



**Communication Sciences
and Disorders**

Department of Communication Sciences & Disorders

AuD and MA SLP Graduate Student Handbook 2024-25

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1 CSD CLINICAL GRADUATE PROGRAMS – GENERAL INFORMATION

This guide provides students with information about the policies and procedures governing the Doctor of Audiology and the Master of Speech-Language Pathology programs of the Department of Communication Sciences and Disorders. It should be used as a supplement to the University and Graduate College catalog: <https://catalog.registrar.uiowa.edu/>, <https://www.grad.uiowa.edu/academics/rules-and-deadlines/manual>.

Although the goal is to cover departmental policies and procedures as completely as possible, these are subject to change as professional, university, and departmental policies evolve. Every attempt will be made to keep students informed of these changes as they arise. The application of policies to particular cases may also vary with the special circumstances related to an individual student. Thus, students should seek clarification and additional information as needed from their faculty advisor or other program leadership.

Included in this section is information on the department, purpose of the programs, and policies and procedures pertaining to graduate students in the clinical graduate programs, regardless of the type of program which they are pursuing.

1.1 The Department of CSD and Clinical Education

1.1.1 History

The Department of Communication Sciences and Disorders (CSD) at the University of Iowa is one of the U.S.'s oldest and largest programs. This discipline's beginnings are usually attributed to the pioneering work of Carl E. Seashore, who became head of the Department of Psychology in 1905 and Dean of the Graduate College at Iowa in 1908. Further, the field's governing body, the American Speech-Language-Hearing Association, was founded in Iowa City at the home of Dr. Lee Edward Travis.

The importance of Iowa's program in speech pathology and audiology and the new academic discipline it represented was recognized in 1956 when it became an independent department in the College of Liberal Arts (now College of Liberal Arts and Sciences). The department expanded greatly in the next two decades. Its growth was facilitated by the Wendell Johnson Speech and Hearing Center building, dedicated in 1968, and will continue to grow as it moves to its new location in the Fall of 2025.

Throughout its history, the department has continued to reflect the concepts that represented its roots. The department's programs reflect a continuing commitment to the notion that scientific exploration of the speech and hearing processes and their disorders is critical to future progress in the assessment and treatment of speech, language, and hearing problems.

1.1.2 Clinical Programs

- 1) The **graduate program in speech-language pathology** is a two-year professional program culminating in a Master of Arts (MA) degree.
- 2) The **graduate program in audiology** is a 4-year professional program culminating in a clinical doctorate of audiology (AuD) degree.

Both Graduate programs provide students with a basic understanding of clinical practice and research in the field, as well as experiential learning in relevant areas. All clinical students will graduate as generalists with the knowledge, skills, and attributes to work in any area of the field. In addition, a variety of special opportunities, available within the department and through inter-departmental collaborations, allow students to specialize in areas of particular interest and relevance to their career goals.

Students should recognize, however, that the time spent in a university program is only one intermediate phase in their overall education and professional training. It is not the goal of this program to graduate a

finished clinician, researcher, or teacher; this program is designed to provide students with the knowledge and skills required to facilitate lifelong learning and professional growth as clinicians, researchers, and teachers.

1.1.3 Governance Structure

The department is led by a Department Executive Officer (**DEO**), also known as the “Chair”. Each program also has a director. The Director of Graduate Studies (**DGS**) leads the PhD program, and the Director of Undergraduate Studies (**DUS**) leads the undergraduate program. Each of the professional (clinical) programs is led by a Program Director (**PD-AuD, PD-SLP**) and a Director of Clinical Programs (**DCP-AuD, DCP-SLP**).

Other department personnel involved with the graduate clinical program is a Departmental Administrator, a Graduate Program Coordinator (**DGS**), an Administrative Services Coordinator (**ASC**), a Clinic Support Services Specialist (**Scheduler**), and a Revenue Cycle Coordinator (**Billing**). The GPC can assist with all components of the student system of record such as tracking progress, grades, and completion of program milestones.

1.2 General Program Procedures and Supports

1.2.1 Admission Procedures

For general application information, please see: <https://csd.uiowa.edu/graduate/admissions>.

1.2.1.1 Deferring admission (MA-SLP program only)

After being accepted into the MA-SLP program, a two-year student may defer for one year; however, the final determination on a deferment will be made on a case-by-case basis depending on the number of students already accepted into the program. If a deferment is granted, the student must contact the Department of Communication Sciences and Disorders by December 31 to confirm their commitment to enroll that following fall. If a request for deferment is made prior to completion of the admissions process, then it is likely that a deferment will be granted. A deferment for a three-year student will likely be granted. If a student who was offered funding requests a deferment, the deferment may be granted but without a guarantee of previously offered funding. The AuD program does not offer deferred admission.

1.2.1.2 Re-admission following program interruption

If a student’s enrollment is interrupted for any reason so that s/he is not enrolled for three consecutive academic sessions (including the spring, summer, and fall sessions but excluding the winter session) the student must apply for readmission. The readmission application form must be used. The form is available at this website <https://grad.admissions.uiowa.edu/new-students/returning-students>. The Graduate College will not require new letters of recommendation, a new Statement of Purpose, a written explanation of the reasons for the absence, or a plan for degree completion. However, the Department of Communications Sciences & Disorders may request any or all of those items.

1.2.2 Advisor Assignment

1.2.2.1 AuD advising

In the AuD program, the Program Director (PD-AuD) will be the academic advisor for all AuD students. In June, prior to the start of your first semester in the AuD program, your advisor will email incoming students their required course registration along with directions on how to register. If individual students have questions, they can communicate with their advisor either via email or zoom to discuss any questions or concerns. Students with funding will need to register in July to get their funding paperwork completed in time for the start of the fall semester. Additional time will be set aside during orientation week for students to meet with their academic advisor if needed.

1.2.2.2 MA-SLP advising

Before their first semester of graduate school SLP graduate students are assigned to advisors, typically on the basis of their stated interest areas. Students graduating from our undergraduate program will not necessarily continue with their undergraduate advisor in their graduate work.

The student may, and in some cases must, change advisors when appropriate.

In addition to helping the student plan the program of study, the advisor is also available to counsel the student regarding any problems related to the student's program of study, professional goals, etc. In some instances, the advisor may suggest that the student talk to the Director of Graduate Studies, Director of Clinical Education, or another faculty member; however, the student should consult the advisor initially.

1.2.3 *Registration, courses, and grading*

During the latter part of each semester, students are assigned times for early registration for the upcoming semester. The advisor is responsible for authorizing the student's registration. This is done online. For the first semester, registration typically occurs after communication with the academic advisor in the summer before the fall semester starts to ensure proper processing of financial aid and funding. Individual advising, registration, or course changes can also occur during orientation week.

1.2.3.1 Course Loads

The maximum academic load for graduate students is 15 semester hours during the fall and spring semesters and 9 semester hours during the summer session (there are exceptions that can be discussed between the student and advisor).

1.2.3.2 Grading

1.2.3.2.1 Incomplete Grades

The Graduate College regulations specify that the grade of "I" is to be used only when a student's work during a session cannot be completed because of illness, accident, or other circumstances beyond the student's control. The department closely follows these regulations.

1.2.3.2.2 Academic Probation and Termination

The Graduate College policies on academic standing, probation, and dismissal of nondoctoral and doctoral graduate students can be viewed at [Academic Standing, Probation and Dismissal](#). An Academic Intervention Plan form must be completed and placed in the student's academic folder.

1.2.4 *Special Opportunities*

1.2.4.1 Professional Seminar

The period from 12:00 to 1:00 on Fridays during the academic year is scheduled for departmental seminars (referred to as Proseminar, or "Prosem") on research or clinical topics. An announcement of the title, speaker and description of the topic is posted a few days prior to each meeting. Proseminars provide an opportunity for both students and faculty to present reports of clinical or research projects that are in progress or completed. Scheduling of proseminar is the responsibility of the faculty member assigned as the Proseminar Coordinator.

All faculty and PhD students are expected to present at Proseminar on a regular basis. Master's and AuD students are encouraged to present, especially those who are doing a thesis. The Proseminar Coordinator will contact students and faculty about presenting at Proseminar. Individuals wishing to present should contact the Proseminar Coordinator.

First-year graduate students (SLP, AuD, and PhD) are required to attend Proseminar for both semesters of their first year. PhD students are encouraged to attend and participate in Proseminar each semester that they are in residence.

An attempt is made each year to schedule individuals who are experts in various areas to present guest lectures. In addition, scholars in related areas from other departments at the University of Iowa may be invited to present guest lectures. Suggestions from students and faculty members for individuals to be invited as guest lecturers are welcome. Suggestions should be submitted in writing to the Proseminar Coordinator and should include contact information, professional affiliations, the topic/content of the public lecture, suggestions re: groups of individuals from CSD who might be particularly interested in attending, and dates that would work for the speaker.

1.2.4.2 Funding sources

1.2.4.2.1 Graduate Assistantships

A limited number of program teaching and research assistantships are available to all MA and AuD students. Note that other programs in the university offer graduate assistantships and many CSD MA and AuD students have traditionally taken advantage of these. CSD assistantship decisions are made on a semester-by-semester basis. Offers are based on several considerations:

- merit (i.e., academic performance)
- performance within the clinic
- skill set (e.g., Does student have background coursework or skills to TA a course?)
- student work habits: hard working, positive attitude, flexible, professional, etc.
- funding availability
- schedule (e.g. Is student available to TA when the course/lab is scheduled?)

All appointments require satisfactory performance of duties in teaching, research, or other assigned activities. To be eligible for an assistantship, the student must be enrolled full-time, described as at least 9 semester hours during each regular semester or at least 1 semester hour for post-comprehensive exam registrations. Students on conditional or probationary status, and those on clinical intervention plans, are not eligible for financial appointments.

Stipend payments are received by the student on the first day of each month, beginning on September 1 for fall appointments and February 1 for spring appointments. Students are required to complete a direct deposit form to have their check automatically deposited. If an appointment includes the payment of tuition, such payment is credited directly to the student's tuition bill. Students may be eligible for resident status and in-state tuition depending on the source of their funding. Questions about any aspect of the appointment should be addressed to the Department Chair or the Department Administrator.

A student who completes the MA or AuD degree but who then decides to continue in a PhD program is considered a "new" applicant as far as decisions relative to financial assistance are made and will be evaluated on a competitive basis with all other new applicants.

1.2.4.2.2 Student travel

The department is able to provide limited support for student travel. Requests for travel funding should be made to the Department Administrator in writing. Priority is given to students who are to present a paper or are otherwise on the program of a conference or meeting. The process for requesting these funds is provided at the beginning of the academic year.

1.2.4.2.3 Funding of student research

The department considers the funding of student research projects to be a high priority. For graduate students working on research projects towards a MA Thesis or AuD Capstone, graduate students work can with their thesis mentor or capstone advisor to request research funding. The process to request the funds and the amounts that may be requested is provided at the beginning of the academic year.

1.2.4.2.4 Graduate Student Senate Funding

GSS provides travel funding assistance to graduate students who present their research at conferences, meetings, symposia and similar professional or academic gatherings. More details can be found here:

<https://gss.grad.uiowa.edu/funding/gss-travel-funds>.

1.2.4.3 Student Organizations

1.2.4.3.1 The University of Iowa NSSLHA Chapter

The National Student Speech Language and Hearing Association (<http://www.nsslha.org/>) is the ASHA organization for students interested in human communication sciences and disorders.

The University of Iowa Chapter of NSSLHA was chartered in 1984 and assumed the duties and responsibilities of former department student associations. NSSLHA serves as the primary vehicle for representing student opinion and organizing social and professional student events.

The University of Iowa NSSLHA Chapter abides by national association bylaws but operates autonomously on a local level. National and local membership are both open to undergraduate, master's, AuD, and doctoral students. Although encouraged, national association membership is not required for students to participate in local chapter functions.

Each year, elections are held in which NSSLHA officers and committee representatives are chosen for the following year. NSSLHA officers determine policy regarding local membership dues and the organization and implementation of events for that calendar year. NSSLHA members can attend regular meetings and have the opportunity to learn, serve, and get together with peers.

1.2.4.3.2 The University of Iowa SAA Chapter

The Student Academy of Audiology (<https://saa.audiology.org/>) is the national student organization of the American Academy of Audiology that serves as a collective voice for audiology 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 University of Iowa's SAA chapter holds regular meetings and students hold elective offices within the organization, such as president, vice president, and so on.

1.3 Clinical Programs Expectations

Both programs are designed to prepare students to be licensed and certified clinicians who have a broad base of knowledge, skills, and attributes enabling them to work with various populations in a variety of settings. New students to the clinical programs in audiology and speech-language pathology participate in an orientation to clinical work which takes place in the week prior to the start of the students' first fall semester in the program. Topics of the orientation include readiness for clinic, policies regarding the clinic schedule, student success document, background check and compliances, code of ethics and beginning expectations for student clinicians, review of the clinic's nondiscrimination policy, clinic dress code, social media policy, as well as clinical learning and tracking progress. Specifics are provided below.

1.3.1 Beginning Expectations for Graduate Student Clinicians

Each student has unique culture, identity, and life experiences including those based on race, ethnicity, gender identity/expression, SES, immigration status, language use, disabilities, religious expression, veteran status among others. Sharing information about our department and clinic culture and expectations is a way to increase student success. Our culture is focused on collaboration, highest levels of evidence-based practice, and client/patient/family centered care. We also value diversity and inclusion in our students and client/patient populations. To be an effective clinician, students gather knowledge, skills, and attributes during graduate school. Expectations of students in clinical endeavors are:

- **Commitment to Learning:** Self-assess, self-correct and self-direct; identify needs and sources of learning; continually seek new knowledge and understanding; genuine interest in the clinic and your clients. This includes willingness to accept **constructive criticism** and **flexibility** in the learning process to develop skills.
- **Commitment to culturally responsive practice:** Openness to work with clients/patients and colleagues of a variety of cultural identities, including race, ethnicity, gender, SES, religious, disability, veteran status, age, immigration status and a willingness to self-reflect and learn about your own cultural identity.
- **Critical Thinking:** Question logically; identify, generate, and evaluate elements of logical argument; recognize and differentiate facts, illusions, assumptions and hidden assumptions; distinguish relevant from irrelevant.
- **Interpersonal Skills:** To interact effectively with patients, families, colleagues, other health care professionals and the community; work collaboratively with people who may have differing backgrounds and identities.
- **Communication Skills:** Communicate effectively (body language, reading, writing, listening) for varied audiences and purposes.
- **Problem-Solving:** Recognize and define problems, analyze data, develop, and implement solutions, and evaluate outcomes.
- **Patient confidentiality:** Students must comply with rules of patient confidentiality, HIPAA privacy laws, and refrain from discussing cases in any non-clinical environment.
- **Reliability and dependability:** Plan and complete clinic related tasks in a timely manner. For example, complete documentation within 1-2 working days of appointments, take initiative in planning for client/patient care and be knowledgeable of your clients'/patients' history prior to meeting with your clinical educator.
- **Professional Identity as a clinician** Present self in a manner consistent with policies of varied clinical environments and their patients/clients in terms of dress, personal hygiene, communication style, demeanor, and attitude). Professional behavior can vary based on the cultural background of the student and will be taken into consideration.
- **Use and understanding of universal precautions:** Although universal precautions were originally intended for doctors, nurses, patients, and health care support workers who were required to encounter patients or bodily fluids, these also apply to speech-language pathologists and audiologists.

1.3.2 UIOWA Student Success Document

This document describes department and campus-wide resources that are available to support student success in our graduate clinical training programs and outlines the core functions routinely performed by practicing speech-language pathologists (SLPs) and audiologists (AuDs) in a variety of settings. Core functions,

as distinguished from academic standards, refer to the cognitive, physical, and behavioral abilities, as well as attributes, that are necessary for satisfactory completion of all aspects of the curriculum. We acknowledge that many of these characteristics can be tied to a student's gender expression, race, ethnicity, and other life experiences. These abilities will be interpreted with an appreciation of the cultural context of the student and the patient/client.

All students entering the clinical programs are required to read through this document and consider their potential to achieve the core functions described. Students who anticipate difficulty performing these functions in either classroom or clinical settings are encouraged to seek out the necessary departmental and/or campus resources (including the Director of Clinical Programs or the Director of Graduate Studies) to ensure their success in the training programs. Each student will be asked to sign the Supporting Student Success in the UI CSD Programs document at the time of their initial registration in the program.

1.3.2.1 Dissemination

Students accepted to the professional audiology and speech-language pathology programs will be sent the UIOWA CSD student success document as part of the prospective student packet distributed prior to the start of graduate school. They will indicate receipt and understanding of the document by signing and returning the form. This document is also reviewed by students and their clinical educators during midterm and final reviews of each semester of the professional audiology and speech-language pathology programs.

1.3.2.2 Procedure for students who do not meet one or more of the core functions

Clinical educators review the Student Success document and how it relates to individual students at the beginning of the training program and during mid-term and final reviews. If a clinical educator identifies any core function not being met by a given student, the student's clinical educator will meet with the student to discuss the issue. During this meeting, the clinical educator will describe the area of need, explain why the core function is needed, and answer the student's questions to ensure that they understand the expectations. The clinical educator and student will develop and document a plan which:

- states which core function is not being met and how that was measured;
- specifically describes what is required to demonstrate that core function;
- identifies any specific barriers and develops concrete steps to address them;
- utilizes input from others (i.e., other clinical educators, Director of Clinical Programs, the student's academic advisor, CSD Department Chair, UI Student Disabilities Services, UI General Counsel);
- is placed in the student's record.

Successful completion of the plan allows the student to continue in the program.

1.3.3 Background check and compliances

A background check and compliances are required for healthcare students to work in any University clinic. This list of compliances and information regarding the process for background check will be sent to students by the Graduate Program Coordinator. It is expected that students complete these requirements prior to the start of classes.

1.3.4 Codes of Ethics

The accredited programs in audiology and speech-language pathology adhere to the codes of ethics developed by ASHA (<https://www.asha.org/code-of-ethics/>) and by the American Academy of Audiology (<https://www.audiology.org/clinical-resources/code-of-ethics/>). All students will review the code in various classes and clinical experiences throughout the clinical program.

1.3.5 Nondiscrimination Statement

The ASHA Code of Ethics includes a non-discrimination statement. The University of Iowa also has its own nondiscrimination statement (search for UIOWA nondiscrimination statement), as well as a Human Rights Policy (search for UIOWA human rights policy) that prohibits discrimination. From these statements and policies was created the Department of Communication Sciences and Disorders nondiscrimination statement.

1.3.5.1 Dissemination of the nondiscrimination statement

Accepted graduate students in clinical training programs will be sent the nondiscrimination statement as part of the prospective student packet distributed prior to the start of graduate school. They will indicate receipt and understanding of the statement by signing their name on the document and returning it to the Graduate Program Coordinator.

The Department applies these non-discrimination policies to its professional programs. The Department's programs provide opportunities for students to work effectively with a diversity of clients and presenting problems. Students in the professional programs will be held to the nondiscrimination policies in their interactions with all clients.

Students may present to the supervising instructor, director of clinical programs, or academic advisor concerns they have about the applicability of these policies to their training. The program administrators will consider religious accommodation requests on a case-by-case basis adhering to program procedures, considering all the relevant circumstances in each case.

1.3.5.2 Procedure for students who opt not to sign the nondiscrimination statement

Students should discuss their concerns with the Department Chair and/or the Director of Clinical Programs (AuD or SLP). Options will be provided to the student following a discussion among the relevant directors, administrators, and faculty members.

1.3.6 Other Policies

1.3.6.1 Dress code

Students should present themselves in a manner consistent with policies of varied clinical environments where they interact with their patients/clients. This includes personal hygiene and dress. For example, at the Wendell Johnson Speech and Hearing clinic, jeans or shorts may be allowed during some clinical experiences but must be approved by the clinical instructor. At a medical setting like UIHC, closed toed shoes are required. Some items (halter tops/cropped tops) may be among options that are not permitted as they do not provide the safe, supportive, and professional environment that our clients deserve.

1.3.6.2 Social media use policy

Graduate student clinicians will not engage in professional interactions on social media as it relates to their clients/patients and education. Students should not connect with clients/patients or their families on social media during the time of their graduate studies. There are situations in which friends and acquaintances on social media may become clients/patients in the clinic. In these circumstances, students should contact their clinical educators. For guidelines on ethical use of social media from ASHA, search ASHA ethical use of social media.

1.3.6.3 Practicum policies

Requirements for practicum registrations are defined by the following principles:

- a. The number of clinical contact hours and the amount and type of other activities required per practicum credit hour may vary *among different practicums*. This is due to inter- practicum differences in the amount and type of clinical experiences deemed necessary to provide adequate training in a given area. For purposes of academic planning, students typically obtain approximately 10-15 client/patient contact hours per semester hour of registration in a practicum. However, this guideline should not be interpreted as an absolute minimum or maximum requirement for any practicum.
- b. The number of clinical contact hours and the amount and type of other activities required per practicum credit hour may also vary *among students enrolled in the same practicum*, since practicum instruction should be individualized in relation to the needs and goals of specific students.
- c. Some activities are required for clinical training, but do not provide practicum hours for students.
- d. The Department of Communication Sciences and Disorders at the University of Iowa uses the Typhon System (web-based database) to track students' clinical experiences and contact hours. Training sessions are held each year for students new to the program.
- e. Clinical education is provided by individuals who hold their Certificate of Clinical Competence in either Audiology or Speech-Language Pathology and are licensed by the state in which the clinical placement is located. Clinical educators must have a minimum of nine months of full-time clinical experience and have completed at least two hours of professional development in clinical education/supervision.

1.3.6.3.1 Practicum enrollment by non-degree students

Graduate students on a non-degree status (special or professional improvement) are not guaranteed the opportunity to enroll for clinical practicum. Depending on the availability of clinical caseloads and on practicum enrollments of degree students during a given term, non- degree students may be allowed to register for clinical practicum if specifically approved by the Director of Clinical Programs and their faculty advisor, and the instructor of the particular practicum. Such approval will be given only in instances in which such enrollment will not affect the opportunities for practicum enrollment of students on a graduate degree status.

Professional improvement students will be given priority over those on special status regarding such practicum enrollments. The priority for clinical practicum is as follows: (1) professional MA and AuD students, (2) general MA and PhD students, (3) professional improvement students, and (4) special graduate students. Requests for registration by undergraduate students will be handled on an individual basis.

1.3.6.3.2 Clinic scheduling policy

The official semester typically begins about one week prior to the start of classes and typically ends about one week after final exams. It is expected that student clinicians will be available for clinical experiences and related training during the full semester. The clinical calendar is published and updated every year.

Students are required to be available through the end of finals week, when not taking examinations or carrying out teaching assistant or research assistant duties, to attend to the following:

- complete all clinic documentation;
- carry out all necessary follow-up appointments;
- ensure that all equipment has been delivered to the client/patient (or arrangements made to do so during or after the break).

Extenuating circumstances resulting in a student not being available for clinical assignments during any of

these times must be approved by the Director of Clinical Programs.

1.3.7 Student Support

The UI is committed to an educational experience that is accessible to all students. A student may request academic accommodations for a disability (such as motor, sensory, cognitive, mental health, or health-related conditions) by registering with the office of Student Disability Services (SDS). Students are encouraged to proactively arrange accommodation early in each semester. The student is then responsible for discussing specific accommodation with the instructor. More information is at <https://sds.studentlife.uiowa.edu/>.

A reasonable accommodation should not fundamentally alter the academic and clinical requirements of the CSD program, pose a direct threat to the health or safety of the student or others, or present an undue burden to the institution. Determining appropriate and reasonable accommodations is an interactive and collaborative process involving the student, the CSD program, the SDS and the General Counsel Office re: ADA compliance.

2 THE DOCTOR OF AUDIOLOGY PROGRAM

2.1 Accreditation, Certification & Licensure

The AuD program at the University of Iowa is accredited by the Council on Academic Accreditation (CAA). Graduates of this program meet all of the requirements for clinical certification by the American Speech-Language-Hearing Association and will be eligible for licensure in the State of Iowa. This program of study provides training that will allow students to function as an audiologist in any clinical environment.

Not specifically part of the program is the Praxis examination, which is required for ASHA certification. It is recommended that students take the Praxis examination prior to graduation.

2.2 Coursework for the AuD Program

Prerequisite undergraduate coursework required for graduation with an AuD degree can be viewed under the “Required Undergraduate Coursework” heading at <https://csd.uiowa.edu/graduate/doctor-of-audiology>.

A minimum of 89 semester hours is required for graduation with an AuD degree. The specific course requirements for the AuD program can be found at <https://catalog.registrar.uiowa.edu/liberal-arts-sciences/communication-sciences-disorders/doctor-of-audiology/#requirementstext>.

2.3 Clinic Placement and Progression

2.3.1 Orientation to clinical practice

All first year AuD students are expected to start working with clients/patients in the Audiology Clinic during their first semester in the AuD program. During that first semester of the AuD program, all students are required to participate in an “orientation to audiology clinical practice” course.

2.3.2 The Wendell Johnson Speech and Hearing Center – audiology clinic

During the first four semesters of the AuD program, including summer sessions, clinical training takes place in the in-house clinic. Clinical experiences focus on developing students as professional hearing health care providers for individuals across the lifespan and include general diagnostics including electrophysiological testing, aural (re)habilitation services including hearing aid and cochlear implant services, tinnitus assessment and management, hearing loss and tinnitus prevention services, and clinic management.

2.3.3 UISAFE (‘Sound Awareness for Everyone’) program

All students in the clinical program are required to become members of UISAFE. UISAFE is an outreach program which provides healthy hearing education and hearing screenings for the university, the local community, as well as at the county and state level. UISAFE partners with the University of Iowa School of Music, the College of Education, The Department of Public Safety, as well as the Recreation Department to provide healthy hearing educational classes. UISAFE works with local schools, businesses, and community groups to provide hands-on healthy hearing presentations and has a presence at the local county and state fair. In addition, UISAFE provides hearing and speech language screenings for local preschools. As a member of UISAFE, AuD students are required to assist with organizing and implementing hearing loss prevention and identification activities in the community.

2.3.4 Audiology clinic management team

Students in the clinical AuD program also participate in audiology clinic management. This experience helps individual students learn to manage and participate in clinic operations. This includes helping them understand the business aspects of running an audiology clinic; professional, ethical and legal issues;

accounting, marketing, compliance, billing, coding and reimbursement. These are skills they will use to help with the upkeep and management of the Wendell Johnson Speech and Hearing Clinic.

2.3.5 ‘Communication Explorers’ preschool

Communication Explorers Preschool is a summer preschool program for children with hearing losses housed in the Wendell Johnson Speech and Hearing Center. The goal of the program is to foster the development of communication skills in preschool children who are deaf or hard of hearing. Preschoolers participate in a combination of group and individual therapy sessions. Audiology student clinicians work with speech-language pathology student clinicians to provide care. Audiology students can participate in this program to complete their pediatric aural habilitation competencies during their first and/or year in the program.

2.3.6 Adult aural rehabilitation classes and services

Adult rehabilitative services are provided through the Wendell Johnson Speech and Hearing Center. Individuals who recently have been fitted with new amplification, or those who seek further information after using their devices for an extended period of time, and their families/friends are targeted for services. Students may provide these services in our clinic or in the community at locations such as assisted living facilities or the Iowa City Senior Center.

2.3.7 Clinical placements in the local community

During students’ second and third years in the program, they are placed in a variety of settings in the local area. At these placements they develop skills in a variety of clinical areas including general diagnostics, auditory brainstem responses testing, otoacoustic emission testing, hearing aids, cochlear implants, tinnitus assessment and management, vestibular assessment and management, and educational audiology. Opportunities provide experiences to work with individuals across the lifespan with diverse backgrounds, as well as those with varying abilities.

2.3.8 Fourth-year externship

During the final year in the clinical AuD program students are placed on a full-time basis at an external site. Our program has established relationships with many excellent sites across the U.S. Fourth year placements are competitive with the application process taking place the beginning of the third year in the program. Students work with the AuD Program Director throughout the application process to ensure that an appropriate site for clinical development and appropriate clinical instruction is found. Some 4th year externship sites require temporary licensure to practice in their state. Each state has different requirements. Specific information, including licensure application requirements is available at the ASHA website. Fourth year externs continue as a student in the department and register for the required 4th year courses during their externship. The Director of Clinical Programs in Audiology monitors the student’s progress toward graduation during their 4th year externship through monthly communications with the student and at least quarterly communications with preceptors.

2.4 Assessment Procedures for Audiology Students

The American Speech-Language-Hearing Association (ASHA) has established professional competencies students must master to be eligible for clinical certification in audiology. These competencies are outlined on a Knowledge and Skills Acquisition (KASA) form. Part of that form focuses on the didactic coursework students must receive. The other part focuses on the clinical training component.

2.4.1 Assessing didactic progress for audiology students

For academic coursework, instructors will assign a letter grade to each student based on the student’s

academic performance in the class. These letter grades are assigned numerical values on a 4-point scale. Successful completion of the AuD program requires that each student maintain a cumulative graduate GPA of 3.0 (grade of B) or higher.

Students who earn a grade lower than a B- for any of the individual courses required for graduation must work with the course instructor to develop an individual intervention plan to ensure that they master the material required for clinical practice as outlined on the didactic portion of the KASA form. That plan may include retaking part or all of a course during another semester, and as a result may prolong the time required for completion of the degree. Successful completion of the intervention plan will **not** result in a change in the grade earned by the student when they originally took the course.

Per Graduate College regulations, students who fall below the 3.0 GPA requirement will have one semester to raise their overall GPA above the minimum level. If unable to do so, they will not be allowed to continue in the program.

2.4.2 Assessing clinical performance for audiology student clinicians

At the start of the graduate program, AuD students are provided access to the *UI AuD Eval of Student by Clinical Instructor* (see Appendix B) which defines the clinical competencies required for graduation and the time frame in which clinical competencies should be acquired. At the end of each semester, clinical educators review each student's progress toward attaining the skill set necessary to function as a competent audiologist. Progress is documented on the evaluation form, which is stored in the Typhon database.

A grade of either 'Satisfactory' or 'Unsatisfactory' will be assigned based on the progress the student has made toward meeting the competencies outlined for the clinical rotations in which the student participated that semester. Details relative to how students are evaluated, graded, and (if necessary) remediated in terms of their performance of the clinical skills necessary to function as an audiologist are described below.

2.4.3 Grading

2.4.3.1 Satisfactory Grade

This designation indicates that the student has demonstrated solidly competent performance appropriate for his/her academic background and clinical experience level as outlined in the *UI AuD Eval of Student by Clinical Instructor form* and is also available in the online clinical education tracking system Typhon. The requirements to earn a 'Satisfactory' grade increase during the graduate program, with increasing independence and skills over time. Some of the knowledge, skills, and attributes required for a 'Satisfactory' grade may include:

- The student clinician functions effectively, with some supervisory assistance, in planning appointments, during diagnostic and treatment sessions, and in follow-through of clinical services.
- The student is effective in the application of background/academic knowledge to the clinical process.
- The student is familiar with the patient's history and/or current medical record and with diagnostic or therapeutic materials and procedures prior to each clinical session.
- Documentation is timely, thorough, complete, and requires only minor revisions.
- The student demonstrates substantial growth and change toward professional independence.
- The student recognizes clinical strengths and areas where improvement is needed and can generate ideas of how to implement change.
- It is projected that the student clinician will continue to learn and refine clinical skills, with decreasing amounts of supervision.
- No clinical competencies are below the level expected for the student's clinical experience.
- The student clinician develops attributes (e.g. flexibility, problem solving, clinical decision making,

active listening, counseling, ability to respond appropriately to patient including their nonverbal communication, etc.) that facilitate the delivery of patient/family-centered services.

- The student passes all clinical checkpoints which are implemented during each semester of the first and second year of the program.

2.4.3.2 Unsatisfactory Grade

This designation indicates marginally competent performance or poorer based on academic background and clinical experience as outlined on the *UI AuD Eval of Student by Clinical Instructor*. Some of the missing knowledge, skills, and attributes that can result in an 'Unsatisfactory' grade can include:

- The student clinician demonstrates difficulty applying and executing the fundamentals of the clinical process in planning appointments, during the diagnostic and treatment sessions, and in follow-through of clinical services.
- The student does not independently apply background/academic knowledge to the clinical process.
- The student is not consistently familiar with or does not exhibit the ability to integrate the patient's history and/or current medical record information with diagnostic or treatment materials and procedures prior to each clinical session.
- Documentation is not consistently timely, informative, thorough, or complete. It requires substantial revisions in both professional language and content.
- The student needs more than usual supervision and direction relative to academic background and clinical experience as outlined on the *UI AuD Eval of Student by Clinical Instructor*.
- The student may recognize only some areas in need of improvement. It is projected that the student clinician may continue to need more than the usual amount of supervision with similar patients.
- One or more clinical competencies are below the level expected for the student's clinical experience.
- Student does not exhibit attributes (e.g. flexibility, problem solving, clinical decision making, ability to respond appropriately to client including their nonverbal communication, active listening, counseling etc.) that facilitate the delivery of patient-centered care.
- The student does not pass one or more clinical checkpoints during their program.

2.5 Support plans for AuD students

2.5.1 Clinical Action Plan (CAP)

A Clinical Action Plan (CAP) is required for students who have not made sufficient progress toward meeting their competencies during a clinical practicum experience. Determination of the need for a CAP will be made by the student's clinical educator and the Director of Clinical Programs - Audiology. Other clinical educators may be consulted.

The CAP will be put in place immediately following the midterm of the semester in which the student is not making sufficient progress. The CAP identifies areas in need of improvement and includes specific goals which describe behaviors that need to be demonstrated for successful completion of the clinical rotation.

The CAP will be put in place immediately following the midterm of the semester in which the student is not making sufficient progress. The CAP identifies areas in need of improvement and includes specific goals which describe behaviors that need to be demonstrated for successful completion of the clinical rotation.

CAPs are written by the clinical educator working with the student showing limitations in progress. The student's clinical educator will review the CAP with the student after which the student will sign the CAP indicating that the CAP was reviewed, the student was provided a copy, and had the opportunity to ask

questions regarding the CAP. The Director of Clinical Programs may be involved in the review of the CAP. If the student chooses not to sign the CAP, clinic activities will be terminated, and an ‘Unsatisfactory’ grade given for the term.

Other clinical educators, including the Director of Clinical Programs, may assist the primary educator by providing additional supervision during the remainder of the semester. The student will carry a typical clinical caseload and academic registration during the time a CAP is in place.

If goals are not met and sufficient progress is not made toward competencies by the deadline specified in the CAP, the student will receive an ‘Unsatisfactory’ grade. A student who receives a grade of ‘Unsatisfactory’ will not receive clinical clock hours toward ASHA or AAA certification, or UI credit hours toward graduation for that clinical assignment. The student will be placed on clinical probation if this is the first ‘Unsatisfactory’ grade received for a clinical placement.

2.5.2 Clinical probation

If a student earns an ‘Unsatisfactory’ grade in Clinical Rotations in Audiology (CSD:5315) or Advanced Externship in Audiology (CSD:6316), the student is placed on clinical probation and a Clinical Intervention Plan (CIP) is established (see below). Withdrawal from a course due to poor clinical performance will be considered equivalent to an ‘Unsatisfactory’ grade. If a student achieves the goals on the CIP the following semester and receives a grade of ‘Satisfactory’, the student will be removed from clinical probation.

The student must earn a ‘Satisfactory’ grade in CSD:5315 or CSD:6316 the following semester to continue in the clinical program. An ‘Unsatisfactory’ grade may result in an extension of the student’s program.

2.5.3 Clinical Intervention Plan (CIP)

The Clinical Intervention Plan (CIP) is for students who have not made sufficient progress toward meeting clinical competencies and have been placed on clinical probation.

Determination of the need for a CIP will be made by the clinical educator and the Director of Clinical Programs - Audiology. The CIP will be put in place immediately following the semester in which a student earned a ‘Unsatisfactory’ or ‘Incomplete’ for their clinical assignment. The CIP identifies areas in need of improvement and includes specific goals which describe behaviors that need to be demonstrated for successful completion of the clinical rotation.

CIPs are written by the clinical educator who worked with the student during the semester in which the student earned the ‘Unsatisfactory’ grade. The student’s clinical educator will review the CIP with the student. The student will sign the CIP indicating that the CIP was reviewed, and that the student was provided a copy and had the opportunity to ask questions regarding the CIP. Both the Director of Clinical Programs–Audiology and the clinical educator who will be working with the student when the intervention plan is in place will review the CIP. If the student chooses not to sign the CIP, clinic activities will be terminated.

The student will carry a typical clinical caseload and academic registration during the time a CIP is in place. If goals are not met and sufficient progress is not made toward competencies as described in the CIP, the student will receive an ‘Unsatisfactory’ grade. A student who receives a grade of ‘Unsatisfactory’ will not receive clinical clock hours toward ASHA or AAA certification or UI credit hours toward graduation for that clinical assignment.

Two ‘Unsatisfactory’ grades in a student’s program will result in dismissal from the Clinical AuD program. An ‘Unsatisfactory’ grade in the semester prior to the student’s fourth year externship may result in a decision to

cancel or postpone that placement. An 'Unsatisfactory' grade in the final semester of the fourth-year externship will impact graduation.

Should a student not meet a clinical competency related to Ethics, an intervention plan will be implemented to assist the student in meeting this competency. The plan may include the following strategies:

- discussion of the problem, assessment of legal and ethical issues, determination of who is affected; identification of options, reflection (Hamill & Friedland, 2004);
- ethical bracketing (Kocet & Herlihy, 2014) to assist the student in self-reflection;
- addressing value-based conflicts using the decision-making model (Kocet & Herlihy, 2014);
- guided clinical observations;
- paired intervention with clinical educator or another graduate student clinician.

2.6 Formative and summative assessment of AuD students

2.6.1 *Formative assessments*

- Clinical Checkpoints each semester during the first and second years.
- Review of clinical competencies at the end of each clinical experience.

2.6.2 *Summative assessments*

- Review of clinical competencies at the end of the third year.
- Qualifying exams during the first and second years.
- Completing all Capstone requirements.

All AuD students must pass a qualifying examination at the end of each of the first two years of their study toward the AuD. A passing score on this examination is 80%. The purpose of this examination is to ensure that the student is making appropriate progress through their AuD program and that they retain the knowledge acquired in previous years. Toward that end, students are tested on the material they have covered in classes and clinic up to that point (i.e, first-year students are tested only on content covered during the first year; second-year students are tested on information from the first two years). Students who score less than 80% on either of the two qualifying examinations must submit a written declaration to the DCP-AuD requesting an opportunity to repeat the qualifying exam. This declaration must be submitted before the student is able to enroll in their next semester of course work.

If a request to repeat the qualifying exam is received, the qualifying exam committee will specify the date by which the repeat exam must be completed. In accordance with the regulations of the Graduate College, this re-examination may occur no sooner than the beginning of the following term. Students are allowed to retake the qualifying examination only once. A second failure will result in dismissal from the AuD program.

2.6.3 *Clinical competencies*

All AuD students must demonstrate the clinical competencies described in the current ASHA CAA and CFCC standards to graduate. At the end of each clinical experience the clinical competencies that are expected for the student's level of experience and those achieved by the student are reviewed with the student by the student's clinical instructor. The Director of Clinical Programs – Audiology monitors students' progress towards obtaining competencies each semester and can adjust clinical assignments based on progress.

2.6.4 *Capstone Project*

AuD students are not required to complete a Comprehensive written Examination at the end of their academic program (see <https://grad.uiowa.edu/academics/manual/academic-program/section-xii-doctors-degrees>, Section I). Instead, all students enrolled in the AuD program are expected to successfully complete a

“Capstone Project” prior to graduation. A major goal of the AuD program is to produce well-rounded students ready to take their place as leaders in the profession of audiology. The capstone project plays an important role in this process by helping students experience the scientific underpinnings of evidence-based practice in our profession. The capstone project is intended to help students understand the process of asking questions, collecting data, evaluating evidence, and disseminating findings. The capstone project also fulfills the summative assessment requirement of the graduate college.

2.6.4.1 Successful Capstone Completion

“**Successful Completion**” means that A) the student has satisfactorily completed all requirements described below and B) that completion has been verified by the Capstone Mentor to the Capstone Advisor.

Deadline. All students enrolled in the AuD program must successfully complete a Capstone Project prior to graduation, specifically by **February 1 of the spring semester in which the student will graduate**. For example, if a student is planning to graduate in May of a particular year, the student’s capstone must be successfully completed by February 1 of that year. If the capstone is not officially completed by this date, the student will earn an “Incomplete” grade for the CSD:6312 Professional Issues in Audiology II and Capstone course and postpone your official graduation until the next University graduation date following completion of the capstone. If a student fails to complete the capstone requirements by February 1 of the year the student is scheduled graduate, the following remediation plan will be put into effect:

- The student will still present their Audiology Case Study at the Departmental Graduation.
- The student must register for 1 SH of Problems: Speech and Hearing Processes and Disorders with their capstone mentor the summer following the May graduation date. (The 1 SH is also a requirement of the Graduate College.)
- The student will continue working on their Capstone paper until it is completed.
- Once the capstone requirements have been met, along with all other graduation requirements, including a grade change from “Incomplete” to ‘Satisfactory’ for the CSD:6312 Professional Issues in Audiology II and Capstone course, the CSD Department will notify the Graduate College. A Letter of Completion can be issued by the Graduate College, assuming the requirements have been completed prior to the summer deadline.

Although the official completion date is February 1 of the spring semester in which the student expects to graduate, all students are ***STRONGLY encouraged to finish their capstone prior to leaving for their 4th year placement.***

2.6.4.2 Capstone Mentor

The Audiology program has a Capstone Advisor who will meet with the student throughout the first year of the program to help the student to identify an area of interest and an appropriate capstone mentor to work with. Each student must select a Capstone Mentor who agrees to work with them on their capstone project. The Capstone Mentor can be tenure track, clinical track, or instructional tract faculty, but must be a current audiology faculty member at the University of Iowa with a primary appointment in the Department of Communication Sciences and Disorders (CSD).

For those students who apply for and are accepted to do a T35 Training Grant project, it should not be assumed that the project will count towards the capstone project since the Capstone Advisor needs to be an Iowa CSD audiology faculty. In all cases, special permission must be obtained from the CSD audiology faculty and the Capstone Advisor before T35 conducted research can count towards the capstone project.

2.6.4.3 Capstone Topic

The capstone topic is chosen in collaboration with the Capstone Mentor. Students are welcome to come up with their own topics and present them to their mentor for consideration. Based on areas of expertise, current workload, and other factors, a mentor may accept, propose modifications, or reject student capstone ideas. Students should NOT have the expectation that they can do any project that they wish. Student-driven ideas will be developed and modified in consultation with the mentor. Some student ideas may be unfeasible given the amount of time, financial, and other resources available. Regardless of the specific topic, the capstone project should meet the goal of helping the student experience and understand the scientific underpinnings of evidence-based practice in audiology.

Students are not required to come up with their own capstone project. If students do not have their own ideas, they should ask their mentor for ideas that they may use for their capstone. Capstone projects may be stand alone, or they may be part of a larger project. However, even if projects are closely related, every student must have their own project—the capstone project is not intended to be a group project.

2.6.4.4 Project Type

The capstone project must be one of the following types: A) Traditional data-driven research project, B) Data-driven clinical project (such as setting up a hearing conservation program in the schools), C) A critical review of the published literature addressing a specific clinical topic. Type A (traditional data-driven) may include all or part of the standard research process. For example, one project might focus on data collection and basic analysis, while another project might use previously collected data and focus on advanced processing, analysis, and presentation.

Students should choose the project type in consultation with their primary mentor. If a project (options A or B) is desired, it is highly recommended that the project starts by the start of the fall of the student's 3rd year. Years of experience suggest that a meaningful project cannot be completed on a shorter time frame. If the project is not started by then, the student is encouraged to choose option C and do a literature review.

2.6.4.5 Capstone Paper

Regardless of capstone topic or type, all students are required to produce a written document describing their project. Students are encouraged to consult their primary mentor to determine the appropriate formatting and length of the paper. The capstone paper is not a thesis or dissertation, so the specific written requirements for the written paper will be determined by the mentor. Note that the deadline for FINAL paper approval is February 1 of the spring semester in which the student will graduate (as listed in Section 2.6.4.1 above).

2.7 Graduation Procedures

Shortly after the beginning of the final term of enrollment, the student and their advisor or the Director of AuD Studies will meet to complete a Plan of Study Summary Sheet. The Director of Clinical Programs-Audiology (DCP-AuD) and the Program Director of AuD will document that each student has successfully met clinical and didactic competencies, as defined by the current ASHA CFCC and CAA standards, as well as the number of clinical hours each student has successfully completed. This information will be used to document that the student is eligible for the Certificate of Clinical Competence in Audiology.

AuD degrees are awarded upon the favorable recommendation of the examining committee, approval of the Department Chair and approval by the Graduate College.

To receive a degree in any given semester, the student must have filed an Application for Graduate College

Degree form for that semester. If they also wish to participate in commencement activities, they must register for commencement. The deadline date for such filing is specified by the Registrar and is typically early in the semester. *It is the responsibility of the student to see that these and other required procedures are completed at the appropriate times.*

For more information on how to apply for the degree and participate in commencement activities, see the following links:

- Degree application - <https://registrar.uiowa.edu/degree-application>
- Commencement - <https://commencement.uiowa.edu/>.

2.8 Combined AuD/PhD

2.8.1 *Application Procedure*

The University of Iowa also offers a combined AuD/PhD degree. For details about the PhD program, see the PhD Program Director and the PhD Program Graduate Handbook. Individuals wishing to pursue this degree are required to apply initially to the AuD program and to discuss this option with their advisor. At the end of the second year of the AuD program, the student will submit their application materials to the Departmental PhD Admissions Committee. Admission to the PhD program depends on: a) the student making adequate progress toward the AuD; b) the availability of a tenured or tenure track faculty member who has agreed to serve as the PhD advisor of the student; c) the availability of funding. If recommended by the PhD Admissions Committee and approved by the faculty as a whole, the student and their mentor will form a planning committee who will help the candidate merge the two curricula efficiently.

2.8.2 *Requirements*

- For students with an undergraduate background in this field who wish to pursue work toward a combined AuD/PhD, it is estimated that completion of combined AuD/PhD degree will take approximately 7 years.
- Students, along with their planning committee members, will determine how the clinical practicum rotations will be interleaved with PhD coursework.
- If a sufficient enough project, the AuD Capstone project can be deemed sufficient by the student's PhD mentor, and can serve as a pre-dissertation project for the PhD.

3 MASTERS IN SPEECH-LANGUAGE PATHOLOGY (MA-SLP)

3.1 Accreditation, Certification & Licensure

The MA-SLP program the University of Iowa is accredited by the [Council on Academic Accreditation](#). Graduates of this program meet all requirements for clinical certification by the American Speech-Language-Hearing Association and will be eligible for licensure in the State of Iowa. This program of study provides training that will allow students to function as a speech pathologist in any clinical environment.

Not specifically part of the program is the Praxis examination, which is required for ASHA certification. It is recommended that students take the Praxis examination prior to graduation.

3.2 Coursework for the MA-SLP Program

Prerequisite undergraduate coursework required for graduation with an MA degree can be viewed under the “Required Undergraduate Coursework” heading at <https://csd.uiowa.edu/graduate/ma-speech-pathology-audiology>.

The specific course requirements for the MA program can be found at <https://catalog.registrar.uiowa.edu/liberal-arts-sciences/communication-sciences-disorders/speech-pathology-audiology-ma/#requirements-text>.

3.3 Thesis Option

All MA students have an opportunity to pursue an independent research project as a part of their MA program. Students interested in completing a thesis should speak with their academic advisor about their interest. It is recommended that students speak with a number of faculty members about their research in order to identify a thesis mentor appropriate to their interests.

Students should begin their thesis by the beginning of the first spring semester. Thesis students will be required to take 4 credits of research (CSD:7590) over the course of their program, which will count as elective (menu) credits. Thus, thesis students will only be required to take a minimum of 6 (rather than 10) credits of other elective courses.

3.4 Clinic Placement and Progression for MA-SLP Students

Students will complete a survey prior to the beginning of the graduate program indicating their interest in specific clinical areas. The Director of Clinical Programs (DCP)-SLP will use this information to create a progression for students through the clinical program.

Typically, clinical assignments progress as follows:

- Students will be assigned to one clinical educator in their first fall semester for 2 to 2.5 hours per week of clinical experiences.
- During the spring semester of the first year, students will be placed on two clinical teams for about 4-6 hours of clinical experiences.
- Students will be assigned to two new clinical educators in the summer. Summer programming may include camps as well.
- In the fall of their second year, students will be placed on one clinical team. During this time, students will have the option of completing mini-placements or other in-house clinic in areas of their interest.
- Students will complete their externships in their 2nd spring semester before graduation.

There may be options for extra clinical placements starting from the first spring semester, depending on availability and student interest. Based on insurance and CAA/CFCC regulations, sessions may be involved in

face-to-face or online teletherapy services.

3.5 Assessment Procedures for MA-SLP Students

The American Speech Language and Hearing Association has established competencies students must master if they want to be eligible for clinical certification in Speech Pathology. These competencies are outlined on a Knowledge and Skills Acquisition (KASA) form. This form includes both didactic and clinical competencies that are required to be developed.

3.5.1 *Assessing didactic progress for MA-SLP students*

For academic coursework, instructors for each class will assign a letter grade to each student using a 4-point scale. Successful completion of the MA program requires that each student maintain a cumulative graduate GPA of 3.0 or higher. Students who earn a grade lower than a B- for any of the courses required for graduation must work with the course instructor to develop an individual intervention plan to ensure that the student demonstrates knowledge and skills as outlined on the didactic portion of the KASA form. That plan may include remediation, retaking part or all of a course during another semester, and as a result may prolong the time required for completion of the degree. Successful completion of this additional requirement will *not* result in a change in the grade earned by the student when they originally took the course.

Per Graduate College regulations, students who fall below the 3.0 GPA requirements will have one semester to raise their overall GPA above the minimum level. If they are not able to do so, they will not be allowed to continue in the program. Earning a grade below a B- during two semesters will also result in dismissal from the MA program.

3.5.2 *Assessing clinical progress for MA-SLP students*

During clinical teaching, feedback and opportunities for reflection and self-evaluation are provided throughout the semester. At mid-term and at the end of each semester, clinical educators will provide evaluative feedback to the students regarding their progress toward attainment of skills necessary to function as a speech language pathologist. For each clinical rotation (including rotations in the in-house training clinic and at clinical externship sites) a grade of either 'Satisfactory' or 'Unsatisfactory' will be assigned based on the progress the student has made toward meeting the competencies outlined on the clinical portion of the KASA (see Appendix C). Details relative to expectations for students including the process of evaluation, grading, and (if necessary) remediation for clinical skills necessary to function as a speech/language pathologist are described below.

3.5.3 *Grading*

Each student will receive 'Satisfactory' or 'Unsatisfactory' grades in all clinical practica, including in-house and external assignments. Students will receive regular feedback, including evaluative feedback at mid-semester to ensure that they are aware of their progress towards the required clinical skills. If there are concerns regarding student progress in clinical practicum, clinical educators will communicate with the Director of Clinical Programs SLP and academic advisors. A clinical action plan (see section 4.7.1) can be initiated at any time in the program to provide students with the support required for their success.

General procedures performed by the clinical educators (to be completed in this order):

- a) At the end of each semester, clinical educators will complete individual KASA forms for each student clinician on their team.
- b) Clinical educators will meet with each of the student clinicians on their team to provide feedback on KASA competencies in their respective areas.

- c) Clinical educators including the Director of Clinical Programs-Speech-Language Pathology (DCP-SLP) will meet to collectively determine a single final grade for each student clinician. (The final meeting is typically scheduled for Monday of Finals Week.) Clinical instructors in external placements will provide their feedback to the DCP-SLP prior to this meeting.
- d) Letters from the DCP-SLP communicating each student clinician's grade (e.g., S or U) will be distributed to each student clinician during Finals Week.

If a student clinician receives an 'Unsatisfactory' evaluation, the student clinician will meet with the DCP-SLP no later than 5:00 pm on Friday of Finals Week. The student's academic advisor may be involved in this meeting as well.

As mentioned above, all clinical educators who have supervised a student in each semester collectively determine one overall grade for that semester. Therefore, a student may receive an overall grade of 'Unsatisfactory' for the semester, even if the student has received 'Satisfactory' performance feedback in some clinical placements. Similarly, a student may receive an overall grade of 'Satisfactory' for the semester, even if the student has received 'Unsatisfactory' performance feedback from some clinical educators.

3.5.3.1 Satisfactory Grade

This designation indicates that the student has demonstrated solidly competent performance appropriate for their academic background and clinical experience level as outlined on the Knowledge and Skills Acquisition (KASA) form. The requirements to earn a 'Satisfactory' grade increase during the course of the graduate program, with increasing independence and skills over time. Some of the knowledge, skills, and attributes required for a 'Satisfactory' grade may include:

- The student clinician can function effectively, with some supervisory assistance, in planning, evaluations, treatment, and related administrative and recording. .
- The student is effective in the application of background/academic knowledge to the clinical process.
- The student is familiar with the client's history and/or current file and with diagnostic or therapeutic materials and procedures prior to each clinical session.
- Paperwork is timely, complete, and thorough and requires only minor revisions.
- The student demonstrates substantial growth and change toward independence.
- The student recognizes clinical strengths and areas where improvement is needed and can generate ideas of how to implement change.
- It is projected that the student clinician will continue to learn and refine clinical skills, with decreasing amounts of supervision. No KASA competencies are below the level expected for the student's clinical experience.
- The student clinician develops attributes (e.g. flexibility, problem solving, clinical decision making, ability to respond appropriately to client including their nonverbal communication, active listening, counseling etc.) that facilitate the delivery of client-centered services.

3.5.3.2 Unsatisfactory Grade

This designation indicates marginally competent performance or poorer based on academic background and clinical experience as outlined on the KASA form. Some of the missing knowledge, skills, and attributes that can result in an 'Unsatisfactory' grade can include:

- The student clinician demonstrates difficulty applying and executing the fundamentals of the clinical process in planning, evaluations, treatment, and related administrative and recording.
- The student does not independently apply background/academic knowledge to the clinical process.

- The student is not consistently familiar with or does not exhibit the ability to integrate the client's history and/or current file and with diagnostic or therapeutic materials and procedures prior to each clinical session.
- Paperwork is not consistently timely, complete, and informative. Reports are not consistently timely and thorough and require substantial revisions in both professional language and content.
- The student needs more than usual supervision and direction for academic background and clinical skills as outlined on the KASA form.
- The student may recognize only some of the areas in need of improvement. It is projected that the student clinician may continue to need more than the usual amount of supervision with similar clients.
- One or more KASA competencies are below the level expected for the student's clinical experience.
- Student does not exhibit attributes (e.g. flexibility, problem solving, clinical decision making, ability to respond appropriately to client including their nonverbal communication, active listening, counseling etc) that facilitate the delivery of client-centered care.

An 'Unsatisfactory' grade will result in the student being placed on clinical probation and will likely result in an extension of the student's program. A student who receives a grade of 'Unsatisfactory' will not receive clinical clock hours, competencies or UI credit hours toward graduation and ASHA certification for that clinical assignment. Two overall 'Unsatisfactory' grades in a student's program will result in dismissal from the Clinical Master's program.

Exceptions may be made at the discretion of the DCP (SLP) in consultation with clinical educators, department chair, and/or student's academic advisor.

An 'Unsatisfactory' grade in the semester prior to the student's final (externship) semester may result in a decision to cancel or postpone the student's externships. This decision will be made by the DCP-SLP, in consultation with the clinical educators, department chair, and/or student's academic advisor.

3.6 Outplacements

Each student will complete the equivalent of two full time outplacements/externships in the last semester(s) of their graduate program. These typically are 8 to 10 weeks in length and can be scheduled in any place of student's interest. Ideally, students will complete a pediatric and an adult placement, or a school and non-school placement based on the student's ultimate career interests. The Director of Clinical Education SLP will meet with the students individually to plan these outplacements. Exceptions to the duration and timing of the outplacement can be made based on student need to ensure student success and growth in the program.

Mini outplacements are opportunities in the community that are available in the Summer or 2nd year Fall semesters. These are discussed during the Foundations 2 class in the Spring of the first year. Mini outplacements occur in the local community and are for about half a day per week.

3.6.1 *Grading*

Similar to the in-house practicum grading, outplacement and mini-outplacement supervisors providing evaluative feedback using the KASA form (appendix C) shared with them. Students can receive a 'Satisfactory' or 'Unsatisfactory' grade for their outplacement. Similar to in-house practicum, students may receive feedback, including evaluative feedback during the course of their outplacement. The DCP-SLP will be in contact with the outplacement clinical educator on a regular basis to discuss strategies for student success if any concerns arise. The final decision regarding the grade for outplacements is made in consultation with the clinical educators within the department. The outplacement grade provided is considered in this decision-making process.

If a student receives an 'Unsatisfactory' grade during their externship, the student will not receive clinical clock hours, or UI credit hours toward graduation and ASHA certification for that clinical assignment. Efforts to find other externships will be made, if warranted.

3.7 Student support plans for MA-SLP students

3.7.1 Clinical Action Plan (CAP)

If a student demonstrates specific areas of concern, a Clinical Action Plan (CAP) will be developed. The CAP can be put in place at any time during the semester following a discussion between the relevant clinical educator(s), DCP-SLP and the student. Determination of the need for a CAP will be made by the clinical educator supervising the student and the DCP-SLP. Other clinical faculty may be consulted. If a student demonstrates an area of weakness at the end of the semester, but receives an overall 'Satisfactory' grade, a CAP can be initiated for the following semester.

The CAP will identify areas of weakness and specific goals will be written by the DCP-SLP in collaboration with other clinical educators and the student. This document will be reviewed, discussed and signed by the student, supervising clinical educators, and DCP-SLP. A student signature indicates that the information was shared, the action plan was understood, and agreed upon. In addition, other clinical educators may assist the primary supervisors by providing additional supervision.

When possible, two clinical educators will supervise the student who has a CAP. If goals are not met and sufficient progress made toward competencies, the student will receive an 'Unsatisfactory' grade and be placed on clinical probation.

A CAP may be created during an externship by the supervising clinician, DCP-SLP, and the student. Similar procedures to those described above will be followed, when possible.

Any documented clinical accommodations can be considered in the development of a CAP, but is not included in the CAP.

3.7.2 Clinical Probation

A student can be placed on clinical probation if they receive an 'Unsatisfactory' grade for clinical practicum in any semester of their program. Once a student has been placed on clinic probation:

- The student will register for CSD:5301 Clinical Practicum and will carry a typical clinical caseload.
- Being placed on clinical probation will likely extend a student's program by at least one semester.
- A clinical intervention plan (CIP) will be developed for the student in collaboration with the student, clinical educators, and the DCP-SLP.
- If a student achieves the goals on the CIP described below and receives a grade of 'Satisfactory,' the student will be removed from clinical probation. If the student does not achieve the CIP goals and does not receive a grade of 'Satisfactory', the student will be dismissed from the MA-SLP program.
- If a student is placed on clinical probation a 2nd time during their graduate program, they will be dismissed from the MA-SLP program.

3.7.3 Clinical Intervention Plan (CIP)

A Clinical Intervention Plan (CIP) will be created for a student if they have been placed on Clinical Probation OR if they have had multiple CAPs for the same area of concern. The CIP is similar to the CAP in that it will identify areas of weakness, and specific goals will be written by the DCP-SLP in collaboration with the student and clinical educators. Other clinical faculty members may assist the primary supervisors by providing additional supervision. Like the CAP, this document will be reviewed, discussed and signed by the student, supervising

clinical educators, and DCP. A student signature indicates that the information was shared, the action plan was understood, and agreed upon. Any documented clinical accommodations can be considered in the development of a CIP, but the accommodations are not included in the CIP.

When possible, two clinical educators will work with the student who has a CIP, unless reducing the student's clinical load is part of the CIP. If CIP goals are not met and sufficient progress made toward competencies, the student will receive an 'Unsatisfactory' grade. If a student receives two 'Unsatisfactory' grades, they will be dismissed from the program.

3.7.4 *Withdrawal from Clinical Practicum*

A student may withdraw from a clinical registration following a conversation with their clinical educator, DCP-SLP, and/or academic advisor. Doing so will extend the graduate program by at least one semester to demonstrate competencies and obtain hours as required for ASHA certification. If a student needs to withdraw from clinic registration more than once, this may result in dismissal from the MA-SLP program. There are also graduate program guidelines for withdrawal from classes that will be taken into consideration.

3.8 Formative and summative assessment of MA-SLP students

MA SLP students will complete a formative comprehensive assessment at the beginning of their first Fall, Spring and second fall semesters and a summative, comprehensive assessment at the end of the second Fall semester. Information in the first formative assessment conducted in the first fall semester prior to the start of the semester will include information from pre-requisite undergraduate courses that students are expected to have completed. The 2nd formative exam, conducted prior to the start of the spring semester of the first year, will include information from undergraduate courses as well as required courses from the first semester of graduate school. Similarly, the 3rd formative assessment will include information from all required courses till the start of the fall semester of the 2nd year and undergraduate pre-requisite courses. Students will receive their scores immediately upon finishing the examination. Detailed information regarding areas of performance that their scores were lower will be provided to students in meetings with their advisors. The final summative exam will be conducted at the end of the fall semester of the 2nd year for students, prior to outplacements. These may change in extenuating circumstances if there are differences to a student's plan of study. Students completing a thesis will not be required to complete the comprehensive examinations.

3.9 Graduation Procedures

To receive a degree in any given semester, the student must have filed an Application for Graduate College Degree form for that semester. If they also wish to participate in commencement activities, they must register for commencement. The deadline date for such filing is specified by the Registrar and is typically early in the semester. *It is the responsibility of the student to see that these and other required procedures are completed at the appropriate times.*

For more information on how to apply for the degree and participate in commencement activities, see the following links:

- Degree application - <https://registrar.uiowa.edu/degree-application>
- Commencement - <https://commencement.uiowa.edu/>.

4 APPENDICIES

4.1 Professional Standards

The Department of Communication Sciences and Disorders at the University of Iowa abides by the ASHA and AAA codes of ethics.

American Academy of Audiology (AAA) Code of Ethics

<https://www.audiology.org/publications-resources/document-library/code-ethics> (effective February 2018, revised April 2023)

American Speech-Language-Hearing Association (ASHA) Code of Ethics

<https://www.asha.org/Code-of-Ethics/> (effective March 1, 2016, revised March 1, 2023)

Council for Clinical Certification in audiology and speech-Language pathology (CFCC)

The CFCC is a semi-autonomous credentialing body of the American Speech-Language-Hearing Association (ASHA). The charges to the CFCC are:

- to define the standards for clinical certification and to apply those standards in granting certification to individuals;
- to have final authority to withdraw certification in cases where certification has been granted on the basis of inaccurate information; and
- to administer the certification maintenance program.

For Audiology, see: <https://www.asha.org/certification/2020-audiology-certification-standards/> (effective January 1, 2020, revised 2022)

For Speech-Language Pathology, see: <https://www.asha.org/Certification/2020-SLP-Certification-Standards/> (effective January 1, 2020; revised 2022)

Council on Academic Accreditation (CAA) Standards

The CAA is a semi-autonomous body of ASHA, which establishes and enforces a set of standards for the voluntary accreditation of graduate education programs in audiology and in speech- language pathology, and reviews programs on a regular basis to ensure that standards are maintained. The CAA is recognized as an accrediting agency for audiology and speech-language pathology programs by the Council for Higher Education Accreditation and the U.S. Department of Education.

See: <https://caa.asha.org/siteassets/files/accreditation-handbook.pdf>;

<https://caa.asha.org/siteassets/files/accreditation-standards-for-graduate-programs.pdf>.

4.2 Appendix B: UIOWA CSD AuD Student Evaluation Form

2023 ASHA CAA Standard 3.1A and 2020 ASHA CFCC Standard II

CFCC competencies are embedded within the CAA competences.

Use *Description of Student Clinical Competencies – 2023 ASHA CAA Standard and 2020 ASHA CFCC Standard II* as a reference when evaluating your student. If you have questions regarding the clinical skill requirements or how to evaluate your student, please contact the Director of Clinical Education in Audiology at The University of Iowa, Department of Communication Sciences and Disorders.

Student:

Clinical Instructor:

Clinical Site:

Date:

Overall Student Performance:

Rate the student's overall performance as satisfactory or unsatisfactory based on the descriptions below.

Satisfactory – Student demonstrates expected skills in the area based on clinical experiences to date and is expected to be able to function as an effective, well-educated and competent clinician in this area when the student begins independent practice as a professional in the field.

Unsatisfactory – Student does not demonstrate expected skills in this area based on clinical experiences to date and is not expected to be able to function as an effective, well-educated and competent clinician in this area when the student begins independent practice as a professional in the field.

____ Satisfactory

____ Unsatisfactory

Use the following rating scale to answer the questions below.

1 = Strongly Disagree with the statement

2 = Disagree with the statement

3 = Neutral

4 = Agree with the statement

5 = Strongly Agree with the statement

____ The student successfully met the expectations of the placement during this review interval.

____ The student demonstrated the knowledge and skill base necessary to succeed in the placement during this review interval, or, in the case of the final review of a 4th year extern, to begin professional practice in field.

____ The student demonstrated the ability to quickly learn and apply new clinical skills related to the placement during this review interval, or, in the case of the final review of a 4th year extern, necessary to begin practice in the field.

____ The student demonstrated appropriate professionalism during this review interval, or, in the case of the final review of a 4th year extern, to begin practice in the field.

Please use the following rating scale to indicate how would you rank the student relative to others with the same similar experience.

(1= Poor; 2 = Below Average; 3 = Average; 4=Strong; 5 = Outstanding)

_____ Knowledge Base

_____ Clinical skills

_____ Professionalism

Comments regarding the student's overall performance:

Comments including suggestions that we should consider to better prepare our students for a placement at your site:

To be completed by student:

_____ My initials indicate that I acknowledge I was fully briefed regarding this review of my performance, was provided access to my clinical instructor's feedback, and had my questions answered regarding the evaluation.

Clinical Skill Competency Ratings:

Please rate your student for clinical areas in which the student participated using the rating scale below. Leave areas that are not applicable blank.

Competency Ratings:

1. Competency absent - Student is unable to demonstrate skill. Modeling and repeated verbal/written instruction do not result in an improvement of the skill.
2. Competency emerging - Student is unable to demonstrate skill without modeling and direct verbal instruction from the clinical instructor. Student does not independently recognize strengths and weaknesses, but understands them if pointed out by clinical instructor. Modeling and direct verbal instruction result in an improvement of the skill.
3. Competency present - Student is able to demonstrate skill; however, skill needs further development. Clinical instructor monitoring is required except for routine cases. The clinical instructor is present most of the time to provide verbal guidance without modeling. Student independently recognizes strengths and weaknesses, but requires input from the clinical instructor to make appropriate clinical decisions. Modeling and verbal/written instruction result in generalization of the skill.
4. Competency developed – Student demonstrates skill consistently. Monitoring by the clinical instructor may be necessary sometimes, but only in difficult or uncommon cases. Student understands strengths and weaknesses to the extent that the student can use critical thinking to make appropriate clinical decisions and knows when to seek input from the clinical instructor.
5. Competency well developed – Student demonstrates skill consistently across patients and situations. Student uses critical thinking to make clinical decisions and can articulate them to the clinical instructor who is used as a consultant.

PROFESSIONAL PRACTICE (Standard 3.1.1A)

The student demonstrated the following at the level indicated.

_____ Accountability

_____ Effective Communication Skills (A12)

_____ Evidence-Based Practice (A13)

_____ Professional Duty (A5, A6, A17)

Comments regarding professionalism:

PREVENTION AND IDENTIFICATION (Standard 3.1.3A)

The student demonstrated the following skills at the level indicated.

- ___ Screen for the **hearing loss** and its impact (B5, B6, B8, B9)
- ___ Screen for **tinnitus** and its impact
- ___ Screen for **speech/language disorders** and/or their impact (B5, B10, B11, B12, B13)
- ___ Screen for **cognitive disorders** and/or their impact (B10, B13)
- ___ Screen for **vestibular disorders** and/or their impact
- ___ Promote prevention of **hearing loss** and/or its impact (B1, B2, B3, B4)
- ___ Promote prevention of **tinnitus** and/or its impact (B1, B3)
- ___ Promote prevention of **speech/language disorders** and/or their impact
- ___ Promote prevention of **vestibular disorders** and/or their impact (B1)
- ___ Participate in an occupational hearing conservation program (B4, B7)
- ___ Administer programs related to prevention and identification (B2, B4, B14)

Comments regarding prevention and identification:

ASSESSMENT OF THE STRUCTURE AND FUNCTION OF THE AUDITORY AND VESTIBULAR SYSTEMS AS WELL AS THE IMPACT OF ANY CHANGES TO SUCH SYSTEMS (Standards 3.1.4A)

The student demonstrated the following skills at the level indicated.

GENERAL (to be completed for clinical experiences involving **all** types of assessment)

- ___ Evaluate information from appropriate sources, obtain a case history and patient narrative (C1, C2, C3)
- ___ Administer appropriate assessment measures
- ___ Determine contextual factors that may facilitate or impede an individual's participation in everyday life
- ___ Document evaluation procedures and results appropriately
- ___ Interpret results appropriately (C4, C10)
- ___ Generate appropriate recommendations and referrals
- ___ Provide counseling to facilitate understanding of the disorder
- ___ Maintain records in a manner consistent with legal and professional standard;
- ___ Effectively communicate results and recommendations orally and in writing
- ___ Assign the correct Common Procedural Terminology (CPT) code(s) and the correct International Classification of Diseases (ICD) code(s)
- ___ Engage in interprofessional practice to facilitate optimal assessment of the individual being served

HEARING (to be completed for clinical experiences involving assessment of hearing)

- Perform an otoscopic examination
- Cerumen management, when appropriate

Behavioral/Psychophysical Measures

- Puretone air and bone conduction (C8)
- Masking
- Conditioned play audiometry
- VRA
- Speech audiometry (C9)
- Tests for nonorganic hearing loss (C13)
- Assessment of tolerance to determine presence of hyperacusis (C6)
- Central auditory processing testing (C15)
- Assessment of challenges listeners face in real world
- Self-assessment measures of communication
- Scales of communication function for communication partners

Immittance (C7)

- Tympanometry
- Acoustic reflex thresholds and decay
- Eustachian tube function

Physiological and Electrophysiological Measures (C11)

- Otoacoustic emissions (C12)
- Electrocochleography
- Auditory brainstem response for frequency specific air and bone conduction thresholds
- Auditory brainstem response for neural diagnostic purposes with click stimuli

TINNITUS (to be completed for clinical experiences involving assessment of tinnitus)

- Perform assessment to characterize tinnitus, including severity (C5)
- Assess the impact of tinnitus on patient's activities of daily living and quality of life (C5)

VESTIBULAR (to be completed for clinical experiences involving assessment of vestibular disorders)

- Perform balance system assessment and determine the need for balance rehabilitation (C14)
- Electronystagmography (ENG)/Videonystagmography (VNG)
- Ocular vestibular-evoked myogenic potential (oVEMO)
- Cervical vestibular evoked myogenic potential (cVEMP)

Comments regarding assessment:

INTERVENTION TO MINIMIZE THE EFFECTS OF CHANGES IN THE AUDITORY AND VESTIBULAR SYSTEMS ON AN INDIVIDUAL'S ABILITY TO PARTICIPATE IN THEIR ENVIRONMENT (Standard 3.1.5A)

The student demonstrated the following skills at the level indicated.

GENERAL *(to be completed for clinical experiences involving **all** types of intervention)*

- ___ Develop and implement appropriate, individualized treatment plans (E1, E2, E6, E7)
- ___ Counsel individuals served, families, and other appropriate individuals regarding treatment options/prognosis (D1, D2, D3, D4, D5, D6, D7, D8, D9)
- ___ Assess efficacy of interventions, monitor and summarize treatment progress and outcomes (E28)
- ___ Communicate results, recommendations, and progress in a culturally sensitive and age-appropriate manner (E3)
- ___ Document treatment procedures/results and maintain records in a manner consistent with legal/professional standards
- ___ Serve as an advocate for individuals served, their families, and other appropriate individuals

HEARING *(to be completed for clinical experiences involving intervention for hearing disorders)*

- ___ Conduct audiologic (re)habilitation to maximize outcomes
- ___ Provide communication training (e.g., speechreading, auditory training, communication strategies) to enhance receptive communication (E21)
- ___ Provide assessment of communication partners' (family members, coworkers, others) perception of/reactions to communication difficulties and effects on relationships. (E4, E5)
- ___ Identify effects of hearing problems and subsequent communication difficulties on interpersonal communication including impact on marital dyads, family dynamics, work relationships, etc. (E5)
- ___ Cerumen management

HEARING AIDS *(to be completed for clinical experiences involving intervention using hearing aids)*

- ___ Perform hearing aid/assistive listening device/sensory aid assessment, selection and fitting (E8)
- ___ Define appropriate device parameters for the user (E9)
- ___ Verify that amplification devices are functioning appropriately (E10)
- ___ Conduct real-ear measurements and use patient input to set devices accurately (E11)
- ___ Incorporate soundfield functional gain testing when fitting osseointegrated and other implantable devices (E12)
- ___ Conduct individual and/or group hearing aid, assistive listening device, and sensory aid orientations (E13)
- ___ Use validation measures and patient input to ensure benefit is obtained

HEARING ASSISTIVE TECHNOLOGY *(to be completed for clinical experiences involving intervention using hearing assistive technology)*

- ___ Identify the need for/fit appropriate hearing assistive technology systems (HATS) (E17)
- ___ Provide HATS for those requiring access in public, private and work settings (E18)
- ___ Ensure compatibility of HATS in real world environments and when used in conjunction with hearing aids, cochlear implants, or other devices (E19)
- ___ Provide services/make appropriate referral for use/installation of multi-user HATS (e.g., systems in theaters, churches, schools) (E20)

COCHLEAR IMPLANTS *(to be completed for clinical experiences involving intervention using cochlear implants)*

- ___ Identify individuals who are candidates for cochlear implantation and other implantable devices (E14)
- ___ Counsel cochlear implant candidates and their families regarding the benefits/limitations of cochlear implants (E15)
- ___ Provide programming, fitting adjustments, and post-fitting counseling for cochlear implant patients (E16)

PEDIATRICS *(to be completed for clinical experiences involving pediatric patients)*

(Re)habilitation

- ___ Select age/developmentally appropriate amplification devices and HATS (F5)
- ___ Provide intervention to ensure age/developmentally appropriate speech and language development (F8)
- ___ Administer self-assessment, parental, and educational assessments to monitor treatment benefit and outcome (F9)

Counseling and Education

- ___ Counsel parents to facilitate their acceptance of and adjustment to a child's diagnosis of hearing impairment (F1)
- ___ Counsel parents to resolve their concerns and facilitate their decision making regarding early intervention, amplification, education, and related intervention options for children with hearing impairment (F2)
- ___ Educate parents regarding the potential effects of hearing impairment on speech-language, cognitive and social-emotional development and functioning (F3)
- ___ Educate parents regarding communication mode options, educational laws and rights (F4)
- ___ Instruct parents/children regarding the daily use, care, and maintenance of amplification devices and HATS (F6)
- ___ Plan and implement parent education/support programs (F7)
- ___ Counsel pediatric patients with hearing impairments (F11)

Educational support

- ___ Provide ongoing support for children by participating in IEP or IFSP processes (F10)
- ___ Evaluate acoustics of classroom settings and provide recommendations for modifications (B4, F12)
- ___ Provide interprofessional consultation and/or team management (F13)

TINNITUS *(to be completed for clinical experiences involving intervention for tinnitus)*

_____ Perform assessment of devices used to manage tinnitus

_____ Counsel patients regarding the audiologic significance of tinnitus and factors that cause or exacerbate tinnitus (E22)

_____ Counsel patients to promote the effective use of ear-level sound generators/environmental sounds to manage tinnitus(E23)

_____ Counsel patients to facilitate identification and adoption of effective coping strategies (E24)

_____ Monitor/assess the use of ear-level and/or environmental sound generators and the use of adaptive coping strategies (E25)

VESTIBULAR *(to be completed for clinical experiences involving intervention for vestibular disorders)*

_____ Provide canalith repositioning for patients diagnosed with benign paroxysmal positional vertigo (BPPV) (E26)

_____ Provide intervention for central and peripheral vestibular deficits (E27)

Comments regarding treatment:

GENERAL KNOWLEDGE AND SKILLS APPLICABLE TO PROFESSIONAL PRACTICE (Standard 3.1.6A)

The student demonstrated the following skills at the level indicated

_____ Ethical Conduct (A22)

_____ Integration and application of the interdependence of speech, language, and hearing

_____ Engagement in contemporary professional issues and advocacy

_____ Engagement in self-assessment over the duration of the program to improve effectiveness in the delivery of clinical services

_____ Clinical education and supervision skills (A23)

_____ Clinical counseling skills appropriate to the individual, family members, caregivers, and others involved in care

_____ Professionalism and professional behavior that is reflective of cultural and linguistic differences (A8, A9, A11)

_____ Interaction skills and interpersonal qualities, including counseling and collaboration (A12, A16)

_____ Ability to work effectively as a member of an interprofessional team (A17, A18)

Comments regarding professional practice:

4.3 Appendix C: KASA MA-SLP Competencies at the University of Iowa

Student's Name: _____ Semester/Year: _____ Date: _____

Clinical Educator: _____ Practicum: _____

KASA - Standard V-B The applicant for certification must complete a program of study that includes supervised clinical experiences sufficient in breadth and depth to achieve the following skills outcomes (in addition to clinical experiences, skills may be demonstrated through successful performance on academic course work and examinations, independent projects, simulated patients, or other appropriate alternative methods):			
	Midterm	Final	Average
EVALUATION			
1a. Conducts screening and prevention procedures (including prevention activities).			
1b. Collects case history information and integrates information from clients/ patients, family, caregivers, teachers, relevant others, and other professionals.			
1c. Selects appropriate evaluation procedures, such as behavioral observations, non-standardized and standardized tests, and instrumental procedures.			
<ul style="list-style-type: none"> Administers appropriate evaluation procedures, such as behavioral observations, non-standardized and standardized tests, and instrumental procedures. 			
1d. Adapt evaluation procedures to meet the needs of individuals receiving services.			
1e. Interprets, integrates, and synthesizes all information to develop diagnoses and make appropriate recommendations for intervention.			
1f. Completes administrative and reporting functions necessary to support evaluation.			
1g. Refers clients/patients for appropriate services.			
3c. Provides person-centered counseling regarding communication and swallowing disorders to clients/patients, family, caregivers, and relevant others			
INTERVENTION			
2a. Develops setting-appropriate intervention plans with measurable and achievable goals that meet clients'/patients' needs. Collaborates with clients/ patients and relevant others in the planning process.			
<ul style="list-style-type: none"> Displays knowledge base obtained from coursework. 			
2b. Implements intervention plans (involve clients/patients and relevant others in the intervention process.)			
<ul style="list-style-type: none"> Implements multiple therapy objectives as needed. 			
2c. Selects or develops and uses appropriate materials and instrumentation for prevention and intervention.			
2d. Measures and evaluates clients'/patients' performance and progress.			
2e. Modifies intervention plans, strategies, materials, or instrumentation as appropriate to meet the needs of the clients/patients.			
<ul style="list-style-type: none"> Provides appropriate instructions. 			
<ul style="list-style-type: none"> Provides appropriate models. 			

• Provides appropriate stimuli.			
• Provides appropriate feedback.			
• Provides appropriate reinforcement.			
2f. Completes administrative and reporting functions necessary to support intervention.			
2g. Identifies and refers clients/patients for services as appropriate.			
3c. Provides person centered counseling regarding communication and swallowing disorders to clients/patients, family, caregivers, and relevant others			
INTERACTION AND PERSONAL QUALITIES			
Interactions with Clients			
3a. Communicates effectively, recognizing the needs, values, preferred mode of communication, and cultural/linguistic background of the client/patient, family, caregivers, and relevant others. Interacts respectfully regarding differences including gender, race, ethnicity, sexual orientation, age, national origin and disability.			
3b. Manages the care of individuals receiving services to ensure an interprofessional, team-based collaborative practice.			
3d. Appropriately interprets and expresses verbal and nonverbal messages.			
• Demonstrates interest in the client’s progress.			
• Demonstrates interest in the client’s well-being.			
• Maintains a professional relationship with the client and/or client’s family or caregivers.			
Job-Related Professional Skills			
3e. Adheres to the ASHA Code of Ethics			
• Works respectfully with Clinic office staff			
• Present self in a manner consistent with policies of varied clinical environments and their patients/clients.			
• Follows Universal precautions			
Meetings with Clinical Educator			
• Review of new or updated client information (e.g. files, updated testing, progress towards goals) before meetings with the Clinical Educator; demonstrates familiarity with the case.			
• Timeliness and active engagement (e.g. asking questions and sharing ideas) during weekly 1:1 or group meetings with the Clinical Educator.			
• Increased independence in exploring and seeking resources for assessment and intervention.			
• Responsive to Clinical Educator feedback.			
• Maintains a professional relationship with Clinical Educator			
Written Communication			
• Timeliness of lesson plans, soaps and final reports			
• Lesson plans and SOAPS are complete and written in a clinical manner consistent with the setting			
• Final reports are complete, clinically suitable to the reader and setting			
• Timeliness and completeness of suggested changes or edits to written			

documentation, including EPIC, given by the Clinical Educator.			
<ul style="list-style-type: none"> • Timeliness in responding to emails, EPIC messages, and other communication sent by Clinical Educator. 			
<ul style="list-style-type: none"> • Manages billing accurately on EPIC 			
Self-Evaluation			
<ul style="list-style-type: none"> • Readily participates in self-reflection activities. 			
<ul style="list-style-type: none"> • Answers the question: "What went well?" 			
<ul style="list-style-type: none"> • Answers the question "What needs to change?" 			
<ul style="list-style-type: none"> • Answers the question "What's my plan to make changes?" 			
<ul style="list-style-type: none"> • As training progresses, the student's evaluations are more independent and accurate. 			
Collaboration			
<ul style="list-style-type: none"> • Independently collaborates with other professionals in case management. Shares work equally among partner student clinicians. 			
<ul style="list-style-type: none"> • When working as part of a group, actively participates in group meetings (e.g. offering ideas or potential solutions). 			
<ul style="list-style-type: none"> • When working as part of a group, shows respect to fellow group members during interactions. 			
<ul style="list-style-type: none"> • Maintains a professional relationship with staff and team members. 			

PROGRESSION OF SKILLS CODES
N/O = no opportunity
0 - Absent - Student does not have knowledge; student does not demonstrate skill, student does not recognize strengths and weaknesses, requires maximum level of supervision - modeling and repeated direction does not improve skills.
1 - Taught/Marginal - Student does not have knowledge, student demonstrates minimal skills, student does not recognize strengths and weaknesses, student requires maximum level of supervision - modeling and repeated direction results in some change.
2 - Emerging - Student is beginning to demonstrate skill, student does not recognize strengths and weaknesses but can identify both if pointed out by clinical educator after the session, requires maximum supervision, modeling and directions result in some generalization of skills.
3 - Developing - Student demonstrates skill approximately half of the time, student recognizes clinical strengths and weaknesses after the session and with the clinical educator's help can generate ideas for change, supervision is provided most of the time, usually directions without modeling.
4 - Refining - Student demonstrates independence but supervision needed at times, direction alone required to make changes, student recognizes clinical strengths and weaknesses during the session although cannot always make online changes, requires intermittent supervision in accordance with ASHA guidelines.
5 - Independent - Student is functioning essentially as the responsible professional and displays competency, student clearly recognizes clinical strengths, student engages clinical educator when s/he has questions, take initiative for most aspects of the case, requires minimal level of supervision in accordance with ASHA guidelines.
6 - Outstanding - Student functions essentially as the responsible professional and displays superior competence in providing therapy and taking initiative for all aspects of the case, student clearly recognizes strengths and weaknesses, can usually critically think through challenging aspects, would be able to perform at high levels without supervision, although receives minimal level of supervision in accordance with ASHA guidelines.

MINIMUM REQUIREMENTS BY SEMESTER					
(note: 5 th Term is when the outplacement occurs)	1st Term (Fall)	2nd Term (Spring)	3rd Term (Summer)	4th Term (Fall)	5th Term (Spring)
Evaluation	2	3	3.5	4.5	5
Intervention	3	3.5	4	4.5	5
Interactions with clients	3.5	4	5	5	5
Job-related professional skills	3	4	5	5	5
Meetings with clinical educator	3	4	4.5	5	5
Written communication	3	4	4.5	5	5
Self-evaluation	3	4	4	5	5
Collaboration	4	4	4.5	5	5
Minimum expected average	3	3.8	4.3	4.8	5

If student has NOT met the minimum required competency in any area, is an action plan required? Yes__ No__

Did the student receive an overall passing score **and** meet all the required competencies?

Yes_____ No_____ (If 'No', please add more details in the 'comments' section)

Additional Supervisor Comments (e.g., clinical experiences gained, strengths and areas for improvement, opportunities to practice cultural competence and humility, etc)

Student Comments

Clinical educator: I certify the above record of supervised practicum is correct and the amount of supervision meets ASHA guidelines.

Mid-semester Signature: _____ Date: _____

Final Signature: _____ Date: _____

Printed Name: _____ ASHA CCC#: _____

Student: I certify that the above record of supervised practicum is correct.

Mid-semester Signature: _____ Date: _____

Final Signature: _____ Date: _____

Printed Name: _____

4.4 Appendix D School Speech Language Pathologist Licensure Preparation

School Speech Language Pathologist

Licensure Preparation / Added Endorsement Program K-12

Student Name: UID:

This program of the University of Iowa College of Education is approved by the state of Iowa as preparation for the Initial Professional Service License (or for added endorsement to an educator license) for endorsement number 237, B-21 Speech Language Pathologist, intended for students and graduates of the Master of Arts (M.A.) degree program with major in Speech Pathology and Audiology of the Department of Communication Sciences and Disorders, or an equivalent program. The holder of this endorsement is authorized to serve as a speech-language pathologist to pupils from birth to age 21.

The program is offered in partnership with the Department of Communication Sciences and Disorders of the College of Liberal Arts and Sciences.



Requirements

- Master's degree in speech pathology; and professional education course requirements to total a minimum of 20 semester hours and to include all of the following: curriculum, foundations, educational measurements, educational psychology, special education, child development, human relations, individuals with disabilities, and gifted and talented.

Professional Education Course Requirements

- Complete the following courses for 23 semester hours.

Curriculum

- Complete one of the following four courses or an approved substitute.

Course	Course Title	Credit	Session/Substitute
ASLE:3905	Teaching Deaf & Hard of Hearing Students	3 s.h.	
EDTL:4066	Curriculum Concepts in Gifted Education	3 s.h.	
EDTL:4171	Diversity and Exceptionalities in Literacy Instruction	3 s.h.	
EDTL:4980	Special Education Literacy	3 s.h.	

Human Relations

- Complete one of the following two courses or an approved substitute.

Course	Course Title	Credit	Session/Substitute
EPLS:4180	Human Relations for the Classroom Teacher	3 s.h.	
RCE:5250	Multiculturalism for the Helping Professions		

Foundations, Individuals with Disabilities, Gifted and Talented

- Complete the following course or an approved substitute.

Course	Course Title	Credit	Session/Substitute
EDTL:4900	Foundations of Special Education	3 s.h.	

Special Education

- Complete one of the following two options.

Option 1: Complete the following course or an approved substitute.

Course	Course Title	Credit	Session/Substitute
CSD:5258	Multilingualism and Culturally Responsive Practice in CSD	3 s.h.	

Option 2: Complete two of the following three courses or approved substitutes.

Course	Course Title	Credit	Session/Substitute
CSD:5234	Acquired Cognitive-Communication Disorders	2 s.h.	
CSD:5260	Augmentative and Alternative Communications	2 s.h.	
PEDS:7255	Autism Spectrum Disorders	2 s.h.	

Complete all of the following courses or approved substitutes.

Course	Course Title	Credit	Session/Substitute
CSD:5104	Language Disorders: School-Aged Children (Standards: Educational Measurements)	3 s.h.	
CSD:5135	Foundations of Clinical Practice I (Standards: Educational Psychology)	2 s.h.	

CSD:5136	Foundations of Clinical Practice II (Standards: Foundations)	1 s.h.	
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Child Development

Complete one of the following two courses or an approved substitute.

Course	Course Title	Credit	Session/Substitute
PSQF:4106	Child Development	3 s.h.	
PSY:2401	Introduction to Developmental Science	3 s.h.	

Outplacement

Complete the following course or an approved substitute.

Course	Course Title	Credit	Session/Substitute
CSD:5304	Speech Pathology Outplacement: School	2 s.h.	

Field Experience

Please provide placement details for CSD:5304 Speech Pathology Outplacement: School.

Site
Clock Hours/Dates

Additional Information

This Program Guide is for planning and documentation of program completion. State requirements for licensure and endorsements are subject to change without notice; check with your advisor or the Office of Education Services for updated requirements. Course transfer and substitution may require syllabi or other documentation in addition to transcript. Revised 07/15/2022 KD/BJ version 4.2.

For additional information, admissions procedures, or advising referral, please contact Office of Student Services, College of Education, N201 Lindquist Center, Iowa City, IA 52242, 319-335- 5359, FAX: 319-335-5364, ask-education@uiowa.edu, <https://education.uiowa.edu/>