with any additional requirements indicated by the placement site. Potential conflicts at externships must be initially discussed with the Clinical Coordinator and Clinic Director who will then address on an individual basis given individual circumstance.

Documentation will be kept by the Clinical Coordinator and/or Clinic Director regarding any conflicts.

IX Grading

Grades are comprised using scores from each student's clinical educators and course instructor. The evaluation form can be reviewed on Calipso once finalized by the clinical educator. Students will receive a midterm evaluation and final evaluation from their clinical educators and/or externship supervisors. Clinical skills, writing skills, professional behaviors and class attendance, participation and assignment grades all contribute to the clinical course grade calculation. Specific information on grading can be found on the practicum course syllabi.

Intervention plans and other documentation of concerns regarding student performance during the semester may be completed at any time during the semester.

X Parent/ Family Contact and Generalization/Homework Activities

Home activities for generalization are an integral and required part of all treatment programs. Because the preparation and inclusion of these activities is integral to a complete and successful treatment program, a portion of each student's grade is based upon the inclusion of carryover/home activities in his/her planning and execution of treatment sessions.

XI Clinical Seminar/Lecture Meetings

All student clinicians are to attend weekly meetings wherein students present on their clients and are encouraged to ask questions. Discussion of hypothetical clients, simulations, cases and treatment planning activities may also take place. Readings and related assignments will be required in addition to reflection assignments. Specific requirements will be found in each course syllabi.

XII General Supervisory Guidelines

Supervision is provided in accordance with ASHA guidelines. ASHA mandates that supervision must be in real time and must never be less than 25% of the student's total contact with each client. This minimum guideline is directed upwards based upon the needs of individual clinicians and clients.

XIII Clinical Educator/Clinician Meetings

As per the stated guidelines, lesson plans etc. are due well in advance of scheduled treatment sessions to allow for supervisor feedback and guidance. As needed, revisions and changes in treatment planning and written work may be necessary. Time must be allotted to communicate with your clinic supervisors at their discretion. Upon arrival at the speech center, students are to stop by the clinical educator's office to let them know they are present and clarify any last-minute concerns and/or questions. Additionally, students must meet with the clinical educator following the session for feedback.

XIV Day to Day Operations and Security at the Speech Center

The Molloy University Speech, Language and Hearing Center is located in a professional, medical building with security cameras in the common areas. Entrance to the speech center is made via a locked door opened by speech center staff. Staff confirms the identity of the person ringing the bell prior to allowing entry. Students are NOT to open the door without direction from speech center personnel.

Please note that both an intercom system (or phone) and video system are provided in each treatment room. Should you need to communicate with a clinical educator or staff member during your session, please use one or both of these systems.

XV Transportation

The Molloy shuttle service is also available for transport between campus, the speech center, the bus station and the train station. Please check the Molloy University website for the most current schedule.

XVI Equipment and Supplies

- A. Supervisors and clinicians may use tests and materials from the testing and materials closets. These materials will not, however, generally be sufficient for all of your treatment sessions. Students are encouraged to be creative in the development of their own materials. These can then be kept within your own set of treatment materials for the remainder of your clinical career.
- B. Treatment rooms are to be cleaned immediately after sessions. All materials should be put away, and tables and materials wiped down with antibacterial wipes. If any materials were removed from the room for a session, they must be returned back to its original location. For example, if a mirror or picture was removed from the wall, it must be securely stored and returned upon completion of the session. Please do not prop mirrors against the wall as this is a safety hazard. Please see Appendix A for detailed information regarding Infection Control Policies and Procedures. As previously mentioned, all students will be required to take an OSHA and Infection Control course prior to beginning SLP 5900 or SLP 5910.
- C. Equipment and testing materials are not to be removed from the speech center without the consent of the Clinic Director. Tests and testing materials must be signed out and signed back in. Students are responsible for returning items in a timely manner in their respective storage areas. Please note that the tests are alphabetized in the test closet.
- D. In the event that a piece of equipment needs repairs or is missing pieces, the Speech Center administrative assistant and/or Clinic Director must be notified immediately.

XVII Photocopy Policy

Best clinical practice includes being prepared for your sessions in advance. Students must plan ahead in regard to materials and copies needed for therapy and evaluation sessions. Photocopying is available in the lab facilities on the Molloy University main campus, the cost of which is included in students' tuition and fees. With that being said, photocopying will be limited at the speech center. Please note: Only materials in which the author gives permission for reproduction for educational or therapeutic purposes will be photocopied. Lastly, kindly use the printer and/or copier machine for clinic-related paperwork rather than academic coursework. Academic coursework papers should be printed on campus rather than at the speech center.

XVIII Video Recording

Recording is encouraged to be used as a tool for development of clinical skills and modification of treatment programs. As previously stated, client confidentiality is of the utmost importance. Each client has a permission for video and audio recording on file denoting specific permissions for that client.

Students are also required to permit recording of themselves. Recording of clients/sessions takes place only via the internal system at the SLHC. These recordings are not under any circumstances to be removed from the speech center, and students are not to record on their own devices without specific prior written permission.

XVIV Client Records

As mentioned, electronic versions of all speech center clients' plans, notes and reports must be created, submitted and saved on ClinicNote, a HIPAA compliant electronic health record. Other clinic work, such as community screenings, testing protocols, etc. will be maintained at the speech center in paper files. As stated, client paper records are not to be removed from the speech center. Each client's paper folder will be accessible to the student clinician during speech center hours. It is the student's responsibility to place all supervisor-approved work into the folder after noting supervisor feedback. Permanent folders must be signed out with the clinical educator or the center's administrative assistant once the clinical educator indicates that the clinician may view it.

ALL SPEECH CENTER FORMS, FORMATS AND STUDENT EVALUATIONS ARE AVAILABLE ON CLINICNOTE AND CALIPSO, RESPECTIVELY.

XVV Use of Generative Artificial Intelligence

There has been a significant increase in the popularity and availability of a variety of generative artificial intelligence (AI) tools, including ChatGPT, Sudowrite, Bard, and others. These tools will help shape the future of work, research, and technology, but when used in the wrong way, they can stand in conflict with academic integrity guidelines at Molloy University. Molloy University considers use of unauthorized and uncited generative AI as plagiarism. Please refer to Molloy University's AI policy on their website. To maintain a culture of integrity and respect, generative AI tools should not be used in the completion of course assignments unless your course instructor specifically authorizes their use. Therefore, any use of AI in this course must be specifically approved in advance, for each proposed use, by the course instructors and cited appropriately with AI source, after approval. Failure to adhere to this generative AI use policy is considered a violation to Molloy's Academic Integrity policies and are subject to the same consequences. If an academic infraction is detected for any course deliverable (assignments, presentations and/or exams), the procedures lined out in the graduate handbook will be followed to investigate the academic infraction and the grade for the deliverable will be changed to zero.

In terms of clinic, the use of AI is NOT permitted to create lesson plans, SOAP notes, treatment plans, progress reports, evaluation reports or any other type of documentation as there is a risk for unauthorized disclosures of protected health information (PHI). Furthermore, AI algorithms are not always correct, and it is imperative that all students provide evidence-based intervention and evaluations. Use of AI in clinical documentation will be considered a HIPAA violation.

The cited use of AI may be permitted to create materials for client sessions; however, careful consideration of the appropriateness for each individual clinician and their clients must be taken.

MOLLOY UNIVERSITY SPEECH, LANGUAGE AND HEARING CENTER POLICIES AND PROCEDURES

APPENDIX A – INFECTION CONTROL

The procedures described below are designed to protect students, clients, faculty and staff as well as other individuals gaining access to the clinical environment, from transmission of communicable diseases.

Standard Precautions (ASHA: <http://www.asha.org/slp/infectioncontrol.htm>)

Standard Precautions (previously referred to as Universal Precautions) were recommended by the Centers for Disease Control and Prevention (CDC) for the purpose of prevention of the transmission of blood-borne pathogens. Training in these guidelines will be completed at the beginning of the semester during the student's first clinical practicum. Standard Precautions include but are not limited to hand hygiene, wearing personal protective equipment, and sterilization of reusable equipment.

A. Hand Hygiene

1. Proper hand hygiene is agreed to be the most effective way to prevent transmission of communicable diseases. The students, faculty and staff shall implement the following standard policies and procedures:
 - Wash hands or use hand sanitizer **before** and **after** each clinical session;
 - Wash hands upon contamination or potential contamination with any bodily fluid or blood;
 - Wash hands immediately after performing the following procedures: oral peripheral examinations, dysphagia management, oral motor therapy, feeding therapy or any procedure involving manipulation or touch of the articulators;
 - Wash hands after removing gloves

CDC Recommended Guidelines for Hand Washing

1. Wet hands with clean running water (warm or cold) and apply soap;
 2. Rub hands together to make a lather and scrub well; scrub back of hands, between fingers and under nails;
 3. Continue rubbing hands for at least 20 seconds;
 4. Rinse hands well under running water;
 5. Dry hands using clean paper towel or air dry.
2. If soap and water are not available, use an alcohol-based hand sanitizer that contains at least 60% ethanol alcohol or 70% isopropyl alcohol. Alcohol-based hand sanitizers quickly reduce the number of germs but do not eliminate all types of germs.

Hand Sanitizer Guidelines

1. Apply the produce to the palm of one hand;
2. Rub hands together;
3. Rub produce over all surfaces of hands and fingers until hands are dry.

B. Personal Protective Equipment

Protective barriers includes gloves, face masks, protective glasses and other equipment which are used to provide a barrier of safety.

1. **Use of Disposable Gloves:** Disposable gloves should be worn when the student, faculty or staff member could be in contact with any bodily fluid. Additionally, disposable gloves should be worn in the presence of non-intact skin or any open wound. Disposable gloves should be worn during oral peripheral examinations, dysphagia management, oral motor therapy, feeding therapy or any procedure involving manipulation or touch of the articulators. Disposable gloves are available in each and every treatment room. Please be aware of latex allergies prior to treatment or assessment. Latex-free gloves are available.

Glove Procedure

- Place gloves on a clean paper towel;
- Inspect for tears;
- Wash hands prior to putting on gloves;
- Wash hands after removing gloves;
- Dispose of gloves in trash.

If gloves are contaminated with blood, place in a plastic bag, separate from other trash.

2. **Use of Masks:** Diseases such as airborne microorganisms can be transmitted through the mouth or nose. Masks are required to be worn when a patient reports a potentially contagious airborne microorganism disease.

Mask Procedure

- Masks are for single use purposes
- Masks shall be discarded in trash after use
- Masks must fit snugly over mouth **and** nose

- C. **Disinfecting Materials:** Disinfectants are chemicals designed to kill microorganisms residing on non-living surfaces.

1. **Room and Toy Disinfection:** Table tops and all toy items should be wiped with disinfectant wipes after each session, available in each treatment room. If a surface has been contaminated with blood or any bodily fluid, the following procedures will be followed:

1. The clinical educator will be notified immediately. The clinical educator will make the decision regarding whether or not Molloy University's Maintenance Department should be notified to sanitize any surfaces, such as carpeting.
2. Gloves will be worn, as per the glove procedures in this manual;
3. The contaminated area will be isolated until the surface area can be disinfected appropriately.
4. The contaminated area will be disinfected with a hospital-grade disinfecting solution. Please ask the administrative assistant or clinic director. Disinfecting wipes are also available in all treatment rooms.
5. Wipes should be discarded in a plastic bag and placed in a trash receptacle.

D. ***Incidents*** – Human bites, physical injuries, etc.

Any student, faculty member or staff member who receives a human bite or other physical injury will be advised to seek immediate medical care with their physician or Student Health Services. All incidents will be reported to Public Safety. A first aid kit is available in the closet next to the conference room. In case of emergency, 911 will be contacted.

- E. ***Policies and Procedures for Feeding Sessions:*** The student clinician who is using any of the oral motor or feeding equipment with a client is responsible for cleaning and storing the equipment in a sanitary manner, when use of disposable utensils and plates is not appropriate. All utensils and feeding equipment will be washed in warm soapy water, rinsed thoroughly, and dried with a paper towel. Materials will be stored in a clearly marked food storage bag with the client's name. This page will be stored in the clinical educator's cabinet.

F. ***Policies and Procedures for Audiologic Procedures:***

1. **Headphones:** Headphones will be wiped with a disinfecting wipe before and after each use. Headband and headphone cushions will be wiped. Wipes will be discarded in trash. Hang headphones in designated area and let dry.
2. **Tympanometry:** Gloves should be worn if drainage is noted. After administration, disposable tips should be disposed of in a plastic bag in the trash.
3. **Otoscopy:** Gloves should be worn if drainage is noted. Following procedure, remove specula and dispose of in plastic bag in trash.

PLEASE SIGN THE ATTACHED FORM, COMPLETE THE ATTACHED QUIZ, AND RETURN TO THE SPEECH CENTER DIRECTOR.

Appendix B – Identifying Information which CANNOT be saved or sent electronically or removed

From the Molloy University Speech, Language and Hearing Center

(A) Names	
(B) All geographic subdivisions smaller than a state, including street address, city, county, precinct, ZIP code, and their equivalent geocodes, except for the initial three digits of the ZIP code if, according to the current publicly available data from the Bureau of the Census: (1) The geographic unit formed by combining all ZIP codes with the same three initial digits contains more than 20,000 people; and (2) The initial three digits of a ZIP code for all such geographic units containing 20,000 or fewer people is changed to 000	
(C) All elements of dates (except year) for dates that are directly related to an individual, including birth date, admission date, discharge date, death date, and all ages over 89 and all elements of dates (including year) indicative of such age, except that such ages and elements may be aggregated into a single category of age 90 or older	
(D) Telephone numbers	(L) Vehicle identifiers and serial numbers, including license plate numbers
(E) Fax numbers	(M) Device identifiers and serial numbers
(F) Email addresses	(N) Web Universal Resource Locators (URLs)
(G) Social security numbers	(O) Internet Protocol (IP) addresses
(H) Medical record numbers	(P) Biometric identifiers, including finger and voice prints
(I) Health plan beneficiary numbers	(Q) Full-face photographs and any comparable images
(J) Account numbers	(R) Any other unique identifying number, characteristic, or code, except as permitted by paragraph (c) of this section [Paragraph (c) is presented below in the section “Re-identification”]; and
(K) Certificate/license numbers	

(ii) The covered entity does not have actual knowledge that the information could be used alone or in combination with other information to identify an individual who is a subject of the information.

Source: <http://www.hhs.gov/ocr/privacy/hipaa/understanding/coveredentities/De-identification/guidance.html#standard>



30 Hempstead Ave., Suite 243, Rockville Centre, NY 11570
slhc@molloy.edu

Speech, Language and Hearing Center:
T: 516.323.3545

INFECTION CONTROL QUIZ

1. Handwashing or use of hand sanitizer is necessary before and after each session at minimum.
True False
2. If soap and water is not readily available, hand sanitizer must be at least 60% ethanol alcohol or 70% isopropyl alcohol.
True False
3. Latex free gloves must be worn when touching the articulators during speech therapy.
True False
4. If a student clinician is injured during a therapy session, Public Safety does not need to be notified.
True False
5. Table tops and all toy materials need to be wiped with disinfecting wipes before and after use.
True False
6. If disposable utensils are not appropriate during feeding sessions, all utensils must be cleaned, rinsed and dried with a paper towel by the student clinician.
True False
7. Regarding the above, all utensils must be carefully labeled with the client's name and stored in a clean ziploc bag.
True False
8. Audiological headphones will be wiped with a disinfectant wipe after hearing tests/screenings.
True False
9. If a child has an accident on the rug, the student clinician will immediately notify the administrative assistant and clinical educator so that the area will be isolated and disinfected by Molloy University Maintenance Department.

True

False

10. Masks are required if someone reports a possible contagious airborne microorganism disease.

True

False



30 Hempstead Ave., Suite 243, Rockville Centre, NY 11570
slhc@molloy.edu

Speech, Language and Hearing Center:

T: 516.323.3545

INFECTION CONTROL POLICIES ACKNOWLEDGEMENT

I, the undersigned, acknowledge that I have read and understand the Molloy University Speech, Language and Hearing Center's Infection Control Policies and Procedures. I understand that as a Molloy student participating in clinical practicum, I am required to adhere to these policies and procedures. I further understand that if at any time I am found to be in violation of any of these policies, a remediation plan may be set in place and/or my clinical privileges may be jeopardized.

Signature

Student's Name (please print)

Date