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Speech Language Pathology Graduate Handbook - 2021-2022

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DEPARTMENT *of* AUDIOLOGY &
SPEECH-LANGUAGE PATHOLOGY
College of Clinical and Rehabilitative Health Sciences

EAST TENNESSEE STATE UNIVERSITY

GRADUATE HANDBOOK
SPEECH-LANGUAGE PATHOLOGY

2021-2022

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WELCOME TO THE MASTER OF SCIENCE IN SPEECH-LANGUAGE PATHOLOGY PROGRAM

We want to welcome you to the Master of Science in Speech-Language Pathology Program in the Department of Audiology and Speech-Language Pathology (ASLP). This handbook will acquaint you with the requirements of the program. It provides an in-depth overview of the program, faculty, graduation requirements, advisement, and accreditation and licensing requirements. We recommend that you consult the handbook for answers to many of your questions before contacting a faculty member.

The Department of Audiology and Speech-Language Pathology offers the Master of Science degree in Speech-Language Pathology and the Doctorate of Audiology. Both programs are accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association (ASHA). The programs are designed to meet the requirements for certification including the attainment of the Certificate of Clinical Competence (CCC) of the American Speech-Language-Hearing Association (ASHA), Tennessee state licensure, and Tennessee public school licensure.

The certification requirements for the Master's degree in Speech-Language Pathology include successful completion of:

- (1) A minimum of 36 semester credit hours of academic and clinical coursework at the graduate level
- (2) A minimum of 400 clock hours of supervised clinical practice (25 hours in clinical observation and 375 in direct client/patient contact) with a minimum of 325 hours completed at the graduate level, as specified by ASHA guidelines.
- (3) Achievement of the Knowledge and Skills outcomes as stipulated on Standard IV-A through IV-G and Standard V-A through V-C

These academic and clinical coursework credits and clinical clock hour requirements reflect the minimal standards. Our program is designed to meet or exceed these basic standards. The Standards for the Certificate of Clinical Competence are contained in Appendix E, the guidelines for Tennessee licensure are presented in Appendix F, and requirements for Tennessee public school licensure are available in Appendix G.

FACULTY

The faculty of Audiology and Speech-Language Pathology covers a diverse field of specialties within speech-language pathology and audiology. The faculty is here to share current knowledge of human communication sciences and disorders. To facilitate this process, it is necessary that you actively engage in study and interaction with your advisor as well as the entire graduate faculty. The faculty and their areas of specialty are provided below.

Speech-Language Pathology Faculty

Faculty	Area of Specialty
Bess Sirmon-Taylor, Ph.D., CCC-SLP Chair, Professor, SLP Program Director University of Georgia, 2006	TBI and Concussion, Language and Mental Illness, Ethics, Legislation and Policy
Teresa Boggs, Ph.D., CCC-SLP, SLP Clinical Services Director, Professor, East Tennessee State University, 1991	Autism Spectrum Disorders, Feeding Disorders, Clinical Supervision, Parent Training
Chayadevie Guntupalli, Ph.D., CCC-SLP, Associate Professor, University of Pittsburgh, 2013	Voice Disorders, Speech Science, Clinical Supervision
Brenda Louw, D. Phil, Professor, University of Pretoria, South Africa, 1986	Cleft Palate, Early Language Intervention, Multicultural and Multilingual Issues
A. Lynn Williams, Ph.D., CCC-SLP, Professor, Associate Dean CCRHS, Indiana University, 1988	Phonology and Child Language Disorders, IPE, Professional Issues Advocacy
Kerry Proctor-Williams, Ph.D., CCC-SLP Professor Emerita University of Kansas, 2005	Child Language Development and Disorders, Intervention Approaches, IPE
Kelly Farquharson, PhD, CCC-SLP Adjunct Faculty University of Nebraska – Lincoln, 2012	Phonology
Maura Jarnagan Bishop, Ed.D, CCC-SLP, Adjunct Instructor Carson-Newman University, 2016	Language and Literacy, Services in the Schools
Ellen Kelly, Ph.D., CCC-SLP Adjunct Instructor, University of Syracuse, 1989	Fluency Disorders
Samantha Wampler, M.S. CCC-SLP Adjunct Instructor East Tennessee State University, 2003	Speech-Language Pathology Services in the Schools
Annika Coulton Adjunct Instructor	

Speech-Language Pathology Clinical Faculty

Faculty	Area of Specialty
Lindsay Greer, M.S. CCC-SLP, Assistant Clinic Director, East Tennessee State University, 2009	School-Age Children, Phonological Disorders, Clinical Supervision

Courtney Andrews, M.A. CCC-SLP Louisiana State University, 2012	Adult Neurodegenerative Disorders, Concussion Management, Tele-practice
Kristy Eisenzopf, M.Ed., CCC-SLP Valdosta State University, 2001	Pediatric Neurogenic Disorders, Clinical Supervision, Child/Adult Lang Disorders
Marie Fillers Johnson, M.S. CCC-SLP, East Tennessee State University, 2009	Language Disorders of Children, Clinical Supervision, Aural Rehabilitation
Jennifer Quillen, M.S. CCC-SLP East Tennessee State University, 2003	Pediatric Speech and Language Disorders
Eva Beal Adjunct Clinical Supervisor East Tennessee State University, 2018	Adult Communication Disorders
Pepper Basham Adjunct Clinical Supervisor Radford University, 1999	Pediatric Communication Disorders

Speech-Language Pathology VA Medical Center – Mountain Home Faculty

Faculty	Area of Specialty
Jody Rice, M.S., CCC-SLP Adjunct Professor, East Tennessee State University, 2001	Adult Neurogenic Disorders, Dysphagia
P.J. Henley, M.S., CCC-SLP Adjunct Professor, East Tennessee State University, 2001	Clinical Supervision, Dysphagia, Laryngectomy
Kara Burton, M.S., CCC-SLP University of Central Arkansas, 2000	Clinical Supervision, Dysphagia
Kelli Johnson, M.S., CCC-SLP East Tennessee State University, 2008	Clinical Supervision, TBI
Jill Metcalf, M.S., CCC-SLP East Tennessee State University, 2010	Clinical Supervision, Dysphagia, Cognitive- Communication Disorders Neurogenic Communication Disorders

Audiology Faculty

Faculty	Area of Specialty
Saravanan Elangovan, Ph.D. Professor; Director of Audiology East Carolina University, 2005	Electrophysiology, Speech Perception, Cochlear Implants

Marc A. Fagelson, Ph.D. Professor; Assistant Chair University of Texas at Austin, 1995	Diagnostics, Psychoacoustics, Tinnitus
Marcy Lau, Au.D, Ph.D. Assistant Professor Texas Tech University, 2012, 2018	Pediatrics, Listening Efforts
Jacek Smurzynski, Ph.D. Professor; Program Coordinator Wroclaw Univ of Technology, Poland, 1987	Auditory Perception, Otoacoustic Emissions

Audiology Clinical Faculty

Faculty	Area of Specialty
Shannon Bramlette, Au.D. Salus University, 2008	Clinical Supervision, Pediatrics, Cochlear Implants, Community Audiology

Audiology VA Medical Center – Mountain Home Faculty

Faculty	Area of Specialty
Faith Akin, Ph.D. Professor Vanderbilt University, 1997	Vestibular Assessment and Rehabilitation
Courtney Hall, Ph.D. Associate Professor University of Texas at Austin, 2000	Vestibular Rehabilitation
Earl Johnson, Ph.D., Au.D. Assistant Professor Vanderbilt University, 2007 University of Florida, 2009	Adult Amplification
Owen Murnane, Ph.D. Professor Syracuse University, 1995	Human Vestibular and Auditory Electrophysiology
Kim Schairer, Ph.D. Associate Professor, University of Memphis, 2000	Otoacoustic Emissions, Middle Ear Measurements, Psychoacoustics
Nicholas Giuliani, Au.D., Ph.D. Assistant Professor University of Iowa, 2014, 2017	Audiologic Rehabilitation, Amplification, Listening Effort
Sharon Rutledge, Au.D. Associate Professor University of Florida, 2001	Implantable Hearing Devices, Audiologic Rehabilitation

ADVISEMENT

It is the student's responsibility to independently review the Admission, Advisement and Registration, Academic, and Degree and Graduation Requirements that are printed annually in the Graduate Catalog. It is the student's responsibility to fulfill these requirements and the accompanying administrative tasks for successful matriculation.

You will need an e-mail address to communicate with faculty and supervisors and to receive information on departmental events. *The department will communicate with you ONLY using your ETSU email account. It is your responsibility to check this account regularly for departmental information.*

Faculty contact information for general areas of advisement can be found in Appendix J. Upon admission, you will be assigned to a faculty advisor; this may change at some point during your program.

Your academic and clinical file is housed in the department office. That file contains: (1) application materials; (2) copies of your clinical grade sheets and a record of your clinical clock hours; and (3) all other graduate related forms, including application, candidacy, advisory committee forms, etc. Your file is strictly confidential; only you and the faculty/staff of ASLP have access to it. You may review it at any time in the office of the departmental Executive Aide; however, none of its contents may be removed.

You will select a graduate advisory committee with the assistance of the Graduate Coordinator. This can be completed after at least 9-12 hours of graduate study and must be submitted by the end of the second Fall semester. For the thesis option, the advisory committee will be your thesis committee who will assist you in your thesis prospectus and defense. For the non-thesis option, the advisory committee will assist you in your comprehensive examination preparation and as examiners. The three- to four-person committee must consist of at least one Ph.D. level faculty member, who will then serve as your chair. Any changes in the above require permission with the accompanying paperwork through the School of Graduate Studies.

Enrollment Procedures

Enrollment can be completed during the pre-enrollment period during the preceding semester or during the week before classes begin. The Graduate Coordinator will review your admission forms so that you know which requirements you have met and which you have yet to meet in order to obtain a degree from ETSU, ASHA certification, and teacher licensure. With this information, you and the Graduate Coordinator will then review the general Program of Study.

College of Graduate and Continuing Studies Masters Degree Requirements

See the full description:

[https://catalog.etsu.edu/content.php?catoid=37&navoid=1617#Master s Degree Requirements](https://catalog.etsu.edu/content.php?catoid=37&navoid=1617#Master_s_Degree_Requirements)

Highlights

- Specific course and degree requirements for areas of graduate study (i.e., MS in Speech-Language Pathology Program) leading to a master's degree must be met. See https://catalog.etsu.edu/preview_program.php?catoid=37&poid=12573&returnto=1623
- Transfer of Credit: No more than 9 semester hours of graduate level courses with grades of "B" or higher may be petitioned for transfer of credit to the SLP program
- Master's degree programs are offered through two (2) options, both of which are available in the SLP Program:
 - Thesis Option. Minimum of 30 credit hours of graduate coursework (including at least three (3) hours of credit for the thesis).
 - Non-thesis Option. Minimum of 33 credit hours of graduate coursework including a research requirement to be satisfied by one (1) or more courses which introduce the student to the tools and methods of research (i.e., CDIS 5400 - Research Methods in Communicative Disorders) and scholarly activities and a writing requirement on a topic in the student's major field which conforms to the style and standards of the discipline (i.e., assigned papers; Written Comprehensive Exam).
- Culminating Experience. All master's degree programs should involve a culminating experience that includes an integrating activity and a comprehensive evaluation of the student's performance:
 - The integrating activity is intended to help students synthesize knowledge and skills acquired throughout the degree curriculum. The form of this activity may vary according to the particular discipline and may or may not involve academic credit. We provide this through Clinical practicum courses.
 - A comprehensive evaluation of the student's performance should include a written or oral examination or evaluation to determine whether the student has achieved mastery of the student's discipline. We offer this through the Thesis in the form of a defense, or through the Non-thesis/Comprehensive Examination options.
 - Assessment of a student's performance shall be made by a committee established for that purpose consisting of a minimum of three (3) ETSU graduate faculty members. The Appointment of Advisory Committee Form must be submitted:
 - Thesis Option: During the semester before first enrollment in in CDIS 5960 – Thesis.
 - Non-thesis Option: During the second Fall semester
 - Upon successful completion of the Culminating Experience, the Graduate Coordinator or Chair of the Advisory Committee will submit the Results of Examination, Report, Culminating Experience Form.
- Admission to Candidacy and Approval of the Program of Study. To be admitted to candidacy the student must:
 - Remove all conditions required at the time of admission by the School of Graduate Studies.
 - Meet the specific requirements of the major department.
 - Have an overall GPA of 3.0 and be in good academic standing.

- Submit the Graduation Application no later than the end of the second week of the semester in which the student expects to complete the requirements for a graduate degree. <https://www.etsu.edu/reg/application.php>
- All the forms for the College of Graduate and Continuing Studies can be found at <https://www.etsu.edu/gradschool/forms.php>. Commonly used forms are: Transfer Credit form, Course Overload form, Appointment of Advisory Committee form, Graduate Assistant and Tuition Scholarship forms
- The time limit for the use of credit toward the Master's degree from the date of enrollment is six years for the SLP program.

Credit Hours of Enrollment

According to University guidelines, a full-time graduate student must be enrolled in a minimum of nine hours during the Fall and Spring semesters and six hours during the Summer session. This includes students with appointments as graduate assistants and tuition scholarships, who must enroll in a minimum of nine graduate hours during the fall and spring semesters.

Retention and Graduation Requirements

In order to remain in good standing, students in ASLP must meet the following criteria:

1. 3.00 cumulative minimum GPA in academic courses taken as a Master's or AuD candidate or special student in ASLP
 - a. Complete all required courses with the grade of "B-" or better. Students will repeat a course for which the final grade is lower than "B-" only one time in order to complete graduation requirements; however, in repeating a course, the previous grade as well as the grade earned when the course was repeated is averaged in the subsequent GPA.
 - b. No more than two required courses are allowed to repeat. The class must be repeated in the semester that it is offered.
2. 3.00 GPA in each clinical practica taken at the graduate level
 - a. Satisfactory completion of all required clinic practica as determined by the appropriate supervisor(s) and the Graduate Coordinator. A clinic practicum experience must be repeated when the grade assigned is "B-" or lower.
 - b. No clinical hours will be awarded for substandard clinic practica.
 - c. A student may not be placed in an externship while on clinic probation.
3. 3.00 GPA in courses taken as an undergraduate, a prerequisite student, a special student or as a graduate student.
4. Satisfactorily complete all ETSU College of Graduate and Continuing Studies retention and graduation requirements as outlined in the ETSU *Graduate Catalog*.

If these requirements are not met, a student will be placed on academic and/or clinical probation with an academic or clinical remediation plan.

Academic Probation. Students will repeat a course for which the final grade is a lower than “B-” only one time in order to complete graduation requirements. An academic remediation plan will be developed by the instructor of record and the student and placed in the student’s file. The student’s advisory committee, the Graduate Coordinator, and the department Chair will review the status of the student on academic probation at the end of each semester. If the specified criteria are not met for resolution of the remediation plan, the student will be dismissed from the program. No more than two required courses are allowed to be repeated. The class must be repeated in the semester that it is offered. In repeating a course, the previous grade as well as the grade earned when the course was repeated is averaged in the subsequent GPA. A student who fails to obtain at least a B- in the course and a 3.00 cumulative average in by the end of the semester in which the course is repeated will be dropped from the program.

Clinic Probation. Students will repeat a course for which the final grade is “B-” or lower in order to complete graduation requirements. A clinical remediation plan will be developed by the supervisor of record, the Clinical Director, and the student and placed in the student’s file. No clinical hours will be awarded for substandard clinic practica. A student may not be placed in an externship while on clinic probation. The student's advisory committee, the clinical supervisor of record, the Clinical Director, and the department Chair will review the status of the student at the end of the probationary period, which will not exceed one semester. A student who fails to obtain at least a “B” in the clinical practicum and a 3.00 cumulative clinical average in by the end of the probationary period will be dropped from the program.

No student will be allowed more than two probationary semesters, whether consecutive or cumulative. At the end of a second probationary semester a student whose cumulative grade point average is still below 3.0 will be dismissed from graduate study. Students dismissed from the program may petition the graduate faculty for reinstatement if they believe extenuating circumstances exist. See the College of Graduate and Continuing Studies Policy https://catalog.etsu.edu/content.php?catoid=32&navoid=1483#Academic_Probation. Students who have been dismissed from the College of Graduate and Continuing Studies for academic reasons may address a written request for reinstatement to the chair of their department of their major. The request should include reasons why the reinstatement should be considered. The department will review the request for reinstatement and make recommendations to the Dean of the College of Graduate and Continuing Studies. If the request is denied at the departmental level, the student may then direct a written appeal to the Dean of the College of Graduate and Continuing Studies, and a final decision will be made in accordance with policies established by the Graduate Council. Students on probation will not be eligible for department assistantships or be advanced to a higher clinical competency level.

A student who withdraws voluntarily from the program during the first Fall semester before completion of coursework and clinical placement, and who is in good standing academically and

clinically, may be considered for reinstatement in the program. If reinstatement is granted, the student may re-enter the program the following Fall semester with the incoming cohort.

Courses taken at another college or university for graduate credit transfer only as credit. These courses are not counted in determining a student's GPA at ETSU. An "F" in any course at ETSU must be retaken.

Mid-Program Evaluation for Students

The graduate faculty will evaluate each student during the third semester of enrollment. Academic performance, clinical performance, communication skills (written and spoken), ethical behavior and professionalism will be considered. The Knowledge and Skills considered correspond to Standards IV-C, D, E, G, H, V-A, V-B 1, 2, 3. An assigned faculty member from the student's Advising Committee will discuss the student's areas of strength and areas for improvement as perceived by the graduate faculty. If there is a need for special help, such as in the area of writing skills, options will be presented. The student's Program of Study will be established during this meeting. (See Appendix A for Course Requirements and the Academic and Clinic Planning for Speech Pathology Worksheet).

ACADEMIC OPTIONS

Forms for the College of Graduate and Continuing Studies

In order to graduate as planned, the student must complete the following paperwork with the College of Graduate and Continuing Studies:

1. Enroll in a minimum of 1 credit hour in the semester in which they will graduate.
2. Review the final Program of Study with the Graduate Coordinator by the second week of the semester in which the degree is to be conferred.
3. File an *Appointment of a Graduate Committee* after completion of at least 9-12 hours and no later than the end of the second week of the semester before the semester in which the student expects to complete the requirements for graduate degree (typically Fall semester of 2nd year).
4. Complete the Apply to Graduate information using Student GoldLink, no later than the end of the second week of the semester in which the student expects to complete the requirements for graduate degree (typically Spring of 2nd year).
5. Schedule a final conference with the Clinical Director. At this time final clock hours will be tabulated to assure that ASHA and departmental requirements have been met.

All forms are available at College of Graduate and Continuing Studies:

<https://www.etsu.edu/gradschool/forms.php>

IRB TRAINING

All students must complete training pertaining to protection of human subjects and privacy of information. The training for SLP students takes place during the Research Methods class or sooner if they participate in research before that time as part of their Graduate Assistant responsibilities. The student must place certificates indicating successful completion of training with the primary researcher under whose supervision they are working.

HIPAA TRAINING

All students must complete Health Insurance Portability and Accountability Act (HIPAA) training. The training for SLP Students is conducted through the HIPAA Compliance Officer, Office of University Counsel within the first year of the program.

HEALTH AND SAFETY TRAINING

All students must complete the following Health and Safety Training units within the first semester of the program:

- Bloodborne Pathogen Training (Online)
- Portable Fire Extinguishers Training (Online)
- Proof of Hazard Communication Standard Training (Online)
- Emergency Preparedness Training (Online)
- Personal and Active Shooter Training (Live, during first semester from Health and Safety Officer)

CAPSTONE EXPERIENCE

Thesis Option for the Master's Degree

The thesis option is offered in speech-language pathology. This option provides students with the opportunity to develop and execute a research project with mentoring by their faculty committee. Guidance is given by the faculty advisor through all phases of a research project, from the development of the research topic and exploration of the relevant literature through development of methodology and analysis and interpretation of finding. The thesis requires a considerable commitment to writing and independence in meeting deadlines and should be undertaken with advice from and commitment of the faculty.

Candidates for a Master's degree with a thesis option must continue to register each semester (minimum of one hour) from the time of the initial registration for CDIS 5960 Thesis until the thesis is accepted by the College of Graduate and Continuing Studies. No less than three credit hours or more than six credit hours of thesis may be applied toward the Master's degree.

Departmental Criteria

Student electing a thesis option must meet the following departmental criteria:

1. Graduate GPA of 3.50
2. Proven writing skills
3. Grade of A/B in English composition *OR* a score at 4.0 or above in the Analytical Writing area of GRE
4. Proven ability to meet deadlines in a timely fashion
5. History of meeting practicum and class work deadlines on time
6. Completion of CDIS 5400 Research Methods or equivalent with a grade of “A”
7. Development of a viable research project

Students who meet at least five of the criteria must submit an application to the Graduate Coordinator and Research Mentor for permission to write a thesis (see Appendix C). The application due date is June of the first year for graduation in May of the second year. The review of the application evaluates skills that are associated with successful completion of the thesis such as the student’s grades in courses, clinical preparation, writing abilities and time management.

Prospectus Preparation

The prospectus is developed with assistance from the student’s thesis advisor. The prospectus is a means for the student to present his/her proposed research project to the advisory committee. The prospectus generally is comprised of two or three chapters that: (1) review the relevant literature; (2) present the research topic; and (3) present the participant description, procedures and data analyses techniques to be used in the project. The first chapter generally outlines the purpose of the research and rationale for the project based on published research. This chapter may be divided into two chapters at the discretion of the faculty advisor: (1) statement of the problem; and (2) review of literature. The second chapter provides a detailed description of the methodology to be used in the study in sufficient detail for the committee to understand what procedures will be used to answer the research questions. For most students, this is the first experience with developing a project, so drafts of these chapters are given to the advisor for review and comments. Through this process of review and modification of the drafts, the student will refine his/her proposal and make it understandable for the rest of the committee. The prospectus will be ready to present to the committee when the student’s advisor determines that the written proposal is complete and clearly written.

Prospectus Meeting

The prospectus meeting is an opportunity for the student to present the proposed research. The committee should receive a copy of the prospectus one to two weeks prior to the meeting to allow sufficient time to read the proposal. The meeting is generally scheduled for one hour. In the first 20-25 minutes, the student will present a summary of the purpose of the study, relevant literature and methodology to be used. Generally, PowerPoint is used to present a short summary of the project without going into great detail. Following the presentation, the committee will ask questions regarding the proposal and there will be discussion of issues pertinent to the project. The committee may recommend changes in methodology and/or the written manuscript. These comments and questions are intended to improve the project *before* it is executed. Following the prospectus meeting, the student will proceed to the data collection phase.

Individual Thesis Timelines

Both the student and the faculty advisor benefit from a clear understanding of the student's thesis project. Expectations of both parties must be made clear prior to the commencement of the project and so it is recommended that a written agreement be used to define both the scope of the thesis, and the timetable required for completion of the project in a reasonable manner.

Adherence to the written agreement should facilitate completion of the thesis while minimizing potential misunderstandings between candidate and committee. The agreement does not guarantee the completion of the thesis but clarifies roles and timetables for both parties. The written agreement should include at least the following information:

- List of deadlines
- Estimate of financial obligation of the student
- Committee membership
- Proposal of student's alternative if the thesis project is dropped

The Graduate School catalog indicates the relevant deadlines for thesis submission. Additionally, a list of deadlines appears in the Graduate School Thesis Manual. Students considering a thesis should obtain and read the Thesis Manual sometime early in their second semester (ideally by the start of their second semester). The advisor and student may then design a reasonable timetable with the understanding that deviation from the timetable puts the student at-risk for a late graduation. Table 1 provides a rough outline of mileposts for the thesis candidate.

Timeline for Thesis, Spring Graduation

Specific dates within these guidelines are set through collaboration between the student and the research mentor

Thesis Progression	Completion
Identify topic, select thesis chair and committee members	2 nd semester of the first year
Submit an application for a thesis	June, first year
Deliver introduction and review of literature to committee chair	July, first year
Prospectus Meeting	September, second year
IRB Approval Submission	Within 1 week of prospectus meeting
Register for thesis- (section for thesis advisor)	4 th semester (3units) 5 th semester (3 units)
Data collection/analysis completed	January, second year
Draft of results to thesis advisor	February, second year
Draft of discussion to thesis advisor	February, second year

Oral Defense: “Scheduled by” and “Completed by” date	See College of Graduate and Continuing Studies deadlines in Schedule of Classes
Last day for submission of final copies to graduate school	See College of Graduate and Continuing Studies deadlines in Schedule of Classes

Institutional Review Board (IRB)

IRB approval is required for projects involving human subjects or animal-based research, and proceeds according to the IRB committee’s preset timetable and can be lengthy. The schedule is available on their website ([IRB](#)). It is suggested that the student begin the IRB process during preparation of the prospectus. The ETSU IRB oversees the protection of research participants’ rights and safety when an experiment is conducted using humans. In general, the requirements imposed by the IRB on an experimenter are proportional to the invasiveness of the experimental technique. There are three types of review procedures used by the IRB when approving research: (1) Exempt, (2) Expedited, and (3) Full Review. Approval **MUST** be received prior to the initiation of an experiment. All forms and instructions are available on the IRB website. **THE IRB INSTRUCTIONS MUST BE FOLLOWED CAREFULLY.**

The student must place certificates indicating successful completion of IRB training in their academic file, clinic file, and IRB research file for the project.

Manuscript Preparation/Distribution to Committee

It is recommended that students follow the APA manual (Seventh Edition) throughout the preparation of all drafts, as ultimately the thesis must conform to APA standards. Additionally, information a student needs regarding the specific aspects of the thesis format is available from the College of Graduate and Continuing Studies (<https://www.etsu.edu/gradschool/etd/default.php>).

The graduate school provides workshops to assist in thesis preparation. The workshop contents are placed online after completion. It is highly recommended that students use the services available from the College of Graduate and Continuing Studies to determine the most appropriate way to format the text of their thesis. Additionally, any copyrighted or sensitive material from survey items must be treated appropriately. Guidelines for the former are available from the College of Graduate and Continuing Studies; the latter from the IRB. The thesis must be submitted to the graduate school electronically. Procedures are available on the College of Graduate and Continuing Studies webpage. The manuscript must be distributed to all committee members at least two weeks before the Oral defense.

Oral Thesis Defense

Once the thesis advisor approves the final draft, the College of Graduate and Continuing Studies will be contacted to schedule an oral defense. Deadlines are posted on the Schedule of Classes. In addition to the committee, the College of Graduate and Continuing Studies will send a representative to sit in on the defense. This faculty member serves as an observer to verify that the committee conducted the defense appropriately. They are not active participants in the

meeting, and they do not vote in determining whether the candidate meets the requirements for the defense. They write a report to the College of Graduate and Continuing Studies following the defense. The defense is organized similar to the prospectus meeting; the student will present 20-25 minutes of the research project and outcomes and then the committee members will ask questions or comment on the project. At the end of the meeting (generally an hour) the candidate will step out of the room and the committee will discuss the performance. The candidate will be asked back into the room and given the results of the committee decision. The committee members will make suggestions regarding revisions to the manuscript. These revisions and approval of the final manuscript by the thesis advisor must be made prior to submission of the thesis to the Graduate School by the posted deadline.

Non-Thesis Option for the Master's Degree: Comprehensive Examination

The non-thesis option for the Master of Science degree in Speech-Language Pathology includes a two-part summative Comprehensive Examination: (1) a Written Examination, and (2) an Oral Examination. The purpose of the Comprehensive Examination is to ensure that graduating students demonstrate integration of theoretical and practical knowledge, critical thinking skills, and clinical judgment.

Eligibility

To be eligible for the Comprehensive Examination, the student must meet the following departmental criteria:

1. Be in their fourth semester of academic coursework;
2. Have no incomplete grades on their Program of Study;
3. Hold a 3.00 or higher GPA in clinical practicum; and,
4. Maintain a 3.00 GPA in academic course on the Program of Study.

Comprehensive Examination Grading

Grading will be assigned as Pass/Fail. This is ultimately a consensus decision of the students' advising and examining committee members as guided by the rubrics used in the evaluation of the written and oral components of the examination. Students must receive an average score of at least 80% across *all* written and oral questions and cases. A student who fails the Comprehensive Examination will need to retake the entire Comprehensive Examination including both the written and oral components within three months. The questions and cases will be different. The examiners also may change. Repetition of the Comprehensive Examination may delay graduation. Students who fail the Comprehensive Examination twice will be dismissed from the program.

Written Examination

Content. The written examination involves answering four questions from among the following eight core topic areas:

1. Language disorders in children
2. Speech sound disorders in children

3. Neurological language disorders in adults
4. Research methods
5. Dysphagia in children or adults
6. Voice disorders in children or adults
7. Fluency disorders in children or adults
8. Motor Speech Disorders in adults

Format. Questions from any of the eight core topic areas may be included on the examination. The topic questions require evaluation and synthesis of information, integration of theoretical and practical knowledge, critical thinking skills, and clinical judgment. The written comprehensive examination will be administered in a morning and an afternoon session during a single day. Each session will be 3 hours in length with a 1-hour lunch break in between. Students will be given one examination packet in the morning and a second examination packet in the afternoon. Each packet will include instructions, four questions, and scratch paper. In each half-day session, students must answer two of the four questions provided. In total, students will answer four questions. Students may bring a one-page double-sided printed list of references (about 5-7 for each topic), but no notes, into the examination. Students will submit their reference page, question packets, and any notes they take during the examination. No materials may leave the examination room. Students are not allowed to access any other form of hard or electronic resources (e.g., phone, internet, cloud, flash drive) during the examination.

Examination Site. Students will take the Written Examination in a site to be announced.

Examination Submission. The written exam will be completed using Microsoft Word, and uploaded to a dropbox on the Speech-Language Pathology Program D2L site at the end of each half-day session. Also, students also will save their responses to a USB flash drive provided at the examination, as back-up. These flash drives will be distributed at the beginning of each exam session and collected at the end of each exam session. They may not leave the examination room.

Evaluation. Each question will be graded anonymously and individually by faculty members with expertise in the core topic areas. Grading will be based on a rubric. The examiners of the core areas will use a specific rubric to guide their evaluation of content within the scope of a common rubric created for the written examination. Grading will consider, but not be limited to: the relevance of the response to the question; the comprehensiveness and accuracy of the information provided; integration of theory and practice, when appropriate; evidence-based support from the literature; inclusion of specific clinical examples, when appropriate; organization, conciseness, and clarity of the response; and spelling and grammar with only minor errors.

Preparation. In preparation for the Written Examination:

- a) Review your course materials and related clinic materials and experiences.
- b) Organize the material using an evidence-based practice approach to the literature.
- c) Think critically and apply evidence about a particular disorder as you would in clinic.
- d) Think how you would analyze the evidence in literature regarding assessment or treatment of a disorder and how it directs your clinical choices.

Strategies for answering Written Examination questions:

- a) Ensure you have read and understood all parts of the question.
- b) Draft a brief organizational outline.
- c) Check your reference list and recall relevant information.
- d) Provide sufficient detail that will ensure your knowledge on the material in question- whether it is theoretical underpinnings or clinical case scenario or a combination of the two.
- e) Ensure that the answers are well organized in content and structure.
- f) Read/edit for organization, clarity, spelling, and grammar.

Oral Examination

Content. The Oral Examination involves answering questions about two clinical cases: one pediatric case and one adult case. The cases may include one or more elements from among the following seven core topic areas:

1. Language disorders in children
2. Speech sound disorders in children
3. Neurological language disorders in adults
4. Dysphagia in children or adults
5. Voice disorders in children or adults
6. Fluency disorders in children or adults
7. Motor speech disorders in adults

Format. Students will be assigned a pediatric case on the first day and an adult case on the second day. Topics will be randomly assigned. For each case, students will be given relevant client information and 20 minutes to prepare. Students will then answer questions about the case posed by their oral examination committee for approximately 20 minutes. Students may bring the client information packet but no notes into the examination other than what they have written during their 20-minute preparation.

Examination Site. To be determined.

Evaluation. Each oral examination will be conducted and graded by two members of the faculty, with at least one being a member of the student's advisory committee. Grading will be based on a common rubric created for the oral examination. Grading will consider, but not be limited to: accuracy of interpretation of the diagnostic and/or treatment information provided; integration of theory and practice; inclusion of evidence-based support for intervention including specific clinical examples, when appropriate; the relevance of the responses to the questions; organization and clarity of the response.

Preparation. In preparation for the Oral Examination:

- a) Conduct chart reviews whenever you have the opportunity throughout clinical training.
- b) Actively engage in clinical discussions with supervisors and instructors throughout your program.
- c) Critically think about and discuss intervention with colleagues and supervisors, taking HIPAA restrictions into account.

- d) When considering alternative approaches to assessment and treatment for clients, review and become familiar with the literature and available evidence base.
- e) Consider the full range of assessment approaches (e.g., standardized, bedside, behavioral observation, criterion-based assessment) that may be pertinent to arriving at a differential diagnosis.
- f) Consider the intervention frameworks appropriate for disorders in the core areas (e.g., ICF, continuum of naturalness). For each core area, identify the specific treatment approaches and their key components.
- g) Review your practicum clinical evaluations to guide understanding of expectations and for strengths and weakness.
- h) Adopt a holistic view to intervention.

Strategies for Case Review for the Oral Examination:

- a) Read through the case carefully.
- b) Distinguish between relevant and irrelevant information.
- c) Make notes of key clinical observations and their implications.
- d) Prepare to justify their importance.

Strategies for answering Oral Examination questions:

- a) Ensure understanding of the question and ask for rephrasing if not understood.
- b) Keep the answer focused on the question posed.
- c) Take time to think before answering.
- d) Listen carefully to faculty comments; they may provide guidance for clarification of your response.
- e) Be ready to justify answers.

Timeline for Comprehensive Examination, Spring Graduation 2022

Non-Thesis Progression	Completion
Submit Advisory Committee Form	September, 2 nd year
Submit Appointment of a Graduate Committee Form	October, 2 nd year
Written Comprehensive Examination	First Day of Classes, January, 2 nd year
Oral Comprehensive Examination	Thursday and Friday, First Week of Classes, 2 nd year
Examination Results to Students	First Week of February, 2 nd year
Re-administration of Written Examination	First Mon. of March, 2 nd year
Re-administration of Oral Examination	First Thurs. & Fri. of March, 2 nd year

PRAXIS EXAMINATION

The student may take the PRAXIS exam in their last semester or after they have graduated. When you take the exam it is important to specify two recipient codes at the time of your exam in order to verify your score. All students must specify the CDIS department code of #0281. For students obtaining a school credential, also specify #1198 (College of Education). The passing score is 162 or higher (out of a possible 200 points) and may be retaken if you do not achieve a passing score on your first attempt. It is important to prepare for the Praxis exam. We suggest the following:

1. Student must take responsibility to study for the exam. We encourage students to form study groups to prepare.
2. The faculty supports the student review for the Praxis exam by presenting colloquia on how to prepare for the exam. We also refer students to the ASHA website ([ASHA](#)) for more information.

PROFESSIONAL ORGANIZATIONS

There are many professional organizations available in the area of education, medicine, and communication sciences and disorders. As a concerned member of the profession, you should consider joining the American Speech-Language-Hearing Association (ASHA) and/or the American Academy of Audiology (AAA) as well as your state speech and hearing association as a minimum. Some of the benefits of membership are personal. You receive the publications of the organizations and can attend conventions at reduced rates. Some of the benefits are to the profession as a whole. For instance, your ASHA and AAA memberships help to support legislation and public relations campaigns, which will increase awareness and support of our profession. Membership in the state organization supports licensure legislation and appropriate teacher certification standards.

You are **strongly** encouraged to become a member of the National Student Speech-Language-Hearing Association (NSSLHA) and the ETSU NSSLHA Chapter, which are affiliated with ASHA. Audiology students may also join the National Association of Future Doctors of Audiology (NAFDA) and or Student Academy of Audiologist (SAA). You will receive the ASHA journals, which should prove helpful in your studies. NSSLHA also publishes its own journal, which is geared to students, and sponsors awards. As a member of NSSLHA you also save a substantial amount when you apply for ASHA certification and membership. ETSU has established NSSLHA and SAA chapters. The members generally meet once a month and some of the meetings involve speakers or social events. The Tennessee Association of Audiologists and Speech-Language Pathologists (TAASLP) also has student membership available which entitles you to receive their newsletter and to attend the fall state convention for a reduced fee.

Applications for student membership in NSSLHA, SAA, or TAASLP can be obtained online or by contacting the NSSLHA/SAA faculty sponsors.

You can become a regular (professional) member of ASHA or TAASLP once you have completed the academic and practicum requirements for membership.

EXPECTATIONS AND ACTION ITEMS DURING THE COVID-19 PANDEMIC

Students must know and follow the ETSU Face Covering Policy. It can be found using the following link: <https://www.etsu.edu/policies/health-safety/face-coverings.php>.

Face coverings are required in most indoor settings for all students, faculty, staff, and visitors. This action applies to those who have been vaccinated, as well as those who have yet to receive the vaccine. Students, employees, and guests may remove their face coverings while eating or drinking, and face coverings are not required for individual private offices or residence hall rooms. Vaccination remains the best option for preventing serious illness and death from COVID-19, and ETSU encourages all students, faculty, and staff who have not been vaccinated to schedule an appointment as soon as possible. [ETSU Health](#) will continue to host free vaccine clinics throughout the coming weeks and there are ample sites available across the region to receive the lifesaving vaccine. Information regarding free vaccination opportunities is available at [Vaccines.gov](#) or Ballad Health. ETSU encourages all members of the community to dispel disinformation campaigns and take the appropriate steps to protect you and your family from the Delta variant.

The Department of Audiology and Speech-Language Pathology will follow guidelines issued by the CDC and the TN Department of Health, as well as requirements set forth by the University with regards to the COVID-19 pandemic. Your clinical site may have additional COVID-19 instructions and requirements. You need to be aware of these requirements and abide by them. If you have questions, speak with **Dr. Teresa Boggs, Clinical Director** at ETSU or **your Clinical Supervisor** at your clinical site.

From ETSU Health (policy updated 08-15-2021):

If you are experiencing symptoms of COVID-19, do not report to work or class.

If suspected COVID-19 illness or concern for exposure and testing is desired:

- Call one of the following:
 - University Health Center at 423-439-4225 (Monday-Friday, 8 a.m.-4:30 p.m.) or after-hours at 1-888-915-7299
 - Washington County Health Department at 423-975-2200
 - Personal primary care provider
- Seek emergency medical care immediately if experiencing severe symptoms, such as any of the following:
 - Trouble breathing
 - Persistent chest pain or pressure

- o Confusion
- o Inability to awaken or stay awake
- o Bluish lips
- o Any symptoms that are severe or personally concerning

Return to Work or Class Protocol

1. Confirmed COVID – 19 Illness with Symptoms - Must be excluded from all work or school activities until:

- At least 10 days have passed *since symptoms first appeared*
- AND At least 24 hours have passed *since last* fever without the use of fever-reducing medications
- AND Symptoms (e.g., cough, shortness of breath) have improved

It is the responsibility of the student or employee to monitor temperature and symptoms at least twice daily.

People who have tested positive for COVID-19 do not need to quarantine or get tested again for up to 3 months as long as they do not develop symptoms again. People who develop symptoms again within 3 months of their first bout of COVID-19 may need to be tested again if there is no other cause identified for their symptoms.

2. Laboratory-Confirmed COVID-19 but have not had any Symptoms (Asymptomatic) - Must be excluded from all work or school activities until:

- At least 10 days have passed since date of first positive COVID-19 diagnostic test
- AND have not subsequently developed symptoms since the positive test
- If symptoms develop, please follow the above protocol for **Confirmed COVID-19 Illness with Symptoms**

If an alternate diagnosis is determined for the symptoms, criteria for return to work or school should be based on that diagnosis.

Any questions regarding testing or symptoms should be directed to University Health, or to the student’s or employee’s personal medical provider.

People who have tested positive for COVID-19 do not need to quarantine or get tested again for up to 3 months as long as they do not develop symptoms again. People who develop symptoms again within 3 months of their first bout of COVID-19 may need to be tested again if there is no other cause identified for their symptoms.

3. Potential Exposure to COVID-19 (also known as “close contact” for unvaccinated persons: “Potential Exposure” (also known as “close contact”) is defined as *being within 6 feet for more than 15 total minutes within the last 24 hours* of a person who has had a confirmed positive test COVID-19. This includes exposure with the infected person going back 48 hours

prior to the time the positive test was collected, OR 48 hours prior to the time the positive contact showed symptoms, whichever is earlier.

Must be excluded from all work or school activities:

- Quarantine at home for 10 days after last exposure and continue to monitor symptoms for 14 days after last exposure.
- Quarantine may end after 10 days ONLY if the exposed person is completely asymptomatic.
- If symptoms develop, self-isolate and consider getting a test for COVID.
- Maintain physical distancing of at least 6 feet from others at all times
- People who have tested positive for COVID-19 do not need to quarantine or get tested again for up to 3 months as long as they do not develop symptoms again. People who develop symptoms again within 3 months of their first bout of COVID-19 may need to be tested again if there is no other cause identified for their symptoms.

4. Potential exposure to COVID-19 (also known as “close contact”) for vaccinated persons:

- Vaccinated persons with an exposure to someone with suspected or confirmed COVID-19 are not required to quarantine if they meet all of the following criteria:
 - Are fully vaccinated (i.e., ≥ 2 weeks following receipt of the second dose in a 2-dose series, or ≥ 2 weeks following receipt of one dose of a single-dose vaccine)
 - Have remained asymptomatic since the current COVID-19 exposure
- Fully vaccinated people should be tested 3-5 days following a known exposure to someone with suspected or confirmed COVID-19 and wear a mask in public indoor setting for 14 days or until they receive a negative test result. They should isolate if they test positive.
- Fully vaccinated people who live in a household with someone who is immunosuppressed, at increased risk of severe disease, or unvaccinated (including children <12 years of age) should also consider masking at home for 14 days following a known exposure or until they receive a negative test result.

5. Household Contacts: A household contact is an individual who shares any living spaces with someone who has a confirmed positive case of COVID-10. This includes bedrooms, bathrooms, living rooms, kitchens, etc.

- Non-vaccinated household contacts must be quarantined for 10 days after the case has completed their (minimum) 10-day isolation period (whether the case is symptomatic or not).
- If a household contact develops symptoms of COVID-19, they become a case. They should begin isolation as a case and consider getting tested.
- If a non-vaccinated household contact is able to separate themselves from the confirmed positive case, they must quarantine for 10 days after their last exposure, and continue to monitor symptoms for 14 days after the last exposure.

- A non-vaccinated household contact may be released from quarantine after 10 days only if he or she remains asymptomatic for the entire 10 days after the last exposure. Monitoring for symptoms must continue for 14 days after the last exposure. · For more information, see here.

Questions? Call the University Health Center at 423-439-4225 (Monday-Friday, 8 a.m.-4:30 p.m.) or after-hours at 1-888-915-7299, the Washington County Health Department at 423-975-2200, or Ballad Nurse Connect at 1-833-822-5523.

For students in the Dept of Audiology and Speech-Language Pathology, in any of these circumstances, also:

- Notify **Dr. Bess Sirmon-Taylor, Dept Chair of ASLP**
- Notify **Dr. Teresa Boggs, Clinical Director**
- Notify **your Clinical Supervisor** at your clinical site who can provide instruction on when to return to work.

If you are experiencing a medical emergency call 911

ETSU Health Center	Testing or Medical Care	423-439-4225
Washington County Health Department	Testing or Medical Care	423-975-2200
Dean of Students, Dr. Michelle Byrd	Support for Housing, or Alternative Class Arrangements	423-439-4311
Counseling Center	Counseling Services	423-439-3333; counselingcenter@etsu.edu
Disability Services	Disability Accommodations	423-439-8492; littleme@etsu.edu

IMPORTANT: Certain off-campus clinical sites may have requirements for mandatory vaccinations, and if you choose not to receive the vaccination, you may be re-assigned, but only if other clinical placements are available.

You have a responsibility to protect yourself and others. In the event clinical education or academic progression is delayed as a result of COVID-19 related absences, we will work together to create a plan to complete the needed requirements for the clinical education experience/course.

UNIVERSITY FACILITIES

Students who are enrolled at ETSU pay for the use of the Culp Center, the Student Health Center, and the Physical Activity Center in their student fees. The University Library is also available to all ETSU students. The library provides guidebooks and tours for those who are unfamiliar with the building and its services. Of special interest to students involved in research are the computer-assisted literature searches and interlibrary loan service.

A variety of cultural, entertainment, and athletic events are scheduled on campus. Students can obtain tickets to athletic events at reduced rates and some are even free! Concerts, plays, speakers, films, etc., are frequently presented in the D.P. Culp Center and the VA Theatre.

Use of Departmental Computers

The ASLP Department has made computers available for graduate student use in computer lab at the Nave Center. These computers allow access to the ETSU Library, e-mail, or the Internet. You must provide your own paper for printing for classes; the department will provide paper for printing reports. Additionally, there are numerous student computer labs across campus that provides such access.

To assure appropriate use of the computers please honor the following guidelines:

1. Students should receive instruction in appropriate use of the computers either in class, through a university-sponsored workshop, or from a knowledgeable colleague
2. Eating and drinking are not allowed in the computer work areas
3. Students must turn the computer off at the end of the day.

In addition, there are several student computer labs throughout the ETSU Campus and you can sign out laptops at the Sherrod library. Use the following link for the most updated list of computer lab resources <https://www.etsu.edu/helpdesk/labs/>

GRADUATE HOODING CONVOCATION/UNIVERSITY COMMENCEMENT

At the completion of the program, students are invited to participate in the Graduate Hooding Convocation in a separate ceremony that will occur prior to University Commencement. Each recipient of the graduate degree who is present is recognized and is hooded by faculty members of their choice. The Dept Chair and Executive Aide will develop the program and the SLP faculty committee determines recipients of the Alpha Eta Honor Society.

This activity is a student-led event. A faculty advisor will assist students in planning the ceremony. The student body will share the cost of the hooding ceremony. Financial support from student organizations may be requested to offset the cost. The following is a suggested timeline for planning:

1. The departmental Executive Aide, Ms. Rachel Hatfield, will assist with scheduling the time and date for the Hooding Ceremony.

2. In the Fall Semester prior to the ceremony, the student committee and a second year student will review prior ceremonies and outline plan for ceremony (e.g., invited speakers, music).
3. Establish a committee to work on the Hooding Ceremony. (Fall)
4. Invite speakers, schedule musicians. (Fall)
5. Contact possible donors for flowers. (Fall)
6. Assign a student to develop an invitation. (Fall)
7. The committee will finalize plan with faculty advisor. (Spring)
8. The committee will select food for reception and arrange with the Executive Aide. (Spring)
9. The committee will assign students to set up stage and seating (day of ceremony).

Students wishing to participate in hooding and commencement ceremonies should arrange to purchase or rent a cap, gown, and hood from the University Bookstore. Request a hood for a Master of Science in Speech-Language Pathology.

ASHA EMPLOYER AND ALUMNI SURVEY

We will be requesting that you keep us updated of your correct email address after you have graduated. Approximately a year after you have finished the program we will send you an Alumni and Employer survey. These are general questionnaires pertaining to your training here at ETSU. The information is used for our ASHA accreditation. We hope you will take the time to assist us in completing these questionnaires.

STUDENT GRIEVANCES

Occasionally students will have complaints about faculty members or about departmental procedures. Complaints about faculty may range from an assignment being too long, a test that is perceived to be too difficult, or a grade that is thought to be unfair. In most cases the complaints represent what amounts to a simple breakdown of communication between the faculty member and the student. Usually the parties involved resolve the problem satisfactorily without anyone else necessarily being aware that a problem existed. Very few complaints need to go any further for a solution.

If a student has a complaint concerning a faculty member that cannot be resolved in discussion with the faculty member or there is a problem that the student does not feel free to discuss with the faculty member, the student should come to the Department Chair or Graduate Coordinator. If the student can present evidence demonstrating the possibility of a valid complaint against the faculty member, the Department Chair or Graduate Coordinator will discuss the matter with the faculty member in an attempt to resolve the problem. The Department Chair or Graduate Coordinator may bring the student and faculty member together as part of this attempt. If the problem still cannot be resolved, the Department Chair could convene a grievance committee.

If a student has a complaint about a departmental procedure, this should also be discussed with the Department Chair or Graduate Coordinator. If the Department Chair or Graduate Coordinator feels that the complaint is legitimate, they will solicit input from other students and/or faculty members if appropriate, and alternatives may then be suggested and adopted. If the complaint

does not appear justified, no change in procedures will be made. Again, a grievance committee could be convened. Information about Student Conduct, Rights and Responsibilities are included in the Graduate Catalog and can also be found at <https://www.etsu.edu/students/conduct/> .

ACADEMIC DISHONESTY AND MISCONDUCT

Academic dishonesty includes plagiarism (representing someone else's ideas as if they are one's own), unauthorized collaboration on out-of-class projects, cheating on in-class exams, unauthorized advance access to an exam, fraudulent alterations of academic materials, and knowing cooperation with another person in an academically dishonest undertaking. Dishonesty will not be tolerated. Appropriate disciplinary action is at the discretion of the instructor and could include: a substitute assignment or exam, a grade of zero or F for the assignment or exam, a reduced grade for the exam, assignment or course, a grade of F for the course, or recommendation of probation, suspension or expulsion. Whenever disciplinary action is taken, this must be communicated in writing within 10 working days to the: (1) student; (2) student's advisor; (3) instructor's department chair; and (4) student's academic dean.

Students have the right to appeal any allegations or actions. Academic misconduct may involve obtaining undeserved academic credit or advantage, but the intent to defraud is not present. The instructor consults with the student and can require the student to complete a substitute assignment or exam. No further notification of university officials is required.

Further details regarding the policy are available in the ETSU Graduate Catalog.

CERTIFICATE OF CLINICAL COMPETENCE: SLP

To practice as a Speech-Language Pathologist or Audiologist, you must obtain the Certificate of Clinical Competence offered by the American Speech-Language-Hearing Association. In order to receive the certificate, you must complete a master's degree, a Clinical Fellowship, and achieve a passing score (162) in your major area on either the National Examination in Speech-Language Pathology. Guidelines and procedures for certification and information concerning the Clinical Fellowship are contained in the ASHA Membership and Certification Handbook.

ASHA CERTIFICATION REQUIREMENTS

ASHA's certification requirements for audiology and speech-language pathology reflect a trend in health care training programs nationally. They are based on competencies that will be acquired during your participation in the graduate experience. It includes course and clinical hour requirements, as well as competencies that can be achieved outside of these formats (e.g., invited workshops, internet tutorials, and presentations). Your participation in these alternative formats will be mandatory as these extra workshops may be the only time these competencies can be met. In other words, check with faculty before scheduling trips or commitments on open Fridays during the semester (including Summer) to avoid missing critical workshops. The competencies have been given to us by ASHA in a form called the Knowledge and Skills Acquisition (KASA)

document. Please see Appendix E. The department will have a meeting early in the semester to inform you about how to use the KASA and other paperwork requirements for tracking your progress on CALIPSO in achieving the competencies. Advisement sessions will be held to update the KASA form every semester after the first semester.

ASHA CODE OF ETHICS

The ASLP faculty at ETSU is dedicated to demonstrating and facilitating the standards of professional and ethical conduct. As part of that commitment to professional competence, the faculty emphasizes student understanding of the Code of Ethics of the American Speech-Language-Hearing Association (Appendix H). Upon successful completion of your graduate program, you should be ready to begin your Clinical Fellowship with full understanding of the importance of preserving the standards and principles of the Code of Ethics and with the ability to adhere strictly to those principles throughout your career.

GRADUATE ASSISTANTSHIPS, TUITION SCHOLARSHIPS, GRADUATE TRAINEESHIPS, TENNESSEE DEPARTMENT OF EDUCATION GRANT

The Department of Audiology and Speech-Language Pathology offers half-time Graduate Assistantships (10 hours work requirement per week) and Tuition Scholarships (8 hours work requirement per week) for full-time students in the ASLP program who have completed the undergraduate prerequisites. The department may request a Graduate Assistantship (20 hours work requirement per week) from the Office of Equity and Inclusion on behalf of qualified students, as indicated on student applications. These Graduate Assistantships and Tuition Scholarships are awarded on a competitive basis. Detailed guidelines for these positions are available in the College of Graduate and Continuing Studies Graduate Assistant Handbook <http://www.etsu.edu/gradstud/documents/gatshandbook.pdf> . If you are awarded one of these opportunities, you will be assigned to a faculty member for your work commitment. You should plan to be available to your faculty supervisor the week prior to start of classes through exam week. To summarize, the requirements for each are presented below.

Graduate Assistantships

1. Out-of-state tuition and one-half maintenance fees (in-state tuition) are waived for Fall and Spring semesters.
2. Out-of-state tuition is waived for Summer but maintenance fees are not waived in the Summer.
3. Students must register for a minimum of 9 units in Fall and Spring semesters and 6 units for Summer.
4. Receive a monthly stipend.
5. Must maintain a 3.0 GPA.
6. Appointments are from August 16 through May 13. You are responsible to your assigned faculty member for your work hours during that time. You must make

- arrangements to make up your hours with your faculty member if you will not be on campus during that time.
7. For SLP students: While your appointment is for 2 years, you must renew your appointment for the second year at the end of the first year. Announcements for renewal will be posted in the department and you must complete a form to renew your assistantship for the second year.

Tuition Scholarships

1. Out-of-state tuition and maintenance fees (in-state tuition) are waived for Fall and Spring semesters.
2. Out-of-state tuition is waived for Summer, but maintenance fees are not waived in the Summer.
3. Students must register for 9 units in Fall and Spring semester and 6 units for Summer.
4. Students must maintain a 3.0 GPA.
5. Appointments are from August 16 through May 13. You are responsible to your assigned faculty member for your work hours during that time. You must make arrangements to make up your hours with your faculty member if you will not be on campus during that time.
6. For SLP students: While your appointment is for 2 years, you must renew your appointment for the second year at the end of the first year. Announcements for renewal will be posted in the department and you must complete a form to renew your assistantship for the second year.

SUBSTANCE ABUSE POLICY

Students at East Tennessee State University who have chosen to prepare for a career in clinical and rehabilitative health have placed themselves into a relationship where there is special concern relative to the possession or use of alcohol, drugs or controlled substances. Therefore, the use, possession, distribution, sale or manufacturing of alcoholic beverages or public intoxication on property owned or controlled by the University; at a university-sponsored event; on property owned or controlled by an affiliated clinical site, or in violation of any term of the ETSU Drug-Free Schools and Communities Policy Statement is prohibited.

Appendix I contains further information about the college policy on substance abuse for students enrolled in clinical training programs.

APPENDIX A

COURSE REQUIREMENTS AND WORKSHEET FOR ACADEMIC & CLINICAL PLANNING

COURSE REQUIREMENTS: SLP

REQUIRED COURSES (27 HOURS)

<u>Course Number</u>	<u>Title</u>	<u>Semester</u>
CDIS 5010	Neuro Bases of Cog & Comm	Fall 1
CDIS 5015	Language Disorders in Children	Fall 1
CDIS 5025	Clinical Phonology	Fall 1
CDIS 5400	Research Methods in CDIS	Fall 1
CDIS 5040	Adult Language Disorders	Spring 1
CDIS 5045	Dysphagia	Spring 1
CDIS 5275	Dysphagia Lab (1 credit)	Spring 1
CDIS 5070	Voice Disorders	Spring 1
CDIS 5285	Voice Lab (1 credit)	Spring 1
CDIS 5035	Motor Speech Disorders	Fall 2
CDIS 5030	Fluency	Fall 2

ELECTIVES (15 HOURS)

CDIS 5295	Counseling in CDIS	Summer 1
CDIS 5200	Language Disorders School Age	Summer 1
CDIS 5250	Challenges in ASD	Fall 2
CDIS 5290	Adv. Adult Neuro Disorders	Fall 2
CDIS 6300	Audiologic Rehab	Spring 2
CDIS 5240	Pediatric Organic Disorders	Spring 2
CDIS 5280	Language & Literacy Disorders	Spring 2
CDIS 5960	Thesis (6 credits)	Fall 2/Spring 2

CLINIC COURSES (9 HOURS; ONE EACH TERM FOR FULL TIME STUDENTS)

CDIS 5620	SLP Clinic: Child Evaluation/Treatment
CDIS 5640	SLP Clinic: Adult Evaluation/Treatment
CDIS 5670	SLP Clinic: Advanced (repeatable)
CDIS 5690	Externship: SLP (6 units)
CDIS 5510	AUD Clinic for SLP

APPENDIX B

PROCEDURES FOR ADMISSION TO MASTER'S CANDIDACY AT ETSU

Admission to the College of Graduate and Continuing Studies and the approval to pursue a degree program does not in any way imply that a student is admitted to candidacy for the master's degree. To be admitted to candidacy the student must:

1. Remove all conditions required at the time of admission by the College of Graduate and Continuing Studies.
2. Complete at least one semester (12-15 hours) of residence study following admission to the College of Graduate and Continuing Studies.
3. Complete a minimum of 12 semester hours in the major field of study with a grade point average of 3.0 or above.
4. Meet the specific requirements of the major department.
5. Submit the completed forms for admission to candidacy and an approved program of study of the associate vice president for research and dean of the graduate school before the beginning of the last semester of residency. When the application for candidacy is approved, the student may be considered a candidate for the graduate degree. Changes in the planned program of study for candidacy will not be approved in the College of Graduate and Continuing Studies if the changes or course substitutions are not made prior to enrollment in courses. Forms for program changes are available in the Graduate Office.

APPENDIX C

APPLICATION FOR THESIS

*East Tennessee State University
Department of Audiology and Speech-Language Pathology*

Name: _____

Address: _____

Phone Number: (____) ____-_____

Undergraduate GPA: _____

GRE Scores: _____

Graduate GPA: _____

Graduate Semester: _____

Title/Topic of Proposed Research: _____

Proposed Thesis Committee Chair: _____

Proposed Thesis Committee Members: _____

Brief Description of Project: _____

Potential Source of Participants: _____

Indicate completion, grade, and involvement of the following:

CDIS 5400 Research Methods: Grade: _____

Statistics Course: Grade: _____

Any other previous research studies: (principal investigator or research assistant)

APPENDIX E

STANDARDS FOR CERTIFICATE OF CLINICAL COMPETENCE

2020 Standards and Implementation Procedures for the Certificate of Clinical Competence in Speech-Language Pathology

Effective Date: January 1, 2020

Introduction

The Council for Clinical Certification in Audiology and Speech-Language Pathology (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; 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.

A [Practice and Curriculum Analysis of the Profession of Speech-Language Pathology](#) was conducted in 2017 under the auspices of the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) and the CFCC. The survey analysis was reviewed by the CFCC, and the following standards were developed to better fit current practice models.

The 2020 Standards and Implementation Procedures for the Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP) went into effect on January 1, 2020. View the [SLP Standards Crosswalk](#) [PDF] and consult [Changes to Speech-Language Pathology Standards](#) for more specific information on how the standards changed.

Terminology

Clinical educator: Refers to and may be used interchangeably with supervisor, clinical instructor, and preceptor

Individual: Denotes clients, patients, students, and other recipients of services provided by the speech-language pathologist.

Citation

Cite as: Council for Clinical Certification in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association. (2018). *2020 Standards for the Certificate of Clinical Competence in Speech-Language Pathology*. Retrieved from <https://www.asha.org/certification/2020-SLP-Certification-Standards>.

The Standards for the CCC-SLP are shown in bold. The CFCC implementation procedures follow each standard.

- [Standard I—Degree](#)
- [Standard II—Education Program](#)
- [Standard III—Program of Study](#)
- [Standard IV—Knowledge Outcomes](#)
- [Standard V—Skills Outcomes](#)
- [Standard VI—Assessment](#)
- [Standard VII—Speech-Language Pathology Clinical Fellowship](#)
- [Standard VIII—Maintenance of Certification](#)

Standard I: Degree

The applicant for certification (hereafter, “applicant”) must have a master's, doctoral, or other recognized post-baccalaureate degree.

Standard II: Education Program

All graduate coursework and graduate clinical experience required in speech-language pathology must have been initiated and completed in a CAA-accredited program or in a program with CAA candidacy status.

Implementation: The applicant’s program director or official designee must complete and submit a program director verification form. Applicants must submit an official graduate transcript or a letter from the registrar that verifies the date on which the graduate degree was awarded. The official graduate transcript or letter from the registrar must be received by the ASHA National Office no later than one (1) year from the date on which the application was received. Verification of the applicant’s graduate degree is required before the CCC-SLP can be awarded.

[Applicants educated outside the United States or its territories](#) must submit documentation that coursework was completed in an institution of higher education that is regionally accredited or recognized by the appropriate regulatory authority for that country. In addition, applicants outside the United States or its territories must meet each of the standards that follow.

Standard III: Program of Study

The applicant must have completed a program of study (a minimum of 36 semester credit hours at the graduate level) that includes academic coursework and supervised clinical experience sufficient in depth and breadth to achieve the specified knowledge and skills outcomes stipulated in Standards IV-A through IV-G and Standards V-A through V-C.

Implementation: The minimum of 36 graduate semester credit hours must have been earned in a program that addresses the knowledge and skills pertinent to the [ASHA Scope of Practice in Speech-Language Pathology](#).

Standard IV: Knowledge Outcomes

Standard IV-A

The applicant must have demonstrated knowledge of statistics as well as the biological, physical, and social/behavioral sciences.

Implementation: Coursework in statistics as well as in biological, physical, and social/behavioral sciences that is specifically related to communication sciences and disorders (CSD) may not be applied for certification purposes to this category unless the course fulfills a general the university requirement in the statistics, biology, physical science, or chemistry areas.

Acceptable courses in biological sciences should emphasize a content area related to human or animal sciences (e.g., biology, human anatomy and physiology, neuroanatomy and neurophysiology, human genetics, veterinary science). Chemistry and physics are important for the foundational understanding of the profession of speech-language pathology. For all applicants who apply beginning January 1, 2020, courses that meet the physical science requirement must be in physics or chemistry. Program directors must evaluate the course descriptions or syllabi of any courses completed prior to students entering their programs to determine if the content provides foundational knowledge in physics or chemistry. Acceptable courses in social/behavioral sciences should include psychology, sociology, anthropology, or public health. A stand-alone course in statistics is required. Coursework in research methodology in the absence of basic statistics cannot be used to fulfill this requirement.

Standard IV-B

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

Standard IV-C

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, and anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

- **Speech sound production, to encompass articulation, motor planning and execution, phonology, and accent modification**
- **Fluency and fluency disorders**
- **Voice and resonance, including respiration and phonation**
- **Receptive and expressive language, including phonology, morphology, syntax, semantics, pragmatics (language use and social aspects of communication), prelinguistic communication, paralinguistic communication (e.g., gestures, signs, body language), and literacy in speaking, listening, reading, and writing**
- **Hearing, including the impact on speech and language**
- **Swallowing/feeding, including (a) structure and function of orofacial myology and (b) oral, pharyngeal, laryngeal, pulmonary, esophageal, gastrointestinal, and related functions across the life span**
- **Cognitive aspects of communication, including attention, memory, sequencing, problem solving, and executive functioning**
- **Social aspects of communication, including challenging behavior, ineffective social skills, and lack of communication opportunities**

- **Augmentative and alternative communication modalities**

Implementation: It is expected that coursework addressing the professional knowledge specified in this standard will occur primarily at the graduate level.

Standard IV-D

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for persons with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

Standard IV-E

The applicant must have demonstrated knowledge of standards of ethical conduct.

Implementation: The applicant must have demonstrated knowledge of the principles and rules of the current [*ASHA Code of Ethics*](#).

Standard IV-F

The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

Implementation: The applicant must have demonstrated knowledge of the principles of basic and applied research and research design. In addition, the applicant must have demonstrated knowledge of how to access sources of research information and must have demonstrated the ability to relate research to clinical practice.

Standard IV-G

The applicant must have demonstrated knowledge of contemporary professional issues.

Implementation: The applicant must have demonstrated knowledge of professional issues that affect speech-language pathology. Issues include trends in professional practice, academic program accreditation standards, [*ASHA practice policies*](#) and guidelines, educational legal requirements or policies, and reimbursement procedures.

Standard IV-H

The applicant must have demonstrated knowledge of entry level and advanced certifications, licensure, and other relevant professional credentials, as well as local, state, and national regulations and policies relevant to professional practice.

Standard V: Skills Outcomes

Standard V-A

The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

Implementation: Applicants are eligible to apply for certification once they have completed all graduate-level academic coursework and clinical practicum and have been judged by the graduate program as having acquired all of the knowledge and skills mandated by the current standards.

The applicant must have demonstrated communication skills sufficient to achieve effective clinical and professional interaction with persons receiving services and relevant others. For oral communication, the applicant must have demonstrated speech and language skills in English, which, at a minimum, are consistent with ASHA's current position statement on [students and professionals who speak English with accents and nonstandard dialects](#). In addition, the applicant must have demonstrated the ability to write and comprehend technical reports, diagnostic and treatment reports, treatment plans, and professional correspondence in English.

Standard V-B

The applicant must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

1. Evaluation

- a. Conduct screening and prevention procedures, including prevention activities.**
- b. Collect case history information and integrate information from clients/patients, family, caregivers, teachers, and relevant others, including other professionals.**
- c. Select and administer appropriate evaluation procedures, such as behavioral observations, nonstandardized and standardized tests, and instrumental procedures.**
- d. Adapt evaluation procedures to meet the needs of individuals receiving services.**
- e. Interpret, integrate, and synthesize all information to develop diagnoses and make appropriate recommendations for intervention.**
- f. Complete administrative and reporting functions necessary to support evaluation.**
- g. Refer clients/patients for appropriate services.**

2. Intervention

- a. Develop setting-appropriate intervention plans with measurable and achievable goals that meet clients'/patients' needs. Collaborate with clients/patients and relevant others in the planning process.**
- b. Implement intervention plans that involve clients/patients and relevant others in the intervention process.**
- c. Select or develop and use appropriate materials and instrumentation for prevention and intervention.**
- d. Measure and evaluate clients'/patients' performance and progress.**
- e. Modify intervention plans, strategies, materials, or instrumentation as appropriate to meet the needs of clients/patients.**

- f. Complete administrative and reporting functions necessary to support intervention.**
- g. Identify and refer clients/patients for services, as appropriate.**

3. Interaction and Personal Qualities

- a. Communicate effectively, recognizing the needs, values, preferred mode of communication, and cultural/linguistic background of the individual(s) receiving services, family, caregivers, and relevant others.**
- b. Manage the care of individuals receiving services to ensure an interprofessional, team-based collaborative practice.**
- c. Provide counseling regarding communication and swallowing disorders to clients/patients, family, caregivers, and relevant others.**
- d. Adhere to the ASHA *Code of Ethics*, and behave professionally.**

Implementation: The applicant must have acquired the skills listed in this standard and must have applied them across the nine major areas listed in Standard IV-C. These skills may be developed and demonstrated through direct clinical contact with individuals receiving services in clinical experiences, academic coursework, labs, simulations, and examinations, as well as through the completion of independent projects.

The applicant must have obtained a sufficient variety of supervised clinical experiences in different work settings and with different populations so that the applicant can demonstrate skills across the *ASHA Scope of Practice in Speech-Language Pathology*. *Supervised clinical experience* is defined as clinical services (i.e., assessment/diagnosis/evaluation, screening, treatment, report writing, family/client consultation, and/or counseling) related to the management of populations that fit within the [ASHA Scope of Practice in Speech-Language Pathology](#).

These experiences allow students to:

- interpret, integrate, and synthesize core concepts and knowledge;
- demonstrate appropriate professional and clinical skills; and
- incorporate critical thinking and decision-making skills while engaged in prevention, identification, evaluation, diagnosis, planning, implementation, and/or intervention.

Supervised clinical experiences should include interprofessional education and interprofessional collaborative practice, and should include experiences with related professionals that enhance the student's knowledge and skills in an interdisciplinary, team-based, comprehensive service delivery model.

Clinical simulations (CS) may include the use of standardized patients and simulation technologies (e.g., standardized patients, virtual patients, digitized mannequins, immersive reality, task trainers, computer-based interactive). These supervised experiences can be synchronous simulations (real-time) or asynchronous (not concurrent in time) simulations.

Clinical educators of clinical experiences must hold current ASHA certification in the appropriate area of practice during the time of supervision. The supervised activities must be within the [ASHA Scope of Practice in Speech-Language Pathology](#) in order to count toward the student's ASHA certification requirements.

Standard V-C

The applicant must complete a minimum of 400 clock hours of supervised clinical experience in the practice of speech-language pathology. Twenty-five hours must be spent in guided clinical observation, and 375 hours must be spent in direct client/patient contact.

Implementation: Guided clinical observation hours generally precede direct contact with clients/patients. Examples of guided observations may include but are not limited to the following activities: debriefing of a video recording with a clinical educator who holds the CCC-SLP, discussion of therapy or evaluation procedures that had been observed, debriefings of observations that meet course requirements, or written records of the observations. It is important to confirm that there was communication between the clinical educator and observer, rather than passive experiences where the student views sessions and/or videos. It is encouraged that the student observes live and recorded sessions across settings with individuals receiving services with a variety of disorders and completes debriefing activities as described above.

The observation and direct client/patient contact hours must be within the [*ASHA Scope of Practice in Speech-Language Pathology*](#) and must be under the supervision of a qualified professional who holds a current ASHA certification in the appropriate practice area. Guided clinical supervision may occur simultaneously during the student's observation or afterwards through review and approval of the student's written reports or summaries. Students may use video recordings of client services for observation purposes.

Applicants should be assigned practicum only after they have acquired a base of knowledge sufficient to qualify for such experience. Only direct contact (e.g., the individual receiving services must be present) with the individual or the individual's family in assessment, intervention, and/or counseling can be counted toward practicum. When counting clinical practicum hours for purposes of ASHA certification, only the actual time spent in sessions can be counted, and the time spent cannot be rounded up to the nearest 15-minute interval.

Up to 20% (i.e., 75 hours) of direct contact hours may be obtained through CS methods. Only the time spent in active engagement with CS may be counted. CS may include the use of standardized patients and simulation technologies (e.g., standardized patients, virtual patients, digitized mannequins, immersive reality, task trainers, computer-based interactive). Debriefing activities may not be included as clinical clock hours.

Although several students may observe a clinical session at one time, clinical practicum hours should be assigned only to the student who provides direct services to the individual receiving services or the individual's family. Typically, only one student at a time should be working with a client in order to count the practicum hours. Several students working as a team may receive credit for the same session, depending on the specific responsibilities that each student is assigned when working directly with the individual receiving services. The applicant must maintain documentation of their time spent in supervised practicum, and this documentation must be verified by the program in accordance with Standards III and IV.

Standard V-D

At least 325 of the 400 clock hours of supervised clinical experience must be completed while the applicant is enrolled in graduate study in a program accredited in speech-language pathology by the CAA.

Implementation: A minimum of 325 clock hours of supervised clinical practicum must be completed while the student is enrolled in the graduate program. At the discretion of the graduate program, hours obtained at the undergraduate level may be used to satisfy the remainder of the requirement.

Standard V-E

Supervision of students must be provided by a clinical educator who holds ASHA certification in the appropriate profession, who has the equivalent of a minimum of 9 months of full-time clinical experience, and who has completed a minimum of 2 hours of professional development in clinical instruction/supervision after being awarded ASHA certification.

The amount of direct supervision must be commensurate with the student's knowledge, skills, and experience; must not be less than 25% of the student's total contact with each client/patient; and must take place periodically throughout the practicum. Supervision must be sufficient to ensure the welfare of the individual receiving services.

Implementation: Effective January 1, 2020, supervisors for ASHA certification [must complete 2 hours of professional development/continuing education](#) in clinical instruction/supervision. The professional development/continuing education must be completed after being awarded ASHA certification and prior to the supervision of a student. Direct supervision must be in real time. A clinical educator must be available and on site to consult with a student who is providing clinical services to the clinical educator's client. Supervision of clinical practicum is intended to provide guidance and feedback and to facilitate the student's acquisition of essential clinical skills.

In the case of CS, asynchronous supervision must include debriefing activities that are commensurate with a minimum of 25% of the clock hours earned for each simulated individual receiving services.

Standard V-F

Supervised practicum must include experience with individuals across the life span and from culturally/linguistically diverse backgrounds. Practicum must include experience with individuals with various types and severities of communication and/or related disorders, differences, and disabilities.

Implementation: The applicant must demonstrate direct clinical experiences with individuals in both assessment and intervention across the lifespan from the range of disorders and differences named in Standard IV-C.

Standard VI: Assessment

The applicant must have passed the national examination adopted by ASHA for purposes of certification in speech-language pathology.

Implementation: Results of the [Praxis® Examination in Speech-Language Pathology](#) must be submitted directly to ASHA from the Educational Testing Service (ETS). The certification standards require that a passing exam score be earned no earlier than 5 years prior to the submission of the application and no later than 2 years following receipt of the application. If the exam is not successfully passed and reported within the 2-year application period, the applicant's certification file will be closed. If the exam is passed or reported at a later date, then the applicant will be required to reapply for certification under the standards in effect at that time.

Standard VII: Speech-Language Pathology Clinical Fellowship

The applicant must successfully complete a Speech-Language Pathology Clinical Fellowship (CF).

Implementation: The CF experience may be initiated only after completion of all graduate credit hours, academic coursework, and clinical experiences required to meet the knowledge and skills delineated in Standards IV and V. [The CF experience](#) must be initiated within 24 months of the date on which the application for certification is received. Once the CF has been initiated, it must be completed within 48 months of the initiation date. For applicants completing multiple CFs, all CF experiences related to the application must be completed within 48 months of the date on which the first CF was initiated. Applications will be closed for CFs that are not completed within the 48-month timeframe or that are not submitted to ASHA within 90 days after the 48-month timeframe. The Clinical Fellow will be required to reapply for certification and must meet the standards in effect at the time of re-application. CF experiences more than 5 years old at the time of application will not be accepted.

The CF must be completed under the mentorship of a clinician who held the CCC-SLP throughout the duration of the fellowship and must meet the qualifications described in Standard VII-B. It is the Clinical Fellow's responsibility to identify a CF mentor who meets ASHA's certification standards. Should the certification status of the mentoring SLP change during the CF experience, the Clinical Fellow will be awarded credit only for that portion of time during which the mentoring SLP held certification. It is incumbent upon the Clinical Fellow to verify the mentoring SLP's status periodically throughout the CF experience. Family members or individuals related in any way to the Clinical Fellow may not serve as mentoring SLPs to that Clinical Fellow.

Standard VII-A: Clinical Fellowship Experience

The CF must consist of clinical service activities that foster the continued growth and integration of knowledge, skills, and tasks of clinical practice in speech-language pathology consistent with ASHA's current *Scope of Practice in Speech-Language Pathology*. The CF must consist of no less than 36 weeks of full-time professional experience or its part-time equivalent.

Implementation: At least 80% of the Clinical Fellow's major responsibilities during the CF experience must be in direct, in-person client/patient contact (e.g., assessment, diagnosis, evaluation, screening, treatment, clinical research activities, family/client consultations, recordkeeping, report writing, and/or counseling) related to the management process for individuals who exhibit communication and/or swallowing disabilities.

Full-time professional experience is defined as 35 hours per week, culminating in a minimum of 1,260 hours. Part-time experience should be at least 5 hours per week; anything less than that will not meet the CF requirement and may not be counted toward completion of the experience. Similarly, work in excess of 35 hours per week cannot be used to shorten the CF to less than 36 weeks.

Standard VII-B: Clinical Fellowship Mentorship

The Clinical Fellow must receive ongoing mentoring and formal evaluations by the CF mentor. Mentorship must be provided by a clinician who holds the CCC-SLP, who has the equivalent of a minimum of 9 months of full-time clinical experience, and who has completed a minimum of 2 hours of professional development/continuing education in clinical instruction/supervision after being awarded the CCC-SLP.

Implementation: Effective January 1, 2020, CF mentors for ASHA certification [must complete 2 hours of professional development/continuing education](#) in clinical instruction/supervision after being awarded the CCC-SLP and prior to [mentoring the Clinical Fellow](#).

Direct observation must be in real time. A mentor must be available to consult with the Clinical Fellow who is providing clinical services. Direct observation of clinical practicum is intended to provide guidance and feedback and to facilitate the Clinical Fellow's independent use of essential clinical skills

Mentoring must include on-site, in-person observations and other monitoring activities, which may be executed by correspondence, review of video and/or audio recordings, evaluation of written reports, telephone conferences with the Clinical Fellow, or evaluations by professional colleagues with whom the Clinical Fellow works. The CF mentor and the Clinical Fellow must participate in regularly scheduled formal evaluations of the Clinical Fellow's progress during the CF experience. The Clinical Fellow must receive ongoing mentoring and formal evaluations by the CF mentor.

The amount of direct supervision provided by the CF mentor must be commensurate with the Clinical Fellow's knowledge, skills, and experience, and must not be less than the minimum required direct contact hours. Supervision must be sufficient to ensure the welfare of the individual(s) receiving services.

The mentoring SLP must engage in no fewer than 36 supervisory activities during the CF experience and must include 18 on-site observations of direct client contact at the Clinical Fellow's work site (1 hour = 1 on-site observation; a maximum of six on-site observations may be accrued in 1 day). At least six on-site observations must be conducted during each third of the CF experience. On-site observations must consist of the Clinical Fellow engaging in screening, evaluation, assessment, and/or habilitation/rehabilitation activities. Mentoring must include on-

site, in-person observations; however, the use of real-time, interactive video and audio conferencing technology may be permitted as a form of observation, for which pre-approval must be obtained

Additionally, supervision must include 18 other monitoring activities. *Other monitoring activities* are defined as the evaluation of reports written by the Clinical Fellow, conferences between the CF mentor and the Clinical Fellow, discussions with professional colleagues of the Clinical Fellow, and so forth, and may be executed by correspondence, telephone, or reviewing of video and/or audio tapes. At least six other monitoring activities must be conducted during each third of the CF experience.

If the Clinical Fellow and their CF mentor want to use supervisory mechanisms other than those outlined above, they may submit a written request to the CFCC prior to initiating the CF. Written requests may be emailed to cfcc@asha.org or mailed to: CFCC, c/o ASHA Certification, 2200 Research Blvd. #313, Rockville, MD 20850. Requests must include the reason for the alternative supervision and a detailed description of the supervision that would be provided (i.e., type, length, frequency, etc.), and the request must be co-signed by both the Clinical Fellow and the CF mentor. On a case-by-case basis, the CFCC will review the circumstances and may or may not approve the supervisory process to be conducted in other ways. Additional information may be requested by the CFCC prior to approving any request.

Standard VII-C: Clinical Fellowship Outcomes

The Clinical Fellow must demonstrate knowledge and skills consistent with the ability to practice independently.

Implementation: At the completion of the CF experience, the applicant must have acquired and demonstrated the ability to:

- integrate and apply theoretical knowledge;
- evaluate their strengths and identify their limitations;
- refine clinical skills within the *Scope of Practice in Speech-Language Pathology*; and
- apply the ASHA *Code of Ethics* to independent professional practice.

In addition, upon completion of the CF, the applicant must demonstrate the ability to perform clinical activities accurately, consistently, and independently and to seek guidance as necessary.

The CF mentor must document and verify a Clinical Fellow's clinical skills using the *Clinical Fellowship Report and Rating Form*, which includes the [*Clinical Fellowship Skills Inventory*](#) (CFSI), as soon as the Clinical Fellow successfully completes the CF experience. This report must be signed by both the Clinical Fellow and CF mentor.

Standard VIII: Maintenance of Certification

Certificate holders must demonstrate continued professional development for maintenance of the CCC-SLP.

Implementation: Clinicians who hold the CCC-SLP must accumulate and report 30 Certification Maintenance Hours (CMHs) (or 3.0 ASHA continuing education units [CEUs]) of professional

development, which [must include a minimum of 1 CMH \(or 0.1 ASHA CEU\) in ethics](#) during every [3-year certification maintenance interval](#) beginning with the 2021–2022 maintenance interval.

Intervals are continuous and begin January 1 of the year following the initial awarding of certification or the reinstatement of certification. [Random audits](#) of compliance are conducted.

Accrual of professional development hours, adherence to the ASHA [Code of Ethics](#), submission of certification maintenance compliance documentation, and payment of annual membership dues and/or certification fees are [required for maintenance of certification](#).

If maintenance of certification is not accomplished within the 3-year interval, then [certification will expire](#). Those who wish to regain certification must submit a reinstatement application and meet the standards in effect at the time the reinstatement application is submitted.

Information was acquired from [ASHA](#)

APPENDIX F

REQUIREMENTS FOR STATE LICENSURE

Students are responsible for independently retrieving, reading, and understanding the licensure rules of the state in which they plan to practice following graduation. A suggested first step is to view [ASHA](#). This link provides a link for each state. The state webpages provide an overview of requirements. To examine the administration and requirement details, follow the Board Oversight link and the Resources for Specific Rules and Regulations link.

REQUIREMENTS FOR TENNESSEE LICENSURE

Students are responsible for independently retrieving, reading, and understanding the licensure rules for Tennessee. The following links provide more specific information for Tennessee Licensure:

<http://www.asha.org/advocacy/state/info/TN/>

<http://www.asha.org/advocacy/state/info/TN/licensure/>

<https://www.tn.gov/health/health-program-areas/health-professional-boards/cds-board.html>

Any one of the links on this webpage leads you to a webpage with complete menu of links. Particularly helpful are: Licensure, Applications, Statutes and Rules, and Policies.

Test #0330 Speech-Language Pathology (no minimum score) Send qualifying score reports from Educational Testing Service to College of Education, Recipient Code # 1198	
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APPENDIX H

AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION

CODE OF ETHICS

Reference this material as: American Speech-Language-Hearing Association. (2016). Code of ethics [Ethics]. Available from www.asha.org/policy/.

Available from <http://www.asha.org/Code-of-Ethics/>

Preamble

The American Speech-Language-Hearing Association (ASHA; hereafter, also known as "The Association") has been committed to a framework of common principles and standards of practice since ASHA's inception in 1925. This commitment was formalized in 1952 as the Association's first Code of Ethics. This Code has been modified and adapted as society and the professions have changed. The Code of Ethics reflects what we value as professionals and establishes expectations for our scientific and clinical practice based on principles of duty, accountability, fairness, and responsibility. The ASHA Code of Ethics is intended to ensure the welfare of the consumer and to protect the reputation and integrity of the professions.

The ASHA Code of Ethics is a framework and focused guide for professionals in support of day-to-day decision making related to professional conduct. The Code is partly obligatory and disciplinary and partly aspirational and descriptive in that it defines the professional's role. The Code educates professionals in the discipline, as well as students, other professionals, and the public, regarding ethical principles and standards that direct professional conduct.

The preservation of the highest standards of integrity and ethical principles is vital to the responsible discharge of obligations by audiologists, speech-language pathologists, and speech, language, and hearing scientists who serve as clinicians, educators, mentors, researchers, supervisors, and administrators. This Code of Ethics sets forth the fundamental principles and rules considered essential to this purpose and is [applicable to the following individuals](#):

- a member of the American Speech-Language-Hearing Association holding the Certificate of Clinical Competence (CCC)
- a member of the Association not holding the Certificate of Clinical Competence (CCC)
- a nonmember of the Association holding the Certificate of Clinical Competence (CCC)
- an applicant for certification, or for membership and certification

By holding ASHA certification or membership, or through application for such, all individuals are automatically subject to the jurisdiction of the Board of Ethics for ethics complaint adjudication. Individuals who provide clinical services and who also desire membership in the Association must hold the CCC.

The fundamentals of ethical conduct are described by Principles of Ethics and by Rules of Ethics. The four Principles of Ethics form the underlying philosophical basis for the Code of Ethics and are reflected in the following areas: (I) responsibility to persons served professionally and to research participants, both human and animal; (II) responsibility for one's professional competence; (III) responsibility to the public; and (IV) responsibility for professional relationships. Individuals shall honor and abide by these Principles as affirmative obligations under all conditions of applicable professional activity. Rules of Ethics are specific statements of minimally acceptable as well as unacceptable professional conduct.

The Code is designed to provide guidance to members, applicants, and certified individuals as they make professional decisions. Because the Code is not intended to address specific situations and is not inclusive of all possible ethical dilemmas, professionals are expected to follow the written provisions and to uphold the spirit and purpose of the Code. Adherence to the Code of Ethics and its enforcement results in respect for the professions and positive outcomes for individuals who benefit from the work of audiologists, speech-language pathologists, and speech, language, and hearing scientists.

Terminology

ASHA Standards and Ethics

The mailing address for self-reporting in writing is American Speech-Language-Hearing Association, Standards and Ethics, 2200 Research Blvd., #313, Rockville, MD 20850.

advertising

Any form of communication with the public about services, therapies, products, or publications.

conflict of interest

An opposition between the private interests and the official or professional responsibilities of a person in a position of trust, power, and/or authority.

crime

Any felony; or any misdemeanor involving dishonesty, physical harm to the person or property of another, or a threat of physical harm to the person or property of another. For more details, see the "Disclosure Information" section of applications for ASHA certification found on www.asha.org/certification/AudCertification/ and www.asha.org/certification/SLPCertification/.

diminished decision-making ability

Any condition that renders a person unable to form the specific intent necessary to determine a reasonable course of action.

fraud

Any act, expression, omission, or concealment—the intent of which is either actual or constructive—calculated to deceive others to their disadvantage.

impaired practitioner

An individual whose professional practice is adversely affected by addiction, substance abuse, or health-related and/or mental health-related conditions.

individuals

Members and/or certificate holders, including applicants for certification.

informed consent

May be verbal, unless written consent is required; constitutes consent by persons served, research participants engaged, or parents and/or guardians of persons served to a proposed course of action after the communication of adequate information regarding expected outcomes and potential risks.

jurisdiction

The "personal jurisdiction" and authority of the ASHA Board of Ethics over an individual holding ASHA certification and/or membership, regardless of the individual's geographic location.

know, known, or knowingly

Having or reflecting knowledge.

may vs. shall

May denotes an allowance for discretion; *shall* denotes no discretion.

misrepresentation

Any statement by words or other conduct that, under the circumstances, amounts to an assertion that is false or erroneous (i.e., not in accordance with the facts); any statement made with conscious ignorance or a reckless disregard for the truth.

negligence

Breaching of a duty owed to another, which occurs because of a failure to conform to a requirement, and this failure has caused harm to another individual, which led to damages to this person(s); failure to exercise the care toward others that a reasonable or prudent person would take in the circumstances, or taking actions that such a reasonable person would not.

nolo contendere

No contest.

plagiarism

False representation of another person's idea, research, presentation, result, or product as one's own through irresponsible citation, attribution, or paraphrasing; ethical misconduct does not include honest error or differences of opinion.

publicly sanctioned

A formal disciplinary action of public record, excluding actions due to insufficient continuing education, checks returned for insufficient funds, or late payment of fees not resulting in unlicensed practice.

reasonable or reasonably

Supported or justified by fact or circumstance and being in accordance with reason, fairness, duty, or prudence.

self-report

A professional obligation of self-disclosure that requires (a) notifying ASHA Standards and Ethics and (b) mailing a hard copy of a certified document to ASHA Standards and Ethics (see term above). All self-reports are subject to a separate ASHA Certification review process, which, depending on the seriousness of the self-reported information, takes additional processing time.

shall vs. may

Shall denotes no discretion; *may* denotes an allowance for discretion.

support personnel

Those providing support to audiologists, speech-language pathologists, or speech, language, and hearing scientists (e.g., technician, paraprofessional, aide, or assistant in audiology, speech-language pathology, or communication sciences and disorders). For more information, read the Issues in Ethics Statements on [Audiology Assistants](#) and/or [Speech-Language Pathology Assistants](#).

telepractice, teletherapy

Application of telecommunications technology to the delivery of audiology and speech-language pathology professional services at a distance by linking clinician to client/patient or clinician to clinician for assessment, intervention, and/or consultation. The quality of the service should be equivalent to in-person service. For more information, [see the telepractice section](#) on the ASHA Practice Portal.

written

Encompasses both electronic and hard-copy writings or communications.

Principle of Ethics I

Individuals shall honor their responsibility to hold paramount the welfare of persons they serve professionally or who are participants in research and scholarly activities, and they shall treat animals involved in research in a humane manner.

Rules of Ethics

- A. Individuals shall provide all clinical services and scientific activities competently.
- B. Individuals shall use every resource, including referral and/or interprofessional collaboration when appropriate, to ensure that quality service is provided.
- C. Individuals shall not discriminate in the delivery of professional services or in the conduct of research and scholarly activities on the basis of race, ethnicity, sex, gender identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language, or dialect.
- D. Individuals shall not misrepresent the credentials of aides, assistants, technicians, support personnel, students, research interns, Clinical Fellows, or any others under their

supervision, and they shall inform those they serve professionally of the name, role, and professional credentials of persons providing services.

- E. Individuals who hold the Certificate of Clinical Competence may delegate tasks related to the provision of clinical services to aides, assistants, technicians, support personnel, or any other persons only if those persons are adequately prepared and are appropriately supervised. The responsibility for the welfare of those being served remains with the certified individual.
- F. Individuals who hold the Certificate of Clinical Competence shall not delegate tasks that require the unique skills, knowledge, judgment, or credentials that are within the scope of their profession to aides, assistants, technicians, support personnel, or any nonprofessionals over whom they have supervisory responsibility.
- G. Individuals who hold the Certificate of Clinical Competence may delegate to students tasks related to the provision of clinical services that require the unique skills, knowledge, and judgment that are within the scope of practice of their profession only if those students are adequately prepared and are appropriately supervised. The responsibility for the welfare of those being served remains with the certified individual.
- H. Individuals shall obtain informed consent from the persons they serve about the nature and possible risks and effects of services provided, technology employed, and products dispensed. This obligation also includes informing persons served about possible effects of not engaging in treatment or not following clinical recommendations. If diminished decision-making ability of persons served is suspected, individuals should seek appropriate authorization for services, such as authorization from a spouse, other family member, or legally authorized/appointed representative.
- I. Individuals shall enroll and include persons as participants in research or teaching demonstrations only if participation is voluntary, without coercion, and with informed consent.
- J. Individuals shall accurately represent the intended purpose of a service, product, or research endeavor and shall abide by established guidelines for clinical practice and the responsible conduct of research.
- K. Individuals who hold the Certificate of Clinical Competence shall evaluate the effectiveness of services provided, technology employed, and products dispensed, and they shall provide services or dispense products only when benefit can reasonably be expected.
- L. Individuals may make a reasonable statement of prognosis, but they shall not guarantee—directly or by implication—the results of any treatment or procedure.
- M. Individuals who hold the Certificate of Clinical Competence shall use independent and evidence-based clinical judgment, keeping paramount the best interests of those being served.
- N. Individuals who hold the Certificate of Clinical Competence shall not provide clinical services solely by correspondence, but may provide services via telepractice consistent with professional standards and state and federal regulations.

- O. Individuals shall protect the confidentiality and security of records of professional services provided, research and scholarly activities conducted, and products dispensed. Access to these records shall be allowed only when doing so is necessary to protect the welfare of the person or of the community, is legally authorized, or is otherwise required by law.
- P. Individuals shall protect the confidentiality of any professional or personal information about persons served professionally or participants involved in research and scholarly activities and may disclose confidential information only when doing so is necessary to protect the welfare of the person or of the community, is legally authorized, or is otherwise required by law.
- Q. Individuals shall maintain timely records and accurately record and bill for services provided and products dispensed and shall not misrepresent services provided, products dispensed, or research and scholarly activities conducted.
- R. Individuals whose professional practice is adversely affected by substance abuse, addiction, or other health-related conditions are impaired practitioners and shall seek professional assistance and, where appropriate, withdraw from the affected areas of practice.
- S. Individuals who have knowledge that a colleague is unable to provide professional services with reasonable skill and safety shall report this information to the appropriate authority, internally if a mechanism exists and, otherwise, externally.
- T. Individuals shall provide reasonable notice and information about alternatives for obtaining care in the event that they can no longer provide professional services.

Principle of Ethics II

Individuals shall honor their responsibility to achieve and maintain the highest level of professional competence and performance.

Rules of Ethics

- A. Individuals who hold the Certificate of Clinical Competence shall engage in only those aspects of the professions that are within the scope of their professional practice and competence, considering their certification status, education, training, and experience.
- B. Members who do not hold the Certificate of Clinical Competence may not engage in the provision of clinical services; however, individuals who are in the certification application process may engage in the provision of clinical services consistent with current local and state laws and regulations and with ASHA certification requirements.
- C. Individuals who engage in research shall comply with all institutional, state, and federal regulations that address any aspects of research, including those that involve human participants and animals.
- D. Individuals shall enhance and refine their professional competence and expertise through engagement in lifelong learning applicable to their professional activities and skills.

- E. Individuals in administrative or supervisory roles shall not require or permit their professional staff to provide services or conduct research activities that exceed the staff member's certification status, competence, education, training, and experience.
- F. Individuals in administrative or supervisory roles shall not require or permit their professional staff to provide services or conduct clinical activities that compromise the staff member's independent and objective professional judgment.
- G. Individuals shall make use of technology and instrumentation consistent with accepted professional guidelines in their areas of practice. When such technology is not available, an appropriate referral may be made.
- H. Individuals shall ensure that all technology and instrumentation used to provide services or to conduct research and scholarly activities are in proper working order and are properly calibrated.

Principle of Ethics III

Individuals shall honor their responsibility to the public when advocating for the unmet communication and swallowing needs of the public and shall provide accurate information involving any aspect of the professions.

Rules of Ethics

- A. Individuals shall not misrepresent their credentials, competence, education, training, experience, and scholarly contributions.
- B. Individuals shall avoid engaging in conflicts of interest whereby personal, financial, or other considerations have the potential to influence or compromise professional judgment and objectivity.
- C. Individuals shall not misrepresent research and scholarly activities, diagnostic information, services provided, results of services provided, products dispensed, or the effects of products dispensed.
- D. Individuals shall not defraud through intent, ignorance, or negligence or engage in any scheme to defraud in connection with obtaining payment, reimbursement, or grants and contracts for services provided, research conducted, or products dispensed.
- E. Individuals' statements to the public shall provide accurate and complete information about the nature and management of communication disorders, about the professions, about professional services, about products for sale, and about research and scholarly activities.
- F. Individuals' statements to the public shall adhere to prevailing professional norms and shall not contain misrepresentations when advertising, announcing, and promoting their professional services and products and when reporting research results.
- G. Individuals shall not knowingly make false financial or nonfinancial statements and shall complete all materials honestly and without omission.

Principle of Ethics IV

Individuals shall uphold the dignity and autonomy of the professions, maintain collaborative and harmonious interprofessional and intraprofessional relationships, and accept the professions' self-imposed standards.

Rules of Ethics

- A. Individuals shall work collaboratively, when appropriate, with members of one's own profession and/or members of other professions to deliver the highest quality of care.
- B. Individuals shall exercise independent professional judgment in recommending and providing professional services when an administrative mandate, referral source, or prescription prevents keeping the welfare of persons served paramount.
- C. Individuals' statements to colleagues about professional services, research results, and products shall adhere to prevailing professional standards and shall contain no misrepresentations.
- D. Individuals shall not engage in any form of conduct that adversely reflects on the professions or on the individual's fitness to serve persons professionally.
- E. Individuals shall not engage in dishonesty, negligence, fraud, deceit, or misrepresentation.
- F. Applicants for certification or membership, and individuals making disclosures, shall not knowingly make false statements and shall complete all application and disclosure materials honestly and without omission.
- G. Individuals shall not engage in any form of harassment, power abuse, or sexual harassment.
- H. Individuals shall not engage in sexual activities with individuals (other than a spouse or other individual with whom a prior consensual relationship exists) over whom they exercise professional authority or power, including persons receiving services, assistants, students, or research participants.
- I. Individuals shall not knowingly allow anyone under their supervision to engage in any practice that violates the Code of Ethics.
- J. Individuals shall assign credit only to those who have contributed to a publication, presentation, process, or product. Credit shall be assigned in proportion to the contribution and only with the contributor's consent.
- K. Individuals shall reference the source when using other persons' ideas, research, presentations, results, or products in written, oral, or any other media presentation or summary. To do otherwise constitutes plagiarism.
- L. Individuals shall not discriminate in their relationships with colleagues, assistants, students, support personnel, and members of other professions and disciplines on the basis of race, ethnicity, sex, gender identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language, dialect, or socioeconomic status.

- M. Individuals with evidence that the Code of Ethics may have been violated have the responsibility to work collaboratively to resolve the situation where possible or to inform the Board of Ethics through its established procedures.
- N. Individuals shall report members of other professions who they know have violated standards of care to the appropriate professional licensing authority or board, other professional regulatory body, or professional association when such violation compromises the welfare of persons served and/or research participants.
- O. Individuals shall not file or encourage others to file complaints that disregard or ignore facts that would disprove the allegation; the Code of Ethics shall not be used for personal reprisal, as a means of addressing personal animosity, or as a vehicle for retaliation.
- P. Individuals making and responding to complaints shall comply fully with the policies of the Board of Ethics in its consideration, adjudication, and resolution of complaints of alleged violations of the Code of Ethics.
- Q. Individuals involved in ethics complaints shall not knowingly make false statements of fact or withhold relevant facts necessary to fairly adjudicate the complaints.
- R. Individuals shall comply with local, state, and federal laws and regulations applicable to professional practice, research ethics, and the responsible conduct of research.
- S. Individuals who have been convicted; been found guilty; or entered a plea of guilty or nolo contendere to (1) any misdemeanor involving dishonesty, physical harm—or the threat of physical harm—to the person or property of another, or (2) any felony, shall self-report by notifying ASHA Standards and Ethics (see Terminology for mailing address) in writing within 30 days of the conviction, plea, or finding of guilt. Individuals shall also provide a certified copy of the conviction, plea, nolo contendere record, or docket entry to ASHA Standards and Ethics within 30 days of self-reporting.
- T. Individuals who have been publicly sanctioned or denied a license or a professional credential by any professional association, professional licensing authority or board, or other professional regulatory body shall self-report by notifying ASHA Standards and Ethics (see Terminology for mailing address) in writing within 30 days of the final action or disposition. Individuals shall also provide a certified copy of the final action, sanction, or disposition to ASHA Standards and Ethics within 30 days of self-reporting.

Issues in Ethics Statements

http://www.asha.org/practice/ethics/ethics_issues_index/?utm_source=asha&utm_medium=email&utm_campaign=seethics071417

From time to time, the Board of Ethics determines that members and certificate holders can benefit from additional analysis and instruction concerning a specific issue of ethical conduct. Issues in Ethics statements are intended to heighten sensitivity and increase awareness. They are illustrative of the [Code of Ethics](#) and are intended to promote thoughtful consideration of ethical issues. They may assist members and certificate holders in engaging in self-guided ethical decision making. These statements do not absolutely prohibit or require specific activity. The facts and circumstances surrounding a matter of concern will determine whether the activity is ethical.

APPENDIX I

COLLEGE OF CLINICAL AND REHABILITATIVE SCIENCES

SUBSTANCE ABUSE POLICY

College of Clinical and Rehabilitative Health Sciences Substance Abuse Policy For Students in Clinical Programs and Field Experiences

Students at East Tennessee State University who have chosen to prepare for a career in clinical and rehabilitative health have placed themselves into a relationship where there is special concern relative to the possession or use of alcohol, drugs or controlled substances. Therefore, the use, possession, distribution, sale or manufacturing of alcoholic beverages or public intoxication on property owned or controlled by the University; at a university-sponsored event; on property owned or controlled by an affiliated clinical site or in violation of any term of the ETSU Drug-Free Schools and Communities Policy Statement is prohibited. In addition, the unlawful use, possession, distribution, sale or manufacturing of any drug or controlled substance (including any stimulant, depressant, narcotic or hallucinogenic drug or substance, or marijuana), being under the influence of any drug or controlled substance or the misuse of legally prescribed or “over the counter” drugs on property owned or controlled by the University; at a university-sponsored event; on property owned or controlled by an affiliated clinical site or in violation of any term of the ETSU Drug-Free Schools and Communities Policy Statement is prohibited.

In addition to the ETSU General Policy on a Drug-Free Campus as stated in the *ETSU Spectrum*, the College of Clinical and Rehabilitative Health Sciences (CCRHS) must also maintain a safe academic environment for students and faculty, and must provide safe and effective care of patients while students are in the classroom and clinical/field settings. The presence or use of substances, lawful or otherwise, which interfere with the judgment or motor coordination of students in these settings, poses an unacceptable risk for patients, colleagues, the institution and the health care agency. This policy will be included in publications distributed to students by CCRHS programs. Students will sign a “Statement of Acknowledgement and Understanding Release Liability” form (attached to this policy) prior to initial clinical and/or field experiences to indicate that they have read and understood the policy.

All students in the College of Clinical and Rehabilitative Health Sciences will be responsible for compliance with:

- Drug-Free Campus/Workplace Policy Statement
- Institutional Disciplinary Rules (taken from TBR Policy No. 3:02:00:01): Institutional Policy Statement [Student Affairs](#) and Disciplinary Rules
- CCRHS Departmental and Clinical Handbooks
- Clinical/Field Site Regulations

Behaviors that may constitute evidence that an individual is under the influence of alcohol or drugs are stated and attached to this policy (see Reasonable Suspicion of Drug/Alcohol Use). Individuals who suspect a violation of this policy are required to take action. Students may be required to take blood tests, urinalysis and/or other drug/alcohol screen tests when an affiliate used for student clinical/field experiences requires screening without cause if such screenings are the policy for employees of that affiliate, and when clinical supervisory personnel (faculty or hospital employee), fellow students or a student's self-professed use determine that circumstances justify testing. The actions to be taken are spelled out in the following procedures:

1. If reasonable suspicion has been established (as identified on a form attached to this policy) that any provision of this policy has been violated or if an arrest for drug or alcohol violation occurs by any official law enforcement authority, the following actions are to be taken:
 - a. In all cases, the faculty or affiliate personnel responsible for that student has the responsibility for dismissing the student from the classroom or clinical/field experience immediately.
 - b. If the incident occurs in the classroom. The individual will be accompanied to the Dean or Dean's Designee.
 - c. If the incident occurs in a clinical/field setting, the Dean or Dean's Designee will be notified by telephone. In addition, the clinical/field supervisor will immediately notify the student's clinical/field coordinator in the respective program at the University. The student also has the responsibility to make arrangements immediately to meet with program faculty.
 - d. Because students enrolled in CCRHS programs may have a special patient/provider relationship, the student will be suspended from the program of study when the investigation commences. If the student is referred to the University Judicial Officer for disciplinary action, the suspension will remain in place until such time as the disciplinary process have been completed, including appeals.
2. Subsequent to a preliminary investigation by the Dean or Dean's Designee, the Dean will make the determination as to whether testing is appropriate and will then take steps to have the student tested at the student's expense. If the determination is made that testing is appropriate, the student will immediately be asked to submit to body fluid testing for substances at a laboratory designated by the College of Clinical and Rehabilitative Health Sciences. Based on the outcome of the test, the Dean or Dean's Designee will determine whether to initiate disciplinary charges.
3. If any student is asked and refuses to submit to a drug/alcohol screen, this information will be given to the Dean or Dean's Designee. The Dean's office will determine whether university judicial charges for failure to cooperate with an institutional official are to be forwarded to the Office of Student Affairs.

4. The Dean or Dean's designee will report screening results for licensed students/personnel to the respective state boards of licensure when applicable in accordance with their practices.
5. The Dean may refer the student to the University Judicial Officer for disciplinary action.
6. Upon determination that a student has violated ETSU and/or CCRHS Drug Rules as set forth in this policy, disciplinary sanctions may be imposed as outlined in the *ETSU Spectrum* under "Disciplinary Sanctions". Violation of these policies can result in disciplinary sanction up to and including dismissal from the University, even for a first offense.
7. All cases may be appealed by the student to the next higher judicial authority in accordance with the Appeal Procedures outlined in the ETSU Student Disciplinary Rules in the *ETSU Spectrum*. A final appeal of any disciplinary action may be made to the University's President.
8. When appropriate, the Dean or Dean's Designee may require the student to develop a specific plan for rehabilitation with a qualified health care professional. Counseling and assistance services for students who are identified as needing help will be recommended. The plan for rehabilitation may include referral to and the completion of Tennessee Professional Assistance Program services (when applicable, to the Clinical and Rehabilitative Health Sciences program). Qualified health care professionals will be responsible for monitoring compliance. All costs for assessment will be the responsibility of the student.
9. Should a student be dismissed from a program of study for violation of these policies, in order for the student to be considered for readmission into the CCRHS program, a written plan for rehabilitation shall be devised by a qualified health care professional which may include, but is not limited to, mandatory counseling, periodic drug/alcohol screening and periodic reporting. The student must assume the responsibility for compliance with this plan before a student's request for readmission into the program of study can be considered.

All educational records related to these procedures will be managed in compliance with the Family Educational Rights and Privacy Act (FERPA) and/or appropriate state board policy.

Approved 1/9/03 by Academic Council Reasonable Suspicion of Drug/Alcohol Use

1. State the date and time you contacted the Office of the Dean of the College of Clinical and Rehabilitative Health Sciences (include name of contact).
2. Write a report and include student name, date and time of observation and location.
3. Include any behavioral/visual/olfactory/auditory observations:
 - a. **Speech**

Normal	Incoherent	Confused	Change in Speech	Slurred
Rambling	Shouting	Slow	Using Profanity	

b. **Coordination**

Normal	Swaying	Staggering	Lack of Coordination	Grasping for Support
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c. **Performance**

Unsafe Practices	Change in Performance	Unsatisfactory Work
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d. **Alertness**

Sleepy	Confused	Change in Alertness
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e. **Demeanor**

Fighting	Excited	Combative	Change in Personality
Aggressive	Violent	Threatening	Argumentative
Indifferent	Antagonistic		

f. **Eyes**

Bloodshot	Dilated
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g. **Clothing**

Dirty	Disheveled	Inappropriate
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h. **Breath**

Odor of alcohol on breath

i. **Other Observed Actions or Behaviors**

4. List unexplained absences or tardiness.
5. Include if student admitted to the use of drugs/alcohol.
6. Describe if drugs/alcohol were discovered on student.
7. List reports or complaints of student behavior from personnel or other students.
8. List witnesses to behavior.
9. Describe specific incident in detail.
10. Sign and date report.
11. Send a copy of the report to the office of the Dean of the College of Clinical and Rehabilitative Health Sciences (note the date and time that you send the copy of the report).

12. Forward any recommendations of discipline to the CCRHS Dean.

Consent to Drug/Alcohol Testing

Statement of Acknowledgment and Understanding Release of Liability

I, _____, am enrolled in the health related program at East Tennessee State University. I acknowledge receipt and understanding of the institutional policy with regard to drug and alcohol testing, and the potential disciplinary sanctions which may be imposed for violation of such policy as stated in the respective program handbook.

I understand the purpose of this policy is to provide a safe working and learning environment for patients, students, clinical and institutional staff and property. Accordingly, I understand that prior to participation in the clinical experience, I may be required to undergo drug/alcohol testing of my blood or urine. I further understand that I am also subject to testing based on reasonable suspicion that I am using or am under the influence of drugs or alcohol.

I acknowledge and understand the intention to test for drugs and/or alcohol and agree to be bound by this policy. I hereby consent to such testing and understand that refusal to submit to testing or a positive result of the testing may affect my ability to participate in a clinical experience, and may also result in disciplinary action up to and including dismissal from East Tennessee State University.

If I am a licensed health professional, I understand that the state licensing agency will be contacted if I refuse to submit to testing or if my test result is positive. Full reinstatement of my license would be required for unrestricted return to my professional field of study.

My signature below indicates that:

1. I consent to drug/alcohol testing as required by clinical agencies or as directed by the Office of Student Affairs and/or the Dean of the College of Clinical and Rehabilitative Health Sciences.
2. I authorize the release of all information and records, including test results related to the screening or testing of my blood/urine specimen, to the Office of Student Affairs and/or the Dean of the College of Clinical and Rehabilitative Health Sciences, the director of the program and others deemed to have a need to know.
3. I understand that I am subject to the terms of the general regulations on student conduct and disciplinary sanctions of East Tennessee State University and the Drug-Free Schools and Communities Policy of East Tennessee State University as well as federal, state and local laws regarding drugs and alcohol.
4. I hereby release and agree to hold harmless East Tennessee State University and the Tennessee Board of Regents, their officers, employees and agents from any and all action, claim, demand, damages or costs arising from such test(s), in connection with, but not limited to the testing procedure, analysis, the accuracy of the analysis and the disclosure of the results.

My signature indicates that I have read and understand this consent and release, and that I have signed it voluntarily in consideration of enrollment in the program.

Student's Signature

Date

APPENDIX J

SPEECH-LANGUAGE PATHOLOGY GRADUATE ADVISING CONTACTS

Type of Advising

Contact

Academic Advising

Dr. Sirmon-Taylor – sirmontaylor@etsu.edu

Clinical advising/clinical placements

Mrs. Greer—GREERLP@mail.etsu.edu

KASA Coursework Advising

Dr. Sirmon-Taylor – sirmontaylor@etsu.edu

KASA Clinical Advising

Dr. Boggs—boggs@mail.etsu.edu

**STUDENT SIGNATURE PAGE CERTIFYING
PROPER REVIEW OF GRADUATE HANDBOOK**

The Graduate Handbook includes important information that is designed to help you the understand policies related to advising, organizations, culminating experience, and student grievances. Please read all information carefully and sign below to indicate your understanding of and agreement to follow these guidelines.

I have read the Graduate Handbook of Speech-Language Pathology program. I understand the information and will do my best to adhere to the policies and procedures.

Signature of Student

Date

Graduate Coordinator

Date

Please make a copy for yourself and return the form to the Graduate Coordinator.