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# AUDIOLOGY CLINICAL HANDBOOK

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Audiology & Speech-Language Pathology Clinic  
Department of Speech and Hearing Science  
University of Illinois at Urbana-Champaign



AUGUST 1, 2023

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## Accreditation

The Doctor of Audiology (AuD.) education program in audiology residential at the University of Illinois Urbana-Champaign is accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association, 2200 Research Boulevard, #310, Rockville, MD 20850, 800-498-2071 or 301-296-5700.

## Professional Ethics

Faculty and clinical personnel in the Department of Speech and Hearing Science adhere to the ASHA Code of Ethics and to the University of Illinois procedures. We welcome you to our clinic and invite you to learn and practice ASHA's Code of Ethics found at <https://www.asha.org/Code-of-Ethics/> and the University of Illinois policy found at <https://www.uillinois.edu/about/policies>.

## Information in This Handbook

The information contained in this handbook is for guidance on matters of interest to faculty, staff and students in the Department of Speech and Hearing Science at the University of Illinois at Urbana-Champaign. The handbook sometimes summarizes campus and university policies as a convenient reference tool. However, information on campus and university policies contained herein is for informational purposes only and is subject to change without notice. For the most current information, please see the official campus/university versions of these policies as posted on official web sites. These can be accessed through the Campus Policies and Procedures home page at the following URL: <https://www.uillinois.edu/about/policies>

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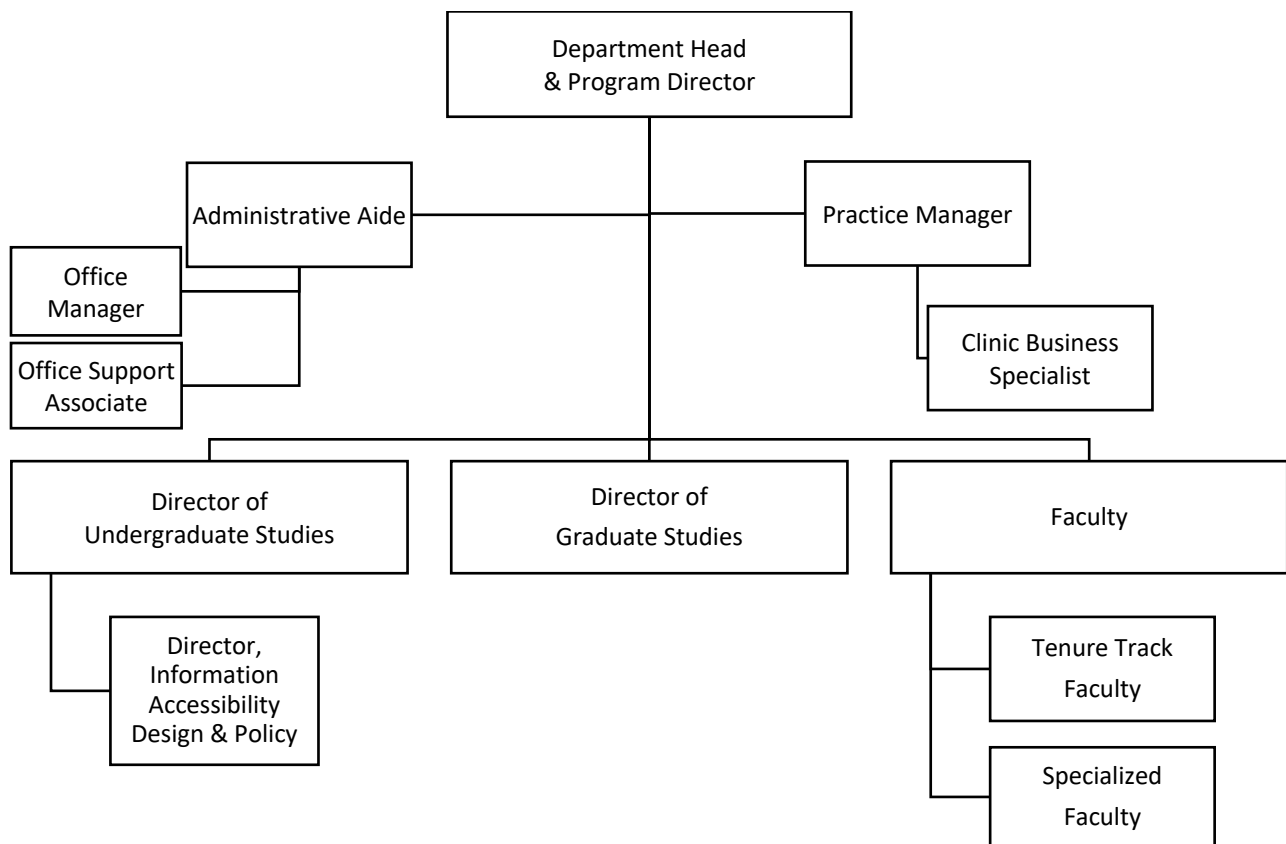
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## Section I Introduction

## AUDIOLOGY & SPEECH-LANGUAGE PATHOLOGY CLINIC

The Audiology & Speech-Language Pathology Clinic is part of the Department of Speech and Hearing Science in the College of Applied Health Sciences at the University of Illinois at Urbana-Champaign. The purpose of the clinic is to train students to diagnose and treat communication disorders. Within the clinic, students in the Doctor of Audiology Program work with patients and their families under the direct supervision of an individual who holds a state of Illinois license to practice audiology and an American Speech-Language and Hearing Association (ASHA) Certificate of Clinical Competence in Audiology (CCC-A). The Department of Speech and Hearing Science organizational chart is shown below.

### A. Organizational Chart of Administration



## B. Department of Speech and Hearing Science: Mission & Vision Statements

**Mission Statement:** Enhancing communication across the lifespan by integrating research and clinical practice from the biological, behavioral, and social sciences.

**Vision Statement:** Serve as a global leader for interdisciplinary research, education, clinical practice, and public engagement in human communication and its disabilities across the lifespan.

The research, teaching, and service programs of the Department of Speech and Hearing Science are committed to furthering understanding of the entire spectrum of communication. The undergraduate curriculum offers a broad background in the theoretical, basic, and applied aspects of biological, behavioral, linguistic, and social foundations of human communication to educate students who intend to pursue careers and/or graduate studies in many fields related to communication, health, and medicine. The graduate program focuses on research and clinical education in communication, its disabilities, and the treatment and prevention of communicative disorders. To these ends, the department:

Educates the students of the state, nation, and world regarding the nature of communication and communication differences and disabilities.

Investigates health, development and aging, and disability related to speech, language, deglutition, and hearing across the life span.

Develops methods to prevent, identify, assess, and treat disabilities of human communication.

Prepares students to investigate communication and its disabilities as scientists and instructors; and

Prepares students to prevent and treat communicative disabilities as speech-language pathologists and audiologists.

## C. Clinical Priorities

Students in the Department of Speech and Hearing Science AuD Program are expected to complete academic and clinical coursework during their enrollment at the University of Illinois at Urbana-Champaign to be fully prepared for licensure and certification. Due to the number of clinical hours needed for certification, the diversity of our scope of practice, and the need to demonstrate skill in a large number of competencies, students will need to exercise flexibility in their scheduling. To balance academic training and clinical experiences, priorities in scheduling are as follows:

1. Academic classes take priority. Clinical assignments are scheduled to avoid conflict with class meeting times.
2. Clinical experiences take second priority.
3. Work responsibilities take third priority, including T.A./R.A. assignments.



Open communication with clinical educators and the AuD Coordinator of Clinical Experiences is critical in balancing academics + clinical + work schedules.

A student's clinic schedule is generally completed before the beginning of each semester; however, schedules may change during the semester and in subsequent semesters. Flexibility is paramount.

## D. Clinical Practicum Privileges

Faculty supervising students in the Audiology & Speech-Language Pathology Clinic are ethically bound to protect the welfare of the patients in the clinic. This is paramount when any decisions are made that may affect patients. This includes decisions about student participation in clinical activities. Therefore, student participation in clinical practicum is a privilege rather than a right.

All graduate students are required to review the document entitled **Supporting Student Success in SHS Professional Programs**. The document describes department and campus-wide resources to support student success and outlines the essential functions routinely performed by Audiologists. All students entering the Doctor of Audiology Program are strongly encouraged to read this document and consider their potential for participating in these essential professional functions. Students who anticipate difficulty learning in either classroom or clinical settings are encouraged to contact the Director of Graduate Studies in SHS as soon as possible, as well as seek out other campus resources, such as Disability Resources & Educational Services (DRES), as appropriate.

Clinical faculty in Audiology will meet at least twice each semester to review the clinical performance of every student enrolled in the program. If a student's overall grade point average drops below 3.0 or if the student exhibits any behavioral or performance characteristics which are determined by consensus of the faculty to be inconsistent with the standards represented on the Audiology Formative Assessment (**See Section VII**), the student will be counseled by the appropriate faculty. This counseling will inform the student that her/his privileges of participating in clinical practicum are at risk of being terminated for the reasons explained to the student. Refer to the Supervision section of this Handbook (**see Section VII**) for further details about Intervention Plans. In some circumstances, the student's participation in clinical practicum may be terminated immediately for just cause.

## Section II Clinical Facilities

## A. Main Office

The SHS Audiology and Speech-Language Pathology Clinic is located at 2001 S. Oak St, Suite B, Champaign, IL 61801. The Audiology & Speech-Language Pathology Clinic is open Monday through Friday. The Clinic Business Specialist is available from 8:00 A.M. to 4:30 P.M. The Audiology and Speech-Language Pathology Clinic is a 12-month clinic. The Clinic schedule follows the University of Illinois operating calendar.

## B. Faculty/Staff

The Department Head, Administrative Aide, and Graduate Secretary are housed in the Administrative Suite on the first floor of the Speech and Hearing Building located at 901 South Sixth Street, Champaign, IL 61820. All tenure-track faculty, including the Director of Graduate Studies, have offices in the Speech and Hearing Building.

The Audiology & Speech-Language Pathology Clinic is located at 2001 South Oak, Suite B, Champaign, IL 61820.

## C. Client/Patient Waiting Area

The waiting area for audiology and speech-language pathology services is located in the lobby of the Clinic. Students should meet their patients in the waiting room prior to each session/appointment. Conferences should not take place in the waiting area. If important information needs to be exchanged with patients or parents, it should be discussed in the privacy of the testing rooms per the privacy policy. When greeting a patient, according to privacy rules, you may greet them by their first name or title and last name, but not both.

## D. Clinic Rooms

The audiology test suites are located in Rooms 1008 and 1012. The test suites are equipped with clinical audiometers, CD players and other specialized test equipment and materials. The other room (1010) houses storage, an immittance bridge and screener, a computer, an otoacoustic emission system, an Auditory Brainstem Assessment system, and hearing aid tools/workshop.

Students are responsible for keeping all clinical rooms and the patient waiting areas presentable, maintaining infection controls, and returning materials to their proper locations. This includes cleaning otoscopic specula and immittance probe tips, putting away all hearing aid supplies and removing all loose papers, etc. After each clinic slot, the Audiology rooms should look exactly as they did prior to clinic with all items used during clinic put away in the proper location.

The audiology test suites are ADA compliant. Test rooms and the audiology suites are large enough to accommodate wheelchairs. For those with limited mobility, ramps are available for improved accessibility of the test booths.

*Infection Control cleaning protocols will be implemented after each appointment. This includes cleaning of ALL touched surfaces (doors knobs, equipment, handrails, etc.)*

### **E. Clinic Chart Room**

Audiology charts are stored and maintained in the clinic's electronic medical record software, Clinic Note. Previously utilized paper charts are located in ColLab, File Room 5. Inactive files are housed in ColLab, File Room 5 building outside of the clinic. To obtain an inactive file located outside the clinic, request assistance from the clinic's Office Support Assistant. Paper charts are not to leave the clinic.

### **F. Clinic Computers**

The computers for access to Clinic Note and word processing are located in Rooms 1008, 1010, and 1012. See HIPAA for policies and procedures (Section IX) for properly maintaining confidentiality for all patient information.

### **G. Student Office Area**

AuD students have access to the use of cubicle offices located in the Speech and Hearing Building located at 901 South Sixth Street, Champaign, IL 61820. Students also have access to a computer and printer in the Speech and Hearing Science Building and in the Audiology rooms at the Clinic in the student work room.

### **H. Access**

Students will use their iCard to enter the Clinic and ColLab during non-business hours. Room 1021 has a safe on the door that gives access to a key for the Chart room and student workroom. Clinical faculty will provide the safe's code.

### **I. Patient Parking**

Patient parking is located in front of the Clinic. **Students may not park in the clinic parking area during the hours of 6 AM – 6 PM Monday through Friday.**

### **J. Building Emergency Plan**

All clinical students must familiarize themselves with the Building Emergency Plan. (In case of a weather event, the NOAA weather radio will signal loudly. Please ask clinical faculty to address the notifications on the radio and await further instruction. If a student is at the clinic after hours, and the weather radio signals, press snooze once and listen to the instructions. In the case of a tornado warning, all individuals should relocate to Room 1005 in the Clinic. If you believe you might require assistance during a building evacuation, please let the Practice Manager know as soon as possible so the appropriate accommodation may be included in the

### Section III Clinical Practicum

The Doctor of Audiology Program is structured to allow students to meet the Council for Clinical Certification in Audiology and Speech-Language Pathology (CFCC) Audiology standards for both academic/knowledge and clinical/performance

competencies <https://www.asha.org/Certification/2020-Audiology-Certification-Standards/>. The objective of the program is to provide students with the knowledge base as well as the quantity and quality of clinical experiences that will lead them to become competent professionals.

At the end of the first year in the AuD program, graduate students will determine if they intend to pursue ASHA certification. It is strongly recommended that students pursue ASHA certification as one of their professional credentialing options. Other credentialing options are American Academy of Audiology (AAA) Board Certification, (see <https://www.audiology.org/american-board-of-audiology/>), or state licensure only. If a student elects other credentialing options, the student will be required to sign a statement to that effect. The student will then be responsible for meeting requirements and completing related records for the other credentialing option(s).

### A. ASHA and Departmental Requirements

The CFCC requires applicants for certification to complete a program of study that includes academic course work and diverse practicum experiences. Clinical experiences must be sufficient in depth and breadth to achieve the knowledge and skill outcomes stipulated in Standard IV of the *2020 Standards and Implementation Procedures for the Certificate of Clinical Competence in Audiology*, [www.asha.org/Certification/2020-Audiology-Certification-Standards/](http://www.asha.org/Certification/2020-Audiology-Certification-Standards/). In addition, the curriculum should include appropriate research opportunities, consistent with the specified mission and goals of the program, and institutional expectations for doctoral programs.

Clinical practicum is defined as direct patient contact, consultation, record keeping, and administrative duties relevant to audiology service delivery. Clinical practicum experiences will occur throughout the program. The program must provide sufficient breadth and depth of opportunities for students to obtain a variety of clinical practicum experiences in different work settings, with different populations, and with appropriate resources and equipment in order to demonstrate skills across the scope of practice in audiology and that are sufficient to enter independent professional practice.

Students in the AuD Program register for at least one clinical practicum course each semester:

**Fall 1, Spring 1, Summer 1, Fall 2, Spring 2, Summer 2** = SHS 557 – In-house Clinic (section number depends on who the Clinical Educator is, register for 1 credit hour per half day of in-house clinic)

**Summer 1, Fall 2, Spring 2, Summer 2, Fall 3, Spring 3** = SHS 557 E (check with the Coordinator of AuD Student experiences for how many credits to register for each semester).

Students are required to provide quality services and meet the department policy for minimum performance in the clinic. Minimum performance corresponds to a letter grade of B- or above. Therefore, the clinical instructor will not sign for clinical hours for earned grades of C+ or lower; these hours will not count toward ASHA certification. In addition, participation in all practicum courses adheres to SHS Department and Graduate College policies. If minimal performance is not achieved, continuation in clinic will be according to an intervention plan as described in the handbook in Section VII, Supervision.

## B. Criminal Background Check and Other Requirements

The AuD program requires practicum experiences in which students work directly with patients in the university clinic and community settings. Graduate students will be required to complete a criminal background check annually through Castle Branch. The student will be responsible for fees associated with the background check. Some external sites may require more frequent background checks and/or other requirements. Students are also responsible for any of those associated fees.

***Failure to complete all site requirements, including background checks and/or drug screenings, may delay the completion of the program.***

The SHS departmental policy on background checks is that any convictions will be reviewed for compatibility with placement in clinical practicum. Certain convictions, such as those that are a bar to employment with a school district or are cause for denial of a professional license, may prohibit a student from participating in practicum. These convictions are fully set out in the Illinois School Code, 105 ILCS 5/10-21.9, as amended (<https://codes.findlaw.com/il/chapter-105-schools/il-st-sect-105-5-10-21-9.html>). Convictions that are grounds for denial of a professional license are set forth in Illinois Speech-Language Pathology and Audiology Practice Act 225 ILCS 110/16 (<http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=1325&ChapterID=24>).

### Castle Branch Procedure

- Go to: <https://portal.castlebranch.com/UH74> for Speech and Hearing Science
- Select + Please Select
- Select + Speech & Hearing Science
- Select from the following as it pertains to your placements:
  - **UH74addition: Illinois CANTS Search and Nationwide Healthcare Fraud & Abuse Scan:** covers and includes a check of sex offender registries as well as the OIG, SAM, SDN exclusions lists check (*completed as needed per external placement*)
  - **UH74bg: Background check** (*initial background check with Castle Branch which is completed prior to start of the Graduate Program*)



- **UH74dt: Drug Test** (*completed annually*)

- 1–3-day turnaround time, not expected to be more than 5 days

In addition to the background check, some external placement sites may have other requirements that must be completed before a student is allowed to be placed at the site. These requirements may include but are not limited to immunizations, drug testing or additional training (e.g.

HIPAA, CPR training/certification). The student will be responsible for fees associated with any required testing or training by an external placement site. The specific requirements for the Audiology & Speech-Language Pathology Clinics (e.g., TB test, CPR/BLS) will be discussed during orientation. General site information is retained on CALIPSO and is updated when appropriate. Site requirements are subject to change as policies are updated.

### C. Professional Behaviors

Developing good professional behaviors is one of the key elements to being a successful audiologist. Throughout practicum assignments, graduate students will have the opportunity to develop clinical skills in a variety of business and professional settings such as in the Audiology Clinic, schools, hospitals and other external placements. In addition to learning about the patients and evaluation procedures, students will be learning how to manage themselves as professionals. The following is a list of behaviors that are consistent with developing professional skills.

**Punctuality:** Graduate students should develop the good habit of being punctual:

- Keep a calendar of all appointments, meetings, and important deadlines. This calendar should be accessible to the student at all times. Information in the calendar should include the time and date, names and phone numbers of contact people.
- Be on time for all meetings and appointments; early is on time. If you are unable to make a scheduled meeting, you are required to let your clinical instructor know at least one day in advance.
- Communicate with staff and colleagues regarding all changes in scheduling.
- All deadlines must be met. If a student is not able to meet a given deadline, your grade may be lowered. Please work with your individual clinical instructor for more guidance on this issue.
- Be prepared to pre-brief (readiness) with your clinical educator at least 15 minutes before your scheduled clinic slots to ensure smooth transitions for patients (to include any infection control procedures needed; room set-up; etc.). Your clinical educator may set this time differently as needed.

**Professional Communication:** Graduate students should develop good professional communication skills:

- Check email at least once a day. Timely responses (within 24 hours) to email messages are crucial to good professional communication. Students should read emails promptly, transfer all-important information to their calendars, and respond to anyone as requested. Students are expected to respond to emails within 24 hours. Otherwise, students may be subject to a professional reminder notice.
- All correspondence should convey a professional and respectful tone, whether to patients, other professionals, or the community (*also see Essential Functions*).
- Understand your clinical educator's preferences for when to email, text, or meet in person. Use emails for emergency situations as soon as they arise. Please allow 24 hours for the clinical educator to respond; if no response within that timeframe, please feel free to contact again.

**Preparation:** Graduate students should be prepared and follow through:

- Prepare for all meetings. Prior to meetings about a patient, familiarize yourself with the patient's chart and prepare points to make or questions to ask.
- Learn to say "yes" appropriately. Follow through on any agreement made to do something. Your stewardship in this program is expected.
- Anticipate problems before they arise and when they do come up, start to problem solve possible solutions. Be prepared to discuss solutions with the clinical instructor in an appropriate and professional manner.

**Confidentiality:** Students have access to personal information about patients. It is the student's responsibility to maintain confidentiality as stipulated by ASHA's code of ethics and federal law. Abide by institutional and Health Insurance and Portability Accountability Act (HIPAA) regulations that pertain to confidentiality (e.g., not giving patients' names out for research without releases, not taking patient charts off the premises, not discussing the patient in any manner in which he/she could be identified, etc.). All clinical students are required to undergo annual HIPAA training. HIPAA training will go into privacy rules and regulations in significant detail. Patient PHI, Protected Health Information, must never be saved on personal computers or flash drives. The above examples are not comprehensive. Privacy violations are extremely serious and may be associated with lowering of grades, failure to meet CFCC standards, intervention plans, termination from the program, and/or legal fines or prosecution. HIPAA and confidentiality rules and regulations apply to both in-person and telepractice sessions. Additionally, client documentation (e.g., schedule, contact notes, reports, etc.) can only be completed in HIPAA-compliant environments.

Clinical documentation should **NEVER** be completed:

- 1) on public Wi-Fi networks
- 2) in public spaces (e.g., coffee shops)
- 3) in class

Failure to protect client confidentiality will result in a professional reminder notice and possible additional disciplinary action.

**External Sites:** Graduate students must learn the requirements of their external rotation sites. The following are suggestions:

- Learn the paperwork requirements for the setting such as release forms, census logs, billing, insurance forms, scheduling, and other documentation. When filling out these forms make sure they are completed thoroughly.
- Become familiar with the goals and missions for the site (i.e., what are the priorities for who is seen for services, what other services does the setting provide).
- Become familiar with the rules and procedures of the site (e.g., parking, keys, hours, use of equipment).
- Read through the latest policy and procedure manuals for the site (if available).
- Each supervisor does things differently – be prepared to modify the way you do something if an external placement supervisor requests that you do so. If you are unsure why the supervisor is doing something a different way than you have been taught, ask in a respectful manner.

#### D. Audiology Clinic Meeting

AuD students will meet bi-weekly during the semester. The day and time of these meetings change each semester and are scheduled to occur when a maximum number of students can participate.

Student attendance at the meetings is mandatory. Students who are at an off-campus clinical placement will have access to the meeting through the application *Zoom*, and the *Zoom* meetings are recorded for later review as needed. The majority of Clinic Meetings will be virtual (*Zoom*), but occasionally may be held in person (see meeting invitations for location). Students who are unable to attend the clinic meeting due to pre-approved external practicum responsibilities or other reasons will be required to watch the *Zoom* video of the meeting and turn in a paragraph that includes what you learned. If you miss a clinic meeting without notifying the Coordinator of AuD Clinical Experiences, you will receive a Professional Behavior Reminder.

## E. Scheduling

When possible, the clinical faculty and staff complete scheduling before the beginning of each semester. It is the responsibility of the clinical educators and the Coordinator of AuD Clinical Experiences to ensure that each student receives a variety of clinical experiences. Students are expected to be flexible with caseload changes, as this reflects the realities of clinical work.

## F. Clinic Assignments and Tracking of Clinical Hours

Clinical assignments are provided to the students prior to the beginning of the semester. If there are questions or conflicts, the student is to see the Coordinator of Audiology Student Experiences immediately. AuD students should check their email for their scheduled clinical assignments. Refusal of any clinical placement may prolong the duration of the clinical program.

Students are responsible for keeping a log of their clinical hours from each session in Calipso. The log of hours should be comprehensive and broken-down by experience type and patient demographics and must be submitted on a weekly basis to the Clinical Educator (in-house, or external) for approval.

In-house Clinic follows the University Calendar. Students in external rotations (557E), will follow the calendar associated with their clinical rotation (not of the University of Illinois calendar).

## G. External Placements

The Coordinator of AuD Clinical Experiences will assign external placements and will consult with other Clinical Instructors as needed. Some facilities may require an interview before approval for the rotation.

It is important to submit paperwork/documentation for external rotations in a timely manner; failure to do so may jeopardize a student's ability to attend that rotation, result in a Professional Behavior Reminder, and potentially delay the completion of the program.

External clinical placements are assigned by the following criteria:

1. The *Cohort Clock Experience Records Report* in Calipso is used to assess each student's exposure to the breadth of clinical skills and placement experiences. This report is run once per semester and documents the clinical experiences and the current outstanding competencies for each student.
2. Student preference for external clinical placement sites is collected prior to the start of each semester using the *AuD. External Placement Preference Form (see Forms)*. The External Placement Coordinator will make a best effort to place the student in one of her/his top

five choices, but this is not guaranteed. If the student objects to an assigned placement, this should be discussed with the Coordinator of AuD Student Experiences. However, if changes cannot be made, or it is felt that changes should not be made, the student's placement site for that semester will remain as scheduled. **Refusal of any clinical placement may prolong the duration of the program.** The Refusal of External Practicum Placement form will be signed and uploaded to a student's Calipso account should they refuse to attend a placement.

Information regarding external placement sites can be found in the Calipso and in the *AuD External Placement Preference Form* that is sent out each semester. To maximize experiences and take full advantage of the training opportunities at external facilities, reliable transportation is required.

Students may not cancel any assigned time block at an external placement during the semester without preapproval by the Coordinator of Audiology Student Experiences **and** the instructor at the external placement.

Students enrolled at an external placement facility will be required to complete the following Calipso forms:

- *Supervisor Feedback Form* (**see Forms**)
- *Off-Campus Placement Evaluation Form* (**see Forms**)

These forms will be reviewed by the External Placement Coordinator at the end of the semester and used for two purposes: to provide feedback to the external supervisor/site, and to inform future external placements.

Students assigned to external placements will be required to sign either a *Student Clinical Practicum Form* or *4th Year Student Clinical Practicum Form* (**see Forms**) prior to beginning the placement. The students will receive a copy of the contract and a copy will be placed in their graduate file in the front office.

## H. Absence/Professional Behavior Policy

Although the majority of graduate students achieve nearly perfect attendance, some do not. Therefore, it has been necessary to develop an absence policy so that clients receive quality services and to ensure that students gain sufficient skills and experience. This system also applies to absences due to emergencies, such as funerals and other life events.

Students are not expected to provide clinical services at the Audiology and Speech-Language Pathology Clinic when the University is closed or during program-designated breaks. Students

should reference the academic calendar set forth by the University to view planned closures. Please note that traditional school breaks on the academic calendar do not apply in the graduate program unless specified, such as the following days where students are not required to attend clinic:

- Labor Day
- Election Day
- Thanksgiving week
- Reading day (each semester)
- Winter break (Students are expected to attend clinic through the end of finals week unless there is a conflict with a final exam. Must make alternate arrangements with supervisor.)
- Martin Luther King Jr. day
- Spring break week
- Memorial Day
- Juneteenth
- Independence Day
- Two weeks after summer semester ends

External Rotation attendance generally follows the schedule of the site. If you have questions, consult your external placement supervisor. Absences, whether the in-house clinic or external sites, will follow the approval process outlined below.

Outside personal appointments should be scheduled when the student is not committed to a clinical assignment. If this is not possible, an Absence Request Form should be submitted to the clinical educator or Coordinator of Audiology Student Experiences. For in-house clinic responsibilities, an alternate clinician **must** be secured to ensure the continuity of client care. If the absence is approved, the assigned student clinician is still responsible for all preparation necessary prior to patient appointments. Approval of the absence is at the discretion of the clinical educator for in-house responsibilities. Approval of the absence is at the discretion of the Coordinator of Audiology Student Experiences for external sites. Requests for absences **must** be submitted to the External Rotation Coordinator **before** the external site supervisor.

Each time a student misses an assigned in-house clinic session or an external rotation day, the student will receive a Notice of Absence from the appropriate educator or External Placement Coordinator.

Receiving a Notice of Absence form does not necessarily mean that the student has demonstrated unprofessional behavior. It may be necessary for a student to miss an assigned time block or

meeting due to illness, a personal emergency, religious observation, or a convention/workshop/conference. This is simply a way to keep track of the number of absences that have occurred. Absences must be handled professionally as outlined below. If an absence is not handled professionally, then a Professional Behavior Reminder will be issued. If a student receives two Professional Behavior Reminders in one semester, their clinic grade for the semester may be lowered (ex – from an *A* to an *A-* or a *B-* to a *C+*). If more than 3 Professional Behavior Reminders are accumulated in a semester, the semester grade may be lowered a full letter grade (ex - from an *A* to a *B*).

If an emergency/absence occurs and a student must miss time at an external rotation, they are required to first contact the Coordinator of AuD Clinical Experiences and then contact the external placement supervisor. When possible, the Coordinator of AuD Clinical Experiences should be contacted at least 12-to-24 hours before the clinic time slot in question. Students are required to make up missed time at rotation sites at the discretion of the external clinical supervisor.

Should a personal emergency arise, the [Student Assistance Center](#) in the Office of the Dean of Students serves as the first point of contact for students requesting assistance for personal emergencies—students may drop in or make an appointment. Assistant Deans help students understand university policies and procedures, guide them in connecting to other campus resources, and support students in crisis. The Student Assistance Center can assist students with a broad range of issues that may be affecting their academic and/or clinical performance, including issues related to physical and mental health, course attendance, accessing various campus services, and options for withdrawing from the university.

If the student is going to miss in-house clinic, the student should contact their immediate clinical educator. At that time, the student and clinical educator will decide what coverage is needed for the session and how the student will arrange for the coverage. For example, an alternate student clinician may need to be identified or the clinical educator may choose to provide direct care. The assigned student will still be responsible for completing all preparation for the missed clinic slot.

## I. Clinical Assessment

Each semester, internal or external clinical supervisors complete a mid-term evaluation and a final evaluation for the course SHS 557, *Advanced Clinical Practicum Audiological Assessment and Rehabilitation*, using the AuD. Formative Assessment Form (**see Forms**) in our Calipso software. Students may not have an opportunity to meet every competency across the list at a particular clinical site. For those competencies that the students did have an opportunity to meet, the clinical supervisor will rate each one from 1-5 (including quarter points and half points), with 1 representing

“unacceptable performance” and 5 representing “exceeds performance expectation”. Clinical supervisors do not enter a rating for competencies that the student did not have an opportunity to meet. Students who do not achieve acceptable performance on a competency will need additional opportunities in a clinical placement to meet them. The Audiology Formative Assessment also tracks inter-professional practice opportunities, and whether or not the student has worked with multicultural or linguistically diverse population. Additional grading information is provided in Section IV of this handbook.

The CALIPSO 5-point grading scale is as follows:



## Performance Rating Scale

- 1 Unacceptable performance: Specific direction from supervisor does not alter unsatisfactory performance. Student is unaware of need to change. Supervisor provides numerous instructions and frequent modeling. (skill is present <25% of the time).
- 2 Needs Improvement in Performance/ Maximum Support: The clinical skill/behavior is beginning to emerge. Efforts to modify may result in varying degrees of success. Maximum amount of direction from supervisor needed to perform effectively. Student shows awareness of need to change behavior with supervisor input and support for case management and services. (skill is present 26-50% of the time).
- 3 Moderately Acceptable Performance/ Moderate Support: Inconsistently demonstrates clinical behavior/skill. Exhibits awareness of the need to monitor and adjust and make changes, but does not do this independently. Modifications are generally effective. Moderate amount of direction from supervisor needed to perform effectively. Supervisor provides on-going monitoring and feedback; focuses on increasing student's critical thinking (skill is present 51-75% of the time).
- 4 Meets Performance Expectations/ Minimal Support: Displays minor technical problems which do not hinder the therapeutic process. Minimum amount of direction from supervisor needed to perform effectively. Student is aware and can modify behavior in-session, and can self-evaluate. (skill is present 76-90% of the time).
- 5 Exceeds Performance Expectations/ Independent: Adequately and effectively implements the clinical skill/behavior. Demonstrates independent and creative problem solving. Supervisor serves as consultant in areas where student has less experience; Provides guidance on ideas initiated by student (skill is present >90% of the time)

Students receive a grade for each clinical assignment. These are reported in CALIPSO as a number that corresponds with the competency performance. Please note, this is on a scale of 1-5 points. The table below outlines how the average competency ratings translate to a letter grade based on different points in time of the program. To pass the clinical experience each semester, the minimum rating score must be at or above the lowest B- level rating.



<u>AuD 1</u> (Fall 1, Spring 1, Summer 1) AND <u>AuD 2</u> (Fall 2)	
4.25 – 5.00 = A+	
3.75 – 4.00 = A	
3.50 – 3.74 = A-	
3.25 – 3.49 = B+	
3.00 – 3.24 = B	
2.75 – 2.99 = B-	
2.50 – 2.74 = C+	} <b>REMEDIATION</b>
2.24 – 2.39 = C.	
2.00 – 2.24 = D	
1.00 – 1.99 = F	
<u>AuD 2</u> (Spring 2, Summer 2) AND <u>AuD 3</u> (Fall 3)	
4.50 – 5.00 = A+	
4.00 – 4.49 = A	
3.75 – 3.99 = A-	
3.50 – 3.74 = B+	
3.25 – 3.49 = B	
3.00 – 3.24 = B-	
2.75 – 2.99 = C+	} <b>REMEDIATION</b>
2.24 – 2.39 = C	
2.00 – 2.24 = D	
1.00 – 2.24 = F	
<u>AuD 3</u> (Spring 3) AND <u>AuD 4</u>	
4.75 – 5.00 = A+	
4.50 – 4.74 = A	
4.25 – 4.49 = A-	
4.00 – 4.24 = B+	
3.75 – 3.99 = B	
3.50 – 3.74 = B-	
3.25 – 3.49 = C+	} <b>REMEDIATION</b>
3.00 – 2.24 = C	
2.75 – 2.99 = D	
1.00 – 2.74 = F	

## J. External Site Communications and License Verification

The Coordinator of AuD Clinical Experiences has direct contact with each External Supervisor at every External Placement Site a minimum of three times per external placement. This contact occurs via email, phone call, or virtual meeting (e.g., Zoom). A minimum of one of these three contacts each semester is a virtual meeting or phone call between the External Supervisor and the External Placement Coordinator.

- a. The first contact takes place prior to the start of the semester for a given externship and the following information is discussed:
  - i. License verification and expiration for all clinical supervisors  

This information is entered in Calipso (under *License Expirations*) prior to the start of each semester.
  - ii. Verification of current ASHA Certificate of Clinical Competence for all clinical supervisors  

This information is entered in Calipso (under *License Expirations*) prior to the start of each semester.
  - iii. Verification of continuing education in clinical supervision
  - iv. Details of services rendered, and population served.
  - v. Details regarding the current contractual agreement
  - vi. Expected student experiences.
- b. The second contact takes place the week before midterms and the following information is discussed:
  - i. Student progress and clinical experiences
  - ii. Details on how to complete Midterm Evaluation in Calipso
- c. The third contact takes place the week before finals and the following information is discussed:
  - i. Student progress and clinical experiences
  - ii. Details on how to complete Final Evaluation in Calipso
  - iii. Provide external supervisor feedback on the semester.

## K. Clinical Observers

Undergraduates may enroll in SHS 475 (Practicum in SHS). Clinical instructors will provide more information as required. The opportunity to mentor undergraduates provides students with initial experiences in supervisory behavior as required by ASHA 2020 standard A23.

## L. Dress Code

All students in the Audiology & Speech-Language Pathology Clinic are expected to dress in a manner consistent with the professional role they are assuming. Professional appearance can help promote authority and respect as a healthcare professional in training. Clothing should be neat and well maintained with regular laundering/cleaning/ironing. The clinical faculty reserves the right to request that a student change her/his clothing and/or accessories if the clinical faculty have concerns it will negatively affect patient care. Nametags must be worn at all times when providing patient care. When at an external site, students must adhere to the dress code of the site to which they are assigned. This may require purchasing additional clothing at the expense of the student (e.g., scrubs, lab coat). The guidelines for dress are as follows:

- **Hair, Earrings & Facial Jewelry:** Consider how you will be interacting with your patient when styling your hair. For example, if you are working with a young child or an individual with dementia, wearing the hair down might be tempting for the patient to pull. Additionally, if you are doing a procedure that requires gloves, will you frequently tuck your hair behind your ear? Earrings can be a distraction to young children. Facial jewelry may need to be covered at the discretion of the clinical instructor, as it may be a distraction or hazard.
- **Tops & Blouses:** Students often do not realize how much bending occurs in clinical work. Check in a mirror to ensure when you bend forward, the top does not reveal cleavage or skin and the shirt does not ride up in the back. This is especially important when working with young children or when doing tasks like assisting with headphones. The following are not allowed: sweatshirts, halter style shirts/dresses, graphic tees, or spaghetti strap shirts/dresses. It is recommended you keep a cardigan handy, just in case. Midriffs and see-through styles are not permitted. If you have any doubts, ask.
- **Pants & Skirts:** Shorts are not allowed. Leggings are considered pants only when worn with a tunic style shirt/dress that is no shorter than 3 inches above the knee. Skirts and dresses should be no shorter than 2" above the knee. Consider the length of the skirt and leg positioning when sitting. No denim is allowed.
- **Shoes:** Closed-toed shoes are recommended. No flip-flops, snow boots or original Crocs. Clean sneakers are permitted.
- **Jewelry & Tattoos:** Jewelry should be conservative and safe. Do not try to draw attention to yourself; if you are questioning it, do not wear it. Your clinical instructor will ask you to cover tattoos if they are perceived to distract from patient care. A wristwatch is required, as cellphones will not serve as a clock when delivering patient care.

- **Fingernails:** Nails should be clean, appear professional and be an appropriate length. Artificial nails or nails longer than fingertip length are not permitted. Avoid distracting nail designs. Nail polish should not be chipped, peeling or otherwise not well kept. Fingernails are a common cause of infection in healthcare settings.
- **Perfume & Scents:** Heavy cologne/perfume should not be worn. Scented body splashes should be used in moderation.
- **Illini Fridays:** Students may participate in Illini Fridays. This may include the University of Illinois themed gear and jeans. Students may not wear attire that features the Chief or that is pejorative toward other universities. Jeans must be clean, not ripped, non-distressed, and not jeggings.

**If a clinical instructor requests that you change your attire, an explanation will be provided to help you understand the rationale. The professional dress guidelines are not intended to stifle expression or creativity but to best prepare you for clinical care. If you are in the clinic during business hours, and you are not seeing patients, avoid patient care spaces unless you are abiding by the dress code.**

### M. Illinois Department of Public Health Requirements

The Illinois Department of Public Health (IDPH) is the regulatory body of the Hearing Instrument Consumer Protection Act (225 ILCS 50). This law requires that:

Any person who performs a hearing evaluation that provides basic information from which a hearing aid is recommended or sold must be licensed as a hearing instrument dispenser or a licensed audiologist in the State of Illinois.

The State of Illinois' policy for full-time graduate audiology students is as follows:

Full-time graduate students enrolled in a program of audiology in an accredited college or university may engage in the dispensing of hearing instruments as a part of an academic program of audiology without a license under the supervision of a licensed audiologist.

The supervisor and the supervisor's employer shall be jointly and severally liable for any acts of the student relating to the practice of fitting or dispensing hearing instruments as defined in this Act and the rules promulgated hereunder.

The current laws and rules may be accessed at: <http://www.idfpr.com/> or <http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=1305&ChapterID=24>

## Section IV Clinic Procedures

## A. Preparation for the Evaluation

The clinic's Office Support Assistant maintains the appointment schedule. Graduate audiology students should check the appointments **at least two to three days prior to their scheduled time** to see what type of services are required and ensure all necessary items have been procured. If special procedures are required, the student should talk to the clinical instructor one to two days in advance of the appointment. Students will be given a level of guidance/support commensurate with their current skill level. Students are responsible for reviewing any material in the chart that may inform decisions about patient care. Students should meet with their clinical instructor if they have questions regarding the case. Students cannot change or add appointments without the approval of their clinical instructor. If a patient fails to make their scheduled appointment, the clinic's Office Support Assistant should be notified. Patients may not be seen outside of scheduled clinic times without the approval of the clinical instructor.

The length of appointments varies according to the services provided. If the student needs more time for a particular patient, he/she should talk to the clinical faculty. The clinic's Office Support Assistant will discuss initial fees with the patient when appointments are scheduled. The student will discuss fees for additional appointments with the patient.

The clinic's front desk staff will schedule all necessary follow-up appointments. Only office staff should schedule appointments unless you receive instruction from a clinical supervisor to do so.

No food or drinks are allowed in patient areas when the clinic is in session. Water may be kept in a hydration station. Students should bring as few books, papers, backpacks, coats, purses, etc. as possible with them to the clinic. Patient charts, hearing aids, etc. should not be left on the tables or counters in any clinic area. Patient materials should not be left on counters in any clinic area including printers, as this could be a potential HIPAA violation.

## B. Legal Release and Permission to Receive Evaluation/Therapy

This form will be given to the patient through the Clinic Note portal before arrival at the clinic. It should be completed and submitted before evaluation or treatment.

## C. Health Insurance Portability and Accountability Act (HIPAA) and Notice of Privacy Practices and Policy

All clients should be offered a copy of the Privacy Practices Policy form (**See Section VIII**) during their initial appointment. If a client has already been seen at this facility, it should be confirmed that they have already received the Policy form and signed the receipt and consent noted in the section below.

#### D. Client Consent for Use and Disclosure of Protected Health Information/Receipt of Notice of Privacy Practices Written Acknowledgement For

Patients should be asked to sign the first section of this form so they can be contacted by mail or telephone. Please allow them to ask questions about the document. This information is used to contact a patient about an appointment or inquire about insurance information. The patient should also sign the second section of the form that documents that they received the HIPAA Policy form.

#### E. Consent for Disclosure of Confidential Information

The consent form should be used when confidential information (e.g., reports, test results, progress notes) is requested by the client for their use or if the client requests information to be sent to an outside facility or professional. All blanks on the form should be completed before having the client sign the form. Be specific when indicating what is being released and for what purpose. Include the expiration date. This facility cannot send results to a requesting agency unless this form has been signed by the patient. By following the referral policy, all referring parties will be sent a report unless specifically asked by the client not to do so. The Consent for Disclosure of Confidential Information form should be completed and signed for this purpose.

#### F. Fee Schedules and Billing

The Fee Schedule for Professional Services and the Fee Schedule for Accessories are found in **the Forms** section and are posted in the clinic closets in each assessment room. **The form** also contains a Hearing Aid Pricing Addendum. Refer to these schedules and forms in order to determine the cost of the services offered by this facility. Current procedural terminology (CPT) and International Classification of Diseases, 10<sup>th</sup>-revision (ICD-10) codes are posted in each of the audiology suites.

Because the prices for hearing aids, hearing aid accessories, hearing aid repairs, earmolds, wireless accessories and hearing protectors are subject to change, the student must consult the appropriate fee schedule to determine current prices. Quotations for the price of a hearing aid are based on the established three-tier pricing for the level of hearing aid technology.

Patient charges for services rendered must be submitted at the conclusion of the appointment. The student should complete a Superbill (**see Forms**) in Clinic Note and following each appointment specifying the service rendered, the respective cost of this service and the diagnosis code. The Superbill should be filled out completely (patient's name, address, chart number, etc.) even if there is no charge for services prior to the end of each clinic session. If superbills are not complete by the end of clinic, a Professional Behavior Reminder will be given. The superbill is to be submitted within Clinic Note to the students Clinical Instructor.

## G. Third-Party Payment Procedures

The patient will work with the Clinic Business Specialist and if needed, the clinical faculty, to determine eligibility for services. Once that is determined, the client will be responsible for any associated co-pays and deductibles.

The following describes procedures that are followed by most health insurance companies that clients may want to use for benefits. Patients will pay for services provided and products dispensed at the time of service, even if they are covered by an insurance company. The Audiology & Speech-Language Pathology Clinic policy requires the client to pay the bill in full at the time of the service. If the patient wishes to file a claim with the insurance company for reimbursement, the patient must provide this facility with the appropriate insurance forms and/or insurance card. If the patient brings an insurance form, the client should sign the form, if required, and complete the necessary client sections (such as insurance number and/or group number) before leaving the form to be completed by the Clinic. The applicable portions of insurance forms will be completed by this facility. Benefits **MUST** be verified before the scheduled appointment can proceed.

## H. Patient Response Questionnaire

The patient should be asked to complete the Patient Response Questionnaire at the conclusion of the appointment or series of appointments. The results of these evaluations are discussed at least once per semester with the students and clinical faculty for quality assurance. The Questionnaire will be accessible through ClinicNote (EMR) as well as in the Clinic.

## I. Patient Contact

All patient contact (e.g., phone call, walk-in) must be documented in electronic form via the Contact Note feature in ClinicNote (EMR). Please consult with your Clinical Instructor if you are unsure whether an encounter necessitates a full report or whether a contact note is sufficient.

## J. Log to Track Disclosure of Personal Health Information (PHI)

Disclosure of PHI should be completed in Clinic Note each time PHI information is released, even if being released to the patient.

## K. Receipt of Records from an Outside Facility

When medical (audiology or physician) records are received from another facility, the date of receipt is documented in a report. The records are to be reviewed and placed in the scanning folder in Room 1012 to be scanned into the patient's chart.



## L. Patient Appointment Changes/Cancellations/Absences

The student cannot change or add patient appointments without the approval of the clinical instructor either verbally or in Clinic Note. If a patient fails to show for an appointment or needs to reschedule, inform the Office Support Specialist or clinical instructor for proper documentation.

## M. Cleaning and Care of Equipment and Facilities

It is the responsibility of the students to leave the Audiology Suites in a clean, neat condition and to replace all equipment in proper locations following test procedures. All otolights, otoscopic, and EMI syringe tips and immittance probe tips should be cleaned and returned for re-use.

Malfunctioning equipment should immediately be reported to a clinical instructor.

*INFECTION CONTROL Safety Procedures: cleaning protocol implementation will be utilized after each use of equipment and treatment rooms. Cleaning procedures include doors, handrails, tables, chairs, etc.*

## Section V Audiology Documentation

## A. Report Writing

The style, content and length of a report are determined by the complexity of the individual cases, type of appointment (or purpose of the report: telephone call, no show) and the clinician's writing style. Reports need to be written for each patient appointment, pertinent telephone calls, and received medical records. All contact notes and reports should be written in complete sentences.

Abbreviations must be defined (e.g., bilaterally (AU)) in each report before they can be used independently in the remainder of the report. Report format is as follows:

### **HEARING AID INFORMATION**

- Manufacturer, model
- Receiver/Tubing
- Dome/Earmold
- Serial Numbers
- Repair warranty expiration date
- L&D expiration date

### **HISTORY**

(Patient's full name), a (age) year old (male/female), was seen for (reason for appointment).

**Hearing Evaluation** includes:

- How the patient was referred
- Case history
- Date and results of most recent testing; note if there is no previous audiometric testing.
- If patient is a hearing aid user, note what type of aid(s), length of use and where the aid(s) was purchased.
- Include any pertinent information in HISTORY acquired prior to the testing.

**Hearing Aid Check or Hearing Aid Repair** include:

- Description of problem & length of time
- Pertinent information the patient reports or information obtained prior to testing.

### **RESULTS**

- **Hearing Evaluation** include:
  - Otoscopy

- Summary of test results
- Audiogram & reliability
- Tympanometry
- Agreement of acoustic reflexes with audiometric findings
- Present/absent or reduced OAEs and their agreement with other testing
- **Hearing Aid Check or Hearing Aid Repair** include:
  - What was done to address the problem?
  - What was found?
  - Was the problem resolved?
  - If the aid is being sent in and to what manufacturer
  - If the aid is being picked-up after repair, any adjustment and verification results.

### **Impressions & Recommendations**

- Summarize test results without a lot of audiology jargon; simplify the appointment in 1 to 3 sentences.
- Recommendations based on test results (HAs, accessories, ENT, Speech language evaluation, preferential seating, etc.)
- How should the patient follow up? (PRN, 2 weeks, 6 months) and for what? (Audio, HAC, warranty check, etc.)
- Include anything which should be conducted at the next appointment (e.g., speech-in-noise testing, assess need for additional programs)

Hearing Evaluation outline and sample report are included in **Forms**.

When the patient is seen for a hearing aid orientation, an ear mold impression or ear mold fitting, a hearing protection check, or a hearing aid check, a brief report needs to be completed containing the sections pertinent to the appointment. Each report must be completed and submitted to the clinical instructor/audiologist for a signature. If additional patient information is obtained by telephone or personal communication from another professional involved in the case, the encounter should be properly documented in a report and signed by the student clinician and audiologist.

All reports should reflect impressions and recommendations. The information should include details that the next follow-up audiologists can find useful in working with the patient.

Impressions might include such things as specific questions or concerns about services provided, financial concerns, patient opinions about recommendations made and inclination as to when he/she

will follow up on such recommendations, or spouse comments and input beyond that written in the report.

**Note:** Drafts of reports should be typed in Clinic Note and signed by the student clinicians prior to submission to the clinical instructor.

**The rough draft reports are due 48 hours after the student has completed the appointment. All chart documentations are to be completed within one week from the appointment date so it can be sent out in a timely fashion.** All scanned forms need to be completed neatly or recopied to be neat and legible.

Upon completion of an evaluation and all appropriate documentation:

- All paper forms should be completed and signed, as needed, by the student clinician, patient, and/or clinical instructor.
- If the report is being cc'd and requires mailing/faxing inform the clinical instructor and the clinic's Office Support Assistant.

## B. Clinic Forms

Forms are available in Clinic Note.

## C. Abbreviations

- ABR – *auditory brainstem response*
- AC – *air conduction*
- AD – *right*
- appt. – *appointment*
- ART – *acoustic reflex threshold*
- AS – *left*
- AU – *bilateral*
- BC – *bone conduction*
- bilateral – *both sides*
- binaural – *both ears (specifically the brain making use of both ears)*
- cc – *carbon copy*
- cc'd – *carbon copied (sent a copy to)*
- CHL – *conductive hearing loss*

- DOB – *date of birth*
- dPa – *decipascal*
- DPOAE – *distortion product otoacoustic emissions*
- Dx – *diagnosis*
- ECV – *ear canal volume*
- EM – *earmold*
- EMI – *earmold impression*
- fb – *feedback*
- HA – *hearing aid*
- HAC – *hearing aid check*
- HAD – *hearing aid dispensing*
- HAE – *hearing aid evaluation*
- HAR – *hearing aid repair*
- HE – *hearing evaluation*
- HL – *hearing loss*
- HP – *hearing protection*
- Hx – *history*
- MCL – *most comfortable level*
- NA – *not applicable*
- NC – *no charge*
- NR – *no response*
- DOS – *date of service*
- OAEs – *otoacoustic emissions*
- PI-PB – *performance intensity function for phonetically balanced monosyllables*
- PRN – *pro re nata, as needed*
- pt. – *patient*
- PTA – *pure tone average*
- Rec – *recommendations*

- SLE – *speech-language evaluation*
- SLP – *speech-language pathologist*
- SLT – *speech-language therapy*
- SNHL – *sensorineural hearing loss*
- SRT – *speech reception threshold*
- Tx – *treatment*
- tymps – *tympanograms*
- Type A – *normal tympanogram, normal pressure & compliance*
- Type B – *flat tympanogram, abnormal compliance*
- Type C – *negative pressure  $\geq -150$  dPa*
- UCL – *uncomfortable loudness level*
- WRS – *word recognition score*

#### D. Degree of Hearing Loss

The following standard should be used when classifying the patient's degree of hearing loss:

- ☐ 0-25    dB HL = Normal hearing
- ☐ 26-40    dB HL = Mild hearing loss
- ☐ 41-60    dB HL = Moderate hearing loss
- ☐ 61-70    dB HL = Moderately severe hearing loss
- ☐ 71-90    dB HL = Severe hearing loss
- ☐ 91+      dB HL = Profound hearing loss

## Section VI Supervision



## A. Direct Supervision Procedures

Graduate students may be assigned to one or more clinical instructors during each semester of in-house or external placement practicum. Clinical instructors are responsible for educating and helping to develop students' clinical skills. Clinical instructors are licensed and certified individuals who are also responsible for the well-being of patients and clients.

In keeping with the Council for Clinical Certification (CFCC) standards (see <https://www.asha.org/Certification/2020-Audiology-Certification-Standards/>), the program provides at least 25% direct supervision of student-provided clinical diagnostic and treatment services. The clinical instructor will determine the amount of additional supervision that is required based on factors including, but not limited to student prior clinical and classroom experience, the medical complexity of the case, and insurance regulations. External placements may have institutional policies in addition to the standards of the CFCC.

Efforts are made to assign students to clinical cases that correspond with their previous or concurrent coursework. In situations where students may be assigned to a case in which they have not yet had coursework, the instructor will provide additional supervision time and relevant readings and resources to increase students' knowledge and skills.

## B. Grievances

Students are encouraged to bring their concerns or complaints to faculty. In all cases, it is best to bring concerns to the faculty member directly involved. If that does not result in a mutually acceptable resolution, the student can bring the matter to the attention of department administrators. Concerns regarding clinical placements or supervision should be brought to the attention of the Coordinator of AuD Clinical Experiences. Concerns regarding academic coursework should be brought to the attention of the Director of Graduate Studies. If concerns cannot be addressed by these individuals, the next level is the Program Director and Head (see Organizational Chart on page 6 of this Handbook.) If a mutually acceptable resolution to a complaint cannot be achieved informally, students may file a formal complaint, or grievance, with either the College of Applied Health Sciences or the Graduate College following the grievance procedures of the respective units. The grievance procedures are available on the University web site

<http://www.grad.illinois.edu/grievepolicies/principles>

The processing of grievances is also subject to College of Applied Health Sciences and University guidelines:

<https://studentcode.illinois.edu/>;

[https://www.vpaa.uillinois.edu/resources/policies/grievance\\_guidelines](https://www.vpaa.uillinois.edu/resources/policies/grievance_guidelines)

<https://grad.illinois.edu/sites/grad.illinois.edu/files/pdfs/handbook.pdf>

<https://provost.illinois.edu/student-consumer-information/student-complaint-process/>

### C. Clinical Educator-Student Conferences

Each clinical instructor and student will at minimum meet at mid-term and at the end of the semester to discuss the student's strengths and weaknesses. Suggestions will be made for improvement to support clinical growth. Estimated grades will be discussed at mid-term and the final grade will be discussed at the final evaluation. Additional conferences may be held at either the student's or the clinical instructor's request.

### D. Professional Protocol and Evaluation Procedures

The Audiology Formative Assessment (**see Forms**) was designed to inform the student about their professional and clinical competence. The clinical instructor and/or student will complete the appropriate sections of the form before the conferences to determine a rating reflecting the student's professionalism and clinical competence during this practicum. The SHS 447 Practicum Evaluation (**see Forms**) is used to give weekly feedback to the student during practicum at the Audiology & Speech-Language Pathology Clinic.

The external placement clinical instructor and graduate student will meet at mid-term and at the end of the semester to discuss the student's progress and performance. Written feedback to the student and the department will be provided based on the Audiology Formative Assessment.

The Doctor of Audiology Program includes clinical experiences at multiple facilities off campus.

Communication regarding students' academic and clinical progress at these facilities is necessary throughout the program. This communication will include performance assessment, evaluation and grade information between representatives of the Department of Speech and Hearing Science and the external clinical facilities. Email, fax, telephone, US mail, and written or spoken communication may be used. The final placement grade is at the discretion of the Coordinator of AuD Clinical Experiences given course requirements.

### E. Evaluation of Clinical Instructors

Students are invited to evaluate their practicum clinical faculty or instructor for in-house clinical practicum at the end of each semester using Supervisor Feedback Form in CALIPSO and/or the University of Illinois at Urbana-Champaign [Instructor & Course Evaluation System \(ICES\) Forms](#) (ICES) Forms. Evaluations for external clinical educators are made via CALIPSO.2

### F. Log of Clinical Hours

All students must track the number of clinical clock hours they have obtained each semester as well as how much of that time was under the supervision of clinical faculty or instructors.

Students will be required to submit their hours for approval in CALIPSO once a week during spring, fall, and summer semesters.

## G. Intervention Plans

### **ASHA Certification requires students to:**

- Complete a graduate degree at a CAA accredited program.
- Meet Pre-Service Knowledge and Skills Standards (KASA) set by ASHA for Audiologists or Speech-Language Pathologists

### **Minimum Grade Point Average (GPA)**

The Graduate College at the University of Illinois at Urbana-Champaign specifies that graduate students must maintain a minimum GPA and make satisfactory progress in all other aspects of their degree programs to continue as students. Students in the Department of Speech and Hearing Science must maintain an overall GPA of 3.0. For information on Graduate College policies regarding academic standing, please refer to the Graduate College Handbook (see <https://grad.illinois.edu/sites/grad.illinois.edu/files/pdfs/handbook.pdf>).

Students receive a grade for each clinical assignment. These are reported in CALIPSO as a number that corresponds with the competency performance. Please note, this is on a scale of 1 – 5 points. The table below outlines how the average competency ratings translate to a letter grade based on different points in time of the program. To pass the clinical experience each semester, the minimum rating score must be at or above the lowest B- rating.

<u>AuD 1 (Fall 1, Spring 1, Summer 1) AND</u> <u>AuD 2 (Fall 2)</u>	
4.25 – 5.00 = A+	
3.75 – 4.00 = A	
3.50 – 3.74 = A-	
3.25 – 3.49 = B+	
3.00 – 3.24 = B	
2.75 – 2.99 = B-	
2.50 – 2.74 = C+	} REMEDIATION
2.24 – 2.39 = C.	
2.00 – 2.24 = D	
1.00 – 1.99 = F	
<u>AuD 2(Spring 2, Summer 2) AND</u> <u>AuD 3 (Fall 3)</u>	
4.50 – 5.00 = A+	
4.00 – 4.49 = A	
3.75 – 3.99 = A-	
3.50 – 3.74 = B+	
3.25 – 3.49 = B	
3.00 – 3.24 = B-	
2.75 – 2.99 = C+	} REMEDIATION
2.24 – 2.39 = C	
2.00 – 2.24 = D	
1.00 – 2.24 = F	
<u>AuD 3 (Spring 3) AND</u> <u>AuD 4</u>	
4.75 – 5.00 = A+	
4.50 – 4.74 = A	
4.25 – 4.49 = A-	
4.00 – 4.24 = B+	
3.75 – 3.99 = B	
3.50 – 3.74 = B-	
3.25 – 3.49 = C+	} REMEDIATION
3.00– 2.24 = C	
2.75 – 2.99 = D	
1.00 – 2.74 = F	

## Successfully Displaying Competency in All KASA Standards

With regard to CFCC knowledge standards in a didactic (clinical) course, at-risk students are identified as being *at minimal risk* if they did not meet all knowledge standards designated for a course; and are identified as *in need of intervention* if during a semester they are failing to meet multiple knowledge standards in a course. A student *at minimal risk* will have other courses in the curriculum where she or he can meet the standards of concern.

A student *in need of intervention* in a course will be notified by the course instructor, who will work with the student, and if needed, the student's academic advisor and the Director of Graduate Studies to provide opportunities during the course or elsewhere in the curriculum to meet the standards of concern.

With regard to CFCC skills standards in a clinical practicum, at-risk students are identified as being *at minimal risk* if they received a rating of "2" for any CFCC skills standards during clinical practicum; and are identified as *in need of intervention* if at mid-semester they are failing to meet any skills standards (i.e., received a rating of "1") during clinical practicum.

A student may also be identified as being in need of intervention if they receive a "not met" for any of the 4 professional expectations at the bottom of the Calipso evaluation form on a Calipso final evaluation (Professional "met/not met" categories include: Displays organization and preparedness for all clinical sessions, assumes a professional level of responsibility and initiative in completing requirements, Demonstrates openness and responsiveness to clinical supervision and suggestions, and Personal appearance is professional and in accordance with the policy for the clinic setting).

A formal intervention plan is not warranted for a student *at minimal risk*; however, the clinical instructor will meet with the student to discuss how to improve performance on the standard(s). A letter of support may be created to outline goals/growth areas for the remainder of the semester. The letter of support will be created in collaboration with the clinical educator, the Coordinator of AuD Clinical Experiences, the Director of Graduate Studies, and the academic advisor. If the goals are met by the end of the semester, then subsequent clinical experiences will not be impacted. However, if the student does not meet the goals from the letter of support, a formal individualized intervention plan will then be created. This will be created in collaboration with the clinical educator, the student's academic advisor (serving as an advocate for the student), the Coordinator of AuD Clinical Experiences, the Director of Graduate Studies, and the Program Director, to guide the student in meeting the standards of concern. Students will have 16 weeks to meet the standards, after which the student will be formally advised by the faculty who created the plan about the student's success in meeting the standards and what, if any, further actions should be taken.

### **Resolutions for students at risk will take three forms:**

- Successfully support student in completing: 1) Degree requirements, and 2) displaying competency in all standards
- Successfully completing degree requirements for academic master's degree; counseling student out of the clinical program.
- Counseling student out of the graduate program, leaving w/out degree.

### **H. Student Learning Outcomes Assessment**

Mastery of the Council for Clinical Certification standards required for the Certificate of Clinical Competence (CCC) will be assessed for each student for behaviorally defined learning outcomes at multiple points in the program. The standards are assessed in each academic course and clinical practicum. There are multiple opportunities to meet each standard across the curriculum. Various locally designed forms of qualitative and quantitative assessments will be used, e.g., examinations, research papers, abstracts, reaction papers, mini-papers, individual and group projects, evaluation and reflection, etc. The course or practicum instructor determines whether the student has met or not met each standard designated for that course. Each student's learning outcomes are tracked via the Audiology Formative Assessment that is accessible to the student via Calipso. (Students in the Class of 2020-2021 started with paper formative assessment forms stored accessed electronically and will continue with that system until graduation.) At least once per semester, students receive feedback from their academic advisor indicating the current level of competence for the learning outcomes. If additional opportunities are needed to meet any standard, a plan will be developed with the academic advisor. Faculty meet annually in the spring semester to assess overall student progress in the program and students receive feedback from their academic advisor. During the student's final semester, the Clinic Director and the Director of Graduate Studies conduct an audit to determine that an acceptable level of competence has been achieved for each behaviorally defined standard. The student must also pass the national standardized Praxis examination.

### **I. Accommodations**

#### **Accommodating Disabilities**

The University of Illinois is committed to ensuring that qualified persons with disabilities are not denied admissions or subjected to discrimination throughout their program. Any prospective student may request accommodation for academic or clinical settings by contacting their instructors, advisors and The Division of Disability Resources & Educational Services (DRES). [DRES](#) provides supports for undergraduate and graduate students across campus. Students are encouraged to contact DRES to proactively arrange accommodation early in each semester.

DRES counselors will help students in developing reasonable accommodation plans with our department for both academic coursework and practical experiences in clinical settings.

To obtain disability-related academic adjustments and/or auxiliary aids, students with disabilities should contact the Disability Resources and Educational Services (DRES) as soon as possible. The determination and implementation of accommodations is an interactive process and can take several weeks to determine reasonable accommodations that enable students to participate in the essential standards for the course or internship program. Students are encouraged to discuss their accommodation needs as soon as possible as instructors, programs, and sites are only obligated to implement accommodations after receipt of an accommodation letter, i.e., not retroactively.

To contact DRES, you may visit 1207 S. Oak St., Champaign, call [217-333-1970](tel:217-333-1970), e-mail [disability@illinois.edu](mailto:disability@illinois.edu) or go to the DRES website at [www.disability.illinois.edu](http://www.disability.illinois.edu). To register for services, please to this link: <https://dres.illinois.edu/information-before-you-apply/application-process/>.

### **Accommodating Personal Emergencies**

The [Student Assistance Center](#) in the Office of the Dean of Students serves as the first point of contact for students requesting assistance for personal emergencies—students may drop in or make an appointment. Assistant Deans help students understand university policies and procedures, guide them in connecting to other campus resources, and support students in crisis. The Student Assistance Center can assist students with a broad range of issues that may be affecting their academic and/or clinical performance, including issues related to physical and mental health, course attendance, accessing various campus services, and options for withdrawing from the university.

### **Accommodating Religious Observances**

University policy and state law require that all academic and clinical instructors reasonably accommodate conflicts and work requirements resulting from a student's religious beliefs, observance and practices. Students are required to submit the [Request for Accommodation for Religious Observances Form \(.doc\)](#) to their instructors and the Office of the Dean of Students to request accommodation by the end of the second week of the course.

## **J. Policies and Procedures for Equitable Treatment**

The following is the Official Notice of the Nondiscrimination Statement of the University of Illinois at Urbana-Champaign. It can be found on the University of Illinois Office of Access and Equity Website. <https://oae.illinois.edu/discrimination-and-harrassment-prevention.html>

University complaint and grievance procedures provide employees and students with the means for the resolution of complaints that allege a violation of this Statement. Inquiries or complaints may be addressed to the Director and Assistant Chancellor, Office of Equal Opportunity and Access, 601 E. John Street, Swanlund Administration Building, (217) 333-0885, fax (217) 244- 9136, TTY (217)

244-9850 or the Associate Provost and Director, Academic Human Resources, Henry Administration Building, (217) 333-6747, fax (217) 244-5584. For other University of Illinois information, contact University Directory Assistance at 333-1000.

Policies and procedures for problem solving and grievance filing on matters related to discrimination and harassment are established within the University. Vice Chancellors, deans, directors, and department heads share the responsibility for procedures within their units, subject to oversight by the Office of the Provost which has the lead responsibility for overseeing all aspects of the policy and procedures. Each college-level unit has an appointed intake specialist, and procedures take the form of informal problem-solving and formal filing of grievance, with the possibility for appeal. These policies and procedures encourage and require all to make a sincere and sustained effort to create an environment where everyone feels welcomed and valued.

## K. Student Complaints

Students are encouraged to bring their concerns or complaints to faculty. In all cases, it is best to bring concerns to the faculty member directly involved. If that does not result in a mutually acceptable resolution, the student can bring the matter to the attention of department administrators. Concerns regarding clinical placements or supervision should be brought to the attention of the Clinic Director. Concerns regarding academic coursework should be brought to the attention of the Director of Graduate Studies. If concerns cannot be addressed by these individuals, the next level is the Program Director and Head (see Organizational Chart on page 7 of this Handbook.) If a mutually acceptable resolution to a complaint cannot be achieved informally, students may file a formal complaint, or grievance, with either the College of Applied Health Sciences or the Graduate College following the grievance procedures of the respective units. The grievance procedures are available on the University web site at <http://www.grad.illinois.edu/grievpolicies/principles>.

A complaint concerning the program's compliance with the CAA Standards may be submitted to the Council on Academic Accreditation by any student, faculty member, speech-language pathologist, audiologist, and/or member of the public. Criteria for complaints and submission requirements can be found at <https://caa.asha.org/programs/complaints/>.

The Speech-Language Pathology Certification Standards and the Standards for Accreditation in Audiology and Speech-Language Pathology by the Council on Academic Accreditation may be obtained by contacting the CAA Office at ASHA, 2200 Research Boulevard, Rockville, Maryland 20850, calling ASHA's Action Center at 1-800-498-2071, or accessing the documents on ASHA's Web site at <https://www.asha.org/certification/2020-slp-certification-standards/> and <http://asha.org/academic/accreditation>.

Comments should be submitted to this address:



Chair, Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA)  
American Speech-Language-Hearing Association 2200 Research Boulevard #310  
Rockville, MD 20850

## L. Campus Student Support Services

The University provides a variety of support services to students. There is a University web site dedicated to student support services: <http://www.grad.illinois.edu/current/health>

Applied Health Sciences has an embedded clinical counselor, Stephanie Hultz, located in Huff Hall Room 245. As a Counseling Center employee, she offers limited-time counseling, connection to group counseling, referrals to community therapists, and outreach and prevention services. Students can schedule appointments by calling the Counseling Center at 217-333-3704 and asking for an appointment with Stephanie Hultz. More information about services provided by the Counseling Center can be found on the website: <http://counselingcenter.illinois.edu>

## Section VII Professional Organizations

### **A. The American Speech-Language-Hearing Association (ASHA)**

ASHA is the national professional association for speech-language pathologists, audiologists, and speech-language and hearing scientists concerned with communication behavior and disorders. The Certificate of Clinical Competence in Speech-Language Pathology or Audiology is offered by ASHA. Graduate students are urged to become familiar with ASHA's goals, its programs, and its publications (see <https://www.asha.org/>).

### **B. The National Student Speech-Language-Hearing Association (NSSLHA)**

NSSLHA is the national organization for students interested in the study of normal and disordered communication behavior (see <https://www.nsslha.org/>). NSSLHA is affiliated with ASHA. Membership is open to undergraduate and graduate students. Many universities, including the University of Illinois at Urbana-Champaign, maintain active chapters that meet regularly during the academic year. Faculty in the Department of Speech and Hearing Science serve as advisors to the local chapter.

Our NSSLHA Chapter encourages student membership and support of its activities. Through the University of Illinois Chapter programs, students will learn more about the opportunities that can result from professional training, more about the national NSSLHA Chapter, and about the workings of ASHA. Each clinical trainee is encouraged to become a member of the University of Illinois NSSLHA Chapter.

### **C. The American Academy of Audiology (AAA)**

The American Academy of Audiology is dedicated to providing quality hearing care services through professional development, education, research, and increased public awareness of hearing and balance disorders. The American Academy of Audiology promotes quality hearing and balance care by advancing the profession of audiology through leadership, advocacy, education, public awareness, and support of research (see <https://www.audiology.org/>).

The American Academy of Audiology supports the following core values, which are aligned with the Academy's pillars of advocacy, education, leadership, public awareness, and research. These core values are both for the Academy as an organization and for the individual members and represent the tenets that govern our professional behavior.

### **D. The Student Academy of Audiology (SAA)**

The Student Academy of Audiology is the national student organization of the American Academy of Audiology that serves as a collective voice for students and advances the rights, interests, and welfare of students pursuing careers in audiology. The SAA introduces students to lifelong involvement in activities that promote and advance the profession of audiology, and provides services, information, education, representation and advocacy for the profession and the public we

serve.

The local chapter of SAA holds meetings regularly during the academic year. Faculty from the Department of Speech and Hearing Science serve as Advisors to the local chapter.

The chapter sponsors and participates in various fundraising events on campus. They may collaborate with NSSLHA for organizing events that are related to the Speech and Hearing Science department. Their goals include developing a mentoring program for Speech and Hearing Science students and spreading awareness of the field and profession of audiology through involvement in community and campus outreach opportunities.

## E. Praxis

The Praxis Examination in Audiology, an integral component of the American Speech- Language- Hearing Association (ASHA) certification process, is commissioned by ASHA and facilitated by the Educational Testing Service (ETS). The exam content covers areas across the entire scope of practice in audiology and requires clinical decision-making based on a broad range of clinical experiences. The exam is a requirement for the ASHA Certificate of Clinical Competence in Audiology and may be a requirement for professional licensure in some states. ASHA recommends that individuals take the Praxis Exam no earlier than the completion of their graduate coursework and graduate clinical practicum. The Department of Speech and Hearing Science highly recommends that students **in the Doctor of Audiology program take the Praxis Exam no earlier than the spring semester of their fourth year**. ETS provides study guides and practice tests to help test-takers familiarize themselves with the exam structure, content, and question types. Further information regarding the Praxis Examination in Audiology is at <https://www.asha.org/Certification/praxis/About-the-Audiology-Praxis-Exam/>.

## Section VIII

### Health Insurance Portability and Accountability Act (HIPAA)

The Audiology & Speech-Language Pathology Clinic will comply with the regulations of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and applicable updates.

## A. Training

The University of Illinois policy on HIPAA training can be found at <https://hipaa.uillinois.edu/training/>.

Training of clinical graduate students will occur at the beginning of the first semester of the program and subsequently will be completed annually. Students will be enrolled in the HIPAA training approved by the University of Illinois. Students will be required to upload their compliance documentation to CALIPSO by the date required by the Clinic Director or Business Specialist. Training will occur as needed when new policies or protocol modifications occur.

## B. Records

Graduate students will complete and sign forms to document the completion of HIPAA training and to acknowledge the agreement to abide by security and confidentiality requirements. These forms will be uploaded by the student into their CALIPSO portal.

## C. Clinic Protocol

The Audiology & Speech-Language Pathology Clinic guidelines for adherence to HIPAA regulations are listed below.

- All current and new patients are given a copy the University Audiology Clinic's *Notice of Privacy Practices* and asked to sign a *Receipt of Notice of Privacy Practices Written Acknowledgment Form* to acknowledge that they received a copy of the Speech-Language Clinic and Audiology Clinic privacy policy.
- Patient information cannot be left on answering machines/voicemail or in email messages without the patient's consent. In order to do this a patient needs to sign and date a *Patient Consent for Use and Disclosure of Protected Health Information form*. Within this form, the term **USE** means sharing, employment, application, utilization, examination or analysis of PHI **within the clinic**. The term **DISCLOSURE** means the release, transfer, giving access to or divulging in any other manner of PHI to anyone **outside of the clinic**.
- Before any PHI is released from the Audiology & Speech-Language Clinic's records to an outside agency/facility/person, a patient must sign and date the *Consent for Disclosure of Confidential Information form*. All sections of the form must be completed thoroughly to indicate the agency/facility/person involved, the specific information (PHI) involved, and the time period for which the form is in effect. This form does not need to be completed and signed by the patient if the PHI to be released is being given to the patient herself/himself.

- For clinical reports, reports and letters:
  - All files contain a *Log to Track Disclosures of PHI (HIPAA Log)* Any time patient information is sent from this facility or given in person to the patient, an entry must be made in the log. If a report, letter or copies of an audiogram are to be sent out or given to the patient or another agency, entries should be completed in the *Log to Track Disclosures of PHI (HIPAA Log)*. Each report or letter (with its enclosures) that is sent out or given to the patient should be entered on a separate line of the log. Information regarding the date, information being sent or given, who requested the release of information, and to whom it is being sent to or given to should be completed.
  - The clinical faculty or instructor will edit student drafts of patient reports and the accompanying as needed.
  - When the clinical faculty or instructor has approved the contact sheet, report, or letter, the student will complete the final document including the patient's identifying information. The documents may then be printed and signed by the student. Letters should be printed on the Department of Speech and Hearing Science letterhead. All final documentation will be placed in the patient's chart.
  - The clinical faculty or instructor will sign the contact sheet, report or letter. She/he will also initial the *HIPAA Log* for each completed entry tracking the information to be released.
  - All papers containing any patient identifiable information that is not part of the patient's record must be shredded. Shredders are located in the student workroom and in room 1010.
  - Paperwork with identifying information should be placed in a folder in the student or clinical instructor's mailbox.
  - Oral communication with or about a patient should be kept private by moving to a private area or keeping voice levels low.
  - Cases and patients should not be discussed in the hallway, waiting room, or any other public area.

- An approved network server is set up for the purpose of accessing, creating or editing documents relative to patient cases. This server will be accessible to AuD and MA graduate students via individual passwords. Each graduate student will have access to the server and her/his own folder on that server. Access rights and passwords will be updated each semester by the appointed college AHS-IT consultant.
  - No patient data, information or documents from the server should be saved to the specific computer (department, clinic or personal) being used. Patient data should not be downloaded to any personal storage media, including hard drives, even for temporary editing or printing. Printing of documents from the server should be completed using clinic printers only.
  - While working on clinic paperwork and patient information on the server, computer screens should be turned inward so that people passing by cannot read patient information. While the server is open, the computer in use should not be left unattended. Patient information should not be left on the computer printer.
- In the Audiology & Speech-Language Pathology Clinic, the clinic computer screens for NOAH should not be left on or unattended for extended periods of time to prevent patient information from being viewed by others.
- Patient charts should only be used in private areas in the Audiology & Speech-Language Pathology Clinic. This would include clinic rooms and the student work area (if in a private area). Files should not be in public areas.
- The clinic email and fax sheets include a confidentiality clause at the bottom of the page. The clause states that the information is confidential, privileged and protected from disclosure. It states that if the reader has received the material in error that she/he should notify the sender immediately.
- If an audiology student is sending a hearing aid to a patient, the patient's name and address will be needed on the shipping label. When giving the package to the office staff it should be placed face down so the patient information is not showing. Packages should not be left on the front counter of the office in the public area.



## Section IX Infection Control

The Audiology & Speech-Language Pathology Clinic will follow the Unit Exposure Control Plan as posted on the University of Illinois at Urbana-Champaign Canvas website. A paper copy of the plan is located at the Audiology & Speech- Language Pathology Clinic (Room 1010).

## **A. Training**

This online training will occur at the beginning of the student's first semester in the program and is to be renewed annually. Annual retraining will occur at the beginning of each fall semester for all second- and third-year graduate students and clinic personnel. Annual retraining will be completed using materials provided by the University of Illinois Division of Safety Research Training (Bloodborne Pathogens program). Annual retraining in the policy, plan and procedures of the Audiology Clinic will also occur at the beginning of each fall semester for second- and third-year graduate students and clinic personnel.

Students will complete Bloodborne Pathogen Training as follows:

1. Go to <https://www.drs.illiois.edu/> to complete online training.
2. Click on the training tab (top)
3. Click on "non-laboratory personnel safety training."
4. Click "Occupational Exposure to bloodborne pathogens."
5. Follow the directions for training.
6. Print to PDF your completion certificate in order to submit.
7. Upload into CALIPSO account

Students should follow universal precautions when engaging in patient care. Face shields and/or masks may be used by the service provider when directly interacting with patients. Disinfecting supplies are provided and stored in each room. Students are responsible for sanitizing the room and materials after each session.

Training for new policies or policy modifications will occur for all clinic personnel and AuD graduate students as needed.

## **B. Records**

Forms documenting Exposure Classification, Hepatitis B Vaccination Declination or Request, Infection Control Training (initial, annual retraining, modification), and Report of Exposure to Blood or Other Potentially Infectious Materials will be maintained on CALIPSO. Additional forms related to the implementation and documentation needed for the Infection Control Plan are in the forms section of the handbook and include Group Infection Control Training Record Form, New or Modified Group Infection Control Procedure Training Record Form, and Sterilant Log Sheet

