

FSU

SCHOOL OF COMMUNICATION
SCIENCE & DISORDERS
COLLEGE OF COMMUNICATION & INFORMATION

Off-Campus Clinical Supervision Handbook

2026–2027

Council on
Academic Accreditation
ACCREDITED Speech-Language Pathology



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WELCOME

Thank you for participating in field supervision for graduate students enrolled in Florida State University's graduate program in Communication Science and Disorders. We're so pleased that you're willing to provide the benefits of your clinical expertise and professionalism through the field supervision of our students. We've put together a short handbook for distribution to all off-campus field supervisors to:

- facilitate consistency in supervision practices across clinical settings;
- specify requirements and responsibilities of both field supervisors and students; and,
- enhance communication/feedback between supervisors, students, and FSU practicum coordinators.

We hope that you find the information contained in the handbook useful to you as you work with our students. Our goal is to increase your abilities and confidence in providing clear, appropriate, and necessary guidance to students as they work toward completing their clinical education and acquiring required competencies. We look forward to our collaboration with you and your facility in this important student field experience.

SCHOOL OF COMMUNICATION SCIENCE AND DISORDERS POSITION STATEMENT

The Florida State University (FSU) School of Communication Science and Disorders (SCSD) maintains the philosophy that all persons have the need to communicate, that communication is basic to human interaction and survival, and that communication is necessary in order for individuals to be functioning members of society. Communication is defined as the ability to express and/or receive information verbally, aurally, motorically, visually, and/or technologically. When communication is impaired, the SCSD maintains that all persons have the right to appropriate services for the prevention, identification, diagnosis, and/or treatment of problems in the areas of articulation, language, fluency, voice, swallowing, and/or hearing. Further, to ensure the quality of these services to the public, the SCSD commits to the delivery of services in the instruction, supervision, and guidance of graduate and undergraduate students in training to enter the field of speech-language pathology. It is the goal of the SCSD to prepare students to become competent contributors to the field by rendering appropriate services to clients and their families, demonstrating ethical behavior, interacting cooperatively with others, and maintaining a current knowledge base of the field.

OVERVIEW OF THE FSU SCSD CLINICAL EDUCATION PROGRAM

Our overarching goal for the clinical education program is that students will be CF ready at the time of graduation, with the knowledge and skills needed to enter the profession. To achieve that goal, we have three main objectives for field experience in the clinical education program. They are to provide students with opportunities to:

1. Observe and work with clients across the age span who present with the variety of communication disorders that fall within the American Speech-Language-Hearing Association's (ASHA; 2016) Scope of Practice in Speech-Language Pathology;
2. Benefit from professional supervision in the array of settings in which speech-language pathologists typically work; and,
3. Advance through a progression of opportunities and experiences that offer developmental support while simultaneously increasing expectations for independence.

Through these experiences, students majoring in speech-language pathology will earn clock hours toward those required for ASHA certification and state licensure. FSU's SCSD clinical education program exceeds ASHA standards by requiring a minimum of 50 clock hours to be obtained in at least three different practicum settings.

ASHA COUNCIL FOR CLINICAL CERTIFICATION (CFCC) REQUIREMENTS FOR CERTIFICATION AS A SPEECH-LANGUAGE PATHOLOGIST (effective January 1, 2020)

ASHA's CFCC delineates educational, clock hour, experiential, and supervision requirements for those seeking to obtain certification as a speech-language pathologist.

Supervised Clinical Practicum Options	Required	Minimum Toward the 400 Hours	Maximum Toward the 400 Hours
Guided Clinical Observations	Yes	25	25
On-Site and In-Person Direct Contact Hours	Yes	250	No maximum
Undergraduate Hours	No	0	50
Clinical Simulations	No	0	75
Tele practice	No	0	125

Current requirements include:

- Documenting at least 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.
 - At least 325 of these clock hours must be completed at the graduate level with appropriate supervision.
 - **Direct client contact interacting with a client in treatment, evaluation or counseling**
 - What activities fit into this?
 - Screenings (includes formal and informal observations of clients/patients)
 - Evaluations
 - Treatment
 - Counseling with caregivers and family
 - Student must be working with the patient/student, not observing
- **Up to 5 hours a semester can be counted for activities that include:** Interpreting, integrating, and synthesizing core concepts & knowledge; Critical thinking & decision-making skills while engaged in identification, evaluation, diagnosis, planning, implementation or intervention. Time spent in meetings **with the patient/family present**, when the student is actively reporting evaluation results, treatment plans, progress, etc., can be counted since that is considered advising, educating, and training caregivers and family. **However, activities such as planning, paperwork, and consulting with allied professionals in the absence of clients/family, cannot be counted.**
 - What fits into this **when patient/family is present, and the student is actively participating?**
 - IEP meetings
 - Parent Meetings
 - Interpreting Evaluation Results
 - Treatment Planning based on Evaluation Results
 - Evaluation Report/Treatment Plan writing
- **Alternative Clinical Experiences:** Up to 20% of all hours can be in this category (i.e., 75 hours [.20 x 375])
 - What fits into this?
 - Standardized patients & simulated cases (i.e., SimuCase)

ASHA CFCC requirements do not specify mandatory minimum requirements for clock hours earned in specific age or disorder categories. Clock hours must be distributed, however, to show that the student has demonstrated competence for a variety of disorders across all age ranges, from pediatric to geriatric.

The variety of disorders in which students must earn hours are commonly referred to as “the Big 9,” and encompass those delineated by the ASHA Scope of Practice in Speech-Language Pathology (2016): (1) AAC & Alternative modalities; (2) Speech Sound Production; (3) Cognitive Aspects of Communication; (4) Feeding & Swallowing; (5) Fluency & Fluency Disorders; (6) Hearing; (7) Receptive & Expressive Language; (8) Social Aspects of Communication; and, (9) Voice and Resonance

THE ROLE OF THE FIELD SUPERVISOR

SUPERVISOR QUALIFICATIONS (ASHA CFCC 2020 Standards)

Standard V-E - Supervisor Requirements for 2020 Standards:

Supervision of students must be provided by a clinical educator who holds ASHA certification in the appropriate profession and who, after earning the CCC-A or CCC-SLP, has completed (1) a minimum of 9 months of full-time clinical experience (or its part-time equivalent), and (2) a minimum of 2 hours of professional development in clinical instruction/supervision.

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: Beginning January 1, 2020, clinical educators and clinicians who are involved in the preparation of student clinicians, and who provide guided observation and supervision of clinical practicum hours, must (a) hold the CCC-A or CCC-SLP and have completed a minimum of 9 months of full-time, post-certification (or its part-time equivalent) clinical experience, and (b) [must complete 2 hours of professional development/continuing education](#) in clinical instruction/supervision. 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.**
- **ASHA does NOT endorse remote supervision (student and patient/client/student on site together; supervisor supervising remotely)**
- **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 Clinical Simulations, 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.

More information on this requirement and access to free online courses can be found at the following URL: <https://commdisorders.cci.fsu.edu/clinical-supervision/> and in Appendix B & C.

It is preferential that those who are considered for field supervision be a full-time staff member (minimum of 30 hours per week) of an approved facility. In addition, we prefer that you have a minimum of three years of experience post Master’s degree (CF is included in these three years).

As a field supervisor, you are considered a courtesy instructor in FSU's School of Communication Science and Disorders. As such, you have a commitment to student training in addition to your professional service commitment. The ASHA Code of Ethics (2016) specifically addresses ethical behavior when dealing with graduate students in training.

- Principle I, Rule 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.
- Principle I, Rule 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.
- Principle I, Rule 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.
- Principle II, Rule 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.
- Principle II, Rule 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.
- Principle IV, Rule G: Individuals shall not engage in any form of harassment, power abuse, or sexual harassment.
- Principle IV, Rule 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.
- Principle IV, Rule I: Individuals shall not knowingly allow anyone under their supervision to engage in any practice that violates the Code of Ethics.
- Principle IV, Rule 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.

Students may not be brought up on Code of Ethics charges; rather, the student is working under the supervisor's certification and licensure. If any unethical or illegal behaviors are occurring, the charges would be brought against the supervisor. Therefore, it is essential that you are familiar with the 2016 ASHA Code of Ethics and licensure regulations in your state regarding supervision of graduate students.

DOCUMENTATION OF SUPERVISOR QUALIFICATIONS

CALIPSO (DL 2024 COHORT ONLY)

Included in the list of resources you've received with this handbook is a handbook for using CALIPSO, FSU's online student documentation program (www.calipsoclient.com/fsu). Once a student has submitted your name, ASHA number, and email address to the Coordinator of Student Placements, you will receive an email with instructions on accessing CALIPSO for the first time. One area of information needed from site supervisors is confirmation of your credentials.

1. Log into CALIPSO at www.calipsoclient.com/fsu, using your ASHA number and password.
2. Open the template for adding this information by clicking on "Management – Update Your Information."

3. Once this screen is open, click on “Edit licenses and certification.” This information is required from any supervisor the student is assigned to and who signs off on the student’s clock hours. All supervisors who will approve hours for the student must be enrolled in CALIPSO and complete this information.
4. We need a copy of your most recent ASHA card:
 - a. We will verify your ASHA Certification & that you have met the supervision requirement via the ASHA portal (<https://www.asha.org/eweb/ashadynamicpage.aspx?webcode=ccchome>) and keep that on file
 - b. We will verify your state licensure (or FL Teaching Certificate) online when applicable. If we cannot obtain primary verification online, we will ask that you email us a copy of your state license or FL Teaching Certificate
 - c. You can scan your card and upload it to CALIPSO yourself in the “Edit Licenses and Certification” field by clicking on the “upload file” link.
5. If you need additional CALIPSO logins for additional supervisors, simply provide the supervisor ASHA number and license number to the student who will seek permission from our school and proceed with the appropriate compliance steps. We will also need to obtain copies of that supervisor’s ASHA and state license documentation.

EXXAT Prism (DL Cohort 2025+ and All TLH Cohorts)

Our School uses Exxat Prism exclusively for all TLH Cohorts as well as the DL Cohort 2025 students and beyond (DL Cohort 2026+). Exxat Prism is a web-based application to manage student clock hours, time on site, site demographics, and student performance. You will review and approve clock hours and time-on-site forms (TimeSheets; TimeOff forms) weekly via email from Exxat Prism. You will also complete a midterm and final evaluation as well as basic intake forms via Exxat Prism. Supervisors do not set up an account with Exxat Prism; All tasks are completed via email. At times you may be asked to submit and upload licensure and certification documents to Exxat, so that we can maintain CAA compliance.

DOCUMENTATION OF SITE DEMOGRAPHICS

Site Demographic information is required by ASHA so that the FSU program can document that we are placing students in high-quality facilities! Early in the term, your student will ask you to complete the “**Site Demographic Form**” via email link from Exxat Prism. In future semesters, you may be asked to complete a new “**Site Demographic Form**”. Subsequent submissions are important, as they allow us to update the information on your site as well as provide the student with an overview of the facility.

FIELD SUPERVISOR RESPONSIBILITIES

An initial responsibility of the field supervisor is to determine which graduate student practicum should be accepted by your facility. It is the intent of the SCSD to place graduate students who are well prepared both academically and clinically for the clinical experience under consideration. As applicable, you will carefully review all applications sent, interview candidates, and assess student needs in the light of resources available in your facility. You have a professional responsibility to accept only those students for whom meaningful clinical experiences can be provided. You will also consider the objectives of the clinical education program in conjunction with the student's expressed professional goals, previous practicum experiences, and clock hour needs for certification and licensure. Finally, you can help prepare students for the upcoming clinical experience by providing a program description, required readings, or a list of tests and procedures with which they should be familiar prior to starting the placement.

Once a student has been placed, you are responsible for assigning duties to the student, supervising and evaluating the student’s conduct of assigned duties, regular case staffings and certification of the student’s clock hours. We also request that you provide the student with an orientation to the clinical site and the

speech-language program. Scheduling time for the demonstration of clinical techniques and approaches, behavioral management, supervising sessions, providing feedback, approving clock hours and Time Off Sheets (and/or Timesheets) in Exxat (or CALIPSO DL 2024 Cohort), and evaluating student performance are considered necessary for an optimal student experience, as well as assuring that the best services are provided to the clients at the clinical placement facility. Students will follow the procedures of the facility as directed by the supervisor.

SUPERVISION RATIOS

During the early part of the practicum, it is recommended that you remain in the room with the student and provide a high percentage of supervision until you feel comfortable with the clinical management being provided by the student. Students who are enrolled in beginning practicum experiences (i.e., SPA 5941) will need the most supervision, as they are new to the practicum experience. If you have a student who is enrolled in SPA 5942, they should require less supervision. By the time a student is enrolled in their final placement, they should require minimal supervision (i.e. 25-30%).

Be mindful of the healthcare policies and procedures when a student is working with your caseload. For example, Medicare/Medicaid and some insurance providers have specific supervisory requirements in order to bill for services in which students have participated.

Supervision Minimum Ratios: Treatment & Diagnostics

ASHA's CFCC requires 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. This ratio must be maintained for **each individual client/group and not be an average of supervision time across the entire caseload.** Supervision must be sufficient to ensure the welfare of the individual receiving services. ***NOTE: This is ASHA's recommendation for a student to count clock hours; insurance companies may require a higher level of supervision (i.e., Medicaid & Medicare require 100% supervision).***

Supervisor Absences

Although we expect students' attendance and professional behavior to be commensurate with their stage of clinical development, please remember that the practicum is being completed by a student under your mentoring and observation. The student is also working under your certification and licensure; if something negative occurs, the worst that can happen to the student is that he or she is dismissed from the practicum experience. The supervisor, though, is at risk of losing licensure and certification. Therefore, **students cannot see clients/patients/students without supervision; the student should never cover your caseload without supervision. This means that there should ALWAYS be another licensed, certified SLP on site if you are absent and wish for the student to provide services to your caseload.** If you need to be absent and another licensed, certified SLP is unavailable, observations with other professionals (e.g., classroom teacher, allied service, physician) could be scheduled. It may be helpful to establish a "back-up" plan for observations or alternative supervision in the event you are ill or have an unexpected absence.

GOAL SETTING

The student you are supervising this term should not be expected to be operating completely independently at this point in the program. The student will have additional knowledge and skills to learn. We encourage you to ask the student about their progress in the program, what they hope to learn from the clinical experience you will be supervising, and any particular areas of knowledge or skills that they would like to emphasize during the experience with you.

Review of the experiences the student has had will enhance your ability to plan broadly for the experiences that will enhance the breadth as well as the depth of the student's learning. One way to evaluate the student's experiences to set goals is by reviewing the student's clock hour status and matching the obtained hours with

opportunities available in your work setting. Clock hours status reviews can involve discussing the areas of the Big 9 in which the student has accumulated hours, the number of hours earned with each age group (i.e., pediatric, school-age, adult, and geriatric), and areas of deficiency in which the student has yet to earn hours. If the student has needs in a particular area, such as voice disorders or alternative modalities, it is helpful to work with the student to identify any potential opportunities to earn even a few hours while placed with you.

PROVIDING STUDENT FEEDBACK

Providing frequent and specific feedback is the most important duty of the field supervisor. Although it takes some time to learn the student's strengths and areas to develop, you should be prepared to offer verbal and written feedback for the first few sessions you observe. Using agreed upon goals should also guide your feedback.

Difficulties reported by either students or supervisors with a practicum experience are almost always related to frequency and adequacy of communication. Please make plans to address this critical component of a successful experience at the beginning of the semester. Let the student know your preferences for providing feedback to her/him, including whether you will offer it on a session-by-session, day-by-day, or weekly basis; whether you prefer to offer feedback verbally or in writing; and, your expectations for how the student will use the feedback.

GRADING

Grades are required for the student at midterm and upon completion of the off-campus placement. Procedures for completing student evaluations, including deadlines, knowledge/skills to be evaluated, and performance criteria, will be distributed to the supervisor at the initiation of the practicum experience. All grading is completed within Exxat (except DL2024 Calipso www.calipsoclient.com/fsu). The final evaluation report will become part of the student's permanent record.

The FSU Clinical Competency scale is based on a scale of 1-4, and using incremental values is acceptable (e.g., 3.25, 3.5, etc.). This rating system applies to students at all levels of clinical development.

This scale can be found in Appendix D.

- Only complete fields in which the student has gained experience; all other fields remain blank.
- It is also useful to both the student and the FSU practicum instructor if the comments field is used to qualitatively describe the student's behavior, but comments do not need to be extensive unless the supervisor feels they will be helpful in interpreting the student's ratings.

Grade due dates are provided in the student syllabus and in the email updates sent throughout the semester (beginning, middle, end). The numerical values should be supported by ongoing verbal and written feedback provided at least weekly.

Any problems or difficulties involving the student should be immediately communicated to the student's FSU practicum instructor, the Graduate Program Director of Distance Learning (Jinger Deason, jdeason@fsu.edu) or for the Tallahassee Campus, the Director of Placement & Progression (Brooke Ott, kbott@fsu.edu) or Graduate Clinical Advisor (Jennifer Westmoreland, jwestmoreland@fsu.edu). The Director, in consultation with you, the student's practicum course instructor, and the graduate advising team, will work to ameliorate problems.

COMMUNICATION

It is important to be explicit about how you prefer the student to communicate with you if they need to call in sick or have other questions when not on site with you. Students may assume it is ok to email or text or simply call in to the front desk of your facility without speaking to you directly, unless you specify otherwise.

Not only do we believe communication between you and the student is essential; we encourage communication between you and the FSU program. You will receive an email from the student's instructor after the student has had time to settle in and get started. If everything is going well and there are no questions/concerns, you do not need to return the call/email to FSU. Any time questions or concerns arise, however, please call the student's practicum instructor (whose contact information was sent via an email at the beginning of the semester) or the Graduate Program Coordinator - Distance Learning (Jinger Deason, jdeason@fsu.edu) or for the Tallahassee Campus Director of Placement & Progression (Brooke Ott, kbott@fsu.edu) or Graduate Clinical Advisor (Jennifer Westmoreland, jwestmoreland@fsu.edu)

FREE CONTINUING EDUCATION CREDITS

Florida State University is a member of The Council of Academic Programs in Communication Sciences and Disorders (CAPCSD). As a member of this organization, we are able to offer our supervisors a free series of self-paced, online course modules focused on the process of clinical education. Through high-quality and dynamic readings, multimedia offerings, and reflective activities, participants will gain a richer understanding of the role of clinical education in graduate programs. These courses are provided at no cost and offer ASHA CEUs for participation. **Beginning January 1, 2020, anyone supervising a student, CF, or support personnel (e.g., SLP-A) will be required to have completed a minimum of 2 hours of continuing education in the area of supervision.**

STUDENT RESPONSIBILITIES/REQUIREMENTS

ATTENDANCE

General attendance expectations (e.g., number of days per week on site, hours per day) are established in collaboration with you, the practicum course instructor, and the student. The schedule is also tied to the practicum course in which the student is enrolled and the corresponding number of credit hours for that course. Attendance guidelines are delineated in the course syllabus. If you are uncertain regarding expectations for attendance, ask your student to confirm which course they are enrolled in and how many credit hours. If you have questions about attendance expectations, please contact the practicum course instructor.

Practica (i.e., **SPA 5941**, Beginning Practicum; **SPA 5505**, Advanced Clinical Practicum; **SPA 5942**, Community Practicum)

Attendance schedules for practica are typically 21-24 hours per week (for TLH Graduate Students) or 12+ hours per week on site (for Distance Learning Graduate Students) and follow the university calendar. In other words, if the university has an official holiday, the student should be excused from attendance that day. If the student is requesting to be excused for a holiday, check with the practicum course instructor or the official university calendar, found at http://registrar.fsu.edu/dir_class/.

Excused/Unexcused Absences

Students are expected to abide by the university's attendance policy regarding excused/unexcused absences. The FSU policy, as written in the University Handbook, is:

Instructors must accommodate absences due to documented illness, deaths in the immediate family and other documented crises, call to active military duty or jury duty, religious holy days, and official University activities and must do so in a way that does not penalize students who have a valid excuse. Consideration should also be given to students whose dependent children experience serious illness [emphasis added]. All students are expected to abide by this class attendance policy. Students must also provide, when possible, advance notice of absences as well as relevant documentation regarding absences to the instructor as soon as possible following the illness or event that led to an absence. Regardless of whether an absence is excused or unexcused, the student is responsible for making up all work that is missed.

You may approve of a student to be absent for a day with good cause. It is the student's responsibility to inform the practicum course instructor of the request via email. You may also require the student to make up for the missed time. There should be no unexcused absences. If the student misses more than two days that you do not approve and that are not made up to your satisfaction, the student may be dismissed from the practicum. Please contact the course instructor immediately if you have concerns about the student's punctuality or attendance.

Students are not permitted to end practica early (i.e., prior to the end of the last day of classes in the specific academic term), although exceptions may be made on a case-by-case basis. Students who wish to end a placement earlier than the last scheduled day of the term must submit a written request to the course instructor who consults with you and the Graduate Advising Team. You, the instructor, and the Graduate Advising Team, must all approve of the student's request.

CLOCK HOUR DOCUMENTATION AND VERIFICATION

To provide verification of clock hours obtained during enrollment in clinical education programs, the student will enter the contact time into Exxat for each client/or group seen for diagnostics or clinical management.

Weekly, the student will submit these hours to you for approval; you will receive an email from Exxat stating that you have hours that need to be approved.

Refer to the Exxat instructions <https://help.exxatprism.com/hc/en-us/articles/25047149677585-Reviewing-Student-Clinical-logs-for-Clinical-Educator> for further information on how to approve clock hours.

DL 2024 please refer to CALIPSO for clockhour documentation

We request that you review clock hours at least weekly and attest to the amount of time supervised. It is imperative that you identify the amount of time you have supervised for each session to verify that the ASHA standards have been met. Reviewing and approving clock hours weekly will increase the accuracy of the documentation and support the student's professional accountability.

Students may need assistance in determining which areas of the Big 9 are most appropriate for a given session when entering hours. It is helpful if you can discuss with them the category most appropriate for the documentation. For example, social and cognitive aspects of communication are often related to language. However, it is a more accurate illustration to document memory strategies as a cognitive aspect and conversational interventions as social aspects. When memory books or visual systems are used to support communication, it may be documented as an alternative modality.

Logging of Clock Hours

Clock hours should be logged as actual contact time in minutes and **not rounded**. Any management of a hearing-impaired client (whether articulation, language, auditory training, etc.) is logged as hearing treatment hours.

LIABILITY AND HEALTH INSURANCES/OTHER SITE REQUIREMENTS

TLH Graduate Students who are enrolled in this practicum have proof of liability insurance, health status and appropriate medical coverage on file through our EXXAT Approve system. Distance Learning Graduate Students who are enrolled in this practicum have proof of liability insurance on file through our EXXAT Approve system. Copies are available for your records upon request.

If your site has additional requirements for participation (e.g., immunizations, background checks, CPR, etc.), we have made every effort for the student to be notified of these requirements and have them met prior to the first day on site. It is the student's responsibility to pay all costs associated with these requirements and to provide the site with appropriate documentation.

NAME TAGS AND DRESS CODE

Students are expected to wear their official FSU nametag during all clinical experiences, which identify them as student clinicians. Students may wear any appropriate nametag *if they are clearly identified as a student clinician*. If your site has a particular dress code requirement, please share this expectation with the student. Costs associated with name badges and dress codes are the student's responsibility.

SUMMARY

Again, thank you for participating in field supervision for graduate students enrolled in Florida State University's graduate program in Communication Science and Disorders. Your participation as a field supervisor is a significant contribution not just to your assigned student's professional growth but to the overall mission of our program.

We hope that the handbook has been useful in communicating policies and establishing guidelines that will aid you in supervision of the student placed with you. If, at any time, you have concerns about a student's clinical performance, professionalism, attendance, etc., contact the practicum course instructor or a Director immediately. Addressing concerns early in the term makes it more likely that you and the student will establish a successful working relationship.

Graduate Program Director of Distance Learning -Jinger Deason, jdeason@fsu.edu
Tallahassee Campus Director of Placement & Progression- Brooke Ott,kbott@fsu.edu
Tallahassee Graduate Clinical Advisor -Jennifer Westmoreland, jwestmoreland@fsu.edu

The course instructor's contact information accompanies the initial email that you receive from Exxat.

References

American Speech-Language-Hearing Association. (2016). *Code of Ethics* [Ethics]. Available from www.asha.org/policy.

American Speech-Language-Hearing Association. (2016). *Scope of Practice in Speech-Language Pathology* [Scope of Practice]. Available from www.asha.org/policy.

American Speech-Language-Hearing Association. (2014). Standards and Implementation Procedures for the Certificate of Clinical Competence in Speech-Language Pathology. Available from <http://www.asha.org/Certification/2014-Speech-Language-Pathology-Certification-Standards/>.

Hayes, L. (2016). *CALIPSO Supervisor's Manual*. Charleston, SC: CALIPSO, LLC.

APPENDIX A – LIST OF REQUIRED RECORDS & FORMS

(FOR DL COHORT 2024 Students) Logging Clock Hours in CALIPSO

At least weekly, the graduate student is to enter into CALIPSO actual contact time for each client seen for diagnostics and/or clinical management. These hours should then be forwarded to you for your review and approval.

(FOR DL COHORT 2024 Students) Clinical Supervisor Information in CALIPSO

This information is required for all supervisors the student is assigned to and documents clock hours with the student during their clinical placement. Enter your information into CALIPSO via “Management – Update my information” and then selecting “Edit licensures and certification.” A copy of the ASHA & License (or Teaching Certificate) verification must be kept on file. If we cannot obtain the documentation online, the Director of Clinical Education will request that you provide a copy for our records.

(FOR DL COHORT 2024 Students) Midterm and Final Evaluations in CALIPSO

The same form in CALIPSO is used for midterm and final grading. Instructions for completing the grading form can be found in the CALIPSO manual (Hayes, 2016), www.calipsoclient.com/fsu.

ALL OTHER COHORTS EXXAT Prism

Completed via an email link sent to the email address we have on file for you.

Time Off Sheets,

Clinical Logs (Clock Hour Verification),

TimeSheets (Time on Site Verification Logs)

Supervisor Details Form (verification of basic supervisor information)

Site Demographic Form

Midterm Evaluation, Final Evaluation

[Community Placement Expectations Worksheet](#)

APPENDIX B: RESOURCES FOR CLINICAL SUPERVISION

FSU General Documents: <https://commdisorders.cci.fsu.edu/clinical-supervision/>

ASHA Supervision Requirements

- Courses that meet the ASHA Supervision Requirement
- Editing the ASHA Portal
- ASHA Supervision Requirements

CALIPSO (For DL Cohort 2024 Students only)

- **CALIPSO Supervisor Handbook**
- CALIPSO Clinical Competency Key

EXXAT Prism

Exxat Prism is an all-in-one education management software primarily designed for universities with health sciences, nursing, and social work programs. It replaces scattered spreadsheets and manual paperwork by serving as a central digital hub to manage student placements, clinical rotations, compliance documents, and curriculum competencies. Supervisors do not need to set up an account with this platform; All tasks are completed via links emailed directly to the supervisor.

- **Clinical Log Instructions**

<https://help.exxatprism.com/hc/en-us/articles/25047149677585-Reviewing-Student-Clinical-logs-for-Clinical-Educator>

- **Evaluation Instructions**

<https://help.exxatprism.com/hc/en-us/articles/15824422668305-Completing-Program-Evaluations>

Clinical Practicum Resources

- Off Campus Supervision Handbook
- [Community Placement Expectations Worksheet](#) (completed via EXXAT with student)

Available from ASHA Website: www.asha.org/policy.

- ASHA 2016 Code of Ethics
- ASHA 2016 Scope of Practice in Speech-Language Pathology
- ASHA Preferred Practice Patterns for the Profession of Speech Language Pathology
- ASHA Position Statement on Clinical Supervision in Speech-Language Pathology

Appendix C: ASHA's 1/1/2020 Supervision Continuing Education Requirement

Beginning January 1, 2020, ASHA Council for Clinical Certification (CFCC) will require that any SLP or AuD supervising an **undergraduate or graduate student earning clock hours, Clinical Fellow, or support personnel** (i.e., SLP-A) has completed 2 hours of continuing education (0.2 ASHA CEUs) on supervision.

Specifically, the language from the ASHA Certification page emphasizes that each certified individual must have completed continuing education that demonstrates (<https://www.asha.org/Certification/Prof-Dev-for-2020-Certification-Standards/>):

Knowledge and skills specific to clinical educators of undergraduates, graduate students, preceptors of audiology externs, mentors of clinical fellows in speech-language pathology, supervisors of support personnel, and supervision of individuals transitioning in a new area of practice or reentering the profession.

Clinical directors and employers will be able to search on an individual's certification page in ASHA's system to determine whether an individual has completed the required supervision training. If not, a student, CF, or support personnel **cannot be supervised by someone who has certification but has not yet completed the training**. Again, this change in professional development requirements goes into effect on January 1, 2020.

If you're unsure about whether you have continuing education credits in this area already, go to <https://www.asha.org/certification/>. Click on the teal box in the upper right area of the page that says "Verify ASHA Certification." Enter the individual's name or ASHA number. If you have completed the required continuing education, it will be noted under "Clinical Instruction, Supervision, or Clinical Fellowship Mentor:"

Name: Tricia M Montgomery	ASHA Account Number: XXXX5916	Certification Status: CCC-SLP
Area of Certification: SLP	Certification Awarded: 05/01/1999	Valid Through: 03/31/2021

Clinical Instruction, Supervision or Clinical Fellowship Mentor

Tricia M Montgomery has met the 2020 ASHA certification standards for providing clinical instruction and supervision to individuals preparing for ASHA certification.

This is a one-time ASHA requirement, so you won't need to renew unless ASHA changes this standard. We will be unable to place any students with you unless the requirement is met. If an SLP new to FSU's roster of clinical educators requests a student, we will be unable to assign a student to that person until the requirement is met. Also, remember that this requirement is not intended only for supervision of students, but for anyone who supervises a Clinical Fellow or SLP-A.

Appendix D: FSU Clinical Education Performance Scale

- 1.00 Not Evident:** The student requires direct instruction to modify behaviors and is unaware of the need to change. Supervisor must model behavior and implement the skill required for client to receive optimal care. Supervisor provides constant instructions and constant modeling. The student may observe and state facts; however, critical thinking/problem solving skills are not yet present. (skill is present <20% of the time).
- 1.50 Becoming Evident:** The student requires direct instruction to modify behaviors and is unaware of the need to change. Supervisor must model behavior and implement the skill required for client to receive optimal care. Supervisor provides numerous instructions and frequent modeling. The student may observe and state facts; however, critical thinking/problem solving skills are not yet present. (skill is present 20-29% of the time).
- 2.00 Early Emerging:** The skill is emerging, but is inconsistent or inadequate. Student shows awareness of need to change with supervisor input. Supervisor frequently provides instructions and support for all aspects of case management and services. Critical thinking/problem solving skills are emerging and the student is beginning to identify problems. (skill is present 30-44% of the time).
- 2.50 Emerging:** The skill is emerging, but is inconsistent or inadequate. Student shows awareness of need to change with supervisor input. Supervisor intermittently provides instructions and support for all aspects of case management and services. Critical thinking/problem solving skills are emerging and the student is beginning to identify problems. (skill is present 45-59% of the time).
- 3.00 Present with Ongoing Monitoring/Feedback:** The skill is present and needs further development, refinement or consistency. Student is aware of need to modify behavior, but does not do this independently. Supervisor provides ongoing monitoring and feedback; focuses on increasing the students' critical thinking on how/when to improve the skill. (skill is present 60-74% of the time).
- 3.50 Present with Intermittent Monitoring/Feedback:** The skill is present and needs further development, refinement or consistency. Student is aware of need to modify behavior, but does not do this independently. Supervisor provides intermittent monitoring and feedback; focuses on increasing the students' critical thinking on how/when to improve the skill. Critical thinking and problem solving skills are present. The student identifies and analyzes problems and is beginning to reach conclusions. (skill is present 75-89% of the time).
- 4.00 Proficient:** The skill is developing/implemented most of the time and may need continued refinement or consistency. Student is aware and can modify the behavior in-session and can self-evaluate. Reflection is generally effective at modifying approach in-session. Critical thinking and problem solving is developed. The student identifies and analyzes problems, reaches appropriate conclusions and can adequately communicate those problems to conclusions to relevant others. Supervisor acts as a collaborator to plan and suggest possible alternatives. Student consistently demonstrates the skill independently across clients, settings, and increasing levels of clinical complexity. Student is CF ready. (skill is present 90-100% of the time).

Appendix E: FSU Clinical Education Competencies

Evaluation/Assessment

1. **Foundational Knowledge of Human Communication & Swallowing:** Explains typical communication and swallowing development across the lifespan. Applies biological, neurological, acoustic, physiological, developmental, and linguistic-cultural principles to clinical contexts. Evaluates how speech, language, and hearing systems interact in normal development. (CFCC IV-B; CAA 3.1.6B)
2. **Knowledge of Communication & Swallowing Disorders:** Identifies and categorizes communication and swallowing disorders based on etiologies and characteristics. Analyzes disordered processes using anatomical, physiological, acoustic, psychological, developmental, linguistic, and cultural factors to support differential diagnosis. (CFCC IV-C)
3. **Evidence-Based Practice & Research Integration:** Accesses, evaluates, and synthesizes research literature. Applies evidence-based principles to clinical decision-making for diverse populations.(CFCC IV-F; CAA 3.1.1B)
4. **Screening & Prevention Procedures:** Selects and administers appropriate screening tools. Interprets results to determine the need for further assessment or intervention. (CFCC IV-D, V-B, 1a)
5. **Knowledge of Prevention & Assessment Principles:** Explains and applies current prevention and assessment methods. Evaluates procedures in relation to anatomical, physiological, psychological, developmental, linguistic, and cultural factors. (CFCC IV-D)
6. **Case History Collection & Integration:** Collects comprehensive case histories from multiple sources. Integrates information from clients, families, caregivers, and professionals to inform assessment planning. (CFCC V-B, 1b)
7. **Selection of Evaluation Procedures:** Chooses appropriate evaluation tools based on client needs. Justifies selection using clinical reasoning and evidence-based guidelines. (CFCC V-B, 1c)
8. **Test Administration:** Administers standardized and non-standardized tests accurately. Scores and documents results according to established protocols. (CFCC V-B, 1c)
9. **Adaptation of Evaluation Procedures:** Modifies evaluation procedures to accommodate individual client needs. Evaluates the effectiveness of adaptations in achieving valid results. (CFCC V-B, 1d)
10. **Diagnosis Development:** Synthesizes assessment data to formulate accurate diagnoses. Evaluates consistency and validity of findings across multiple sources. (CFCC V-B, 1e)
11. **Intervention Recommendations:** Interprets and integrates assessment data to develop appropriate, evidence-based intervention recommendations. (CFCC V-B, 1e)
12. **Administrative & Reporting Functions:** Completes all required documentation and administrative tasks related to evaluation/assessment. Evaluates the clarity, accuracy, and completeness of reports. (CFCC V-B, 1f)
13. **Referral for Services:** Determines the need for referrals based on evaluation outcomes. Justifies referral decisions and ensures appropriateness and timeliness.(CFCC V-B, 1g)
14. **Interprofessional Collaboration & Clinical Counseling:** Communicates effectively with clients, families, and professionals. Demonstrates cultural sensitivity, counseling skills, and collaborative practices. Evaluates and adapts communication strategies to meet individual needs. (CFCC V-B, 3a; CAA 3.1.1B, 3.1.6B)

Intervention

1. **Foundational Knowledge of Human Communication & Swallowing:** Explains typical communication and swallowing development across the lifespan. Applies biological, neurological, acoustic, physiological, developmental, and linguistic-cultural principles to clinical contexts. Evaluates how speech, language, and hearing systems interact in normal development. (CFCC IV-B; CAA 3.1.6B)

2. **Knowledge of Communication & Swallowing Disorders:** Identifies and explains etiologies and characteristics of communication and swallowing disorders. Analyzes anatomical, physiological, acoustic, psychological, developmental, linguistic, and cultural correlates to inform intervention planning. (CFCC IV-C)
3. **Evidence-Based Practice & Research Integration:** Accesses, evaluates, and synthesizes research findings. Applies evidence-based principles to select and implement appropriate intervention strategies for diverse populations. (CFCC IV-F; CAA 3.1.1B)
4. **Intervention Planning:** Develops individualized, setting-appropriate intervention plans with measurable and achievable goals. Synthesizes client data and collaborates with clients and stakeholders to ensure plans reflect anatomical, physiological, developmental, and linguistic-cultural considerations. (CFCC IV-D, V-B, 2a)
5. **Intervention Implementation:** Implements intervention plans effectively by sequencing tasks, providing clear instructions, and engaging clients throughout the process. Evaluates client responses and adjusts delivery to maintain engagement and progress. (CFCC V-B, 2b)
6. **Material & Instrumentation Use:** Selects, develops, and utilizes appropriate materials and instrumentation aligned with intervention goals. Evaluates the effectiveness of tools in supporting client outcomes. (CFCC V-B, 2c)
7. **Performance Measurement:** Measures and analyzes client performance using appropriate tools and criteria. Evaluates progress toward intervention goals and documents outcomes accurately. (CFCC V-B, 2d)
8. **Intervention Modification:** Adjusts intervention plans, strategies, materials, or instrumentation based on client performance and feedback. Applies practical strategies to maintain engagement and optimize outcomes. (CFCC V-B, 2e)
9. **Administrative & Reporting Functions:** Completes all required documentation and administrative tasks related to intervention. Evaluates the clarity, accuracy, and completeness of reports and records. (CFCC V-B, 2f)
10. **Referral for Services:** Identifies when additional services are warranted and makes appropriate referrals. Justifies referral decisions based on client needs and clinical data. (CFCC V-B, 2g)
11. **Interprofessional Collaboration & Clinical Counseling:** Communicates effectively with clients, families, caregivers, and professionals. Demonstrates cultural sensitivity, counseling skills, and collaborative practices. Evaluates and adapts communication strategies to meet individual needs and preferences. (CFCC V-B, 3a; CAA 3.1.1B, 3.1.6B)

Professionalism

1. **Oral Communication Skills:** Demonstrates oral communication skills appropriate for professional practice by articulating clinical observations, treatment plans, and feedback clearly and effectively. Applies ASHA's standards regarding speech and language proficiency in English. (CFCC V-A)
2. **Written Communication Skills:** Produces written documents such as treatment plans, progress notes, and professional correspondence that are clear, accurate, and aligned with clinical standards. Analyzes written feedback and revises work accordingly. (CFCC V-A)
3. **Growth Mindset:** Evaluates feedback from supervisors and integrates suggestions into clinical practice. Reflects on personal performance and sets goals for improvement. Demonstrates accountability by modifying behaviors to enhance professional effectiveness. (CAA 3.1.6B; CAA 3.1.1B)
4. **Professionalism:** Demonstrates professional behavior by fulfilling responsibilities with integrity, respect, and accountability. Analyzes ethical dilemmas and applies professional standards to resolve them. (CAA 3.1.1B; CAA 3.1.6B)
5. **Universal Precautions:** Implements universal precautions consistently during clinical interactions. Identifies potential risks and applies infection control procedures to maintain a safe environment. (CAA 3.8B)
6. **Ethical Conduct & Client Welfare:** Identifies and applies ethical principles from the ASHA Code of Ethics and relevant regulations (HIPAA, FERPA). Evaluates clinical decisions to ensure client welfare is prioritized. (CFCC IV-E, V-B, 3d; CAA 3.1.1B; CAA 3.1.6B; CAA 3.8B)

7. **Contemporary Professional Issues:** Examines current trends and issues in the field. Applies information from professional sources to inform practice and contribute to professional dialogue. (CFCC IV-G; CAA 3.1.1B)
8. **Professional Credentials & Regulations:** Identifies certification, licensure, and credentialing requirements for speech-language pathology. Applies regulatory knowledge to clinical decisions and assesses how professional standards guide responsibilities in healthcare and educational settings. (CFCC IV-H)

Responsibilities in Clinical Practice

1. **Professional Appearance:** Applies established dress code policies by selecting attire appropriate for the clinical setting. Assesses personal grooming and appearance to ensure alignment with professional standards
2. **Punctuality:** Demonstrates punctuality by consistently arriving at the clinical site on time and submitting assignments by the designated deadlines. Evaluates time management strategies and adjusts as needed to meet professional expectations.
3. **Organization:** Applies organizational strategies to prepare for clinical sessions and team meetings. Creates and maintains structured documentation and materials that support clinical efficiency.
4. **Participation:** Engages actively in discussions by contributing relevant ideas, asking clarifying questions, and responding to peers and supervisors. Evaluates group dynamics and adapts communication style to enhance collaboration.
5. **Bias Awareness:** Identifies and explains the impact of implicit and explicit bias on clinical service delivery. Evaluates personal biases through structured self-reflection and analyzes how these biases influence clinical decision-making.
6. **Self-Cultural Awareness:** Describes and analyzes how one's own cultural and linguistic background affects clinical interactions. Applies this awareness to adapt communication and service delivery appropriately.
7. **Cross-Cultural Interaction:** Identifies and evaluates the interaction of cultural and linguistic variables between caregivers and individuals receiving services. Applies culturally responsive strategies to enhance communication and rapport.
8. **Social Determinants of Health:** Explains and integrates knowledge of social determinants of health and environmental factors into clinical decision-making. Evaluates how these factors influence access, engagement, and outcomes in service delivery.