**SLP Internship
Mentor Handbook**

**Department of Speech, Language
and Hearing Sciences
Graduate College of Education
San Francisco State University**

January, 2024

Table of Contents

Introduction

This handbook is intended for Mentors in school and non-school settings who supervise SLP Interns from the San Francisco State University Department of Speech, Language and Hearing Sciences. Taking an SLP intern under your wing is a significant contribution to the profession of Speech-Language Pathology, as students are required to complete two internship experiences in community settings, each one semester in length. Through your supervision of student interns, you demonstrate your commitment to the future of the profession. The final internships provide the bridge from academic and clinical preparation on campus to professional practice in the field. This is a critical transition for the student, as they must now achieve independence in putting academic and clinical skills into practice. Through your mentoring and feedback, the student intern can make this transition smoothly and gradually. Your guidance and supervision enables the student intern to transform from role of student to the role of professional, ready to enter the Clinical Fellowship. Further, your mentorship provides a model of exemplary service to future professionals and colleagues.

The material in this handbook is meant to provide a guideline for both new and experienced Mentors, outlining the components of successful supervision and professional development for both you and the intern. The transition from a university-based Department to SLP practice in a school, clinical, or community setting introduces a number of variables to clinical practice, requiring the intern to apply knowledge and skills in a wholly new context. In addition to achieving clinical competence, the intern must learn to be a colleague who can collaborate effectively with other professionals, patients/clients and families. Your role as the Mentor is critical to the intern's success in transition from student to professional. This handbook is intended to define the phases of initial planning and goal setting, supervision, collaboration with the SFSU faculty supervisor, assessment and increasing professional independence for the intern. We hope that the tools provided here will enhance the success of your role as a Mentor. We deeply appreciate your contribution to the field and hope the mentoring experience with your SLP intern is satisfying and rewarding.

Department of Speech, Language and Hearing Sciences

Department Mission

The mission of the Department of Speech, Language and Hearing Sciences (SLHS) at San Francisco State University is based on our commitment to antiracism and other forms of anti-discrimination as fundamental to our professions, and essential to our preparation of professionals to:

- Identify, challenge and dismantle institutional, environmental, sociocultural, informational, attitudinal and linguistic barriers to accessible, equitable and transformative communication for individuals with communication disabilities and those whose right of expression are diminished or silenced;
- Develop, model, disseminate and adopt best practices in the provision of equitable, competent, compassionate and culturally/linguistically responsive services to individuals with communication disabilities across the lifespan; and
- To promote linguistic diversity and recognize the use of different languages and Englishes among our students and professionals as an asset to our academic and professional community.

Department Vision
The vision of the SLHS department at SF State is to be a leader in the field of Speech, Language and Hearing Sciences for advancing critical thinking, equity and scientific rigor. We aspire to meet the challenges of creating pathways for recruiting, supporting, retaining and nurturing high qualified students and professionals that represent diverse histories, identities, life experiences, and perspectives. The SLHS administration, faculty, student body and professional partners represent a community of practice that respects and supports individuals with communication disabilities; that integrates research with clinical practice; that embodies equity; and that fosters an inclusive student/professional community in service of accessible communication for all.

To learn more about our vision, mission and goals, please refer to the SLHS Department Strategic Plan on the SLHS Department website: http://slhs.sfsu.edu/

Academic and Clinical Preparation for Interns

The Master of Science Department in speech-language pathology at San Francisco State University is accredited by the Council on Academic Accreditation in Speech-Language Pathology (CAA) of the American Speech-Language-Hearing Association (ASHA). The curriculum follows ASHA standards that prepare the intern to develop knowledge, skill and clinical competency in each of the following areas:
- Articulation;
- Fluency;
- Voice and resonance, including respiration and phonation;
- Receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication and paralinguistic communication) in speaking, listening, reading, writing;
- Hearing, including the impact on speech and language;
- Swallowing (oral, pharyngeal, esophageal, and related functions, including oral function for feeding, orofacial myology);
- Cognitive aspects of communication (attention, memory, sequencing, problem-solving, executive functioning);
- Social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities);
- Augmentative and Alternative Communication (AAC) modalities.

Prior to the school or nonschool internship, SLHS graduate students have completed the equivalent of 38 semester units of undergraduate coursework in the foundations of the above areas, graduate coursework and 2 supervised clinical practicum experiences with children and adults. Specific courses that are completed at the graduate level include the following:
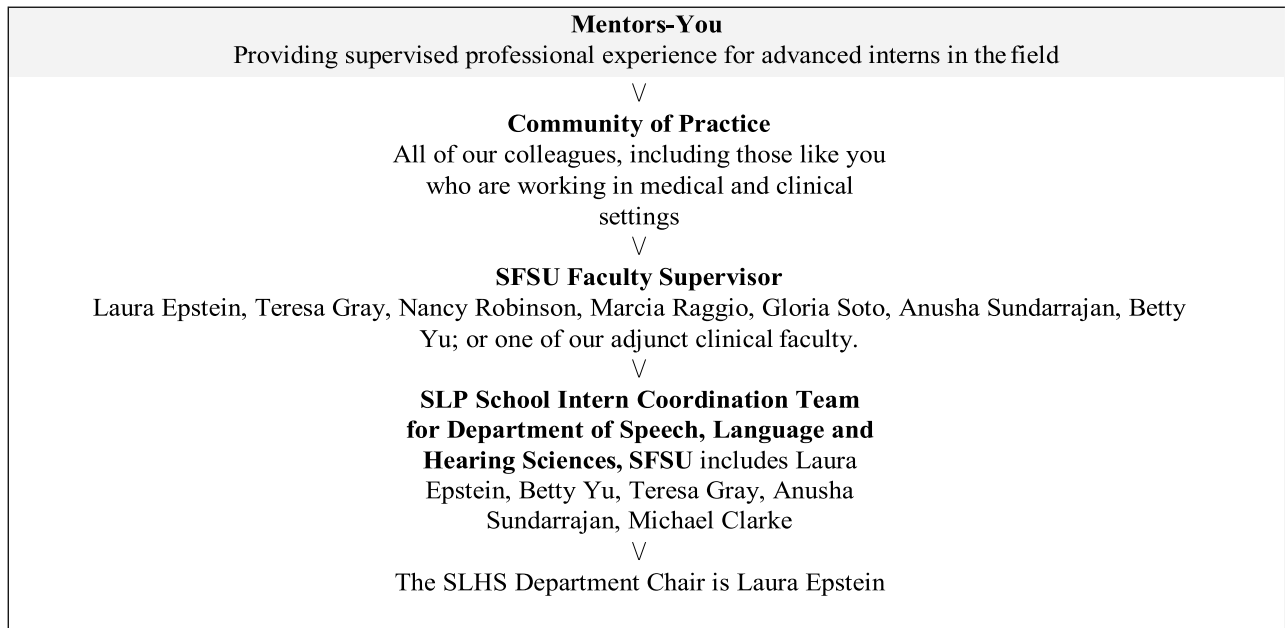
Graduate Courses-Prior to Internship	Clinical Practicum-Prior to Internship
SLHS 701: Culturally and Linguistically Responsive Practices in Speech, Language and Hearing Sciences SLHS 702: Social Communication Development SLHS 703: Research Methods, Evidence-Based Practices and Professional Issues SLHS 707: Serving School Communities in Speech, Language and Hearing Sciences SLHS 708: Seminar in Adult Neurogenics of Language SLHS 709: Seminar in Speech Sound Production SLHS 710: Seminar in Dysphagia SLHS 714: Interprofessional Education and Family-Centered Practices SLHS 754: Seminar in Voice and Resonance SLHS 756: Right Hemisphere Syndrome, TBI & Dementia SPED 743: Augmentative and Alternative Communication (AAC) (or SPED 746)	SLHS 880/713: Advanced Practicum with Children SLHS 880/713: Advanced Practicum with Adults
Graduate Courses-Concurrent with Internships	**Nonschool Internship**
SLHS 757: Aural Rehabilitation (Fall) SLHS 706: Counseling in SLHS (Spring) SLHS 755: Stuttering ((Fall) SPED 746: Teaching Individuals with Physical and Other Health Impairments (or SPED 743)	SLHS 882: Advanced Internship SLHS 712: Internship Workshop
	School Internship
	SLHS 882: Advanced Internship SLHS 712: Internship Workshop

The SFSU SLHS Department has a strong focus in both the school and medical aspects of speech-language pathology, as shown in the courses above. Students are particularly well prepared in the basis of language disorders across the lifespan, but with a focus on the needs of children with communicative disorders (SLHS 701, 707, 708, SPED 743). Separate courses in swallowing and motor speech disorders provide in-depth coverage of assessment and intervention (SLHS 709, SLHS 710). Coursework in adult diagnostics (SLHS 756) also prepares students to conduct formal and informal assessments for clients of all ages. Further, students develop proficiency in all aspects of assessment, intervention, professional writing and documentation through completion of seminars and clinical practicum on-campus (SLHS 703, SLHS 880, and SLHS 713). Prior to entering the first internship, students have completed approximately 75 hours of clinical practicum on campus with children and adults. The range of clinical experiences at SFSU includes child clinics that encompass a range of options, including bilingual intervention in classroom settings, Autism Spectrum Disorders, AAC, and consultative services in preschool. In addition, SLHS students at SFSU may elect to complete optional specializations that include more extensive courses and practicum in AAC or ASD.

Mentor Connection to the Department of Speech, Language and Hearing Sciences

Table 1 shows how Mentors are linked to SFSU, and who to call upon if you have any questions or concerns. The SFSU faculty supervisor is assigned to your intern by the Department Coordinator, and is your liaison with SFSU. A minimum of four formal contacts is planned during the semester and at least one of these contacts is an on-site visit; more visits can be set up as needed. The first visit is typically conducted mid-semester and a follow-up visit prior to the end of the semester whenever necessary. Regular informal contact is encouraged from the beginning of the semester, so that the intern, you and the SFSU site visitor are working as a team. All email communication between the Mentor and Intern should be copied to the SFSU site visitor. If concerns arise, the SFSU site supervisor is the person to contact for assistance. In addition, a member of the Internship Coordination team can be contacted at any time to assist in resolving questions or concerns.

Table 1. Intern Mentor Connection to the Department of Speech, Language and Hearing Sciences

Mentors-You   Providing supervised professional experience for advanced interns in the field
V
Community of Practice   All of our colleagues, including those like you   who are working in medical and clinical   settings
V
SFSU Faculty Supervisor   Laura Epstein, Teresa Gray, Nancy Robinson, Marcia Raggio, Gloria Soto, Anusha Sundarrajan, Betty   Yu; or one of our adjunct clinical faculty.
V
SLP School Intern Coordination Team   **for Department of Speech, Language and**   **Hearing Sciences, SFSU** includes Laura   Epstein, Betty Yu, Teresa Gray, Anusha   Sundarrajan, Michael Clarke
V
The SLHS Department Chair is Laura Epstein

The Department of Speech, Language and Hearing Sciences abides by ASHA requirements for certification, licensure and completion of the supervision CEU requirement of 2 hours (https://www.asha.org/certification/2020-slp-certification-standards/#4):

Implementation: The guided observation and direct client/patient contact hours must be within the ASHA *Scope of Practice in Speech-Language Pathology* and must be under the supervision of a clinician who holds current ASHA certification in the appropriate profession and who, after earning the CCC-SLP, has completed (a) a minimum of 9 months of post-certification, full-time experience (or its part-time equivalent) and (b) a minimum of 2 hours of professional development in the area of clinical instruction/supervision.

Also, From Certification Standard V-E (https://www.asha.org/certification/2020-slp-certification-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.

Internship Roles and Responsibilities

Planning the Internship: Goals and Expectations

The internship process begins with the student's entry into first year of graduate study in speech-language pathology. From the first course and clinical experience, the student is preparing to become a clinically competent professional. Through completion of academic seminars that focus on communicative disorders across the life span and supervised clinical practicum, the student gradually develops mastery to apply theoretical knowledge in the context of clinical interactions with clients, families, instructors, peers and other professionals.

In the second year, graduate students have typically completed prerequisites for internship placements. Two internships are required, one in a school and one in a nonschool setting. Students may select a pediatric or adult focus in the non-school internship. Approximately one-half of the graduate cohort at SFSU complete the nonschool internship prior to the school internship and the other half of the cohort reverse this sequence. Participation in the specialization tracks in Autism Spectrum Disorders and Augmentative and Alternative Communication also change the order of the internships, and usually result in a summer nonschool internship placement in the student's second year.

The placement and selection process to determine individual internship experiences is formally coordinated by SLHS faculty who are assigned to this task. For the school internship, the SLHS Internship Coordination Team refers students to school sites in the greater SF Bay Area and sometimes beyond for informational interviews to determine a mutually positive placement. The student is prepared for the interview by the internship coordinator as if applying for a first professional position, and will bring a resume and samples of clinical writing to this meeting.

Setting Goals and Expectations. Once the intern is selected for an internship, the first step is to determine goals and expectations for the experience. Both the university Department and internship site determine the expected outcomes for the SLP Intern. From the SFSU perspective, the objectives of the school internship are to provide the Intern with the education, training, skill development and experience necessary for the evaluation and treatment of clients in school settings with communication disorders in preschools, elementary schools, middle schools and high schools. Within the site, the Intern is assigned a Mentor and a caseload that gradually increases from shadowing the supervisor, to co-treatment, to leading intervention for part of the caseload, to independent management of a full caseload that reflects the daily schedule of the professional SLPs employed at the site. Specific areas of skill development expected also include the following:

- Collaboration with colleagues, clients, families at the site.
- Participation and contributions to the professional team on site.
- Professionalism in all aspects of the role of an SLP at the site.
- Refinement of documentation (such as use of SEIS), treatment planning, and report writing.
- Mastery of the specific record keeping and documentation system used in the site.
- Completion of all phases of therapy, from referral to assessment, treatment and discharge.
- Attendance and participation, under supervision, in team panels and conferences.
- Attendance at school-wide in-services.
- Completion of related readings, studies, and case presentations to in-service staff during the internship period, as deemed appropriate by the Mentor.

Individual site expectations must also be reviewed and included in the internship plan. The Mentor and SLP intern meet at the beginning of the internship to review evaluation tools provided by the SLHS Department at SFSU, including the *Knowledge and Skills Assessment (KASA) Clinical Evaluation* tool. The KASA provides a comprehensive overview of clinical competency areas that are assessed throughout the student's graduate Department, with increasing mastery expected with each subsequent clinical experience. At the internship level, the intern is expected to demonstrate competency in all areas by the completion of the semester. Additional resources to define goals and expectations of the internship experience include the documents included in the Appendix of this handbook, titled the *Essential Functions Guide* and *Professionalism*. Both of these documents should be reviewed by the Mentor and SLP Intern to clarify competencies and conduct to be mastered in the internship. In addition, individual sites may have specific goals and expectations for interns in document form. These are included in the development of goals to be met by the intern. Agreement and clarification of goals and expectations at the outset of

the internship are

essential for setting benchmarks and indicators of the SLP intern's performance at the midterm and final assessment periods.

     Certificate of Clearance and Clearance Requirements. All SFSU student interns have received the Certificate of Clearance through the California Commission on Teacher Credentialing, which is required for admission into the graduate program. School districts may add additional background clearances per their own policies and requirements. While school districts vary in the requirements to be completed, this process can take time and it is helpful to allow at least one month to complete all requirements prior to the start date for the internship. Most commonly, clearance requirements are completed through the Human Resources offices of the school districts. Timely referral of the intern to the HR representative is helpful to complete the clearance process. Common clearance requirements may include the following:

- Background Clearance
- CPR Training
- TB Clearance
- Influenza Vaccination
- HIPPA Certification
- Obtain an ID Badge
- Site Orientation Training

     SFSU Requirements for Interns and Mentors. The SLP Intern is expected to meet the requirements of the intern site, as a professional SLP employed by the site. For example, on the days that the SLP Intern is onsite, he/she is expected to keep the same schedule as the professional SLPs at the site. The schedule and working requirements of the site are the primary determinants of the SLP Intern's daily plan for the semester. However, the SLP Intern also remains a student at SFSU with related requirements as follows:

Intern Requirements
- The SLP Intern is available to participate at the site for a maximum of 4 working days each week.
- The internship begins and ends with the semester dates, unless other dates are agreed with SFSU, the site and the intern.
- The SLP Intern is expected to participate in monthly seminars on the SFSU campus, typically on Friday afternoons.
- The SLP Intern is expected to participate in one academic course and clinic, typically on Fridays.
- The SLP Intern is required to complete a minimum of 150 direct client/patient contact hours and approximately 50-75 additional residency hours during the semester.
- The SLP Intern is required to participate in the internship the entire semester, with specific beginning and ending dates agreed upon by the site Mentor, intern and SFSU Faculty Supervisor even if minimum clinical clock hours are met prior to the end date.

Mentor Requirements
- Mentors must hold current ASHA certification (CCC) and CA state license. They must have completed the 2-hour ASHA Supervision CEU Requirement as verified on the ASHA website.
- Provide a scanned copy of Mentor's CCC and CA state license to Mallorie Desimone prior to the beginning of the semester by email: mallorie@sfsu.edu and upload to the SLHS 712 Canvas site.
- As is stated in the implementation language for ASHA Certification Standard V-E, *"supervision must be in real time and must never be less than 25% of the student's total contact with each client/patient. Supervision must take place periodically throughout the practicum experience."*
- Mentors are requested to review the following documents for more information about ASHA supervision requirements, Code of Ethics, and Scope of Practice.
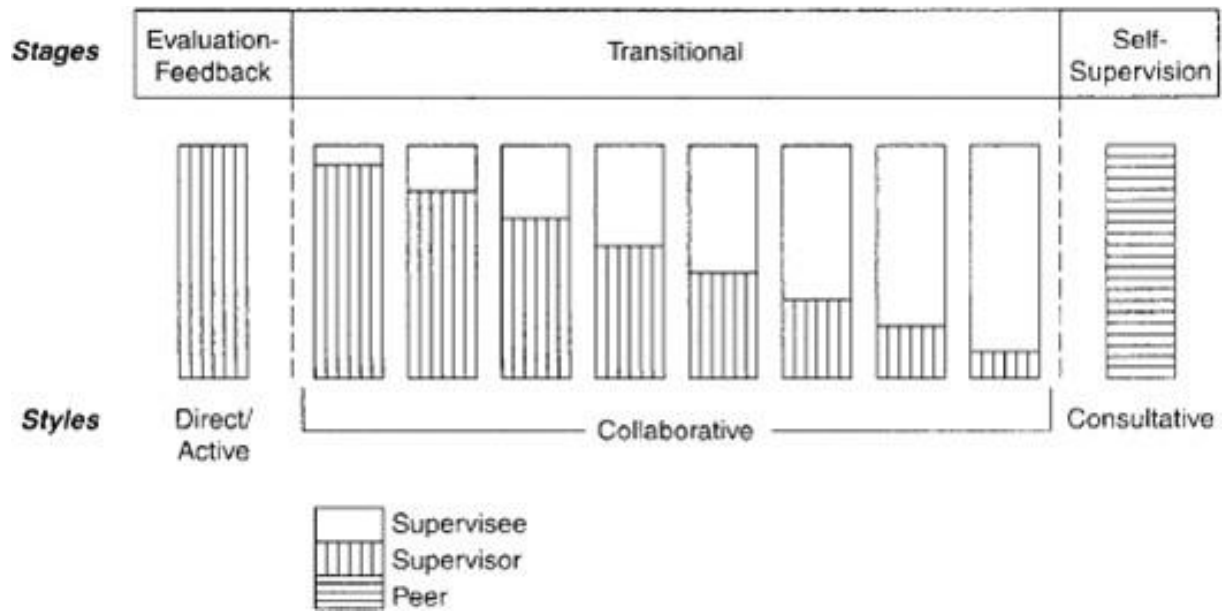
- o The ASHA Code of Ethics (2023): https://www.asha.org/policy/et2016-00342/
  - o Issues in Ethics: Supervision of Student Clinicians (2017): https://www.asha.org/practice/ethics/supervision-of-student-clinicians/
  - o The ASHA Scope of Practice in Speech-Language Pathology: https://www.asha.org/policy/sp2016-00343/
- Mentors will provide student clinicians with oral and/or written feedback that contains both positive comments and constructive criticism during observed therapy sessions and on paperwork and other clinical activities, as required for each individual site.
- Mentors are responsible for the following documents at the midterm and final date of the semester:
  - o Complete and sign mid---term KASA forms; student will place forms in their SFSU Faculty Supervisor's mailbox.
  - o Complete and sign final KASA forms; student will place forms in their SFSU Faculty Supervisor's mailbox.
  - o Sign student clinician's ASHA clinic clock hours form; student will place forms in clinic director's mailbox

Supervision Requirements and Process

Once you decide to take an intern, you will probably start thinking about how you will structure the intern's experience over the course of the semester. While the KASA is a research-based tool that you can use to determine expected competencies for the intern, it is helpful to have a sequence of milestones for your intern to move through as they work towards their final skill set. This will make the intern feel more comfortable, as they will have a better sense of what is expected of them week to week. Included in the Appendix is an *Intern Learning Sequence Worksheet* that you are free to use or to modify to suit the requirements of your site.

Ways to structure the interns' experiences vary quite a bit. Much will depend on the way your site is organized, your school community, your workload, and the student. Below is a visual of what the experience might look like when it is conceptualized in terms of a transition from dependence to independence or self-supervision.

Continuum of supervision. From *The Supervisory Process in Speech-Language Pathology and Audiology* (p. 25), by E. S. McCrea and J. A. Brasseur, 2003, Boston: Allyn and Bacon. Copyright © 2003 by Pearson Education. Reprinted by permission of the publisher.

Stages	Evaluation-Feedback	Transitional	Self-Supervision
Styles	Direct/Active	Collaborative	Consultative

Supervisee
Supervisor
Peer

10

As Anderson (1988) stated:

> The continuum mandates a change over time in the amount and type of involvement of both the supervisor and the supervisee in the supervisory process. As the amount of direction by the supervisor decreases, the amount of participation by the supervisee increases across the continuum. The stages (evaluation-feedback, transitional, self-supervision) should not be viewed as time-bound, as any individual supervisee may be found at any point on the continuum depending on situational variables as well as the knowledge and skill of the supervisee. The model stresses the importance of modifying the supervisor's style in response to the needs, knowledge, and skills of the supervisee at each stage of clinical development. This model also fosters professional growth on the part of both the supervisor and the supervisee.

Immediately below are descriptions from three highly experienced mentors as they describe how they structure their intern's experience. As you will see, ways to structure the interns' experiences vary quite a bit. Much will depend on the way your site is organized, your school community, your workload, and the student.

****

SLP 1:

In fall I do: one week setting up new caseload/and SEIS training, one week intern observes, two weeks sitting together doing therapy, two weeks I am in room but not sitting with the group but observing and will roll over to the group if things aren't going well and I will intervene; rest of the time they have a full two day or two and half day per week caseload and one half day or one full day per week they write reports/do assessments depending on how many assessments are due.

In spring, they start with the one-week observation since we are up and running.

I am mostly always in the room working so I am aware of what is going on but I am not formally observing - will intervene if things are really falling apart but usually give feedback after the session is over.

****

SLP 2:

It depends on the skill/ability/confidence of the intern but this is my general guideline:

Observe for a week or two.

Start working with me in the groups for a week or two.

Take on the kids/groups they think they can work with while continuing to work with me in other groups.

They do an evaluation as soon as it needs to be done, no matter when they start the internship. If they are not confident at the time the evaluation needs to be done then they do the next one, but usually that is something they feel more comfortable with over therapy, especially in middle school. I have them write 3-4 reports, on average. Some need much more support with writing, others are solid.

The caseload trickles in over time and they have the full caseload a couple weeks before or at the midterm, at the latest (for most interns). I am always available to pop in to support whenever they need it, unless I am out for a meeting :-)

They reach out to teachers to collaborate for the sessions of the day as they take on more kids.

I work with the intern on grasping the system, reviewing files, etc. throughout the entire experience but of course heavier at the beginning.

****

SLP 3:

That is roughly how the internships are organized at my site. That being said, assessments and IEP schedules take the precedence in determining how the internships run their course. Also, I increase the caseloads for interns as I see evidence of growth, AND I'm getting positive feedback from the high school students receiving service (e.g., having a good social emotional match). I have frequently not given over the full caseload due to a high volume of assessments.

Role of the SFSU Faculty Supervisor

A site visitor from SFSU has been assigned to you and your intern for the semester as your SFSU liaison. This person is the SFSU faculty with whom your intern is registered at SFSU, and is responsible for recording the grade that you give your intern for the school internship experience. Your SFSU faculty supervisor is the person to contact should any difficulties arise during the semester in which you are working with your intern, or if you have any questions at all. They will contact you, either by phone email, videoconference, or in person at your site at least four times per semester. *The Intern Data Sheet*, included in the Appendix provides contact information, the schedule that you have established with your intern, and your location to the SFSU site visitor who is assigned to be your SFSU Faculty Supervisor. The Intern Data Sheet is to be filled out and faxed to the SLHS Clinic Office at 415.338.0916. The SFSU Faculty Supervisor will then contact you to set up an appointment to visit.

What to expect during your SFSU Site Visit. Using the information from the internship site visit list, your SFSU site visitor will email you and your intern to set up an appointment to visit your site, either in person or virtually. SFSU site visitors may request a variety of observations and interviews during their visit, depending on what is convenient to you and your site, as well as their personal style. They typically observe the intern doing assessment or therapy or both. They also may interview you and the student. Some may prefer to interview you and your student separately if possible, while others may not. They may also request to meet with you and your intern together. During the meetings, topics of discussion may include the variety of experiences the intern is receiving, how independent is the intern, how well the intern is upholding professional and clinical standards, and what are goals for the internship for the remainder of the semester. Either during the site visit, or once the SFSU site visit has been completed, the site visitor will fill out the *SFSU Site Visit Report*, on which the details of the visit have been recorded. You will receive this document via email, with your intern and the school internship coordinator copied, so that everyone is kept in the loop.

Formative and Summative Evaluation

Evaluation of the intern's progress in your site is an ongoing process. Each time you observe the intern and provide feedback is an opportunity to assess how the intern is performing, both in clinical interaction skills and collaboration with colleagues and families. The KASA tool provides an objective measure that can be both a formative and summative evaluation measure. Initially, it is helpful to review the KASA to define clinical competency and professional expectations for the intern. The KASA was developed as a means to gauge the increasing independence and self-evaluation skills of the intern through beginning, intermediate and advanced clinical experiences. The internship is considered to be at an advanced level. The intern is expected to demonstrate proficiency in all of the skills identified on the KASA at the end of the semester. However, this is a gradual process and requires reference to the KASA throughout the experience, in order to gauge the intern's performance and ability to identify areas of further professional development. The Mentor is encouraged to periodically ask the intern to review the KASA and to self-assess regarding individual progress and development of goals for improvement. Regular, ongoing assessment can also be supported by reference to other tools included in this handbook, Professionalism and the Essential Functions. Conferencing with the intern weekly is an effective means to identify strengths and areas needing improvement in an ongoing manner, rather than only conducting midterm and final evaluations.

Responsibilities of the Intern

The internship is an important professional commitment, both to a student's clinical training, and to the mentor who decides to devote time and attention to working closely with a student intern. The student's professional role extends far beyond just showing up and earning clinical clock hours, to the full range of professional roles expected of the student intern at the site. Clinical competency and professional conduct include a range of skills that are identified in tools included in this handbook and described above. In addition, the site Mentor may define additional responsibilities that are expected of professional SLPs in the site. These responsibilities may include participation at team meetings, case conferences, family counseling, presentation of in-service training, etc. As an intern, the student is expected to participate fully in all aspects of the professional SLP role at the site, contributing positively to the effectiveness of service delivery for patients/clients and families.

Beyond the requirement of direct patient/client contact hours, interns are responsible for completing a residency hours requirement at their internship of between 50-75 hours. The residency requirement is intended to assure that the intern participates fully in all aspects of the professional role expected at the site. Residency hours are not counted toward the total 400 clock hours required by ASHA, yet this requirement is meant to assist the intern become a full participant in activities listed earlier. These are important times in an internship, because it is during these times that professionalism and a deep sense of the role of the speech-language pathologist is imparted. These learning moments take time, and the residency hours capture this key time commitment required by the intern.

Objective measures of professional behaviors and responsibilities are captured in the KASA sections on Professional and Personal Qualities, and Response to Supervision and documents on *Essential Functions* and *Professionalism*. Professional requirements such as reliability, punctuality, respect, ethical conduct, and organization are described in the section on Professional and Personal Qualities. In the section on Response to Supervision, qualities such as being reflective, openly discussing differences, confidence, and dealing with frustration are addressed. The Response to Supervision section is a good place to look for qualities about the relationship between mentor and intern.

Interns must fill out their clinical clock hours log every day they are at your internship site. When their internship is finished, you must sign the log at the bottom. The intern also complete one of the *Clinical Clock Hours* (SC10) form for each category of articulation, language, voice, fluency, related disorders, dysphagia, and audiology, with the total number of clinical clock hours earned for each category, and provide these for you to sign. The student has access to a SLHS Department Clock Hours Tracking Spreadsheet that calculates totals required for CCC and licensure.
All clinical contact forms must be brought to campus for the Clinic Director to sign and file.

Guideline for Internship Hours

ASHA requires that students need to earn a total of at least 400 hours of clinical contact over the course of their clinical training. In our Department, we target a total of **160 clinical contact hours for each internship**.

As a general guide, students should obtain about 150 clinical clock hours in each of their internship experiences, in order to make a total of 400 clinical clock hours over the course of their clinical training. A breakdown of all clinical clock hours obtained during training at SFSU follows:

- 25 Observation Hours
- 75 On-Campus Clinic Hours (2 880's and 10 audiology hours – students may earn more than 50 hours in this phase of their training)
- 160 School Internship Hours
- 160 Nonschool Internship Hours

Addressing Concerns

Even when all expectations, goals, supervision, and assessment process are clear, there are times when concerns arise with individual interns. In cases where Mentors have concerns about individual intern performance at the site, communication with the SFSU Faculty Supervisor is key. It is a good practice to cc the SFSU Faculty Supervisor on all email communication between the Mentor and Intern, in order to address any questions or concerns that arise through a team approach. It is important for the Intern to know that the Mentor is connected to SFSU and that communication is open and transparent regarding the internship expectations, goals and performance. The SFSU Faculty Supervisor is available throughout the semester to consult with the Mentor and the Intern together or individually regarding potential misunderstandings, questions and concerns that may arise. In addition, a member of the Internship Coordination Team is always available to support the team by contacting:

Laura Epstein at lepstein@sfsu.edu.
Betty Yu at bettyyu@sfsu.edu
Teresa Gray at teresag@sfsu.edu
Anusha Sundarrajan at anusha@sfsu.edu
Michael Clarke at michaelclarke@sfus.edu

Documentation of concerns is also crucial and email can be an effective means to identify and log the sequence of communication regarding a particular issue. For example, when the intern may not always be on time, the Mentor can document these occasions and provide objective information rather for both the SFSU Faculty Supervisor and intern to address. When the concern centers on the intern's clinical performance or professional conduct, notes and dates to document particular observations can be helpful to identify the basis of the concern and to develop a remediation plan. The earlier a concern is identified and brought to the attention of all involved: the intern, the Mentor and the SFSU Faculty Supervisor, the sooner a plan can be developed for a positive outcome.

Department of Speech, Language and Hearing Sciences Contact Information

Laura Epstein, Ph.D. CCC-SLP
Professor
Department Chair
Internship Coordination Team member
Burk Hall 115
(415) 405-2170
lepstein@sfsu.edu

Nancy Robinson, Ph.D., CCC-SLP
Professor Emerita
AAC Specialization Coordinator
nancyr@sfsu.edu

Gloria Soto, Ph.D.
Professor
AAC Specialization Coordinator
Burk Hall 271
(415) 338-1757
gsoto@sfsu.edu

Marcia Raggio, Ph.D., CCC-A
Professor
Audiology Coordinator
Burk Hall 104
(415) 338-7653
mraggio@sfsu.edu

Michael Clarke, Ph.D.
Assistant Professor
Project Allies Co-Director
Burk Hall 103
(415) 338-7655
michaelclarke@sfsu.edu

Betty Yu, Ph.D. CCC-SLP
Professor
Project Allies Director
Clinic Director
Internship Coordination Team member
Burk Hall 105
(415) 338-3429

Teresa Gray, Ph.D., CCC-SLP
Associate Professor
Nonschool Internship Coordinator
Burk Hall 102
(415) 338-1058
teresag@sfsu.edu

Anusha Sundarrajan, Ph.D., CCC-SLP
Assistant Professor
Nonschool Internship Coordinator
Burk Hall 101
(415) 338-7652
anusha@sfsu.edu

Department of Speech, Language and Hearing Sciences
Academic Office Coordinator
Clinic Coordinator
Mallorie Desimone
Burk Hall 113
(415) 338-1001
mallorie@sfsu.edu

Department of Speech, Language and Hearing
Sciences & Clinic Office Phone: (415) 338-1001
Fax: (415) 338-0916
Email: SLHSinfo@sfsu.edu
Website: http://slhs.sfsu.edu/

Mailing Address:
Department of Speech, Language
and Hearing Sciences
San Francisco State University
1600 Holloway, Burk Hall 113
San Francisco, CA 94132

APPENDIX
Internship Procedures and Forms

- Knowledge and Skills Acquisition Certification in Speech-Language Pathology

- Intern Learning Sequence Worksheet

- SFSU Supervisor Site Visit Report

- Clinical Clock Hours Daily Log

- Clinical Clock Hours Summary (SC10)

- Professionalism Guidelines

Student Name_____ Semester/Year_____

Clinical Practicum Assignment (Circle one): SLHS 880   SLHS 881   SLHS 882   Other_____

Skill Level:

☐ (B) Beginning (1st client)

☐ (I) Intermediate (2nd/3rd/Additional client)

☐ (A) Advanced (school/adult internship)

Clinical Practicum Supervisor's Name_____

Name/Location of Clinical Practicum _____

Number of clients_____   Ages of clients_____

Types of problems. Circle all that apply:

A   Speech Sound Production

F   Fluency

VR   Voice and resonance, including respiration and phonation

    L   Receptive and expressive language (phonology, morphology, syntax, semantics, and pragmatics).

      Indicate modality: speaking, listening, reading, writing, manual

H   Hearing, including the impact on speech and language

SW   Swallowing/feeding (oral, pharyngeal, esophageal, and related functions)

COG   Cognitive aspects of communication (attention, memory, sequencing, problem solving, executive functioning)

SOC   Social aspects of communication (including challenging behavior, ineffective social skills, lack of communication
      opportunities)

AAC   Augmentative and alternative communication

Grade

Midterm: _____

Final: _____

A 4.0   A- 3.7   B+ 3.3   B 3.0   B- 2.7   C+ 2.3   C 2.0   C- 1.7D+ 1.3

D 1.0   D- 0.7   F 0.0

Course Evaluation Based on Skill Level (B- or better to pass)

Midterm:

☐ Pass   ☐ Repeat

Final:

☐ Pass   ☐ Repeat

Skill Level

Beginning student clinician (1st client)

- High degree of supervisory support
- Can recall some aspects of relevant theory
- Needs support to:
    - Draw conclusions about a client
    - Develop a plan for action
    - Understand the total clinical situation
    - Apply problem solving strategies, principles and theory
- Spends a high degree of time and effort in meeting clinical responsibilities
- Highly focused on own performance rather than the client

Intermediate student clinician (2nd/3rd/Additional client)

- The complexity of the client, the workplace environment and the student's previous experience determines:
    - Degree of supervision (moderate to low)
    - Ability to recognize the meaningful aspects of the situation
- Recognizes several aspects of a problem but not all, and related these to the client's needs and is able to:
    - Draw some accurate conclusions about a client
    - Develop some plans for action
    - Recognize some important aspects of the total clinical situation
- Requires support to:
    - Recognize and prioritize all aspects of a situation
    - Flexibly apply problem solving strategies, principles and theory
- Developing automaticity resulting in:
    - A moderate expenditure of time and effort
    - Greater ability to focus on the situation than on own performance
    - A developing ability to use observations to assist clinical reasoning

Advanced student clinician (school/adult internship)

- Performs the majority of his/her work independently and competently
- Seeks support if the situation is new or a number of features about the client or workplace setting combine to create complexity
- Identifies the meaningful aspects of problems and integrate these to generate a number of logically possible conclusions; conclusions/actions will be modified with new information
- Prioritizes appropriately
- Is sufficiently automatic and maintain a focus on the client or situation
- Carries out his/her work in an efficient and timely manner

Clinical Skills Evaluation

	Proficient/ Advanced 4.0	Basic 3.0	Below Basic 2.0	Far Below Basic 1.0	Comments
EVALUATION					
(B) (I) (A) Objectively and accurately observes client behavior.					
(B) (I) (A) Adapts evaluation procedures to meet client needs.					
(I)(A) *Selects appropriate, evidence-based evaluation procedures (behavioral observations, non-standardized/standardized tests/instrumental procedures).* **CTC: PD Standard 1: Program Design, Rationale and Coordination, P, A**					
(I) (A) Appropriately administers standardized/non-standardized tests, informal assessments, etc.					
(I)(A) *Demonstrates proficiency in the effective use of interpreters/translators in the assessment of English language learners.* **CTC: SLP Standard 4: Assessment of Speech and Language Disorders, P, A**					
(I)(A) Formulates appropriate recommendations based on assessments that *evaluate students' needs and strengths, development of academic language* making *accommodations, modifications, instructional decisions and ongoing program improvements.* **CTC: PD Standard 3: Educating Diverse Learners** **CTC: PD Standard 5: Assessment of Students, P, A**					
(I)(A) Collects and integrates case history information, *including required statewide assessments and local, state and federal accountability systems,* with information from clients, family, caregivers, teachers, relevant others, and other professionals. **CTC: PD Standard 5: Assessment of Students, P, A**					
(I)(A) *Consults and/or collaborates with teachers and other relevant personnel, during prevention, assessment and IEP process.* **CTC: SLP Standard 7: Consultation**					

and Collaboration, A					
(A) Applies clinical judgment during informal screening.					
(A) Interprets, integrates, and synthesizes all information to develop a diagnosis.					
(I)(A) *Demonstrates the ability to participate effectively as a team member and/or case manager for the IFSP/IEP/transition planning process, from pre-referral interventions and requisite assessment processes, through planning specially-designed instruction to support access to the core curriculum, developing appropriate IFSP/IEP/transition planning goals based on standards and following all legal requirements of the IFSP/IEP/transition planning process.* **CTC: PD Standard 8: Participating in IFSP/IEPs and Post-Secondary Transition Planning, A**					
(A) Conducts screening and prevention procedures.					
INTERVENTION					
(B) (I) (A) Develops appropriate TX plans with measurable and achievable goals that meet clients' needs.					
(B) (I) (A) Collaborates with clients and relevant others in planning TX, such as t*rans-disciplinary teams, including but not limited to multi-tiered intervention, Section 504, IEP/IFSP/ITP.* **CTC: PD Standard 4: Effective Communication and Collaborative Partnerships, A**					
(B) (I) (A) Implements TX plans and involves clients and relevant others in the TX process.					
(I)(A) *Provides full range of service delivery options, including general education.* **CTC: PD Standard 1: Program Design, Rationale and Coordination, A**					
(I)(A) *Collaborates with personnel from other educational and community agencies to plan, implement, and evaluate transitional life experiences for successful transitions by students.* **CTC: PD Standard 7: Transition and Transitional Planning, A**					
(B) (I) (A) Selects or develops and					

uses appropriate materials and reinforcers which are motivating and stimulating to the client.				
(B) (I) (A) Provides accurate and immediate feedback to client.				
(B) (I) (A) Uses appropriate cueing.				
(B)(I)(A) *Demonstrates effective behavioral intervention strategies and effectively monitor the progress of students.* **CTC: SLP Standard 5: Management of Speech and Language Disorders, A**				
(B) (I) (A) Measures and evaluates clients' performance and progress based on data collection and analysis.				
(B) (I) (A) Modifies TX plans, strategies, materials, or instrumentation as appropriate to meet the needs of clients.				
(B) (I) (A) Objectively evaluates each session.				
(B) (I) (A) Completes administrative and reporting functions necessary to support intervention.				
(B)(I)(A) *Communicates effectively with the business community, public and non-public agencies, to provide the cohesive delivery of services, and bridge transitional stages across the life span for all learners.* **CTC: PD Standard 4: Effective Communication and Collaborative Partnerships, A**				
(I) (A) Utilizes session data for future therapy sessions.				
(I) (A) Conducts parent and staff conferences.				
(A)Conducts p*rogress monitoring and in decision making regarding eligibility and services.* **CTC: PD Standard 5: Assessment of Students, A**				
PROFESSIONAL, LEGAL AND ETHICAL PRACTICES				
Observes *legal requirements for assessment, Individualized Family Service Program, Individualized Education Program (IEP) development and monitoring, services, and instruction of students with disabilities* **CTC: PD Standard 2: Professional, Legal and Ethical Practices, A**				
(B) (I) (A) Observes timelines to submit drafts, revisions.				
(B) (I) (A) Reports information				

accurately.					
(B) (I) (A) Discussion of procedures and progress written accurately.					
(B) (I) (A) Report summary written comprehensively with synthesis and integration of information.					
(B) (I) (A) Makes appropriate recommendations.					
(B) (I) (A) Demonstrates appropriate writing skills for speech, grammar, and sentence construction.					
(B) (I) (A) Uses professional writing style.					
(I) (A) Test/s, results, and interpretation written accurately and appropriately.					
(I) (A) Includes all pertinent information in client report.					
(I) (A) Report is well organized.					
(I) (A) Report is understandable for client or parent/caregiver.					
PROFESSIONAL AND ETHICAL QUALITIES					
(B) (I) (A) Demonstrates cooperation and teamwork.					
(B) (I) (A) Keeps verbal commitments.					
(B) (I) (A) Never has an unexcused clinical absence.					
(B) (I) (A) Observes legal mandates, most especially client privacy and confidentiality policies.					
(B) (I) (A) Dresses for activities with respect for observers, clients, and the professional setting.					
(B) (I) (A) Is punctual in beginning and ending clinical sessions.					
(B) (I) (A) Demonstrates interest and positive attitude with client.					
(B) (I) (A) Written and/or verbal communication is free from judgmental statements.					
(B) (I) (A) Communicates effectively, recognizing needs, values, preferred mode of communication, cultural/linguistic background of client, family, caregivers.					
(B) (I) (A) Adheres to ASHA Code of Ethics and behaves professionally, *given opportunities for demonstration of ethical standards, of teaching, of evidence based educational practices in relation to theories, research and regulations necessary to the*					

provision of services to individuals with disabilities and their families. **CTC: PD Standard 2: Professional, Legal and Ethical Practices, A**					
(I) (A) Provides counseling regarding communication and swallowing disorders to clients, family, caregivers, and relevant others.					
(I) (A) Encourages client and/or family responsibility in management.					
RESPONSE TO SUPERVISION					
(B) (I) (A) Considers supervisory suggestions and openly discusses differences in ideas.					
(B) (I) (A) Discusses supervisory analysis and evaluation in a positive manner.					
(B) (I) (A) Demonstrates reflective practice and engages in self-supervision to discover areas of strength and those that need improvement.					
(B) (I) (A) Suggests ways to enhance clinical performance.					
(B) (I) (A) Develops increasing confidence about own performance and professional growth.					
(B) (I) (A) Positively deals with own frustrations in treatment and/or supervision.					

Supervisor's Signature_____   Date_____

Clinician's Signature_____   Date_____

Please return this form to the CD Clinic Director.

Suggested Intern Learning Sequence Worksheet (Adapt as needed for each Site)

Student:_____
Mentor:_____
Site:_____ Semester/Year:_____

Week	Milestone	Achieved: Yes/No	Actions taken to provide additional learning support (only if needed)
Week 1	Student participates in the set-up of caseload/familiarizes with caseload; SEIS training		
Week 2	Observation		
Week 3-4	Co-therapy		
Week 5-6	Intern begins to do therapy independently; mentor observes and steps in whenever necessary		
Week 6-8	Student begins to conduct assessments, writes up one report; Student is working with full case load; Student decreases need for mentor to step in		
Week 8-12	Student increases assessment, writes up 3 reports		
Week 12-14	Student participates in one IEP		
Week 14-16	Student conducts one IEP		

(SC-08) INTERNSHIP DATA SHEET

SAN FRANCISCO STATE UNIVERSITY
DEPARTMENT OF SPEECH, LANGUAGE   Term_____
AND HEARING SCIENCES (415) 338-0916   **SFSU Faculty Supervisor**_____

STUDENT NAME_____

Phone_____E-mail address_____

SITE SUPERVISOR_____

Current ASHA #_____Current CA State Licensure#_____

Phone_____Pager_____

Fax_____Email_____

INTERN SITE_____

Address_____

City_____Zipcode_____

Location of service on site_____

DIRECTIONS TO SITE   _____

_____

_____

_____

_____

SCHEDULE: Please include scheduled classes and/or on-campus clinics.

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
8:00AM					
9:00AM					
10:00AM					
11:00AM					
12:00PM					
1:00PM					
2:00PM					
3:00PM					
4:00PM					
5:00PM					

SFSU Department of Speech, Language and Hearing Sciences

SFSU Faculty Supervisor's Report of Site Visit

Student Teacher/Intern_____
Site_____
Site Master Clinician/Supervisor_____
Date of Site Visit_____

[Report should include summary of (a) intern's observed clinical strengths and areas for further development (observed by the SFSU Supervisor); (b) intern's proposed goals for the remainder of the semester (based on observation and discussion with the student, site mentor and SFSU supervisor); (c) meeting with site mentor; (d) meeting with intern; and (e) status of internship, i.e., mid-term or final grade, continue, continue with concerns being addressed; intervention requested. *A copy of this completed form will be send to the site mentor, student intern, and SLHS medical internship coordinator.]

Student Teacher/Intern's Observed Clinical Strengths and Weaknesses_____
_____
_____
_____
_____

Intern's Proposed Goals for the Remainder of the Semester _____
_____
_____
_____
_____

Meeting with Site Mentor_____
_____   _____
_____
_____

Meeting with Intern_____
_____
_____
_____

Status of Internship_____
_____
_____
_____

_____   _____
SFSU Faculty Supervisor   Date

INTERNSHIP CLINICAL CONTACT / RESIDENCY HOURS FORM

Student Intern's Name _____ Semester _____ 20 _____

Site _____ Internship Mentor _____

Instructions: The Intern fills out this form **every day at the internship site**. When the internship is finished, the internship mentor signs the log at the bottom. Hours are then transferred to the Clinical Clock Hours form (SC10). The intern fills out a Clinical Clock Hours form (SC10) form for each category (articulation, language, voice, fluency, related disorders, dysphagia, and audiology). After the mentor signs these, these are delivered to the SLHS Clinic for signature by the SLHS Clinic Director. Interns should also enter total clock hours into the SLHS Department Clock Hours Tracking Spreadsheet, along with other clinical training experiences.

Definition of Clinical Clock Hours: Clinical clock hours are completed while directly involved with assessment, treatment, or counseling with patients' or family members.

Definition of Residency Hours: The time the intern spends on site outside of direct clinical contact. A guideline for residency hours is approximately 50-75 over the semester, but this will vary by site. Residency time contributes significantly to an intern's integration into the culture and community of the site. Over the semester, it is expected the weekly time spent in residency will decrease as the time spent in providing direct clinical services increases.

Today's Date	Articulation	Language	Voice	Fluency	Related Disorders	Dysphagia	Audiology	Total Contact Hours	Total Residency Hours
Totals									

_____ _____
Mentor's Signature   Date
(Print Mentor's Name _____

_____ _____
Mentor's ASHA CCC #   Mentor's CA State License #

Site / Agency Name _____

Type of Clinical Setting _____

SAN FRANCISCO STATE UNIVERSITY
CLINICAL PRACTICUM IN COMMUNICATIVE DISORDERS
(SC-10) CLINICAL CLOCK HOURS

This is to certify that_____completed

_____ hours of clinical practicum, for which_____units of academic credit were earned. This practicum

was completed during_____Semester, 20_____.

Please fill out a separate form for each category:

☐☐   Audiology (includes speech and language services for those with hearing   impairment)

☐☐ Speech (check one): ☐☐ articulation, ☐☐ fluency, ☐☐ voice, ☐☐ dysphagia

☐☐ Language

DIAGNOSTIC   THERAPY

_____   hours w/preschool   _____   hours w/preschool

_____   hours w/school age   _____   hours w/school age

_____   hours w/adult   _____   hours w/adult

_____   _____
Supervisor/Clinical Educator's Signature   Date

(Print Instructor's Name)_____

_____   _____
Instructor's ASHA CCC #   *Instructor's CA State License #*

Site / Agency Name _____

Type of Clinical Setting* ————————————————————————

_____   _____
Academic Advisor   Date

By signing this form, the supervisor/clinical instructor affirms that "*At least 50% of each diagnostic evaluation, including screening and identification, was observed directly*," and/or "*At least 25% of the student's total contact time in clinical treatment was observed directly.*"

*Types of clinical settings include separate units/settings within an institution or its affiliates (brain injury units/stroke units/nursing homes/classrooms for severely language-impaired children), community clinics, public schools, rehabilitation centers, hospitals, and private practice settings. For the 3 clinical settings to be classified as different settings, it must be determined that the student has gained unique experiences in each one (i.e., public schools: pull-out services versus a classroom for children who present communication disorders; or hospital: acute-care versus long-term care).

PROFESSIONALISM
Chial, M. (1998). Conveying expectations about professional behavior. *Audiology Today, 10* (4), p. 25.

Speech-language pathology is a professional discipline. Professions require certain behaviors of their practitioners. Professional behaviors (which may or may not directly involve other people) have to do with professional tasks and responsibilities, with the individuals served by the profession and with relations with other professionals. Included among professional tasks are education and training. The following conveys expectations about the behaviors of those who seek to join this profession.

1. You show up.
2. You show up on time.
3. You show up prepared.
4. You show up in a frame of mind appropriate to the professional task.
5. You show up properly attired.
6. You accept the idea that "on time," "prepared," "appropriate," and "properly" are defined by the situations, by the nature of the task, or by another person.
7. You accept that your first duty is to the ultimate welfare of the persons served by your profession, and that "ultimate welfare" is a complex mix of desires, wants, needs, abilities and capacities.
8. You recognize that professional duties and situations are about completing tasks and about solving problems in ways that benefit others, either immediately or in the long term. They are not about you. When you are called upon to behave as a professional, you are not the patient, the customer, the star, or the victim.
9. You place the importance of professional duties, tasks and problem solving above your own convenience.
10. You strive to work effectively with others for the benefit of the person served. This means you pursue professional duties, tasks and problem solving in ways that make it easier (not harder) for others to accomplish their work.
11. You properly credit others for their work.
12. You sign your work.
13. You take responsibility for your actions, your reactions, and your inaction. This means you do not avoid responsibility by offering excuses, by blaming others, by emotional displays, or by helplessness.
14. You do not accept professional duties or tasks for which you are personally or professionally unprepared.
15. You do what you say you will do. By the time you said you would do it. To the extent you said you would do it. And to the degree of quality you said you would do it.
16. You take active responsibility for expanding the limits of your knowledge, understanding, and skill.
17. You vigorously seek and tell the truth, including those truths that may be less than flattering to you.
18. You accept direction (including correction) from those who are more knowledgeable or more experienced. You provide direction (including correction) to those who are less knowledgeable or less experienced.
19. You value the resources required to perform professional duties, tasks, and problem solving, including your time and that of others.
20. You accord respect to the values, interests, and opinions of others that may differ from your own, as long as they are not objectively harmful to the persons served.
21. You accept the fact that others may establish objectives for you. While you may not always agree with those goals, or may not fully understand them, you will pursue them as long as they are not objectively harmful to the persons served.
22. When you attempt a task for the second time, you seek to do it better than you did it the first time. You revise the ways you approach professional duties, tasks, and problem solving in consideration of peer judgments of best practices.
23. You accept the imperfections of the world in ways that do not compromise the interests of those you serve, or your own pursuit of excellence.
24. You base your opinions, actions, and relations with others upon sound empirical evidence, and upon examined personal values consistent with the above.
25. You expect all of the above from other professionals.