

CLINICAL EDUCATION CONTRACT¹¹
SPEECH-LANGUAGE PATHOLOGY

OBJECTIVES

Clinical educator's expectations (e.g., participation in treatment and assessment, minimal competencies required, treatment plans, report writing, type of patients, interprofessional education opportunities, etc.)

Student's professional objectives and expectations (e.g., "What are the most important things that I want to learn in this internship?"; "By the end of this internship I would like to be able to...")

ACTIVITIES

Compulsory (e.g., medical rounds, IPP or team meetings, etc.)

Optional (e.g., medical rounds, IPP or team meetings, staff meetings, etc.)

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Adapted from J.S. Fish, October 1980

METHODS

Time for supervisory meetings (e.g., after each session, at the end of the day, 1 hour per week, etc.)

Preparation required for supervisory meetings (e.g., written self-evaluation, lesson plans, etc.)

Clinical Educator's style of clinical supervision (e.g., modelling, scaffolding, immediate feedback within sessions, feedback at the end of the session, etc.)

FEEDBACK/EVALUATION

Type of feedback (e.g., formative, summative, etc.)

Criteria for evaluation (e.g., clinical competencies, etc.)

Mode of evaluation (e.g., self, peer, clinical educator(s), etc.)

Frequency of formal evaluation (i.e., midterm and/or final evaluation)

Student Accommodations (i.e., discuss the student's formal practicum accommodation plan and ways in which the student's confidentiality will be ensured during the placement) *Please note: this section should only be completed when the student has a formal practicum accommodation plan in place from the University that has been shared with the clinical educator.

Method of appeal if dissonant evaluation (e.g., placement site coordinator, Academic Coordinator of Clinical Education)

Student Emergency Contact Information – In case of an emergency situation during practicum

Name of Emergency Contact: _____

Phone Number: _____

We, _____, clinical educator, and _____, student, agree to the conditions of the above contract, with the option that it can be modified according to circumstance, as long as it is negotiated to our mutual satisfaction.

Signatures:

Clinical Educator

Speech-Language Pathology Student

Date: _____