

# **Master of Arts in Speech-Language Pathology**

**SLHS S568**

## **Medical Externship Handbook**

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COLLEGE OF ARTS AND  
SCIENCES

## **DEPARTMENT OF SPEECH, LANGUAGE AND HEARING SCIENCES**

Indiana University Bloomington

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### Medical Externship Timelines

Students completing the clinical M.A. degree typically complete two full-time off-campus externships during the final Spring II semester of the program. Externship placement is a complex process that requires careful pre-planning beginning in the first semester of the M.A. program.

In the Fall I semester, practicum placement meetings with the Medical Externship Coordinator will be held to provide students with important information about medical externships placements and planning paperwork. Students will be provided with a comprehensive list of active externship sites, of which students are strongly encouraged to seek out as a potential placement. **This meeting is mandatory for all students with TBD dates announced in the Fall I semester.**

After receiving information at the practicum placement meeting, students will be invited to join a Canvas course that contains all information needed for medical externships. **Students are expected to begin seeking medical externship placement sites and arranging interviews during Fall I semester.** Students are encouraged to apply for placements at multiple facilities but may not accept multiple externship offers. Students are also strongly encouraged to seek a placement that will provide diverse opportunities to gain more competence and clinical hours across a variety of disorder areas and populations. Students are highly encouraged to select a site that fits their clinical interests and clinical strengths. In addition, supplemental training may be required, as determined by the Medical Externship Coordinator. For example, students completing medical externships in Level I Trauma Centers or NICUs will be required to complete additional training, as determined by the site coordinator and Medical Externship Coordinator.

Many students will interview for medical externship placements during the Thanksgiving Break or between the Fall I and Spring I semesters. Students are responsible for keeping their Externship Planning Sheet on Canvas up to date as changes occur. **Written confirmation of medical externship placement must be sent to the Medical Externship Coordinator to assure placement, who will then approve the placement and deem it to be “confirmed.”**

**While the Department strives to place students within schools that are their top choices, there is no guarantee that a student can be placed at their school of choice, as there are numerous extraneous factors that play a role in student placement (e.g., supervisor availability, admin support, etc.).** Students are also expected to commute up to 3 hours per day to a school site.

**School placement preferences must be submitted by the start of the Spring I semester (January 8 at 5:00pm EST) utilizing the School Externship Planning Sheet, via email to the School Externship and School of Education Coordinators.** Preferences will be utilized to begin the complex process of securing placements. The typical timeline indicates that school placements are secured during the end of Summer I/beginning of Fall II semesters. **Preferences may not be changed unless due to extenuating circumstances and must be approved by the School Externship Coordinator.** School externship placements also require that students complete the EDUC–M563 Methods in Speech and Hearing Therapy course during Spring I of the M.A. program (prior to the start of their school externships).

School placements are typically confirmed by the end of Summer I/beginning of Fall II. During this time, the School Externship and School of Education Coordinators continue to work on student placements. **Students will be notified of their confirmed placement through TEIS; therefore, there is no need to contact Coordinators to inquire about placement status.**



In the Fall II semester before externships begin, the Medical Externship Coordinator will provide students with final planning information during S567 lectures. Students will then be expected to contact their medical externship placements to confirm start dates and obtain instructions for the on-boarding process to be completed prior to a student's first day onsite. This may include a drug screen, additional background checks, CPR certification, immunizations, FIT testing, and so forth. If the Medical Externship Coordinator must complete on-boarding and/or verify that a student has completed on-boarding requirements, then the relevant documentation must be submitted at least three weeks prior to the start date. Students are also required to track their progress on accumulated clock hours each semester during the M.A. program to identify need areas for externship.

### Placement Preferences & Requirements

It is the department's goal for all MA SLP students to obtain externships that are based upon preferences; the department's expectation is that students will apply, interview, and secure externships with the guidance of the Medical Externship Coordinator. **Students will be provided with extensive resources on how to successfully obtain a medical externship on the Canvas site and are expected to utilize the resources provided.** The process of obtaining a medical externship mimics searching for a Clinical Fellowship after completion of the program and develops crucial skills (e.g., interviewing, professional correspondence, time management, networking, etc.). **Students will be provided with a list of active externship contracts and are strongly encouraged to select a site from the provided list. If students choose to pursue a new site, they will fully assume the risk that the placement could fall through even up to the week before the anticipated start date.**

It is important for students to note that preferences might not be met for a variety of reasons, such as unwillingness of a facility to partner with a new university, limited availability of extern supervisors, and oversaturation of SLP students within a particular city. **Additionally, students must acknowledge that commuting a daily distance of up to 3 hours per day is expected regardless of location, and often allows for all student preferences to be met. Students that refuse an externship placement offered by a site take the risk of delaying their program, and thus, graduation date. The Medical Externship Coordinator must approve all externship placements. If a contract for an externship site is not fully finalized by December 1 of the Fall II semester, students will be required to pursue a new site with an already existing contract; thus, it is of the utmost importance that students obtain a placement as soon as possible.**

After a placement has been confirmed by a site, the Medical Externship Coordinator will then begin the process of contract negotiations with IU's Legal Department if an existing contract is not already in place. **This process does not involve students, as a legally binding contract exists between a facility and the university. Students are not granted access to any correspondence or communication that occurs during this negotiation process. If students have any questions or concerns regarding their medical externship at any point in time during the completion of the program, they should communicate with the Medical Externship Coordinator.**

Students must also note that meeting requirements of an externship site is the responsibility of the student and is beyond the control of the Department, including but not limited to vaccination, drug testing, background check, training, or other requirements. **Any costs associated with site requirements are also the students' responsibility.** The Medical Externship Coordinator will provide a written guide containing options to complete many of the above noted site requirements during the Fall II semester. **Failure to complete all onboarding requirements could result in a delayed externship start date or even cancellation of a placement.**



## Introduction

The medical externship is one of the most important experiences for students who are preparing to become speech-language pathologists. This experience provides a realistic preview of professional environments and responsibilities while the student still has access to direction, guidance, and support from the externship supervisor(s).

This handbook is directed toward improving understanding and communication regarding externship placements as part of the clinical training program of the MA SLP at Indiana University. It will address many of the questions that are commonly asked by both students and supervisors. It describes the logistics and also the components of the externship. Finally, and perhaps most importantly, it defines the role of the student, the externship supervisor(s), and the university externship coordinator. For the speech-language pathologist who is supervising an externship for the first time, it will serve as a guide; for experienced supervisors, it will affirm many of their practices, and perhaps, encourage new approaches and processes.

This discussion of Indiana University's MA SLP medical externship program should not begin without recognizing the significant contributions that externship supervisors make to the clinical training and professional education of the Department's students. Their collaboration with the Department directly influences the nature and quality of the training the students receive, and indirectly, the quality of services which they will provide. It is imperative that the Department thank externship supervisors and site coordinators for their support of the Department of Speech, Language and Hearing Sciences, its students, and the profession.

## The Supervisory Process

Supervision has been defined by Anderson (1988) as:

"...a process that consists of a variety of patterns of behavior, the appropriateness of which depends upon the needs, competencies, expectations, and philosophies of the supervisor and the supervisee (student) and the specifics of the situation (task, client, the setting, and other variables). The goals of the supervisory process are the professional growth and development of the supervisor and the supervisee, which it is assumed will result ultimately in optimal service to clients" (Anderson, 1988, p.12).

Several approaches to supervision can be found in the literature across clinical professions; however, Anderson's clinical supervision model and its continuum perspective offer the greatest potential for facilitating students/ professional growth and self-supervision while accommodating the variables that influence supervisory interactions. Work also completed by McCrea and colleagues (McCrea & Brasseur, 2003; McCrea & Golper, 2006) on supervisor also provides a succinct summary of the "continuum of supervision" as well as the components of the supervisory process and strategies to implement it.

In addition, several activities implied by the model warrant specific emphasis:

1. **Planning.** In addition to planning for the broad parameters of the externship experience, students and supervisors are encouraged to target clinical development (as well as supervisory process goals) which will be addressed during the externship. The goals for students should be behaviorally stated just as client goals are written, so that they will provide basis for observation, data collection, and analysis (i.e., feedback). This planning activity should involve direct student input and as a result, emphasize the importance of self-supervision.
2. **Feedback.** Feedback to students should address the clinical development (and supervisory process) goals that have been collaboratively developed and should be predicated upon



objective observational data. There are many strategies to collect this data; however, if clinical (and supervisory process) goals are behaviorally written, they will themselves suggest behaviors to be observed as well as how they will be measured. As the externship evolves, students should become responsible for collecting their own data to document their own behavior change in relation to the goals that were set. This activity moves them directly into sharing responsibility for their own supervision and demonstrates the value of self-supervision and self-reflection.

3. Conferences. The results of the planning, observation/data collection, and analysis culminate in the supervisory conference. It is the time when student progress is reconciled with the treatment plan; when progress toward student clinical development goals is reconciled with the clinical and supervisory process; when the information regarding professional issues is discussed; and when personal concerns are shared. During conferences two questions are answered: “How are we doing?” and, “Where do we go from here?” The analysis of observational and performance data will help both the supervisor and student anticipate the nature of the conference interaction and provide answers to these questions.
4. Evaluation. The parameters for evaluation of the student should be established and shared during the planning activity, which occurs within the first week of the experience. Specific clinical and supervisory process goals that students and supervisors develop will contribute to these parameters as will features of the formal evaluation tools which students will bring with them.

### The Role of the Medical Externship Supervisor

The speech-language pathologist who assumes the responsibility of supervising a student during the medical externship experience becomes part of a training “team.” The success of the experience is dependent, to a large extent, upon the supervisor’s view of their own role. This, in turn, will be determined by their experience as a service provider and as a clinical educator; as someone who was and continues to be supervised at some level; by their professional attitudes; and by the setting in which they are employed. These several facets of their role should be understood by both supervisors and students as well before the externship begins.

A medical externship supervisor serves many roles:

1. The supervisor as a change agent. The theoretical bases of the profession are constantly being developed through research. Changes which occur in practices and patterns of service delivery are, in great measure, the result of the practicing speech-language pathologists who apply the standards of Evidence-Based Practice. It is particularly urgent then that students develop the ability to evaluate current practices and develop an “attitude for change.” The externship supervisor can exercise great influence on future service to persons with cognitive, communication, and swallowing disorders through the learning experienced by the student during the externship period.
2. The supervisor as a planner. **Students have different strengths and needs, different interests, and different interpersonal dynamics.** Even though there will be basic common components of all externship placements, some individual planning will enhance each student’s experience. Supervising speech-language pathologists undoubtedly will have a framework of experiences which they feel are important for the students who will be working with them; **however, it should not be such a firm plan that it cannot be adapted to meet the needs and expectations of individual students.**



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3. The supervisors as a teacher. One of the aspects of the supervising speech-language pathologist's role is that of a teacher. As part of the "training team," it is assumed that supervisors will "teach" as they plan, observe/analyze/evaluate, and confer with the student. **For some students, this may mean extra, directed reading assignments pertaining to a disorder area in which the student may have minimal experience, or it may involve direct discussion of areas of need.** It may also involve supporting the student's evolving ability to become self-analytical about their own work as they work toward independence. Supervision IS teaching and the supervisor who accepts this role needs to understand their important contributions to the totality of the training program.
4. The supervisor as a professional model. Supervisors, because of their experience, position in their employment sites, and responsibility for students are cast in the crucial role of professional models for students. **Supervisors' actions and behaviors influence and significantly shape the speech-language pathologists they will become.**
5. The supervisor as an evaluator. One of the important roles of supervisors is that of an evaluator. The student who enters the externship is usually eager for feedback. Supervisors range from those who provide little feedback because they equate evaluation with criticism and are leery of hurting or demoralizing the student to those who help the student develop techniques for self-evaluation. The importance of evaluation and how to develop the process will be discussed further in the Supervisory Process section of this handbook. **At the end of the externship experience, it is the supervisor's responsibility to assess the student and recommend a grade to the Externship Coordinator.**
6. The supervisors as a service provider. **All externship supervisors should not lose sight of the fact that the first responsibility of the supervising speech-language pathologist is to their patients.** They become most adept at balancing the needs of their clients as well as the student, so that both can profit from the clinical program. **The university must take care not to make demands upon supervising speech-language pathologists which might be detrimental or burdensome to their program. Similarly, supervisors must not assume that patients will be harmed if students assume a major portion of the responsibility for their treatment.** Generally, the supervisor whose evaluation of the student is patient centered, (i.e., "What is happening to the behavior of patients as a result of the student's activities?") can anticipate problems and make adjustments which prevent negative programmatic consequences.

### Supervisor Expectations

One of the purposes of medical externships is to provide experiences unique to medically based settings. **In addition, it is anticipated that such experiences will meet the individual needs of each student and will take advantage of the particular features of the facility(ies) which the supervisor serves.** The specific content of the externship will vary, therefore, according to the dynamics of the site, the supervisor, the student, and the timing of the placement. Because the caseload and workload of these variables is different across settings, it is expected that externship supervisors will tailor the below listed requirements based upon the above noted factors:

1. Planning: Planning for the externship is an important task for supervisors and students to complete early in the placement and relies on their professional integrity and judgment. It is very meaningful for students if they can also be involved in the planning of some of details of their program. Planning should be conducted in such a way that while supervisors indicate those



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areas which they think are important and possible, students also feel free to set goals and make requests. Open communication between students and supervisors at this early point allows each to indicate what is seen as important and why. In addition, the pattern is set for open, on-going communication throughout the externship period, so that both supervisor and student feel free to suggest alternations to the plan if they become necessary. **Students and supervisors are required to complete a specific planning form by the Friday (or the 5<sup>th</sup> day) of the student's first week of externship (see Appendix A).**

2. Communication: Students and externship supervisors should determine the most appropriate form of communication, along with deadlines (e.g., how to notify supervisor of illness, deadline for notification, etc.). That agreed upon form should be utilized throughout the duration of the placement and also indicated on the planning form. Additionally, externship supervisors and students should determine how often hours should be signed within Calipso and how weekly feedback will be provided. **It is the department's expectation that students will participate in at least 1 brief meeting (30 minutes or less) per week to discuss progression of clinical skills and provide students with feedback essential to their clinical growth.**
3. Student Observations: Observation of the externship supervisor and/or other professionals provides a means of orienting student to caseloads/workloads and to the setting(s). An initial period of observation serves to decrease the student's anxiety about this new experience and to "introduce" the student to the supervisor's caseload; **however, a protracted period of observation does not seem to facilitate a student's progress in the externship.**
4. Caseload Transition: By way of the planning form, students and externship supervisors will determine transition of caseload from supervisor to student. **The department's expectation is that students begin to engage in hands-on clinical activities the first week of the medical externship.** In Appendix B you will find a suggested method of transitioning the caseload to students; by the end of the medical externship, students should assume responsibility of the caseload with the exception of medically complex patients, such as trach/vent, ICU, NICU, etc. **A student's independence with the caseload does not mean that externship supervisors no longer offer guidance or support, but rather that the student takes the primary lead on evaluations and treatments.**
5. Final Project: Students should select a final project based upon their clinical interests. This project can include but is not limited to systematic review of EVP approaches for evaluation or treatment, staff education/in-service, creation of treatment materials, patient education and/or staff resources. **Students are the owners of this project, which is also considered to be their own intellectual property, However, students will provide externship supervisors with copies of materials from the project.** Students' final project will be factored into their final externship grades.

### Clinical Activities

Students should gain experience in a wide range of clinical activities that are pertinent to the setting, including, but not limited to:

1. CSE; FEES; MBSS; aphasia, motor speech, cognitive-linguistic, and/or feeding evaluations
2. Treatments
3. Documentation of evaluations and treatments





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4. Plans of care and discharge summaries
5. Designing and implementing treatment plans
6. Collection and analysis of performance data
7. Patient, family, and/or staff conferences
8. Staff education
9. Collaboration with staff (e.g., PT, OT, RT, RD, RN, MD, SW, Case Management, etc.)

### Medical Externship Coordinator Expectations

The Medical Externship Coordinator serves as a liaison and mediator between the externship supervisor(s) and student during the medical externship practicum. It is also the role of the Medical Externship Coordinator to engage in consistent communication with both supervisor and student to ensure a mutually beneficial experience. The Medical Externship Coordinator should be informed of any student absences, supervisor and/or student concerns, and incidences. **Open communication with the externship coordinator ensures that students' and supervisors' needs are met.**

### Student Expectations

Students have the responsibility of preparing themselves so that they can maximally benefit from their medical externship experience. This implies utilization of information from academic courses and on-campus practicum experiences. **It also implies an attitude of willingness to learn in a new environment and an ability to adjust to new and challenging situations.**

#### Students will assume the following responsibilities during completion of their medical externships:

1. Acquire the necessary liability insurance, criminal history check, immunizations, CPR certification, etc., prior to beginning the externship placement; provide documentation to the site as required.
2. Introduce themselves to their externship supervisors via email and obtain necessary information needed for the first week of the placement.
3. Report at the appropriate time and place to begin the externship.
4. **Engage in respectful, open communication with externship supervisor(s) and externship coordinator throughout the length of the practicum experience. Voice any concerns regarding the practicum at the start of the experience or immediately as issues arise.**
5. Carry out responsibilities as planned by/with the externship supervisor(s).
6. Complete all documentation associated with S568, Medical Externship, to fulfill requirements for the course/practicum.

### Student Attendance Requirements

Department guidelines require students to complete a 10-week medical externship placement. Students are expected to complete a full-time (minimum 30 hours/week) placement with up to 3 speech-language pathologists. It is common for students to be placed with 1-3 supervisors to create a full-time practicum, which often benefits students in creating a more well-rounded, diverse clinical experience. However, students may have no more than 3 consistent externship supervisors. **Students are expected to hold the same schedule as their externship supervisor's contracted workday and participate in the same required duties as the externship supervisor. This may include weekend and/or holiday shifts, along with completing prolonged workdays (e.g., staying later). However, students may not remain alone in the facility after hours without the presence of a facility employee, preferably a licensed therapist.**



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**Students' mental and physical health and well-being should be prioritized during their medical externship.** Students may miss up to 5 days during their medical externships. Students may count a full day toward their placement if: a) they are present for 80% of the supervisor's contracted workday, b) inform their externship supervisor and externship coordinator **in advance** of need to alter workday, and c) do not alter workday more than 3 days during entire length of externship. **Students are not obligated to share medical or health status with externship supervisors or externship coordinator but must inform both parties of planned absences or alternation to the workday. However, students may be asked by their extern site to make up any planned absences. While 5 absences are allowed by the Department, fewer days may be approved by the externship site. It is the student's responsibility to be fully informed of site attendance policies.**

**Students are expected to arrive on time and remain present at their placement sites for the entire length of their supervisor's contracted workday. Students may not leave the placement site early or at any time without first notifying the externship supervisor. If a student arrives late or leaves early on more than 3 occasions during the length of the practicum, the student will automatically receive a score of 1 for Professionalism in the student's Calipso evaluation and result in subsequent remediation of the medical externship practicum. Externship supervisors are expected to evaluate students at both midterm and final on the above noted attendance policies.**

Given the 10-week requirement, if externship supervisors have planned or unplanned time off during the length of a student's practicum, students may observe another healthcare provider (e.g., PT, OT, RT, RD, SW, Case Management, MD, etc.) for **no more than 5 days of the total practicum. Students are also allowed to engage in telehealth services when provided with 100% supervision, as per ASHA guidelines.**

### Frequently Asked Student Questions About Attendance

1. Are all absences excused? Answer: Absences are not deemed excused or unexcused, but rather planned or unplanned. Planned absences can include medical appointments, personal business (like taking the Praxis), conference attendance, etc. Unplanned absences can include illness. **More than 5 days of absence, planned or unplanned, must be made up at the end of the externship. Externship sites reserve the right to require students to make up additional absences.**
2. How do I report absences? Answer: All absences must be reported to your externship supervisor(s) and externship coordinator.
3. How do I make up an absence? Answer: Absences can be made up by adding additional days at the end of your medical externship. **Students may not add additional hours onto externship days to create a full day.**
4. What should I do if I have several appointments scheduled during my medical externship? Answer: Students are strongly encouraged to schedule appointments early in the day or later in the afternoon to avoid missing an entire day of the medical practicum.

### Student Health Insurance Requirements

Graduate students enrolled in the MA SLP program at Indiana University are required to ensure they have full health insurance coverage (e.g., "active" and not "pending" status) for the semester(s) in which they will be completing their medical externships (i.e., while enrolled in S568). **Health insurance is required to protect students in the event of a site injury and is a requirement of all sites.** Failure to



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obtain medical health insurance may result in delayed placement or complete inability to secure appropriate placements.

### Student Vaccinations

Students are required to obtain any necessary vaccinations as required by their medical externship site. **Graduate students enrolled in the MA SLP program at Indiana University are financially responsible for any costs associated with obtaining the required vaccinations, titers, or testing.** All students completing medical externships are obligated to follow the externship facilities' rules and practices. Externship facilities' rules and practices may differ from IU Speech & Language Clinic's required immunizations. Student compliance with externship facility rules and health and safety regulations and requirements is a fundamental expectation. Failure to comply jeopardizes placement, progression, and even graduation. If a student does not meet the requirements of the externship facility, then an externship at a planned facility cannot occur, even with prior confirmation by the facility and externship coordinator. While the externship coordinator will make a reasonable effort to find an alternative placement, one cannot be guaranteed. Failure to meet externship facility rules could result in significant delays or failure to meet S568 requirements or meeting them in a timeframe and can result in discharge or dismissal from the externship facility and a delay or inability to complete S568 requirements.

### COVID Statement

Graduate students enrolled in the MA SLP program at Indiana University may evaluate or treat COVID + or PUI patients while completing medical externships if provided with appropriate PPE. This requires consistent access to properly fitting N95 masks or PAPRs, gowns, gloves, and face shields/goggles. Students may decline to see COVID + or PUI patients if not provided with the aforementioned PPE, or if they feel as though facilities are not adhering to appropriate protocols/procedures, thus creating unsafe conditions. Students with medical conditions are also exempt. It is at the discretion of the facility to require documentation of potential medical exemptions. **However, students who are unable to see COVID+ or PUI patients may accumulate fewer clock hours during externship placement and are required to work with the Externship Coordinator to determine an appropriate solution for reduced clock hours. This solution might include adding days to the length of the externship or completing externship days on weekends.**

### ASHA Supervision Requirements

All observation and clinical practicum hours must be supervised by individuals who hold current CCCs, have completed 9 months of experience post-CF, and have also completed .2 CEUs of supervision.

New supervision requirements went into effect on January 1, 2020. Supervisors must attest to having completed two hours of professional development (post-certification) in the area of clinical instruction or supervision. Only the supervisor who actually observes the student in clinical sessions is permitted to verify the credit given to the student for the clinical practicum hours.

Persons holding a CCC in speech-language pathology may supervise all speech-language pathology evaluation and treatment services, non-diagnostic audiologic procedures for the purpose of initial identification of individuals with hearing disorders, and aural and rehabilitative services. A supervisor with current CCC must be available to consult as appropriate for the client's disorder with a student providing clinical services as part of the student's clinical education. Only a currently certified clinician may supervise a graduate student. Current means the clinical supervisor must hold certification, meet years of clinical experience, *and* have met the supervision CEU requirement at the time the supervision



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is provided. **Supervision of the clinical practicum must include direct observation, guidance, and feedback by the currently certified supervisor to facilitate development of the student's clinical competence.**

Persons who hold the CCC in speech-language pathology may supervise:

- Assessment, rehabilitation, and prevention of disorders of speech (e.g., articulation, fluency, voice and language)
- Assessment and rehabilitation of cognitive/communication disorders
- Assessment and rehabilitation of disorders of oral-pharyngeal function (dysphagia) and related disorders
- Assessment, selection, and development of augmentative and alternative communication systems and the provision of training for their use
- Aural habilitative/rehabilitative services and related counseling services
- Enhancement of speech-language proficiency and communication effectiveness (e.g., accent reduction) and, pure tone air conduction hearing screening.

**At least 50% of each student's time in each diagnostic evaluation, including screening and identification, must be directly observed by a supervisor. At least 25% of each student's total contact time with each client in clinical treatment must be directly observed by a supervisor. These are minimum requirements and should be adjusted upward if the student's level of competence and experience warrants. 100% of students' time in telepractice, both in diagnostic and treatment, must be directly observed by a supervisor.**

### Externship/CALIPSO Grading

**Formal midterm evaluation of the student should occur at the end of Week 5; this includes completion of a Calipso evaluation and 1:1 conference with the student. The same is expected to occur at the end of Week 10.**

Evaluations are completed in CALIPSO and locked after they have been reviewed with the student. **The Performance Rating Scale is shown below, and scores can be assigned to each area on the evaluation in whole numbers (4.0) or half numbers (3.5) to indicate a student's skills are developing and may be "in-between" the levels. Increments of 0.25 should not be utilized.**

It is important to note that the Department's grading system utilizes an expectations-based model. In other words, students should be graded upon clinical and professional expectations of a final semester speech-language pathology graduate student. **However, it is the Department's policy that students should not be expected to be fully independent with all populations, disorders, and settings by the end of the medical externship; given the depth and breadth of the scope of speech-language pathology, along with increased medical complexity, it is not a realistic model for students to be fully independent with all clinical skills.** Rather, the medical externship is an opportunity for students to refine already established knowledge and clinical skills while gaining experience in new opportunities, such as trach/vent, tube-dependent dysphagia, and/or severe cognitive-communication disorders.

If a student is at risk of not meeting externship expectations at any point but especially at the 5th week, the externship supervisor(s) should notify the externship coordinator immediately. **A score of 1 in any area on the midterm evaluation, or two or more scores of 2 should result in a performance improvement plan for the remainder of the placement. Students who receive any scores of 1 or 2 at**



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the midterm will be required to meet with the externship supervisor(s) and Medical Externship Coordinator to develop a performance improvement plan to offer further support needed for student success.

**Students who receive two or more scores of 2 or one score of 1 on the final evaluation will not pass the medical externship and will receive a grade of F. Students will then be expected to retake S568, register and pay for the course again, and complete another full medical externship placement.**

When the final evaluation is completed, a grade for the externship should be recommended and both it and the evaluation will be filed in the student's permanent academic folder on CALIPSO. Consistent with the notion that one of the products of the supervisory process is the ability of students to supervise themselves, students should be encouraged to contribute to the evaluation of their progress and performance. If they have been involved in the observation/data collection/analysis of their own behavior during the externship, their ability to perceive themselves accurately is enhanced and they should be able to substantively participate in the evaluation task.

**The Medical Externship Coordinator will review all midterm and final CALIPSO evaluations. If scores of 2 or 1 are noted, externship supervisors will be required to discuss unsatisfactory scores with the Medical Externship Coordinator and collaboratively determine if a performance improvement plan or repeat of S568 is warranted. The Medical Externship Coordinator will review Department standards and student performance to determine if intervention is required.**

Students are evaluated at midterm (week 5) of each externship placement by the externship supervisor. If a student is not meeting performance expectations (i.e., receives a rating of "2" in two or more primary CALIPSO sections OR a rating of "1" in any one of these sections), the Medical Externship Coordinator will work with the externship supervisor and the student to develop a Performance Improvement Plan (PIP). The MA program director(s) will recommend to the College that the student be placed on probation for clinical concerns. The MA program director and clinic director will (1) work with the College to develop the probationary terms based on the PIP goals, (2) notify the student that they will be placed on probation for the subsequent semester and that they will receive a formal notification from the College, and (3) meet with the student to discuss alternative options as recommended by the College (e.g., leave of absence, withdrawal from the program). If a student fails to meet PIP goals by the end of the placement, this will result in a failed externship placement and removal of clinical clock hours earned. If this occurs, the student must work with the externship coordinator to identify a new externship placement that would commence with a PIP and probationary terms in place. If a student on probation fails to meet probationary terms on the subsequent externship placement, the MA program director will recommend that they be dismissed from the clinical program, pending approval by the Dean.

### CALIPSO Grading Scale

<b>(4) A/High Pass:</b>	<b>Student/skill/competency is well-developed and consistent, performance exceeds expectations, student clinician requires only initial consultative assistance from supervisor or is independent in this area</b>
-------------------------	--



- |                 |   |
|-----------------|---|
| (3) B/Pass:     | Student/skill/competency is present but needs refinement; performance is adequate/average for level of experience, student clinician benefits from intermittent supervisory input   |
| (2) C/Low Pass: | Student/skill/competency is beginning to develop (emerging); student clinician exhibits some competence but needs improvement; performance is below average and expectations, student clinician requires frequent instruction |
| (1) F/Fail:     | Student/skill/competency is not evident/absent; performance is deficient; student requires constant supervisory modeling and intervention   |

It should be noted that a score of 1 is truly representative of unsatisfactory performance and should be reserved for situations in which the student exhibits significantly deficient clinical performance. Scores of 2 are appropriate when the student requires frequent instruction. However, it is important to acknowledge that scores of 2 should most likely not be utilized if a student has little to no exposure to a specific disorder area (e.g., dysphagia). Scores of 2.5 may be appropriate if student performance is lacking but expected to improve by the end of the school externship placement.

### ASHA Code of Ethics

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. Students must adhere to the ASHA Code of Ethics. Violation of the ASHA Code of Ethics may result in disciplinary action as determined by the Indiana University SLHS department. For more information, see <https://www.asha.org/Code-of-Ethics/>.

### HIPAA

HIPAA is a federal law that requires adherence to national standards to protect sensitive patient health information from being disclosed without the patient's consent or knowledge. HIPAA violations should immediately be reported to the externship supervisor, externship coordinator, and any additional appropriate facility staff, as per facility guidelines.

### Bias-Based Incidence Reporting

IU encourages students to report incidents of bias-based harassment and discrimination. Any act of discrimination or harassment based on race, ethnicity, religious affiliation, gender, gender identity, sexual orientation or disability can be reported. **Students wishing to report an incident must contact the externship coordinator to determine course of action as determined by facility/company's affiliation agreement.**

### Religious and Civic Observations

Students should review their externship schedule to determine if there are any religious holy days/holidays that require alternative arrangements, and if so, notify the externship supervisor and the Medical Externship Coordinator in advance.



### Additional Externship Supervisor Resources

- Anderson, J. (1988). The supervisory process in speech-language pathology and audiology. Boston: Little, Brown and Co.
- Brasseur, J. (1989). The supervisory process: A continuum perspective. Language, Speech, and Hearing Services in the Schools. pp. 274-293. Rockville, MD: The American Speech-Language-Hearing Association.
- Dowling, S. (1992). Implementing the supervisory process. Englewood Cliffs: Prentice Hall.
- McCrea, E. and Brasseur, J. (2003). The supervisory process in speech-language pathology and audiology. Boston: Allyn and Bacon.
- McCrea, E. and Golper, L. (2006) in Lubiniski, R., Golper, L., and Fratalli, C. (Eds.). Supervision and the supervisory process. Professional issues in speech-language pathology and audiology (Third Edition). Clifton Park, NY: Thomson-Delmar Learning.



# DEPARTMENT OF SPEECH, LANGUAGE AND HEARING SCIENCES

## Appendix A: Departmental Medical Externship Agreement

### DEPARTMENTAL MEDICAL EXTERNSHIP AGREEMENT

TO: Carolyn "Carrie" Wade, M.S., CCC-SLP  
Medical Externship Coordinator  
Department of Speech Language and Hearing Sciences  
Indiana University  
Bloomington IN 47408

I, \_\_\_\_\_ accept the assignment to \_\_\_\_\_  
for the full-time Medical Externship placement with tentative dates from \_\_\_\_\_ to \_\_\_\_\_.  
I understand that a clinical practicum week is defined as a minimum of 30 hours per week in direct  
patient/client contact, consultation, record keeping, and administrative duties relevant to speech-  
language pathology service delivery. The minimum number of practicum hours required by the SLHS  
Department for graduation is 400. However, attaining that minimum does *not* signal the end of the  
practicum or the MA SLP Program. **The end date of the program is the final date of the medical  
externship.**

#### I understand the following:

1. I assume all risks associated with selecting a site outside of the approved list provided by the program, which can include delay in placement and even degree conferral.
2. I acknowledge that despite a confirmed placement, my tentative start and end dates and my site location may change up to the week before my anticipated start date. I accept that if this occurs, a new site will be assigned by the Medical Externship Coordinator. I also accept that I may be required to commute up to 3 hours daily for my medical site.
3. I am financially responsible for health insurance and any additional associated costs for my placement. This could include but is not limited to liability insurance, immunizations, FIT testing, and background checks. I understand that if I do not complete onboarding requirements in a timely manner, this could result in delay of my anticipated start and even cancellation of my placement.
4. I have read, fully understand, and agree to be held responsible for knowing and adhering to the Medical Externship Handbook.
5. I am responsible for tracking and submitting hours to Calipso in a timely manner in collaboration with my site supervisor.
6. I am responsible for notifying the Medical Externship Coordinator of any changes in the placement or any concerns that significantly affect the experience.
7. The externship site is part of the academic program and as such, the preceptor serves as your clinic supervisor. They should be consulted regarding requested days off, holidays and sick days. The University's academic calendar *does not apply* with regard to holidays and semester breaks while on externship. Additionally, the Medical Externship Coordinator *must* be notified of any absences.
8. I am required to submit all documentation for S568 before my final grade will be awarded, as listed in the S568 syllabus. I understand that failure to submit all documentation could result in a delayed degree conferral, and subsequent licensure.

Student

Date

Medical Externship Coordinator

Date





## Appendix B: Externship FAQs

Below you will find many frequently asked questions students have while out on their externships.

1. Why are M550 and S568 both 6 credit hours when I am providing my clinical services to schools and facilities? And, why do I have to pay for these credit hours?
  - a. There are numerous reasons as to why this is the case. M550 must be 6 credit hours due to CAA standards. Both externship placements are 6 credit hours to reflect the significant amount (i.e., hours) of clinical work you are completing. You pay for these credit hours because you are still receiving a high level of guidance and support from the Department, especially the externship coordinator. Externships remain unpaid, as you are unable to bill for your services. In fact, all the services you provide are billed through your supervisor, even if you are completing them with complete independence. The Department recognizes the financial burdens associated with graduate school, especially with externships, and thus, will provide you with the opportunity to take the Praxis for free.
2. What is the Department doing for me while I'm out on my externships?
  - a. Externship coordinator registers every externship supervisor in Calipso, ensures they are eligible to supervise, troubleshoots CALIPSO with them, and offers guidance and support while they supervise you.
  - b. Externship coordinators complete check-in with all externship supervisors and students as needed, checks CALIPSO evaluations, and serves as a liaison and mediator between students and supervisors.
  - c. You still have access to all clinical resources while you are completing your externships, including TEAMS.
  - d. The Department processes all the paperwork required by CAA and the program for your degree conferral.
3. Is M550 a Department requirement?
  - a. CAA and ASHA do not require completion of a school externship to fulfill degree requirements. However, students are strongly encouraged to complete a school externship along with completion of M463. Completion of M463 and M550 fulfill requirements needed to obtain school licensure as a speech-language pathologist. If you do not complete either course, you will fail to fulfill necessary requirements to be able to work as a school-based SLP (i.e., obtain school licensure). If you decide to work in the schools without completing these 2 courses, you will have to complete additional coursework (typically more than 1 course) and a school externship, even if you already have your CCCs.
4. What is my supervisor's role during my externships?
  - a. Your supervisors will strive to meet your needs as a student. However, your supervisors' first and foremost obligations is to the populations they serve. Your supervisor should engage in planning your experiences during the first week of your externship, provide feedback regarding progression of your clinical skills, engage in open and frequent communication with you, and assist you with caseload/workload transition.



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5. What is my role during my externships?
  - a. You have the responsibility of preparing yourself so that you can maximally profit from your externship experiences. This implies utilization of information from academic courses and on-campus practicum experiences. It also implies an attitude of willingness to learn in a new environment and an ability to adjust to new and challenging situations.
6. What is my externship coordinator's role during my externships?
  - a. The externship coordinator serves as a liaison between you and your externship supervisors during your externships. It is also the role of the externship coordinator to engage in consistent communication with both you and your supervisor to ensure a mutually beneficial experience. Open communication with the externship coordinator ensures that your supervisory and educational needs are met.
7. Can I engage in telehealth?
  - a. This depends upon the state law in which you are completing your externships. First, ask your supervisor for guidance on state practice guidelines. Graduate students may engage in telehealth when provided with 100% supervision, as per ASHA guidelines. You should NOT use IU's Zoom link if engaging in telehealth; you must utilize the telehealth platform of the school/facility where you are completing your externship.
8. What should I do if I am uncomfortable seeing a COVID + or PUI patient?
  - a. The current policy of the externship handbook indicates that you are not forced to see patients if you do not have access to PPE or have not been notified prior to your start date of the need to provide your own (i.e., N95 masks). However, if you do have adequate access to PPE and do not have a medical exemption, you must follow the policies and procedures of the facility in which they are completing their medical externship.
  - b. Review donning & doffing videos from the CDC.
    - i. Donning: <https://www.youtube.com/watch?v=H4jQUBAIBrl>
    - ii. Doffing: <https://www.youtube.com/watch?v=PQxOc13DxvQ>
  - c. Reference this helpful guide from the CDC on how to don/doff PPE appropriately: <https://www.cdc.gov/hai/pdfs/ppe/ppe-sequence.pdf>
9. What should I do if I contract COVID during my externship?
  - a. Closely monitor any symptoms you might be experiencing. It is your obligation to keep students and patients safe with whom you are working; therefore, if you are exhibiting any signs/symptoms of COVID, you should immediately notify your externship supervisor and externship coordinator and complete a test.
  - b. Students must follow their school's or facility's policy on COVID.
  - c. You must notify externship coordinator of all absences. COVID-related absences do not need to be made up during your medical externship, even if you have more than 5 absences.
10. What can I count as clock hours?
  - a. Per ASHA guidelines, you may count any time spent in direct contact with patients, students, OR family members when engaging in evaluation, treatment, or education.
  - b. Staff education does NOT count toward your clock hours.



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- c. Remember clock hours do not equate to billable hours. So, your supervisor(s) might count their time with your patients/students differently than you do.
  - d. When completing your medical externship, discuss with your supervisor how to count your time during MBSS & FEES.
11. How many clock hours do I need?
- a. Per ASHA requirements, you must obtain 400 clock hours. 25 of those can be observation hours. 75 can be through Simucase.
  - b. It is your responsibility to ensure that you have met your 400 clock hours. If you fail to meet these hours during your externships, you must either extend your final externship or complete additional hours elsewhere until you meet the requirement.
  - c. You must also obtain SOME hours in all the Big 9 areas. It is also your responsibility to ensure that you have some hours in each of these areas.
12. Can I count observation hours?
- a. Absolutely! However, only 25 of those hours go toward your 400 clock hour requirement.
  - b. If you plan to count observation hours, the SLP you are observing MUST have their CCCs. You can still observe a CF but cannot count any hours.
13. Does my supervisor have to meet ASHA criteria to supervise?
- a. YES. Your supervisor must have their CCCs, have at least 9-months of experience post-CF, and have completed a 2-hour supervision course.
  - b. Your externship coordinator ensures that these criterion are met prior to the start of your externships.
  - c. Anytime you are with another supervisor, they must be registered in CALIPSO and meet the above noted criteria to count your clock hours.
14. What is an acceptable reason for an absence?
- a. All days must be made up during your school externship in order to meet your 50-day requirement.
  - b. You can miss up to 5 days during your medical externship. However, these days should be utilized judiciously.
  - c. You are strongly encouraged to prioritize your own physical and mental health. It is acceptable to miss time for a medical or personal appointment; however, you must notify your externship supervisor and externship coordinator of any planned absence in advance. You are encouraged to schedule appointments at the beginning or end of your day in order to minimize time missed at your externships.
15. Can I attend a conference or complete a job interview during my externship?
- a. Absolutely! You must make up any missed days during your school externship. If you have missed 5 or fewer days during your medical externship, you do not need to make up those days unless your facility requires it. You must inform your externship supervisor and externship coordinator of all absences.
16. What should I do if I witness an unethical situation or behavior(s)?
- a. It is important to immediately contact the externship coordinators. Oftentimes, newer clinicians require guidance when it comes to identification and resolution of a truly



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unethical situation. Externship coordinators will assist you in determining the most appropriate course of action, based upon the situation and facility protocols/guidelines.

17. What should I do if a student/patient/family member exhibits inappropriate behavior toward me?
  - a. Unfortunately, many children and even adults can exhibit inappropriate behavior due to a myriad of cognitive-communication deficits. You have the power to redirect the student/patient/family in a constructive, respectful manner. You should also discuss this behavior with your externship supervisor, as they often have beneficial strategies that can further assist you. It is important to note that you are not obligated to see a patient/child if you feel unsafe, which is a very rare occurrence, but this should be openly communicated with your externship supervisor and externship coordinators.



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## Appendix C: List of Active Medical Externship Sites

Facility	Location	Setting
A to Z Pediatric Therapy	Atlanta, GA	Pediatric Private Practice
Ability Home Health	Zionsville, IN	Home Health
Adults & Children with Learning & Developmental Disabilities	Bethpage, NY	Pediatric Private Practice
Ambassador Healthcare	Centerville, IN	Skilled Nursing Facilities/Subacute Rehab
American Senior Communities	IN & KY only	Skilled Nursing Facilities/Subacute Rehab
AMG Specialty Hospital (Hancock Campus)	Greenfield, IN	Long Term Acute Care Hospital
Ascension at Home (Kokomo)	Kokomo, IN	Home Health
Ascension St. Vincent Health	Indiana	Ascension St. Vincent 86th Street Hospital (adults & NICU) Mooreville Peyton Manning Children's Hospital
Baptist Health Floyd	Louisville, KY	Inpatient, Acute Rehab, Outpatient
Baptist Healthcare System	KY	Inpatient, Acute Rehab, Outpatient
Baylor Scott & White Institute for Rehab	Dallas, TX	Inpatient Rehabilitation Hospital (adults only); Bilingual Options
Benchmark Rehabilitation Partners	US Locations	Outpatient Clinics
Bloomington Regional Rehabilitation Hospital	Bloomington, IN	Inpatient Rehabilitation Hospital (adults only)
Brickyard Pediatrics	Merrillville, IN	Pediatric Private Practice
Cardinal Hill Rehabilitation Hospital	Lexington, SC	Inpatient Rehabilitation Hospital (adults only)
Carolina Therapeutics	Fort Mill, SC	Pediatric Private Practice
Casa Speech, LLC	Columbus, OH	Bilingual Pediatric Private Practice (pediatrics)
Centura Health	CO & KA	Inpatient, Acute Rehab, Outpatient
Children's Healthcare of Atlanta	Atlanta, GA	Inpatient, Acute Rehab, Outpatient
Cincinnati Children's Hospital	Cincinnati, OH	Inpatient, Acute Rehab, Outpatient
Clark Memorial Hospital	Jeffersonville, IN	Shadowing ONLY
Cole Health	Austin, Tx	Pediatric Private Practice
Columbus Regional Hospital	Columbus, IN	Inpatient, Acute Rehab, Outpatient (adults & pediatrics)
Comfort Keepers	Indiana	Hospice/Home Health
Community Health Network	Indiana	Inpatient, Acute Rehab, Outpatient
Community Health Network Rehabilitation Hospital	Indianapolis	Inpatient Rehabilitation Hospital (adults only)
Community Hospital (Munster)	Munster, IN	Inpatient, Outpatient
Community Stroke & Rehabilitation Center	Crown Point, IN	Inpatient Rehabilitation Hospital (adults only)
CoxHealth	Springfield, MO	Inpatient, Outpatient
Craig Hospital	Denver, CO	Inpatient Rehabilitation Hospital (adults only)
CreativeHealthSolutions	Indianapolis	Skilled Nursing Facility/Subacute Rehab



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Daviess Community Hospital	Washington, IN	Inpatient, Outpatient (primarily pediatrics)
Deaconess Hospital	Evansville, IN	Inpatient, Outpatient
Deaconess Rehabilitation Hospital	Evansville, IN	Inpatient Rehabilitation Hospital
Decatur County Memorial Hospital	Greenville, IN	Critical Access Facility (small hospital) & Outpatient (primarily pediatrics)
Dukes Memorial Hospital	Peru, IN	Inpatient, Outpatient
Easter Seals Rehabilitation Center	Indianapolis	Outpatient Specialty Clinic
Elder's Journey Home Care	Indiana	Hospice/Home Health
Encompass Health at East Valley	East Valley, AZ	Inpatient Rehabilitation Hospital
Encompass Health Rehabilitation Hospital of Chattanooga	Chattanooga, TN	Inpatient Rehabilitation Hospital (adults only)
Encompass Health Rehabilitation Hospital of Cincinnati	Cincinnati, OH area	Inpatient Rehabilitation Hospital
Encore Rehabilitation Services	US Locations	Contract Agency
Eskenazi Health	Indianapolis	Inpatient, NICU, Outpatient (adults & pediatrics)
Especially Kidz Health & Rehabilitation	Shelbyville, IN	Pediatric Long-Term Care
Family Speech Therapy Center	NYU	Pediatric Private Practice
Franciscan Health	Indiana	All Franciscan Hospitals & Outpatient Clinics
Good Samaritan Hospital	Vincennes, IN	Inpatient, Acute Rehab, Outpatient (adults & pediatrics)
Goshen Hospital & Goshen Physicians Group	Goshen, IN	Inpatient, Outpatient
Gundersen Health System	Wisconsin area	Inpatient, Outpatient
Hancock Regional Hospital	Greenfield, IN	Inpatient, Outpatient
Harvest Health and Rehab	Logansport, IN	Private Practice (adults & pediatrics)
HCR Healthcare (Manor Care)	US Locations	Skilled Nursing Facilities/Subacute Rehab
Health Fitness Corporation	Minnesota	Outpatient Clinics
HealthPRO	US Locations	Home Health
HealthPro Heritage	US Locations	Pediatric Private Practice
Healthwin (St. Clair Darden Health System)	South Bend, IN	Inpatient, Outpatient
Hendricks Regional Health	Danville, IN	Inpatient, Outpatient (adults & pediatrics)
Henry Community Health	New Castle, IN	Inpatient, Outpatient
Henry Ford Health System	Detroit, MI	Inpatient, Outpatient
Holzer Health System	Gallipolis, OH	Inpatient, Acute Rehab, Outpatient
Homeview Health & Rehab	Greenwood, IN	Skilled Nursing Facility/Subacute Rehab
Hopebridge	Columbus, IN	ABA/Autism Clinic
Hubbard Hill Healthcare	Elkhart, IN	SNF/subacute rehab
Indianapolis VA Medical Center (Roudebush)	Indianapolis	Inpatient, Acute Rehab, Outpatient, ALS Clinic
Ingalls Memorial Hospital	Harvey, IL	Inpatient, Outpatient
IU Health	Indiana	All IU Health Hospitals & Outpatient Clinics Riley Children's Hospital



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Jackson County Schneck Medical Center	Seymour, IN	Inpatient, Outpatient (primarily pediatrics), Home Health (adults)
Jacob's Ladder Pediatric Rehab Center, Inc	Northern IN	Pediatric Private Practice
John H Stroger JR. Hospital of Cook County	Chicago, IL area	Inpatient, Outpatient
Johnson Memorial Hospital	Franklin, IN	Inpatient, Outpatient (primarily pediatrics)
Kettering Health Network	Kettering, OH	Inpatient, Acute Rehab, Outpatient
Kidworks	US Locations	Pediatric Private Practice
Kindred Healthcare	US Locations	Long Term Acute Care Hospitals & Inpatient Rehabilitation Hospitals
Kindred Hospital Indianapolis	Indianapolis	Inpatient Rehabilitation Hospital (adults only)
La Porte Hospital	La Porte, IN	Inpatient, Outpatient
La Rabida Children's Hospital	Chicago, IL area	Inpatient, NICU, Outpatient
Lafayette Regional Rehabilitation Hospital	Lafayette, IN	Inpatient Rehabilitation Hospital (adults only)
Life Care Centers of America	US Locations	Skilled Nursing Facilities/Subacute Rehab
Little Steps	IL Locations	Pediatric Private Practice
Lutheran Hospital of Indiana	Ft Wayne, IN	Inpatient, Acute Rehab, Outpatient
Madonna Rehabilitation Hospital	Nebraska	Inpatient Rehabilitation Hospital (adults only)
Majestic Care of Crown Point	Crown Point, IN	Skilled Nursing Facilities/Subacute Rehab
Major Health Partners	Shelbyville, IN	Inpatient, Outpatient
Margaret Mary Health	Batesville, IN	Critical Access Facility (small hospital), Outpatient
Mary Hitchcock Memorial Hospital	Lebanon, NH	Inpatient, Outpatient
MCH at Bowling Green	Bowling Green, KY	Inpatient
Memorial Hermann Southwest Hospital	Houston, TX	Inpatient, Outpatient (adults & pediatrics)
MercyEastHealth	St. Louis Area	Inpatient & Outpatient
MetroEHS Pediatric Therapy	Michigan	Pediatric Private Practice
Miller's Health Systems	Northern IN	Skilled Nursing Facilities/Subacute Rehab
Ms Paula SLP, LLC	Chicago, IL area	Pediatric Private Practice; OP in the Home
MyMichiganHealth	Midland, MI	Inpatient, Outpatient
North Kansas City Hospital	Kansas City, MO	Inpatient & Outpatient
Northwest Healthcare Center	Indianapolis	Skilled Nursing Facilities/Subacute Rehab
Northwestern Memorial Healthcare	Chicago, IL area	All Northwestern Hospitals & Outpatient Clinics
Norton Hospitals and Community Medical Associates	Louisville, KY	Inpatient, Outpatient (adults & pediatrics)
OhioHealth	Columbus, OH	Inpatient, Acute Rehab, Outpatient
Ottawa Regional Hospital & Healthcare Center	Ottawa, IL	Inpatient, Outpatient
Paragon Rehabilitation	US Locations	Skilled Nursing Facilities/Subacute Rehab
Parkview Health	Fort Wayne, IN	Inpatient, Outpatient
Pediatric Therapy Associates	San Antonio, TX	Pediatric Private Practice



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Pleasant View Lodge	McCordsville, IN	Skilled Nursing Facility/Subacute Rehab
PT Solutions Physical Therapy	US Locations	Outpatient Clinics **specific locations**
Pulaski Memorial Hospital	Winamac, IN	Inpatient, Outpatient
Rehab Hospital of Fort Wayne	Fort Wayne, IN	Inpatient Rehabilitation Hospital (adults only)
Rehabilitation Hospital of Fort Wayne	Ft Wayne, IN	Inpatient Rehabilitation Hospital (adults only)
Rehabilitation Hospital of Indiana	Indianapolis	Northwest Brain Injury Center, Outpatient, RHI
Rehabilitation Hospital of Northern Indiana	Mishawaka, IN	Inpatient Rehabilitation Hospital (adults only)
Riverview Health	Noblesville, IN	Inpatient & Outpatient (primarily pediatrics)
Rogers Memorial	Oconomowoc, WI	Inpatient & Outpatient
Saint Anne Home and Retirement Community	South Bend, IN	Skilled Nursing Facility/Subacute Rehab
Samaritan Caregivers	Kokomo, IN	Home Health
Select Rehabilitation	US Locations	Outpatient Clinics
Sol Therapy Services	Minneapolis, MN	Pediatric Private Practice; Outpatient in the Home
Southeast Alaska Regional Health Consortium	Southeast AK	Inpatient & Outpatient
St. Joseph Hospital	Mishawaka, IN	Inpatient & Outpatient
St. Joseph Regional Medical Center	Mishawaka, IN	Inpatient & Outpatient
St. Mary Medical Center	Hobart, IN	Inpatient & Outpatient
Steward St. Elizabeth's Medical Center of Boston	Boston, MA	Inpatient & Outpatient
Suburban Home Health	Indianapolis	Home Health
Swedish Health Services	Seattle, WA	Inpatient & Outpatient
Team Rehabilitation	US Locations	Outpatient Clinics
The ACRES of Indiana	New Carlisle, IN	Skilled Nursing Facility/Subacute Rehab
The Carle Foundation	Urbana, IL	Inpatient & Outpatient
The Christ Hospital Health Network	Cincinnati, OH area	Inpatient, Outpatient
The Ohio State University	Columbus, OH	All Hospitals & Outpatient Clinics
The South Bend Clinic	South Bend, IN	Outpatient Clinics
The Therapy Playce	Elkhart, IN	Pediatric Private Practice
Tradewinds Services	Merrillville, IN	Non-profit organization for clients with special needs
Transitional Care of Arlington Heights	Chicago	Skilled Nursing Facility/Subacute Rehab
TriHealth	Cincinnati, OH area	Inpatient & Outpatient
Truman Medical Center	Kansas City, MO	Inpatient, Acute Rehab, Long Term Care, Outpatient
Turnstone Center for Children & Adults with Disabilities	Fort Wayne, IN	Non-profit organization for clients with special needs
UC Health	Ohio locations	Inpatient & Outpatient
Union Hospital	Terre Haute, IN	Inpatient, Acute Rehab, Outpatient
UniversityHealth	Kansas City, MO	Inpatient, Outpatient
UofL Health	Louisville, KY	Inpatient & Outpatient (pediatrics & adults) Frazier Rehab Hospital





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UW Health	Madison, WI	Inpatient, Outpatient (adults & pediatrics)
Vertis Therapy	Indiana	Contract Agency
Vibra Hospital of Southern Indiana	New Albany, IN	Inpatient Rehabilitation Hospital (adults only)
Village of Avon	Avon, IN	Skilled Nursing Facility/Subacute Rehab
Wake Forest University Baptist Medical Center	Winston-Salem, NC	Inpatient & Outpatient
Wesley Manor	Frankfort, IN	Assisted Living
Westside Children's Therapy	Chicago, IL area	Pediatric Private Practice
Witham Health Services	Lebanon, IN	Inpatient & Outpatient (pediatrics & adults)
Woodlawn Hospital	Rochester, IN	Critical Access Facility (small hospital) & Outpatient



## Appendix D: Medical Externship Planning Form

### Medical Externship Planning Form

Please collaborate with your supervisor in planning the activities to be included in your practicum.  
Submit on Canvas by the end of the 1<sup>st</sup> week of the placement.

#### STUDENT

Name:

Cell:

Placement Start Date:

Placement End Date:

#### SUPERVISOR

Name:

Cell:

Work Phone:

E-Mail:

ASHA Number:

#### FACILITY

Name:

Address:

---

Based on the objectives discussed in the Externship Handbook, the following plans have been made in cooperation with the supervising clinician:

1. Amount of time to be spent in observation:

Supervising Clinician-

Other Professionals-

2. Plan for the student to assume responsibility for the entire caseload by midterm:

a. Week 1:

b. Week 2:

c. Week 3:

d. Week 4:

e. Week 5:



## Appendix E: Practicum Timeline

### Prior to Week One

#### Externship Supervisor:

1. Register as a supervisor in CALIPSO. The externship coordinator will provide you with a PIN # and log-in instructions. Timely response of welcome email to provide ASHA number will ensure CALIPSO registration prior to the start of students' medical externship.
2. Complete ASHA requirement for .2 supervision CEUs. Upload proof of completion to CALIPSO personal files.
3. Upload proof of state licensure and ASHA certification to CALIPSO personal files.
4. Complete site survey to provide additional practicum information (to be sent via email by externship supervisor).

#### Student:

1. Introduce yourself via email to externship supervisor(s). Ensure that any onboarding requirements are fulfilled prior to the start of the medical externship.
2. Know specifics re: arrival time, daily schedule, parking requirements, etc.

### Week 1:

#### Externship Supervisor:

1. Complete student orientation of facility(ies). Introduce the student to staff.
2. Provide information regarding patient demographics, facility layout, safety procedures, and daily schedules.
3. Ensure that the student is familiar with emergency procedures and policies.
4. Share any forms or data collection systems that might be used for documentation, conferences, etc.

#### Student:

1. Observe externship supervisor(s) with caseload and workload.
2. Complete case histories on current caseload.
3. Research less familiar/low incidence disorders/populations.
4. Complete Planning Form by the end of the first week.
5. Engage in an open discussion regarding supervision preferences and supervision needs. Advocate for yourself and the type of supervision you need.
6. Review all assignments in Canvas and familiarize yourself with deadlines.
7. Begin discussions on practicum project to be completed.
8. **Initiate treatment or evaluation with a small portion of the caseload.**
9. Log CALIPSO hours. Remember to do this on a weekly basis.
10. Review clock hours and determine which areas from the Big 9 in which you still need to obtain hours. Develop a plan with your externship supervisor(s) on how to obtain those hours.

### Week 2-5:

#### Externship Supervisor:

1. Offer supervision, at ASHA's minimum requirements. Offer feedback as needed. Consider weekly debriefing to discuss clinical progress made.

#### Student:

1. Continue directly working with externship supervisor(s).



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2. Gradually resume the externship supervisor(s) caseload from Weeks 2-5. **If a student is paired with 2-3 supervisors, the student should gradually assume the supervisor's caseloads only on the days in which the student is paired with the supervisor and the student is typically scheduled to be seen on that day. Exceptions might be made if students request additional opportunities or clock areas in specific evaluation or treatment areas.**

### **Week 5:**

#### Externship Supervisor:

1. Complete CALIPSO evaluation and schedule midterm grade conference with student.
2. Schedule an individual Zoom check-in with Medical Externship Coordinator to discuss student's performance if there are any concerns.

#### Student:

1. Ensure that first 5 weeks of clock hours have been turned in and signed off on CALIPSO. Estimate remaining number of clock hours still required.
2. Schedule an individual Zoom check-in with Medical Externship Coordinator to discuss any concerns. It is the responsibility of the student to reach out with any concerns that may arise throughout the placement.

### **Weeks 6-9:**

#### Student:

1. Continue to gain independence with caseload. Refine treatment skills and gain additional confidence with evaluations.
2. Participate in other clinical and school-based activities, such as interdisciplinary observations, additional documentation (e.g., plans of care, discharge summaries), staff meetings, conferences, etc.

### **Week 10:**

#### Externship Supervisor:

1. Complete final CALIPSO evaluation. Schedule final grade conference.
2. Ensure that all clock hours have been signed.

#### Student:

1. Ensure that all clock hours have been turned in to externship supervisor.
2. Return all materials, book, and/or equipment.
3. Turn in student badge and parking pass.
4. Complete additional requirements, as listed on S568 syllabus to ensure fulfillment of all course requirements.



## CALIPSO INSTRUCTIONS FOR CLINICAL SUPERVISORS

<https://www.calipsoclient.com/schooldomain>

### Step 1: Register as a Supervisor on CALIPSO

(Clinical Assessment of Learning, Inventory of Performance, and Streamlined Office-Operations)

- Before registering, have available your **1)** CALIPSO Registration PIN (provided via “CALIPSO registration” email sent by [no-reply@calipsoclient.com](mailto:no-reply@calipsoclient.com) or perhaps alternatively provided by the program Clinical Coordinator), **2)** ASHA card, **3)** state licensure card, and **4)** teacher certification information if applicable. If possible, have available scanned copies of your certification and licensure cards for upload during the registration process.
- Go to your student’s school unique login URL listed in the header at the top of this page, or go to <https://www.calipsoclient.com/school-login>
- Schools are listed alphabetically; locate your student’s school, and click on the school name link.
- Click on the “Supervisor” registration link located below the login button.
- Complete the requested information and click “Register.”
- On the following screen, again complete the requested information and click “Save” at the bottom of the page. A “Registration Complete” message will be displayed and you will automatically be logged into CALIPSO.

### Step 2: Login to CALIPSO

- For subsequent logins, go to your student’s school unique login URL listed in the header at the top of this page, or go to <https://www.calipsoclient.com/school-login>, locate your student’s school, and login to CALIPSO using your 8-digit ASHA number and **password that you created for yourself during the registration process (Step 1).**

### Step 3: View Clinical Assignment / Select Student

- From the Supervisor’s lobby page, use the class selection dropdown menu at the top of the page to choose the appropriate class/cohort for your student and click **Change** to activate that cohort.
- Click the **View** > [Student Information](#) link.
- Click the [Clinical Assignments](#) link to view contact information and other details about a new student assignment.
- Or, to locate your student if not assigned via Clinical Assignments, use the “Add Student of Interest” dropdown menu to select your student and then click **Add**.



## Step 4: View Student Clock Hour Records

- Click on “Clockhours” then “Experience Record” to view a summary of clock hours obtained and clock hours needed.
- Students may be required to gain a minimum of (20) hours in the evaluation and treatment of children and adults for both speech and language disorders which is summarized in the table at the bottom of the page.
- Please note the student’s Clinical Competency Level (I, II, or III) on the page header if applicable.
- Print/save clock hour record by clicking “Print Experience Record.”
- Click “Student Information” located within the blue stripe to return to the student list.

## Step 5: View Student Cumulative Evaluation

- Click on “Cumulative evaluation” to view a summary of your student’s clinical competency across the 9 disorder areas.
- Upon completion of the clinical program, students must obtain a competency score set by the program for all clinical skills listed on the form.
- Please make note of any areas of deficiency (highlighted in orange.)
- Click “Student Information” located within the blue stripe to return to the student list.

## Step 6: View Student Immunization and Compliance Records

- Click “Compliance/Immunizations” to view a record of compliance and immunization documents.
- To create a document to save and/or print, click “PDF.”
- An electronic file of the original documents can be accessed, if necessary and if uploaded by the Clinical Coordinator, by clicking “Files” located within the blue stripe.
- Click “Home” located within the blue stripe to return to the home page.

## !Step 7: Complete Site Information Form

!This form will take approximately 20 minutes to complete. The bulk of the information requested is used by the graduate program to **maintain their ASHA accreditation**. This form only needs to be completed once unless the requested information changes.

- From the home page, click on the “Site Information Forms” link under the Management header.
- Click “Add new form.”
- Complete the requested information. Click “Save.”
- The new site form will post to a table. To finish completing, click on the “Edit” link in the Basic Info column. Check to see that all of the information is complete, and check the box that states “Check here to mark this section as complete.”



## !Step 7 Cont'd: Complete Site Information Form

- Continue to complete the remaining 5 sections of the form by clicking on each remaining tab (Facility/Department/Student/Misc./Appendix VI-B\*) and complete the requested information. After completing the information in each section, check the box that states "Check here to mark this section as complete". Click "Save." [\*Note: Appendix VI-B tab only needs to be completed if the program you are supervising for is a new program in candidacy]
- After all tabs have been completed, click on the "Site Form List" link located near the top of the page or on the "Site Forms" link located within the blue strip.
- If any sections are incomplete, they will be flagged with a red explanation point. To complete those fields, just click on "edit" and make the necessary changes.
- Once each section is assigned a green checkmark, a "Submit" link will display within a column of the table. Click "Submit" and verify that the status changes to "Submitted."

### To Edit/Update a Submitted Form:

- To edit a previously submitted form, simply click the "Copy" link located in the next to the last column. Edit each section as necessary by clicking on the "Edit" link for the corresponding section, making changes, and clicking "Save." Once editing is complete, click "Submit" and verify that the status changes to "Submitted." Delete the older version by clicking on the red "X".

## Step 8: Upload Documents for Student or Clinical Administrator (optional)

- The file management feature allows you to upload any type of file (e.g. Word, PDF, JPEG, audio/video) pertinent to the clinical experience for a specific student.
- Select the desired student and then click on the "Documents" link to upload your own file and/or view a file uploaded by your student.
- **First, select a folder by clicking on the folder name or create a new folder or subfolder.** To create a new folder or subfolder, type in desired folder name in the "Add folder" field and press "create."
- **Upload a file** by pressing the "Browse" button, selecting a file, completing the requested fields, and clicking "upload." The upload fields will display if you have selected an unrestricted folder. **Set the file permission** by choosing "public" for student and clinical administrator access or "private" for clinical administrator access only.
- **Move files** by dragging and dropping from one folder to another.
- **Delete files** by clicking the "delete" button next to the file name. **Delete folders** by deleting all files from the folder. Once all the files within the folder have been deleted, a "delete" link will appear to the right of the folder name.





## Step 9: Complete Midterm Evaluation

- Login to CALIPSO (step two)
- Select the desired “Class” and click “change.”
- Click “New evaluation”.
- Complete required fields designated with an asterisk and press save.
- Continue completing evaluation by scoring all applicable skills across the Big 9 using the provided scoring method and saving frequently to avoid loss of data.
- Once the evaluation is complete, review it with the student. Type his/her name with the corresponding date as well as your name with the corresponding date located at the bottom of the page.
- Check the “final submission” box located just below the signatures.
- Click “Save.”
- Receive message stating “evaluation recorded.”
- Please note: you may edit and save the evaluation as often as you wish until the final submission box is checked. Once the final submission box is checked and the evaluation saved, the status will change from “in progress” to “final”. Students will then have access to view the submitted evaluation when logged into the system.
- To view the evaluation, click “Student Information” located within the blue stripe then “evaluations” located to the right of the student’s name.

## Step 10: Complete Final Evaluation

- Login to CALIPSO (step two)
- Select the desired “Class” and click “change.”
- Click “Student Information” then “evaluations” located to the right of the student’s name.
- Identify the evaluation completed at midterm and click on “Make a duplicate of this evaluation.”
- The duplicated evaluation will appear in the evaluations list.
- Identify the duplicate (noted as “in progress”) and click on the “current evaluation” link highlighted in blue.
- Change “Evaluation type” from midterm to final.
- Complete evaluation by changing and/or adding scores for applicable skills across the Big 9 using the provided scoring method and saving frequently to avoid loss of data.
- Once the evaluation is complete, review it with the student. Type his/her name with the corresponding date as well as your name with the corresponding date located at the bottom of the page.
- Check the “final submission” box located just below the signatures.
- Click “save.”
- Receive message stating “evaluation recorded.”





## Step 11: Approve Clock Hours

- At the completion of the rotation or as often as directed, your student will log their clock hours.
- An automatically generated e-mail will be sent notifying you that clock hours have been submitted and are awaiting approval.
- Login to CALIPSO (step two.)
- Click “clockhour forms pending approval.”
- Identify your current student’s record.
- Click “View/Edit” in the far-right column.
- Review hours, making changes if necessary.
- Complete the % of time the student was observed while conducting evaluations and providing treatment.
- Approve clock hours by selecting “yes” beside “Supervisor approval” located at the bottom of the page.
- Click “Save.”
- If it is determined that there are errors in the clockhour form that the student should correct, exit the form by clicking on the “Clockhours List” link at the top of the page in the blue stripe to return to the student’s Clockhours List. Click on the “Un-submit” button towards the right end of the line for the clockhour form in question. This returns the form to the student’s Daily Clockhours for the student to edit and re-submit.

## Step 12: View Your Supervisory Summary

- For an official record of this supervisory experience (past or present), click on the “Supervision summary” link located under the Management header on the home page.
- Select “Printable view (PDF)” to create a document to save and/or print.

## Step 13: View Your Supervisory Feedback

- At the completion of the rotation, your student will complete a supervisory feedback form in CALIPSO.
- An automatically generated e-mail will be sent stating that you have feedback available to view.
- Login to CALIPSO (step two)
- Select the desired “Class” and click “change.”
- Click “Supervisor feedback forms.”
- Click “View/Edit” in the far-right column.

## Step 14: Update Your Information

- Update e-mail address changes, name changes, certification expiration dates with corresponding scanned copies of your card by logging into CALIPSO (step two.)
- Click “Update your information.”
- Make changes and click “save” and/or click “Edit licenses and certification.”
- Update information and upload supporting files and click “save” located at the bottom of the screen.