

GUIDELINES FOR INTERNSHIP PLACEMENT – SPEECH-LANGUAGE PATHOLOGY

WEEK 1 (Orientation to the Setting/Placement & Direct Supervision)

- Discuss the supervision contract (including the student's goals for the placement)
- Discuss the caseload which the student will assume and the student's previous clinical experiences
- Describe administrative and organizational procedures (i.e., referral procedures, statistics and recordkeeping, charting and report writing)
- Review schedule and weekly appointments (i.e., rounds, departmental meetings)
- Familiarize student with assessment and treatment materials available
- Introduce student to colleagues and orient student to physical setting (if possible, provide a "work space" for the student)
- Student will observe clinical educator working with clients who are presently on the clinical educator's caseload
- Student may participate in and/or administer all or part of an assessment or treatment session with clients, depending on the student's familiarity with the client population
- Feedback will be provided by the clinical educator following all sessions, within schedule constraints

WEEK 2 (Direct Supervision)

- Student will take responsibility for approximately 2 hours/day of direct client contact (i.e., prepare plans, select materials, and implement assessment and/or treatment sessions)
- Student will observe the clinician for up to 2 hours per day
- Feedback will be provided by the clinical educator following all sessions

WEEKS 3 to 6 (Direct Supervision)

- Student will take responsibility for approximately 3 hours/day of direct client contact (i.e., prepare plans, select materials, and implement assessment and/or treatment sessions)
- Feedback will be provided by the clinician following all sessions

WEEK 6

- Midterm Evaluation

WEEKS 6 to 12 (Close Supervision)

- Student should be responsible for 3-4 hours of direct client contact per day (i.e., prepare plans, select materials, and implement assessment and/or treatment sessions)
- Student must be supervised for at least 25% of all treatment sessions, 50% of EACH assessment session, and 100% of interventions that carry risk of harm (such as dysphagia assessment, taking initial case history, communicating results and recommendations following initial assessment, etc.)
- Feedback will be provided by the clinician following all sessions, within schedule constraints

WEEK 12

- Final evaluation