

The whiteboard contains a large table with the following columns: Eyes, Ears, Taste, Touch, Smell, Tongue, CLP, Cognition, and Other. The rows are categorized by stimulus type, with handwritten notes in various colors (red, green, blue) and checkmarks. The categories include Physical Balance, Chemical, Mechanical, and others. The table is a complex matrix of data points related to sensory perception.



Speech-Language Pathology
UNIVERSITY OF TORONTO

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Appendices for this handbook can be found at <http://www.slp.utoronto.ca/clined/guide/>

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Welcome to Clinical Education in the Department of Speech-Language Pathology

WELCOME! This handbook is a comprehensive guide for students, site coordinators and clinical educators. In it, you will find essential information about the clinical education process at the University of Toronto, Department of Speech-Language Pathology (U of T SLP). We hope this guide will help make your experience as a student or an educator as smooth and rewarding as possible. If after reading this guide you do not find answers to your questions, we encourage you to reach out to the Coordinators of Clinical Education.

Here are a few of the many ways that clinical education at U of T SLP is unique;

1. **Clinical education is strongly linked to the academic portions of the curriculum:** Student competencies are systematically developed across the curriculum, with particular emphasis on research evidence as the foundation for professional practice. At U of T, clinical placements follow related academic work allowing students to immediately apply academic learning in the clinical practice setting and to develop the related clinical skills.
2. **Graduated clinical expectations across placement units:** Performance expectations build from one placement to the next, increasing the amount of clinical work expected and broadening the role the student clinician takes. A steady progression of internship expectations ensures consistent development of clinical and professional competencies for all students.
3. **During placements, students develop reflective practice skills through activities such as Learning Conferences and Teaching Clinics,** in which students evaluate and develop clinical and professional skills in a supportive learning environment.
4. **All placements occur in actual clinical settings, rather than in clinical laboratories or “in-house” clinics:** This prepares our graduates well to manage the many issues that impact professional life. Four separate placement units allow students to experience a range of clinical settings.

All clinical courses are designed to integrate the eight curriculum learning objectives of the M.H.Sc. program. These are:

1. Entry-level competence in the assessment, treatment, and management of individuals with a variety of communication and swallowing disorders as defined, for example, by the Speech Language and Audiology Canada Association of Speech-Language Pathologists and Audiologists; Assessing and Certifying Clinical Competency: Foundations of Practice for Audiologists and Speech-Language Pathologists
2. Ability to locate, evaluate, and use a variety of resources to solve problems encountered in the practice of speech-language pathology;
3. Ability to communicate effectively with clients, families, and colleagues in both oral and written modes;
4. Knowledge of and compliance with ethical and legal standards governing professional practice;
5. Attitudes of respect for and attention to the needs and abilities of all clients, families, and colleagues, including those from varied cultural and linguistic backgrounds;
6. Skill in the critical evaluation of research findings and their appropriate application to clinical practice;
7. Ability and motivation to pursue life-long learning within the profession; and
8. Skills and abilities needed to work effectively in inter-professional teams.

Introduction – Course Description

Practicum Objectives:

The general objectives of the practicum courses are to assist the student in development of:

- (a) humane, objective and supportive attitudes toward individuals with communication handicaps and their families;
- (b) assessment and interpretation skills;
- (c) rational and flexible treatment and management programs;
- (d) a sense of responsibility to society in making available professional expertise for the prevention, identification, and remediation of communication disorders;
- (e) critical and evaluative attitudes which will permit ongoing change and improvement of all aspects of clinical practice and research; and
- (f) clinical skills appropriate to entry-level professional practice in speech-language pathology, such as those outlined in the Speech Language and Audiology Canada Association of Speech-Language Pathologists and Audiologists; Assessing and Certifying Clinical Competency: Foundations of Practice for Audiologists and Speech-Language Pathologists

At the end of the degree program students will be prepared for eligibility to become members of SAC and CASLPO.

IMPORTANT: Students who are considering future work in other jurisdictions are responsible for advanced planning in order to prepare to practice in these regions, noting particular details regarding tracking of discrete clinical hours categories and academic content areas studied, as examples.

Placement Calendar

As part of the M.H.Sc. degree program in Speech-Language Pathology, across the four placement units, each student must successfully complete *five* clinical practicum courses:

UNIT NUMBER	DURATION	COURSE CODE and TITLE	DESCRIPTION	DATE	YEAR
UNIT 3	2 MONTHS	SLP 1500Y: Internship	Developmental Placement	March to April	YEAR I
UNIT 5	1 MONTH	SLP 1507H: Clinical Laboratory in Speech-Language Pathology	Placement in one or more clinical areas studied to date (Developmental Language, Articulation, AAC, Fluency, Voice, Aural Rehabilitation, Audiology)	July or August	YEAR I
UNIT 7	2 MONTHS	SLP 1508Y: Advanced Clinical Laboratory in Speech-Language Pathology	Neuro/Structurally Related Placement	January to February	YEAR II
UNIT 9	2 ½ MONTHS	SLP 2500Y: Advanced Internship	General Speech-Language Pathology	May to July	YEAR II
UNITS 1 - 9	Completed across all program units	SLP 1532H: Clinical Laboratory in Hearing Disorders	Hearing Disorders in SLP Practice	Throughout program	YEARS I & II

Coursework Preparation and Expectations

YEAR 1

Clinical Courses 1 & 2 Academic Preparation

Unit 1 (Year 1: September – December)

- SLP 1502Y – Anatomy
- SLP 1505Y – Child Language I
- SLP 1514Y – Applied Audiology
- SLP 1520H – Principles of Clinical Practice
- SLP 1522Y – Speech Physiology and Acoustics

Unit 2 (Year 1: January – February)

- SLP 1503Y – Articulation and Related Disorders
- SLP 1506H – Child Language II
- SLP 1529H – Fluency Disorders

Practicum Course 1

Unit 3 (Year 1: March - April)

- SLP1500Y – Internship

This is the first clinical placement, which occurs six months into the program. It can address disorders related to child language, articulation/phonology, fluency and hearing.

Course Objectives: The purpose of this course is to *introduce* a student to the clinical practice of speech-language pathology with children and their families. By the end of this practicum, a student must be able to:

- (a) demonstrate theoretical knowledge in relation to the understanding of normal, delayed and disordered communication processes and their management;
- (b) with on-going supervision, plan and implement assessment and treatment sessions;
- (c) display an understanding of objectives, outcomes, ethics and commitment in client care;
- (d) show attitudes of self-awareness, curiosity, innovation, sensitivity and respect for diversity necessary to the professional in this discipline;
- (e) evidence an understanding of the multiple roles of a speech-language pathologist in clinical practice, including working in teams;
- (f) develop ongoing effective communication with clinical educator(s); and
- (g) apply all of the above to one or more communication disorder areas.



TIPS: Please make note of the early stage of clinical learning connoted in these course objectives, and observe how these grow in breadth and expectation in each of the subsequent placements.

[Appendix 1.1 Full Course Outline](#)

[Appendix 2.1 Recommended Course Schedule](#)

Clinical Course 3 Academic Preparation

Unit 4 (Year 1: May – June)

- SLP 1516H – Aural Rehabilitation
- SLP 1521H – Augmentative Communication
- SLP 1530H – Voice Disorders

Practicum Course 2

Unit 5 (Year 1: July and/or August)

- SLP 1507H - Clinical Laboratory in Speech-Language Pathology

This placement may be comprised of 2 part-time placements (including a hearing disorders-related experience) or one full-time placement.

Course Objectives: The purpose of this course is to *expand* clinical experiences leading to the further development of clinical and professional skills in practice areas studied to date (developmental language disorders, articulation/phonological disorders, fluency disorders, voice disorders, augmentative and alternative communication (AAC) and hearing disorders). By the end of this course, a student must be able to do the following at the *supervised* clinical practice level:

- (a) demonstrate theoretical knowledge in relation to the understanding of normal, delayed and/or disordered communication processes and their management;
- (b) interpret assessment information and collaborate with clients/families in making appropriate management decisions;
- (c) plan long term and short term goals;
- (d) consider a discharge plan or options;
- (e) implement appropriate goal-directed assessment and intervention procedures;
- (f) report findings, objectives, and progress in written and oral formats to clients, family members, significant others, and/or other professionals;
- (g) demonstrate the development of self-assessment skills; and
- (h) demonstrate the development of clinical reasoning and problem-solving strategies.

[Full Course Outline Appendix A1.2](#)

[Recommended Course Schedule Appendix A2.2](#)

YEAR 2

Clinical Course 4 Academic Preparation

Unit 6 (Year 2: September –December)

- SLP 1525H – Structurally Related Disorders
- SLP 1533Y – Aphasia
- SLP 1534H – Motor Speech Disorders
- SLP 1536H – Swallowing Disorders
- SLP 1538H – Neurocognitive Communication

Practicum Course 3

Unit 7 (Year 2: January and February)

- SLP 1508Y – Advanced Clinical Laboratory in Speech-Language Pathology

This placement focuses on neurogenic and structurally related disorders, so hours will likely be accrued in acquired language, motor speech, swallowing, voice and/or articulation.

Course Objectives: The purpose of this course is to continue to expand clinical experiences leading to the further development of professional skills in speech-language pathology with individuals with neurogenic and/or structurally related disorders and their families. By the end of this course, a student must be able to do the following at the supervised clinical practice level in an efficient and effective manner:

- (a) demonstrate theoretical knowledge in relation to the understanding of normal, delayed and/or disordered communication processes and their management;
- (b) differentiate among a variety of communication and/or swallowing disorders;
- (c) interpret assessment information and collaborate with clients/families/other professionals in making appropriate management decisions;
- (d) design, implement and evaluate appropriate assessment and management;
- (e) report findings, objectives, and progress in written and oral formats to clients, family members, significant others and/or other professionals;
- (f) demonstrate the continued development of self-evaluation skills;
- (g) demonstrate the development of complex, ongoing clinical reasoning skills and problem-solving strategies;
- (h) demonstrate reflective practice in all areas of professional and clinical behaviour;
- (i) demonstrate understanding of the scope of practice of speech-language pathology in relation to other professions and participate as an effective member of the interprofessional team; and
- (j) gain exposure to the concepts of best practice, evidence-based practice and outcome evaluation using a variety of resources.

[Full Course Outline Appendix A1.3](#)

[Recommended Course Schedule Appendix A2.3](#)

Clinical Course 5 Academic Preparation

Unit 8 (Year 2: March - April)

- SLP 1527H – Clinical Analysis of Communication & Swallowing Disorders
- SLP 1528Y – Research in Speech-Language Pathology
- SLP 1535Y – Advanced Principles of Clinical Practice

Capstone Portfolio is due

Practicum Course 4

Unit 9 (Year 2: May – Mid-July)

SLP 2500Y – Advanced Internship

This is the final unit in the curriculum. Hours may be accrued in this placement in any area to ensure that CASLPO/SAC requirements are met. This is a ten-week full-time placement. Students have completed their academic preparation for entry to practice following successful completion of this placement.

Course Objectives: The purpose of this course is to develop a student's clinical competence to meet entry-level professional standards. By the end of the internship, a student must be able to do the following at the supervised clinical practice level in an efficient and effective manner:

- (a) organize a coherent, integrated approach to client management (e.g., assessment, intervention, counselling, reporting, discharge planning) utilizing best practice, evidence-based practice and outcome evaluation in collaboration with clients/families/other professionals;
- (b) counsel client and/or significant others appropriately and competently;
- (c) communicate complete, pertinent, and accurate information in both written and oral forms to clients, family members, significant others and/or other professionals;
- (d) prioritize responsibilities realistically and allocate time accordingly;
- (e) manage a 75% caseload for at least the final four weeks of the internship;
- (f) follow the administrative standards for the clinical facility independently (e.g., setting up files, closing files, workload measurement, quality assurance/improvement, knowledge of authority);
- (g) set realistic goals for self-improvement and recognize and develop personal strengths;
- (h) seek out, understand, and support the mandates and operation of the department/program/facility;
- (i) demonstrate the continued development of self-assessment skills;
- (j) demonstrate continued development of complex, ongoing clinical reasoning skills and problem-solving strategies;
- (k) demonstrate continued reflective practice in all areas of professional and clinical behaviour; and
- (l) continue to demonstrate understanding of the scope of practice of speech-language pathology in relation to other professions and participate as an effective member of the interprofessional team.

[Full Course Outline Appendix A1.4](#)

[Recommended Course Schedule Appendix A2.4](#)

Year 1 and Year 2

Clinical Courses 1 and 4 Academic Preparation:

Unit 1 (Year 1 Sept - Dec)

- SLP 1514Y – Applied Audiology

Unit 4 (Year 1 Jan - Feb)

- SLP 1516H – Aural Rehabilitation

Practicum Course

- SLP 1532H – Clinical Laboratory in Hearing Disorders

Practical experience will be acquired through hearing disorder related experience in Units 3, 5, 7 & 9.

Course Objectives: In this course, the student will apply knowledge regarding the ramifications of hearing loss (its nature, degree, age of onset, and progression), as related to a number of factors:

- its effect on the individual and significant others, personally, socially, educationally (where applicable), and vocationally (where applicable);
- other existing physical, psychological, and environmental conditions;
- comprehension, production and use of language in oral, signed and/or written modalities.

The student will demonstrate knowledge and skills in the following areas:

- (a) performance of valid puretone screening and/or audiograms and/or other methods of audiological assessment;
- (b) interpretation of audiologic results accurately;
- (c) consultation with audiologists, physicians, and related support services as appropriate;
- (d) application of hearing status information to speech-language pathology practice;
- (e) use of compensatory mechanisms or strategies to enhance communication in the presence of hearing disorders;
- (f) use, care and maintenance of assistive listening devices such as hearing aids, cochlear implant devices and amplification systems;
- (g) development of client self advocacy skills (supportive counselling).

[Full Course Outline Appendix A1.5](#)



TIPS: To see how it all fits together, see the [Curriculum Map Appendix A3.1](#)
For a reminder of when placement documentation is due, see the [Record Keeping Summary Table Appendix A4.1](#)

Supplemental Placements

What is a Supplemental Placement?

A Supplemental Placement (SP) is a placement of short duration, usually no more than the equivalent of 3 days. Generally speaking, SPs occur during placement units and very rarely in academic units. A SP may be required to assist a student to obtain clinical hours in a particular area such as hearing disorders or fluency. A student may be withdrawn from the assigned full time placement and attends an additional site for the SP. Every effort is made to assign SPs prior to the start of the full time placement.

How are SPs arranged?

SPs are arranged on a per student basis and are typically targeted and individually assigned by the Academic Coordinator of Clinical Education. Where there exists an opportunity for a preference-based lottery for a group of students, this approach will be used.

What are the SP requirements?

The learning expectations will be outlined in the confirmation email letter sent by the department. Usually, the focus is on learning activities required to meet clinical hour's needs (e.g., child assessment, fluency treatment with adults, minimum expectations for hearing disorders course, etc.).

How is the SP graded?

Due to the shortened length of the placement, a supplemental assessment form is used instead of the standard evaluation of performance. This evaluation will not be included in the overall mark for the placement course. It is intended to provide feedback to inform the university about student performance. If concerns arise from this evaluation the Academic Coordinator of Clinical Education (the instructor for the placement course) will be in contact with the CE and the student to review the evaluation.

[Supplemental Assessment Form Appendix D4.1](#)

What paperwork is submitted and When?

Students are required to track and submit clinical hours obtained with the CE's signature on the form just like in full time placements. The completed and signed Supplemental Placement Evaluation Form must be submitted in a sealed envelope with the CE's signature across the seal. These are due one week post end of placement. No further evidence is required. Evidence may be collected from the SP to be included in portfolios or to address Minimum Expectations for the SLP 1532H Clinical Laboratory in Hearing Disorders course, refer to course outline for this deadline).

Introduction – Roles and Responsibilities

There are many individuals with varying roles involved in the clinical education enterprise:

The Academic Coordinators of Clinical Education (ACCE)

The Coordinators of Clinical Education for the department serve as the primary channel of communication between clinical teaching sites affiliated with the University and the Department of Speech-Language Pathology, and act as a liaison between the course instructor, the clinical educator, and the student.

The ACCE undertakes the following activities and functions:

- (a) initiates or responds to contact with potential clinical teaching sites;
- (b) visits potential sites and clinical educators and provides information to the University on a site's potential as a teaching site;
- (c) makes arrangements with sites for student placements;
- (d) makes arrangements with students for clinical placements;
- (e) serves as primary liaison person for clinical educators wishing to discuss any aspect of students clinical placement with the University;
- (f) serves as primary liaison person for any student wishing to discuss matters concerning clinical placement with the University;
- (g) works with students and clinical educators to help to problem solve any concerns regarding a practicum experience and to facilitate discussion and resolution of such concerns;
- (h) plays a major role in ensuring that each student in the program receives wide ranging clinical experience in accordance with the student's ongoing professional development.

The Administrative Assistant to Clinical Education

The Administrative Assistant to Clinical Education for the department acts as the main communication contact for administrative aspects of the clinical education process and collects and disseminates placement related documentation.

Some of the activities and functions of the Administrative Assistant to Clinical Education are:

- (a) acts as the primary contact for students and clinical sites regarding administrative aspects of placement planning and implementation;
- (b) forwards communications on behalf of the coordinators to students;
- (c) forwards communications on behalf of the coordinators to clinical sites (SCs and CEs);
- (d) co-ordinates record of student clinical experiences;
- (e) maintains website resources for clinical education;
- (f) acts as the agency contact for police record check, vulnerable sector screen



Note: the collection and maintenance of records related to health and immunization are handled through the office of student affairs.

The Site Coordinator (SC)

The Site Coordinator is designated by a placement site and acts as the administrative liaison between the Department of Speech-Language Pathology and Clinical Educators.

The SC undertakes the following activities and functions:

- (a) disseminates information sent by the department to SLP colleagues relating to clinical education and professional education opportunities, etc.;
- (b) supports the process of clinical education by facilitating the development of related knowledge and skills among SLP colleagues;
- (c) ensures a placement agreement is signed and current;
- (d) arranges offers of student placements by liaising with colleagues and facilitating related decisions and administration;
- (e) gathers details of placement opportunities, such as date, location, disorder area's available, work setting, age of client population, and special learning opportunities;
- (f) submits placement offer description to the university using the online placement offer system;
- (g) facilitates exchange of information between the placement site and the university relating to the student placements, including pre-placement administrative requirements;
- (h) ensures students receive an orientation to the placement site and placement expectations.

Clinical Educators (CE)

The Clinical Educator (CE) is a certified speech-language pathologist, audiologist or other qualified professional, as deemed appropriate, who provides and oversees suitable learning experiences for a student during a clinical practicum course.

Potential CEs who intend to take a *primary* role in supervision must have worked in the field at least 2 years. Clinicians in their second year of practice who wish to participate as CE with the support and mentorship of a more experienced peer are encouraged to do so (with the knowledge of the Academic Coordinator of Clinical Education at the university). The potential CE should provide names of qualified speech-language pathologists who would be able to provide supervision in the event of illness or absence.

Potential CEs are strongly encouraged to be registered with their provincial or national professional association or certified with SAC. They must be registered with their professional regulatory college.

The department endorses the following practices for clinical teaching and learning:

- (a) Primary CEs have a minimum of 2 years (or equivalent) clinical experience;
- (b) CEs will explore each student's theoretical and experiential background for working with the clients allocated;
- (c) CEs will be familiar with and follow the Department of Speech-Language Pathology Clinical Education Guide;
- (d) CEs will be familiar with and follow expectations described in course outlines;
- (e) The CE will outline for each student the major philosophies and procedures current at the clinical site so that students will gain knowledge of a variety of approaches to clinical administration. Students should be aware of referral systems, reporting responsibilities and the place of the SLP service in the overall structure of the institution;
- (f) The CE will provide opportunities for student observation of SLP practice
- (g) The CE will provide access to templates or examples of clinical documentation commonly in use at the clinical site
- (h) The CE will require the student to adhere to the norms of professional interaction used in that particular treatment centre;
- (i) The CE will encourage students to evaluate critically both procedures and philosophy in treatment;
- (j) The clinical educator will outline, where appropriate, possibilities for applied research;
- (k) The CE may require the student to pursue specific background preparation when working with certain types of disorders through assignment of readings or advance preparation for test administration. In giving such assignments the educator should try to assign work which can be integrated realistically within the overall studies for which the student is responsible;
- (l) CEs are invited and urged to contact the ACCE concerning any aspect of student placement and experience which requires clarification or discussion.

Clinical educators are strongly encouraged to review the CASLPO position statement entitled Supervision of Students of Audiology and Speech-Language Pathology, which can be accessed at:

http://www.caslpo.com/sites/default/uploads/files/PS_EN_Supervision_of_Students_of_Audiology_and_Speech_Language_Pathology.pdf

Clinical Placement Sites

Clinical experiences must be completed at a clinical site that has been formally approved by the Department of Speech-Language Pathology.

Guidelines for Designation as a Clinical Placement Site:

- (a) Clinical sites will maintain an up to date signed agreement between the Governing Council of the University of Toronto and the Placement Site.
- (b) Clinical sites will identify facilities for student activities, including provisions for observation, work space, audio or visual equipment, etc.
- (c) Clinical sites will be asked to periodically document and update all professionals who would be involved in the clinical training, their qualifications, and years of experience.
- (d) Additionally, the potential site will identify any specialty areas served, the primary model of service delivery, and other specialized experiences available within the clinic.
- (e) Clinical sites must be able to document approval, in principle, by the administration of the clinic to have the site involved in clinical education and the implied time and other commitments required by clinical educators.
- (f) Clinical sites may be asked to document clinical tools, including those used for diagnostic purposes and for treatment, which are routinely used by the clinical site.
- (g) Because staff and resources of clinical sites change from time to time, where possible, clinical sites will be visited periodically by a Academic Coordinator of Clinical Education. The purpose of this visit is primarily to gain first-hand knowledge of the facilities and of the clinical education capacity, and also for promotion of professional development in the area of clinical education.
- (h) Any clinical sites that will offer a student a placement and where billing for service is used, it is expected that in fee service settings use of SLP student time must comply with college guidelines.

We couldn't do it without you, Thank you!

Our innovative curriculum was developed in close consultation with the clinical community. Implementation depends upon on-going close partnership with our clinical educator community. Thank you for providing these valuable learning experiences for our future colleagues. We couldn't do it without you!

Student Role

Students in clinical placements have multiple roles.

They are **learners**, benefitting from experience in actual clinical placements to translate academic learning into clinical practice skills. Learning may be accomplished through observing, modeling observed clinical skills, sharing clinical tasks with a student peer or clinical colleague, conducting simulated clinical activities, planning and implementing assessments or interventions with clients, writing reports, participating in clinical team meetings, preparing and presenting continuing education sessions, or (in the final placement) participating on committees or workgroups, to name just some examples. Through guided self-assessment, they learn and demonstrate self-assessment skills that will support continuous learning throughout their career. Formative and summative evaluations of clinical and professional performance also guide the learner.

They are **managers/administrators**. Students are responsible for knowing the learning expectations of a clinical course, and helping to ensure that the placement experience aligns with the expectations. They must track clinical hours obtained while on clinical placement, and manage related forms and signatures. They must ensure that the performance evaluation material reaches the intended university representative by the due date and according to instructions (e.g., in a signed sealed envelope). They must gather evidence to show to the university that the course Minimum Expectations have been met, and submit this evidence to the university according to instructions provided.

They are current and future **clinical colleagues**. They collaborate with clinical educators and share responsibility for developing a positive learning environment and supportive communication. Students promote best practice in clinical settings by sharing and applying current knowledge learned in the academic setting. Through research-to-practice assignments and reflective learning activities, they assess the clinical environment and address issues that face our profession.

They are prepared!

- ✓ All students have prepared health/immunization records that can be requested by clinical sites as required by site policy.
- ✓ All students have completed mask-fit testing. A record is kept in the student's possession.
- ✓ All students have been encouraged to complete a Police Record Check. These records are retained in the student's possession and can be viewed upon request as per clinical site policy.
- ✓ All students have U of T name tags which can be used at clinical sites.
- ✓ All students have done academic coursework related to their upcoming placements!

Placement Process

The process for developing the needed number of quality clinical placements and assigning these to students is complex, involving numerous stakeholders: students, clinical educators, clinical sites, university instructors, and university staff. Every effort is made to ensure that the process is respectful of the separate and varied needs of all parties.

A priority outcome of the placement process is to enable all students to meet SAC/CASLPO requirements upon graduation. The curriculum has been designed to ensure that students obtain a broad range of clinical experiences. It may not be possible to arrange the needed number of quality clinical placements within the Toronto area placement region (Burlington – Oshawa – Barrie, inclusive) for each placement unit. Although efforts are made to place students in their preferred facilities and geographical areas, it is not always possible to do this. As a result, each student should expect to receive at least one placement outside of this region.

The U of T Academic Coordinator of Clinical Education/Course Instructor is responsible for coordinating and liaising with all placement sites. As part of this process, clinical sites are evaluated to determine suitability for clinical placements.



TIP: No student may undertake to make her/his own arrangements for a clinical placement with a facility or an individual therapist. Any such arrangements will not be honoured. Students are encouraged to discuss potential new placement sites with a Academic Coordinator of Clinical Education.

Students are assigned their placement sites through a computer- assisted process, with consideration of student learning needs and preference. The process is reviewed and updated from time to time with stakeholder representatives. The Department of Speech-Language Pathology reserves the right to place students in specific facilities/areas of practice in order to meet their learning needs and provide students with a balanced clinical education program.

The students are responsible for planning and financing travel/accommodation or other costs related to assigned placements. Students may be able to apply for partial reimbursement of eligible expenses (see Clinical Placement Expense Fund).

Before Placement Begins - Student Responsibilities

1) Preparation for Placement

Students are required to closely read and frequently refer to the Clinical Education Guide and all appendices.

Prior to Unit 3 (and repeat prior to Unit 7 for some), students must complete the following e-learning modules. See “Quercus”

The on-line privacy e-learning module (see Unit 3 SLP 1500Y Internship course outline and page 44 of this guide for more information and instructions)

The e-learning module on Social Media (see Unit 3 SLP 1500Y Internship course outline and page 44 of this guide for more information and instructions)

- ✓ Basic Occupational Health & Safety Awareness Training (covered in Unit 1 SLP 1520 Principles of Clinical Practice)
- ✓ WHIMIS Training(covered in Unit 1 SLP 1520 Principles of Clinical Practice)
- ✓ Handwashing training (covered in Unit 1 SLP 1520 Principles of Clinical Practice)
- ✓ OHRC e-learning module Working Together: The Code and the AODA (covered in Unit 1 SLP 1520 Principles of Clinical Practice)

2) Contact with Clinical Site

Once students have received their placement assignments, they will review the description of the clinical placement provided by the site and follow any site-specific instructions. Students will contact the site coordinator (or CE if indicated in the placement description) to discuss any pre-placement preparation or administrative tasks, such as:

- ✓ Student’s personal contact information
- ✓ Police Record Check requirements
- ✓ Mask Fit Testing requirements
- ✓ Proof of Immunization requirements
- ✓ Travel requirements
- ✓ ID Badge requirements
- ✓ Password assignment
- ✓ Required Reading
- ✓ Dress Code / Footwear Requirements
- ✓ Orientation session or related material (pre-placement?)
- ✓ Where and when to be on the first day

In Addition Resume & Cover Letter

At least four weeks prior to the beginning of the placement, all students are expected to send a one-page resume and cover letter to the Clinical Educator(s) at the site to which they have been assigned a clinical placement. Students are required to carefully review the information and related instructions to students contained in the placement offer prior to writing the cover letter.

Resume

- One page
- Include relevant educational and volunteer experience

Cover Letter

- One page

Purpose of the cover letter is for the student to introduce him/herself to the Clinical Educator(s) and to provide the Clinical Educator(s) with information in order for them to plan more effectively for the student's placement

Summarize personal strengths, areas for development, learning style

Outline specific interests related to the placement

Address any unresolved or outstanding questions regarding dress code, health requirements, criminal record check, etc. prior to the commencement of the placement

Inquire as to how to best prepare for the placement (i.e., suggested readings, etc.)

It is the responsibility of the student to e-mail the resume and cover letter to the Clinical Educator(s). Contact names and e-mail addresses will be provided by the Administrative Assistant to Clinical Education on the document outlining assigned placements.



Note: Students are required to use their utoronto account for all placement - related correspondence with sites. Please note that emails to facilities from sources such as gmail and hotmail may be automatically filtered into junk mail folders.

Planning the Placement - Helpful Documents

These documents are provided to assist both clinical educators and students with pre-placement planning and preparation.

Internship Practicum Contract(s):

This form is used to develop the agreement between the student and the clinical educator about various aspects of the placement; it is returned to U of T by the end of the first week and reviewed by the course instructor. Experience has shown that including as much detail here as possible will help ensure that expectations are explicit and avoid confusion or misunderstanding. Consider incorporating goals arising from the student's prior placement, when applicable

One Site- If the student is attending a single site for a placement unit, use this form:

[One Site Contract Appendix B1.1](#)

Two Sites- If the student is attending two sites for a placement unit, use this form:

[Two Site Contract Appendix B1.2](#)



Note: Information on expectations will be shared across both sites.

Background Questionnaire (OPTIONAL)

This can be used as a "get to know you" when the student and the CE meet for the first time.

[Questionnaire Appendix B1.3](#)

Student Clinical and Professional Development Goals

This is used to guide a student to reflect on learning and future goals at the end of each placement. A CE reviews it with the student and signs it. It is to be taken to the next placement where it can be used to guide development of the Practicum Contract, and can be used for future professional development after Unit 9.

[Student Clinical and Professional Development Goals Appendix B1.4](#)

Assessment:

A primary responsibility for the CE is to provide opportunities for formative assessment, as well as to complete a formal summative assessment used for grading purposes by the university.

Formative Assessment

Formative assessment refers to ongoing feedback about performance, and should include a balance of areas of good performance and areas that would benefit from further attention. Some form of written feedback should be provided on a regular basis (more frequent for earlier placements than for later placements). It is best for the CE to retain a copy of written feedback provided to the students to refer to during mid-term and final assessment to support ratings and comments. Students may utilize this form to log and track verbal feedback as well.

Feedback Log (OPTIONAL)

This word document can be used to give daily written feedback (double click on the check boxes to select and print or print and fill in by hand). Both CEs and students retain a copy. Its use is optional.

[Feedback Log Appendix C1.1](#)

Learning Conference – (for Units 5, 7, 9)

This guided self-assessment supports a student to develop self-assessment skills important for life-long learning. A half-hour (max.) learning conference is arranged as per the course outlines. The student will prepare a self- assessment for discussion and record minutes of feedback received.

Summative Assessment:

The assessment process for both the midterm and final assessment is composed of two parts:

- (a) ratings
- (b) summary comments



***Note:** a formal mid-term assessment is NOT required in Unit 5 (Clinical Laboratory in SLP).*

Mid-term Formative Performance Assessment (Units 3, 7 and 9):

Mid-way through the placement, the student will be given a formative assessment by the Clinical Educator addressing Professional Behaviour and Clinical Skills (Please note that Summary comments must accompany each section) This assessment, though formalized, is not factored into the final grade. The clinical educator will review and discuss the results of these assessments with the student before it is submitted to the Academic Coordinator of Clinical Education.



***Note:** The clinical educator must inform the Academic Coordinator of Clinical Education in the event that the student is in jeopardy of failing at this point in the placement. Written notification of this will then be given to the student (See "If Problems Arise" below).*

Final Summative Performance Assessment (All placements: Units 3, 5, 7 and 9):

Each student will be given a summative assessment at the end of placement by the clinical educator including an assessment of *Professional Behaviour* and assessment of *Clinical Skills*, as well as summary comments. The clinical educator will review and discuss the results of these assessments with the student, then submit them to the Academic Coordinator of Clinical Education.

The Academic Coordinator of Clinical Education will determine a final grade for each student, based on the numerical ratings of each behaviour and the supporting Summary Comments forms.

Following the final placement assessment conference, the Student Clinical Goals Form will be completed by the student, with input from the clinical educator, and will be signed by the student and the clinical educator.

An inherent part of clinical skills is appropriate record-keeping. Accordingly, a student must complete all record-keeping tasks, as outlined on the form entitled Record-Keeping Summary Table, by the due date indicated on the course outline. One-third of a grade will be lost for each day late.

Student Performance Assessment Forms

The Assessment form and the U of T grading rubric for clinical placements can be found on the SLP website under Appendix C Assessment forms.

[Assessment of Student Performance and Grading Rubric – Unit 3/7/9 Appendix C.2.1](#)

[Assessment of Student Performance and Grading Rubric – Unit 5 Appendix C.2.2](#)



Note: The final assessment must be sealed in an envelope with the CE signature across the seal before it is returned to the University. Students are responsible for ensuring that the ORIGINAL copy of the final assessment together with the original signed comments for both midterm and final are to be handed in along with evidence for completion of Minimum Expectations by the due date as assigned by the Academic Coordinator of Clinical Education. The CE signature must appear on the comments in order for the student to submit for grading to the University for grading purposes.

Process for Supporting Students and Clinical Educators in Clinical Placements:

The Department of Speech-Language Pathology, University of Toronto, is committed to supporting students and Clinical Educators (CEs) in clinical placements. It is our hope that the placement experience is positive and rewarding to all involved.

We recognize the fundamental role that CEs play in ensuring the success of clinical placements, as does CASLPO, whose position statement on supervision of student's states:

"The member shall:

1. be familiar with students' learning objectives and with their curriculum; including course content, program philosophy and expectations;
2. orient the student to the facility, department, and/or program (including equipment, protocols and documentation requirements) and to the specific condition, needs and/or goals of individual patient/clients;
3. ensure that duties assigned are commensurate with the student's level of education, ability, experience, comfort level and learning style, as well as the complexity of the environment/practice setting;
4. provide feedback to the student regarding performance on a consistent, timely basis, based on the criteria established by the respective university program;
5. ensure that informed consent is obtained from the patient/client or substitute decision maker, prior to the student initiating direct care with the patient/client;
6. discontinue a student placement when the member, in the best interests of the public, deems such action to be appropriate."

The Department also has an essential role to play in promoting student success and has developed many steps

and procedures to minimize the challenges that students and clinical educators may experience in clinical placements. Academic Coordinators of Clinical Education (ACCEs) work with both students and Clinical Educators (CEs) to support positive learning and teaching experiences.



Note: Please note that it is not possible for university representatives to provide information to clinical sites about students' past academic, clinical or professional performance without the student's consent. A student's performance record is confidential. It is important for us to avoid any action that may unintentionally or inappropriately bias or prejudice the clinical educator, who will evaluate the student's performance.

However, we are able to share information related to learning skills that may be relevant to the clinical educator as an instructor to ensure the learning environment is maximized for the student. In some circumstances, a student may give us permission to share relevant confidential information, and in these cases, the ACCE will be in communication with the CE. In order to minimize challenges that students and clinical educators may experience in clinical placements, the following steps and procedures are in place:

Pre-placement

- Clinical sites provide a description of placement opportunities, detailing typical learning experiences, the required knowledge base, and other requirements or characteristics of the placement;
- Students identify their preferred placement sites based on these written descriptions. This is an opportunity for students and sites to influence the placement match in a way that aligns interests and perceived personal aptitudes with characteristics of placements;
- Once the placement match is completed, a meeting with the student and the ACCE can be held, and any perceived challenges addressed. A support plan is developed with the student as needed;
- Students and clinical educators begin email correspondence 4-6 weeks prior to the placement start date to make arrangements for the start of placement;
- Clinical educators can review online Clinical Educator Orientation materials several weeks before the start of placement;
- Many clinical sites provide orientation information/packages/workshops to students;
- All students are expected to complete full-time clinical placements as per the curriculum expectations. Some students experience personal circumstances (e.g., parenting, ailing family member, illness, mental health) either temporary or continuing, which require accommodation in clinical placements. In such cases, the ACCE will meet with the student and prepare a support plan to reduce the impact on the clinical placement; this will be negotiated with the clinical site as needed;
- When appropriate, a student will be encouraged by the ACCE to share with a clinical site any specific strategies that may be beneficial due to learning needs. Also, referrals to other supports (such as student counselling and learning services) are made as appropriate. A student may elect not to share confidential information with a clinical site related to learning abilities. That student would typically receive support from the ACCE.

During Placement

Practicum Contract:

In preparation for completing the Practicum Contract, CEs and students are directed to discuss the student's background preparation, learning style, personal factors, etc. The "Background Questionnaire" form may be used for this purpose (optional). An open discussion about these topics facilitates smooth placement planning and understanding of individual student issues.

In preparation for completing the Practicum Contract, CEs and students are directed to discuss the "Placement Goals" form that the student completed at the end of the previous placement. At the end of each placement, this form is completed together with the CE, and is intended to support future learning goal planning.

Teaching Clinics:

During placements that are 8-10 weeks in duration, students attend the university for 3 full days of learning (3 days, typically Fridays, in weeks 3, 5 & 7 of the placement). As part of the day, students complete a guided self-assessment to determine if they are progressing towards completing the minimum expectations of the course. These reports are submitted to and reviewed by the ACCE, who follows up with individual students as needed. Students can also meet individually with the ACCE as needed. All year 1 students in their first placement (Unit 3) must meet with the ACCE on or about the first Teaching Clinic day.

Learning Conferences:

For Year 2 placements, 2 weeks prior to mid-term and 2 weeks prior to final assessment, the student completes a self-assessment and meets with the CE to review and devise an action plan for the remaining weeks of placement.

Assessment of Clinical Skills/ Assessment of Professional Skills:

This formal assessment is completed at mid-term as formative feedback to guide learning in the final weeks of placement. Students submit these to the Department and these are reviewed by the ACCE who contacts students and CEs if needed for clarification.

Throughout placement

Students are supported to address placement concerns directly with clinical educators, through discussion, role play, provision of resources, etc.,

CEs are supported regarding placement concerns, through discussion, role play, provision of resources, etc.

If Problems Arise

Step One: Early Identification

Students and CEs are strongly encouraged to bring any concerns regarding a practicum experience to the attention of the ACCE as soon as they arise. CEs are prompted on the mid-term assessment to contact the ACCE if there is indication that the student is at risk for failing the placement. Contact with the ACCE prior to the mid-term is encouraged if there is any question regarding a student who is struggling in the placement. The ACCE will help to problem-solve and to facilitate discussion and resolution of such concerns. Students and/or CEs may discuss their experience in confidence with the ACCE. Once a plan has been decided, the

individual may implement the plan independently, or with the support of the ACCE, who will contact the second party only with consent of the first party.

Step Two: Developing a Written Plan

On occasion, a student may experience difficulty in meeting the learning and performance expectations for a practicum course. In such cases, the CE must notify the ACCE as soon as concerns arise, even if a mid-term assessment has not yet occurred.

If a student is not demonstrating acceptable performance in either professional behaviour and/or clinical skills, based on the assessment of the ACCE, written notice must be given to the student and a specific written plan for developing these skills must be negotiated cooperatively by the ACCE, the clinical educator, and the student.

This plan will include:

1. clear identification of problems in learning and teaching;
2. specification of learning objectives to be achieved and behaviour changes expected;
3. any necessary actions, procedures, or modifications required to the clinical practicum, and
4. a time schedule and procedures for evaluating the outcome of the plan.

The ACCE will document the plan and provide a copy to the student and the clinical educator.



Note: In extreme circumstances, a placement may be discontinued with the knowledge and approval of the Chair of the Department of Speech-Language Pathology.

Step Three: On-going Support and final grading.

The ACCE will also assist the student and the CE in implementing the plan and in evaluating its success on an on-going basis.

If a student achieves below a B- in a Clinical Course

If the student does not meet the learning objectives outlined in such a plan, a grade of failure (FZ) will be assigned for the practicum course by the Academic Coordinator of Clinical Education. This grade is the equivalent of a failure in an academic course and is subject to the regulations and appeal procedures described in the SGS Calendar and the Student Handbook under section 2.1.3 .



Note: If a student fails a placement, he or she may choose to appeal the grade, in which case the CE may be called upon to personally offer evidence in support of the assessment provided to the university. It is advisable to keep a dated written record of meetings with students at risk of failure.

Evaluation of Clinical Faculty Teaching

At the end of the placement, each student will provide feedback about his or her clinical education experience, addressing general performance and quality of teaching, in the following topic areas using the rating scale as indicated below. Areas of teaching not addressed in the placement are left blank.

1 The first question asks the student to indicate the amount of contact they had with the clinical faculty member. It is recognized that time spent with the Clinical Educator varies based on the structure of the placement and/or the stage of learner. (1 poor, 2 Fair and 3 Good).

For Items 2 -19 the following rating scale is used 1 = Poor, needs much attention, 2 = Fair, needs some attention, 3= Good, satisfactory, 4 = Very good, consistently better than average, 5 = Excellent, exemplary teaching

General Evaluation: The students are asked to provide their view of the clinician's performance using the above rating scale based on all of their experiences with the clinician:

- 2 Established clear expectations.
- 3 Responsive to your learning style.
- 4 Incorporated your learning agenda and objectives.
- 5 Was readily accessible, given workplace limitations.
- 6 Demonstrated enthusiasm for teaching.
- 7 Demonstrated a caring attitude for clients and families.
- 8 Demonstrated sensitivity to the needs of students and staff.
- 9 Took time for questions and discussion.
- 10 Asked questions that stimulated problem solving.
- 11 Answered questions clearly.
- 12 Explained her/his rationale for actions and decisions.
- 13 Acknowledged when she/he did not know information and suggested alternative sources to obtain information.

- 14 Maintained an atmosphere that encouraged differing points of view (i.e., open to ideas, suggestions and constructive feedback).
- 15 Provided regular, specific, constructive feedback.
- 16 Promoted self-assessment and self-responsibility for learning.
- 17 Shared her/his relevant knowledge and experience.
- 18 Was an effective role model.
- 19 Overall, I would rate this experience as

Evaluation of Quality of Teaching: The students are asked to provide their view of the clinician's quality of teaching in the following content areas. If the content area was not dealt with an N/A should appear on the clinician's report

- 20 Assessment.
- 21 Oral and Written Reporting.
- 22 Developing and Planning.
- 23 Intervention.
- 24 Counselling and Interviewing.
- 25 Evaluation and Problem-Solving.
- 26 Ethical Issues.
- 27 Administration.
- 28 Prevention and Screening Issues.
- 29 Family and Community Issues.
- 30 Research in Speech-Language Pathology and/or Audiology.

Students may also make additional comments or suggestions.

Guidelines, Policies and Procedures

Recording Clinical Hours

Proof of completion of a minimum of 350 hours experience is required for registration with SAC and/or most provincial regulatory bodies and professional associations in Canada, as well as for international regulatory agencies in Australia, the United Kingdom, and the United States. The student is required to keep accurate records of clinical hours as per university guidelines.

While not a requirement of the program, it may be helpful to track additional experiential hours to support reflections on clinical performance in placements (for example, Total Clock Hours, Numbers of Clock Hours in (Direct Client) Contact, Number of Clock Hours in (Observation) and Number of Hours in Other-Indirect Service).



NOTE: Students must also be aware of the requirements of the regulatory body from the area where they plan to work, and keep records throughout the SLP program accordingly. Students are strongly encouraged to separately collect and track required clinical and academic data of these types in a format suitable for the relevant agency.

Over the course of the two year MHSc program, students will engage in clinical activities in a variety of disorder areas that will be counted as clinical hours. This will primarily occur during clinical placements, however all students will also accrue approximately 30 hours during academic course work.

The Year 2 clinical education reps will track and compile a list of clinical hours obtained in academic courses (prior to Unit 5 in year 1 and prior to Unit 9 in year 2) which the Coordinators of Clinical

Education will approve. Students will use this list as supportive evidence to confirm that the hours they have reported have been approved.

In each clinical placement the student will complete forms provided by the University to show the summary of clinical hours obtained. This form is to be signed by a Clinical Educator (for more information see the next section).

General Guidelines for Clinical Activities in Practicum Courses:

In clinical practicum courses, students will be involved in various clinical activities as appropriate to their level of experience and the clinical setting. The following definitions of clinical activities are based on the current SAC guidelines for clinical hours and have been modified to reflect the expectations of the program.

Student clinicians may obtain supervised clinical experience working on their own (solo), or working with other professionals and/or student clinicians (shared). Solo versus shared participation is not distinguished in the accumulation of clock hours. However, it is assumed that the majority of clinical experiences are obtained by students working independently under supervision.

I. Clinical Readiness Activities

- (a) Review of client files.
- (b) Observation - Student observes clinical educator or other speech-language pathologist, audiologist or other qualified professional, as appropriate, carry out clinical sessions with client(s). The clinical educator will expect the student to: write brief observation notes and/or record data concerning the client's communication behaviours and the techniques used by the clinical educator when interviewing, assessing, treating, or counselling clients and their families; contribute relevant comments and questions to discussion with the clinical educator following observation.

II. Clinical Experience

(Hours: Minimum of 350 total; of those minimum of 300 in A & B; maximum of 50 hours in C)

(a) Client Specific Service

- 1. Screening, Identification, Assessment
- 2. Intervention, Therapy, Management
- 3. Interviewing
- 4. Counselling

(b) Client Related Service

- 1. Case Conference, Rounds, Team Meetings
- 2. Consultation with other professionals, support personnel
- 3. Clinical Educator Discussion (client Related)

(c) Clinical/Professional Activities

- 1. Simulated Clinical Activities
- 2. Promotion
- 3. Presentations e.g., workshops, in-services
- 4. Interprofessional Activities
- 5. Program Development
- 6. Planning / Analysis
- 7. Other – must be approved by Academic Coordinator of Clinical Education

III. Other Clinical Practice Activities

- (a) Planning and Analysis Activities - Student engages in independent planning for the assessment and/or treatment of a client and/or student analyses information obtained during such activities.
- (b) Oral and Written Reporting and Record-Keeping - Student composes, produces, and corrects written reports of student-provided clinical services and maintains clinical records such as file notes and institutional statistics.
- (c) Material Development - Student prepares special materials for use in assessment and treatment.
- (d) Clinical Education Conferencing - Student engages in student-focused discussion with clinical educator

pertaining to planning and execution of the clinical teaching process such as contracting, scheduling, performance evaluation, and orientation.

IV. Related Activities

- (a) Orientation to Facility.
- (b) Continuing Education activities, e.g., rounds, in-service training sessions, conferences.
- (c) Professional Activities, e.g., department meetings, public relations.'
- (d) Presentations.

SAC Clinical Hours Requirements

Developmental Language:40 hours	Voice/Resonance: 10 hours	A minimum of 40 hours combined for these three categories
Acquired Language: 30 hours	Fluency 10	
Dysphagia 10	Motor Speech 10	
Articulation Phonology 20	*Hearing Disorders 20 These can either be Audiology and/or Aural Rehabilitation. Hearing screenings can be supervised by an SLP	

*CASLPO expects 20 "direct" hours (with clients), therefore "client-related" hours must be counted over and above the min 20 hours.

General Guidelines Appendix A from Speech-Language & Audiology Canada (SAC)

For additional information regarding SAC Clinical Hours Requirements for Certification, See the description of [Clinical Hours Requirements at Appendix E1.1](#) in the clinical education guide.

Tracking and Reporting Hours

Summary of Clinical Practice Hours Form

Students will complete a summary of clinical practice hours form once for each clinical placement to track their hours for SAC/CASLPO. A Clinical Educator signs this form at the end of a placement. Another table is completed for hours accrued during academic courses over the two years in the program.



NOTE: It is critical that students complete these forms in their entirety with careful attention to detail. These forms support the student to accurately compile total clinical hours accrued at the end of the professional program for submission to professional and regulatory agencies. Any changes to forms after they have been signed by the Clinical Educator must be approved by the Academic Coordinator of Clinical Education.

[Summary of Clinical Practice Hours Appendix E1.2](#)

Reporting total hours to professional and regulatory agencies

At the end of the final placement, students will be guided to complete a summary report of all clinical hours accrued throughout their M.H.Sc. program. This will include some clinical hours completed during academic coursework in addition to all clinical hours accrued during clinical placements.

This final form is signed by a U of T Academic Coordinator of Clinical Education. Students will then complete and submit a request for document release, and the summary form will be forwarded as requested by the graduating student to the appropriate regulatory agencies.



Tips for Counting VOICE and FLUENCY Hours

These tips will help students to accurately capture minimum required clinical hours under the appropriate categories for voice and fluency.

In each placement, think broadly to try to accurately capture any and all voice and fluency hours possible. Those students who receive placement assignments focusing on fluency should have no problems obtaining SAC/CASLPO targeted hours for fluency. It may also be possible to get some voice hours. While in a fluency placement, it is important that all voice hours are captured that are possible. For example, if teaching EASY ONSET is a goal of intervention, then designate part of a session as VOICE hours. Count in 15 minute units.

A one hour session might be...

.75 fluency (stretched syllables, counselling)

.25 voice (breathy/easy onsets)

More voice hours may be captured when providing service to those with motor speech disorders if you target respiration/posture, phonation or intonation in any way.

Students who receive placement assignments focusing on voice should have no problems obtaining SAC/CASLPO targeted hours for voice. While in a voice placement, obtaining fluency time units may not be possible. However, in other placements, students can capture fluency hours in a variety of ways. For example, when training control of prosody or pacing in motor speech disorders; students can count a portion of a session (perhaps .25 hours) as FLUENCY hours. At some sites that service a general caseload, it may be possible to request a fluency client. Students are asked to contact the Coordinators of Clinical Education with their questions or concerns about obtaining the required hours.

Embedded Placement Activities

Clinical learning experiences which are embedded into many of the clinical placements include Teaching Clinics, Guided Observations and Interprofessional Education activities.

Teaching Clinics

In each 8 or 10 week placement, students attend the university for three full days of learning designed to support the development of clinical reasoning and self-assessment skills pertaining to their placement experience.

For the morning session, groups of students are assigned to a facilitator (SLPs from our clinical community). The students each present a clinical scenario for group discussion (preferably a video recording of themselves in clinical practice) and prepare learning questions focused on clinical skills applied or needing development. They will consider and discuss confirming and developmental aspects of the experience with their peers and the facilitator.

Facilitators come from several areas of the community: Private Practice clinicians who are unable to take a student full time but who want to participate in clinical education; clinicians with status appointments (as part of their teaching responsibilities); returning Clinical Educators who enjoy this aspect of teaching and new SLPs as an introduction to clinical education before taking a student for a clinical placement.

Teaching Clinic Agenda

Morning Session (9:00 – 12:00)

Small Group Reflective Teaching Clinic: Individual student (clinical skills) presentations with discussion and feedback.

Afternoon Education Session

The afternoon educational content is tailored to the particular Unit.

Alternative Assignments

Teaching Clinics are mandatory, however students who are participating in placements at a distance from the university or who are unable to attend Teaching Clinics due to extraordinary circumstances (such as illness) are required to complete an alternative assignment, which can be found on the departmental course website.

Where possible, the university will arrange for students in distance placements to participate in Teaching Clinics, or a portion thereof, using video-conferencing or web-based communications technology. Students who are able to attend the morning session of the Teaching Clinic via the internet are only required to complete the alternate assignment pertaining to the afternoon session.

[Teaching Clinic Format Appendix D1.1](#)

[Release of Video or Audio Recordings for Teaching Purposes Appendix D1.2](#)

Guided Observations

Unit 3 Guided Observation Form – Students can use this form to gather observational information for Minimum Expectation #1 - Guided Observation.



Note: please note that for Unit 3, use of the first 2 pages of this form is REQUIRED. Use of pages 3-8 is optional.

Unit 7 Guided Observation - The student will provide evidence of guided observations using their notes as indicated in the course outline. The forms below are provided as a reminder of forms students have used in the past. Students are to use judgment as to the suitability of these forms. Students can use these as a resource to plan questions that will guide observations

[Guided Observation Form - Child Appendix D2.0](#)

[Guided Observation Form - Adult Appendix D2.1](#)

Interprofessional Education

What is Interprofessional Education?

Interprofessional education (IPE) for students occurs when individuals from at least two different roles or professions learn about, from and with each other to collaborate effectively as team members in working towards best outcomes.

What is an interprofessional education activity?

Consider using this checklist to support students' involvement in clinical IPE activities.

1. Are two or more professions involved?
2. Does significant interactivity between/among participants occur?
3. Are there opportunities to learn about, from and with one another?
4. Are interprofessional teaching/learning moments addressed? (e.g., is learning about how team members work together discussed?)

What does the University of Toronto IPE curriculum mean for students in clinical settings?

As part of the U of T IPE curriculum, students are expected to address competencies for IPE through participating in specific learning activities in clinical settings. Specifically, the "IPE Component in a Clinical Placement Core-Learning Activity" has been integrated with the Unit 7:1508 – Advanced Clinical Laboratory in Speech-Language Pathology. Students participate in either a structured or flexible model.

The following documents describe the flexible IPE activities required in Unit 7:

[Activity 1 Appendix D3.1](#)

[Activity 2 Appendix D3.2](#)

[Activity 3 Appendix D3.3](#)

Placement Policies

Health Requirements and Proof of Immunization

Students entering the M.H.Sc. program are expected to be in a state of health that allows them to participate fully in academic and clinical programs, and pose no risk to themselves or others. After admission, but prior to registration within the program, students must submit to the Administrative Assistant of Clinical Education medical certification stating that they have been immunized against polio, diphtheria, tetanus, rubella, measles, mumps, chicken pox, and hepatitis B, and are free of tuberculosis.

The Health Form is collected by the departmental office in order for the University to establish that each student has fulfilled the University's requirements as well as the standards set forward by the Public Hospitals Act, Section 4.2, Ontario Regulation. The forms are not collected for the purposes of storing for student use. Students must make a copy of the completed health form and supporting documentation BEFORE submitting them to the Office, as students will be required to provide the health form to placement sites multiple times throughout the program. There is an administrative fee for obtaining a copy of the record once it has been submitted to the University.

The Ministry of Health and Long Term Care strongly recommend the influenza vaccine (flu shot) and the H1N1 vaccine. In addition, many clinical facilities require all staff and students to receive the influenza vaccine. If there is an outbreak and a student is not vaccinated, they may be: redeployed by the site or when appropriate dismissed from the clinical site for the safety of the student and patients. It is the policy of some sites to require students who have not had the influenza vaccine to wear a mask while on placement, regardless of an outbreak.

It is the responsibility of each clinical placement site to ensure that a student's immunization status meets site-specific requirements. Students are responsible for following directions particular to the placement site.

Failure to fulfill any of the immunization requirements as set out by the placement site could result in the student being suspended from participating in clinical placements.

<http://www.slp.utoronto.ca/current-students/master-of-health-science-students/mhsc-student-forms/immunization-forms/>

Illness or Absence During Clinical Placements

Attendance obligations are considered equivalent to obligations to an employer. Additionally, the total number of scheduled hours/days at clinical placements is considered to be a vital component of the M.H.Sc. program and represents the minimum number of supervised hours/days needed for students to achieve competent professional skills.

In some circumstances (e.g., illness, bereavement, religious holidays, medical appointments) a student must reasonably be absent from placement. In these cases:

Students are responsible for informing their Clinical Educator (CE) and Academic Coordinator of Clinical

Education (ACCE) of their absence and the reason for absence by 9:00 am that day, or as soon as is practically possible.

Students must submit a proposed plan in writing to the Academic Coordinator of Clinical Education for making up the missed hours from placement for any absence, ideally in advance, if possible.

Absence to attend a continuing education event is not normally acceptable, unless it is directly related to the clinical learning goals of the placement; students must apply to the CCE for approval in advance.

All absences from placement are tracked on the mid-term and final evaluation forms.

Every effort must be made to make up all missed placement time without exception.

A student may arrange to make up lost time outside of designated clinical hours only with the prior approval of the Academic Coordinator of Clinical Education.

In the event that lost time cannot be made up, and this is acknowledged by the CCE, and absences exceed 5% of the total number of placement days, an approximately equivalent number of days will be added to the end of the placement.

Five percent means:

- Unit 3: 2 days
- Unit 5: 1 day
- Unit 7: 2 days
- Unit 9: 3 days

If it is not possible to arrange make up time by extending the placement, the Academic Coordinator of Clinical Education will arrange a supplemental placement. The duration of the supplemental placement will normally be equivalent to the length of the absence, and will include all days in excess of 5% of days missed *at a minimum*, regardless of whether a student has completed the required SAC hours and course minimum expectations.

When a supplemental placement is required, every effort will be made to schedule it within the grading period as determined by the School of Graduate Studies. Should this not be possible, the student will apply to the Coordinator of Graduate for an extension to complete the supplemental placement. If the extension goes into another term, tuition fees may apply.

The supplemental placement must be completed within the extension period granted. A student cannot apply for more than one extension. Supplemental placements of this type will not occur during academic units

A student may not miss more than 5 days of clinical placement cumulatively across the entire program.

Inclement Weather

While on placement, students are asked to adhere to the policies of the site and their supervising CE's regarding absence due to inclement weather.

CPR certification

Department of Speech-Language Pathology students are not required to provide a copy of a valid certificate in CPR at the Basic Rescuer (C) level. This level includes one-person and two-person CPR with infants, children and adults. However some placement sites may require certification. The student is responsible for the expense of these courses.

Placement sites accept CPR certification from most agencies in Canada. Some of the most popular courses among students are provided by the following agencies:

- The Canadian Red Cross: <http://www.redcross.ca>
- Heart and Stroke Foundation: <http://www.heartandstroke.on.ca>
- Lifesaving Society: <http://www.lifesaving.ca>
- St. John's Ambulance: <http://www.sja.ca>

Mask Fit Testing

Healthcare providers adopt infection control procedures including the wearing of personal protective equipment. One of the key pieces of personal protective equipment is a properly fit tested mask. The Ministry of Health and Long-Term Care has developed directives for health care professionals to wear an approved respirator/mask when droplet protection (as in the cases of SARS and H1N1) is required. In order to protect the health and safety of health care learners, the use of respirators/masks may be required if there is evidence of potential exposure to airborne infectious agents.

Fit test data must be updated every 18 months – 2 years or when facial characteristics change due to weight gain/loss or facial trauma. For an adequate mask-to-face seal learners must be clean shaven at the time of the mask fitting. Accommodation requests will be considered on a case-by-case basis.

All Year 1 students will receive a memorandum from the Rehabilitation Sciences Sector (RSS) office in the fall with notification regarding the date, time and room number of an education session and mask fit testing at 500 University Avenue. In this session, students will receive documents regarding the policies and procedures for completing both.

The fee for mask fit testing is included in the student's ancillary tuition fees.

For lost or stolen cards, please go to (<http://www.synergy-employment.com/services/n95-mask-fit-testing/book-a-mask-fit-test-online>) where a charge of \$10.00 will applied. Please provide the Rehabilitation Sector office with a copy of the new card.

Basic Occupational Health & Safety Awareness Training

All students must take “Basic Occupational Health and Safety Awareness Training” prior to attending their first placement. The tutorial will only take a few minutes. Once you complete the tutorial you will receive a confirmation which you will bring with you on the first day of all of your placements, along with your other documentation (health forms, mask fit, flu etc.). To meet the requirements of this regulation, the Office of Environmental Health & Safety has developed a Basic Health & Safety Awareness Training Program.

To complete the training:

Follow the instructions under the Quercus Clinical Education Overview course.

Workplace Hazardous Materials Information System

Workplace Hazardous Materials Information System (WHMIS) is a comprehensive national system for safe management of hazardous chemicals which is legislated by both the federal and provincial jurisdictions.

The ultimate goal is to create a safer workplace by providing workers with the knowledge and tools to enable them to work safely. Students will be introduced to WHMIS prior to fieldwork placement in addition to being oriented to site-specific WHMIS procedures and resources while on placement. Students are required to complete the following on-line tutorial prior to the start of their first placement: Workplace Hazardous Materials Information System available at (<http://www.ehs.utoronto.ca/Resources/whmis.htm#INTRO>).

Police Record Check/ Criminal Reference Check

Many speech-language pathology students will work directly with, or in close proximity to children or vulnerable persons during their placements or clinical training. To protect these groups and maintain their safety, clinical sites may require MHSc students to obtain a Police Record Check (sometimes referred to as a Vulnerable Sector Screening). Police Record Checks (PRCs) are more comprehensive than “Criminal Record Checks” and “clearance letters”.

In cases where a student is unable to attend or to continue with a practicum/clinical experience because of issues related to his or her Police Record Check:

- (i) The academic program will make reasonable attempts to assist the student in securing another practicum/clinical experience for the student who is trying to fulfill these degree requirements, but may not be able to do so and is not required to do so;
- (ii) Neither the academic program nor the University of Toronto is required to accept an alternative practicum/clinical experience proposed by the student.

All Year 1 M.H.Sc. students are strongly encouraged to undergo a Vulnerable Sector Screening - Police Record Check prior to the winter break. Students are cautioned that most clinical sites in Year 1 will require PRCs for clinical placements (e.g., at school boards and in pre-school settings).



Note: the need for a Police Record Check (PRC) is between the student and the practicum/clinical placement. Students DO NOT hand in PRC results to the department. Students are asked to keep copies of the record check results and have them available in the event a clinical site requires the results.

Year 2 M.H.Sc students are cautioned that there may be a possibility that they will be required to obtain a Police Record Check by their assigned placement site (typically within six months of applying for one). Please carefully review the placement offer description for related instructions and, if necessary, contact the placement site coordinator about this matter for clarification as soon as confirmation of a placement assignment is received. Some students may opt to apply for a police record check in the fall prior to the placement assignment depending on the area in which they reside and the length of time it took in year 1.

Metro Toronto Residents

If the postal code of your residence begins with "M" firstly, go to the Metro Toronto Website, <http://www.torontopolice.on.ca/prcp/> and read the "Information About The Vulnerable Sector Screening - Police Reference Check Program For Individuals Seeking Employment Or Volunteer Opportunities Through Certain Agencies" section. Then, you must obtain a "Consent to Disclosure of Personal Information" form from the departments Business Officer, Mark Melchior in Room 1056 or from the Administrative Assistant for Clinical Education, Kristina Smith in Room 1052.

Once complete, the student must submit the form to the Toronto Police Service Headquarters located at 40 College Street, Toronto.



Note: that a fee plus applicable taxes apply. For more information please see the Metro Toronto Website: <http://www.torontopolice.on.ca/prcp/>

Residents in Other Areas

Residents in other areas please consult your local police department in September to determine what is involved in obtaining a police record check and complete as soon as possible. If you are unable to complete this on your own let the Academic Coordinator of Clinical Education as soon as possible.

Use of Social Insurance Number

Some students may have placements where videofluoroscopic swallow studies are performed. In order to monitor potential radiation exposure, the placement site will provide dosimeters to students for the duration of the placement. In this case, students will be asked to provide their Social Insurance Numbers at the placement site to register with the National Dose Registry (NDR) and obtain dosimeters.

Student Identification Badges

Students are issued id badges with their pictures in the first year of the program.

Students are required to wear the identification badge issued by the University at all times while at a placement site for a clinical placement site. In the event that a badge is lost, the student is to contact the Business Officer (Mark Melchior in Room 1056); in the Department of Speech-Language Pathology at the University of Toronto for a replacement.

Privacy Policies

Guidelines for Sharing Clinical Information and Recordings in Academic and Clinical Courses.

As a student in a health care profession, you will become a custodian of personal health information (PHI) in both your academic and clinical courses. Throughout your time in this program, you will have numerous opportunities for clinical observations and placements where you will be exposed to confidential client information in order to enhance the development of your clinical skills. It is expected that this information will only be shared with those in the client's immediate circle of care and/or with express written consent. Any disclosure of PHI without appropriate consent, even accidentally, may result in academic penalty or even dismissal from the program. It is therefore essential that students carefully adhere to the following guidelines to ensure PHI is protected at all times.



Note: that these are minimum standards and when at a clinical site, students must also comply with the site's policies for protection of personal health information.

Ensuring client confidentiality with documents and information related to clinical placements, clinical observations, academic courses, and research subjects:

This guideline refers to client information shared for teaching purposes in academic courses, guided observations, Minimum Expectations documentation for placements, portfolios, ILE's and Teaching Clinics or any other circumstance where hard copy and digital information is generated and/or shared.

As much as possible, redact all written materials (hard copy and digital) to ensure all identifying information has been removed.

If documents containing PHI is to be stored on any device (i.e. laptop, cell phone, tablet etc), the device **MUST** be encrypted.

Information that is stored on a computer or other device must be deleted immediately after it is used for its intended purpose (e.g., Teaching Clinic notes). Ensure deleted files are also cleared from the "trash" folder and any cloud backups.

Keep all hand written notes and hard copies of written documentation in your immediate personal possession or in a secure (locked) location accessible only by you such as a locked filing cabinet.

Express written consent must be obtained before sharing any PHI. Consents are kept in the student's possession and stored in a secure, locked location as noted above. In some instances the site may also want

to keep a copy of the consent. This should be stored as per the policy guidelines of the site.

Any documents containing PHI that are shared with other students, professors or clinical teaching staff (e.g., during Teaching Clinics), must be returned to the student presenter immediately after the presentation/activity. The student presenter is responsible for shredding these IMMEDIATELY.

Do not discuss site visits, clients or other personal information in public locations or with any individual who is not in the client's circle of care.

Ensuring privacy with digital recordings (e.g., using computers, tablets and phones)

Obtain written consent using the departmental consent form (Clinical Education Guide, Appendix D 1.2) prior to ANY form of recording. As noted previously, it is the responsibility of the student to retain the original consent form in a secure (locked) location. In some cases, the site will request to retain the consent in the client file (in which case the student should retain a copy).

All devices used to record MUST be encrypted.

When in use for recording and while recordings are stored on the device, all media uploads to the Cloud MUST be disabled until the recording has been deleted and cleared from the device.

Several departmental tablets are available for loan from the IT office on the 8th floor. These have Cloud access disabled and are password protected to ensure maximum privacy. To arrange the loan of a tablet, contact Chan or Rob in Room 809.

While recording, take appropriate measures to minimize client identification such as avoiding using the client's name, avoiding giving identifying information, such as age, school or other identifiers if possible.

As soon as possible after obtaining the recording, upload the file to MY MEDIA at the University of Toronto, ensure it is functioning properly (i.e., it plays correctly) and delete the recording from the recording device.

Note: Recordings stored to My Media are stored on University of Toronto servers.



Upload speed is impacted by the capacity of the local Wi-Fi service. If your video is taking too long to upload, consider using editing options to shorten the video to under 10 minutes

You are not to share a link to your recording under any circumstances unless instructed to do so (e.g., by a course instructor for an assignment). In order to access videos on My Media, individuals need to have a link provided by you and a UTORid. If sharing the My Media link, you must do so ONLY from your University of Toronto e-mail account.

If it is not possible to upload to My Media, instead save the recording to an encrypted USB stick and store in a secure, locked location.

Delete all files from the device and clear from the device's "trash" folder before reactivating media sharing. For an extra level of protection, please have your clinical educator audit this process. Document the time/date of deletion from the device.

Share files only as consent permits and delete from My Media or storage device as per consent. Students will be asked to keep and submit a record of deleted materials that may be randomly audited by the department to ensure compliance

If you have any questions or are unclear on how to manage PHI at any time, contact the Academic Coordinator of Clinical Education for assistance.

To develop knowledge of best practices in relation to privacy, students must complete 2 e-learning modules:

***Privacy E - Learning Module**

Prior to Unit 3, students are required to complete the Privacy Module for U of T Faculty of Medicine Learners e-learning module. Students will complete the module and then submit a copy of the certificate to the Unit 3 course instructor as part of their minimum expectations

http://www.uhn.ca/corporate/For_Staff/Privacy_eLearning (if a login window pops up click cancel).

***Social Media E- Learning Module**

Prior to Unit 3, students are required to complete the *CASLPO Pause Before You Post: Social Media Awareness for Regulated Healthcare Professionals* e-learning module that can be found at <http://www.caslpo.com/members/resources/learning-tools/elearning-modules>. Students will complete the quiz, scenarios and then submit a copy of the certificate to the Unit 3 course instructor as part of their minimum expectations.

*If students are unable to complete either of the above modules due to technical difficulties they are asked to contact the Unit 3 course instructor ASAP.

WSIB and Private Insurance

Placement sites are asked to sign a declaration of understanding, a U of T form, which describes insurance coverage relating to student placements and which only needs to be filled in once for all U of T departments in Rehabilitation Sciences.

At the beginning of the academic year all students are asked to sign a similar form. No further insurance forms are required. Students may be asked to present a copy of the declaration to their placement site.

In The Event of an Accident or Injury

In the event of an accident or injury, ensure that first aid is given immediately, and that transportation is provided to a hospital, doctor's office, or the student's home if necessary. Sites complete the U of T Accident

Report and return it to the university within 48 hours of the incident.

If a Student Must Make a Claim:

The Ontario Ministry of Advanced Education and Skills Development (MAESD) ensures that students on work placements receive WSIB for placement employers who have WSIB coverage and private insurance for employers who are not covered by WSIB for injuries or disease incurred while fulfilling the requirements of their placement. Contact U of T for further instruction.

International Placement Opportunities

Criteria and Planning Steps for International Placements

Process and Timeline

The following process and timelines will be utilized for determining a student's eligibility for international clinical placements.

Late September/Early October – Initial Meeting

The Director of Education the International Centre for Disability and Rehabilitation (ICDR) and the Academic Coordinator of Clinical Education (ACCE), Department of Speech-Language Pathology will meet with all Rehabilitation Sciences students interested in doing an international clinical placement to discuss opportunities, student criteria and process, and to answer any questions.

Late October / Early November – Application Deadline

MHSc students will send an email to notify the Academic Coordinator of Clinical Education, Department of Speech-Language Pathology, of their wish to be considered for an international placement.

Required supporting documentation:

Curriculum Vitae

Personal Statement - to include information on why they are interested in having the placement, where they would prefer to go, their life and travel experiences that are relevant and their expectations for the placement (max two pages, must be double spaced).

Late November – Interviews

Students will be interviewed by a committee consisting of the Director of the International Centre for Disability and Rehabilitation, the Academic Coordinator of Clinical Education, Department of Speech-Language Pathology and a speech-language pathology graduate who has previously completed an international clinical placement.

The interview will be approximately 20 minutes long and will consist of questions relevant to international placements. Candidates will be assessed using a 7-point Likert scale.

Criteria:

- At least B+ performance on previous clinical placements (quantitative and qualitative assessment)
- At least B+ performance on previous academic coursework
- High level of maturity as assessed by interview and observed throughout the professional degree program
- Appropriate personal characteristics, including assertiveness, confidence, cultural sensitivity, preparedness, etc.
- Previous experience with international travel
- Dedicated attendance/involvement in ICDR activities such as the Speaker Series, biannual symposium and working groups

Good health

Placement opportunities provide a match between hours needed (overall and specific categories) and those that can be provided

December – Notification

Students will be notified of their recommendation for a potential international clinical placement. It should be noted that even though a student is recommended, this is not a guarantee that an international placement will be available.

December – June

Students will be notified of their placement match as soon as possible.

International Placement Preparation

Students will participate in the Safety Abroad program in the Faculty of Medicine see MHSc student handbook for more information;

Students will have one group and one individual meeting with the Academic Coordinator of Clinical Education and/or an ICDR representative to discuss cultural and travel issues and questions and/or attend ICDR Country/Group meetings(s).

Students will participate in the IPE Elective: Critical Perspectives in Global Health (4 evenings, January - March)

During Placement

- Students will communicate via email with the Academic Coordinator of Clinical Education on a routine basis (frequency to be determined prior to departure)
- Where possible, web-based technology will be utilized to permit the student to participate in Teaching Clinics (procedures to be determined prior to departure).
- For those portions of Teaching Clinics the student is unable to participate in, alternate assignments will be completed (to be determined prior to departure).

Post-Placement

Students who complete an international placement will be required to fulfill the following additional minimum expectations:

1. A project, as determined jointly by the clinical educator(s) and student(s), to focus on giving a useful resource to the site and staff;
2. A written report of their experience – maximum 3 pages (must be double spaced);
3. Recommendations for future clinical placements at that site;
4. Students may also be asked to make a verbal presentation of their experience to a group of students and/or faculty, and/or to be involved in the process of selecting future students for potential international clinical placements.

It is the intention of this process to ensure that student candidates have the knowledge, skills, attitudes and behaviours, along with the appropriate supports necessary to participate and be successful in an international clinical placement.

Clinical Placements - Requests from other Programs

The department receives many requests for placements in the Toronto area from programs across Canada and the United States, as well as international programs.

As a service to the community, the Coordinators of Clinical Education may arrange placements for students enrolled in programs of speech-language pathology that offer recognized degrees for CASLPO registration and/or SAC membership.

Placement requests are considered using the following order of priority:

1. Students in Ontario programs;
2. Other students in Canadian programs;
3. Canadian students in non-Canadian programs.

Note: A charge for this service may be levied.



Additional Resources

Ontario Ministry of Advanced Education and Skills Development Funding - Student

Some discretionary funding has been received from the Ontario Ministry of Advanced Education and Skills Development (MAESD) to support clinical education activities.

Students who experience significant financial hardship as a result of a placement assignment may be eligible for some financial reimbursement of placement-related expenses. Funding is limited; therefore expenses can only be partially reimbursed. Please note that the amount of reimbursement provided to each eligible applicant will depend upon the total number of requests made, and will be proportional to the amount of expenses incurred.

International Placements

Recipients of the Chris Gandy Award are *not* eligible for the Clinical Placement Expense Fund for an international placement.

Northern Ontario School of Medicine (NOSM)

NOSM offers a limited number of clinical placements to the University of Toronto program each year, for which the student is funded for travel and accommodation. All successful student applicants must accept the fully funded placement assigned to them. Where additional unfunded placements can be obtained for remaining student applicants at the discretion of the NOSM coordinator, these students can apply for funding support from the Clinical Placement Bursary program in advance of accepting a placement offer. If sufficient funding cannot be provided which will enable the student to attend the placement, the placement offer can be declined by the student.

Eligible Expenses:

Only amounts over \$300 will be considered.

1. Accommodation:

For any placements which require accommodation-related expense to the student, students may apply for partial reimbursement, however student must prove need and obtain approval from the U o f T academic CCE prior to the start date. Post placement applications will not be considered.

2. Travel:

- a) For any placements (in or out-of-catchment) which require significant travel expense (e.g., car rental necessary) related to placement activities (e.g., car is required to travel between multiple work locations).

Students may submit a reimbursement claim for a car rental amount *only* if a car was required for the placement.

Students may submit a reimbursement claim for mileage only if a car was required for the placement.



Note: that mileage covers all automobile operating costs, including gasoline, insurance, repairs and maintenance.

Travel between the student's home and placement site will not be considered for the expense fund.

Students who claim mileage must submit a travel log (Appendix G1.2).

Reimbursement claims for travel will not be considered if there is a reasonable alternative provided through public transportation or by the site (e.g., shuttle bus).

b) Expenses for travel to/from Toronto to a placement region at a distance from the university (e.g., ISTAR, Nunavut, India) will be considered in such cases that the clinical site is a long-standing partner in clinical education and where no related funding is already in place to support the identified placement. In the case of a new clinical partner, the clinical site will offer a clinical learning experience that aligns with the mission of the International Centre for Disability and Rehabilitation (ICDR). The student's application must include the signature of the academic CCE in support of the application to be eligible.



Eligible expenses will only be partially covered

Funding is limited!

Supporting receipts are required.

Application Deadlines:

Students must complete and submit an Expense Report (G1.1), supporting receipts and/or a travel log (Appendix G1.2) in an envelope to the Administrative Assistant to Clinical Education. The deadline for

reimbursement requests is September 15th of the placement year, with supporting receipts. Students must complete a separate Expense Report for each reimbursement request. All applications are reviewed once a year (typically in the fall) by the clinical placement expense fund committee.

Year 2 applicants should provide post-graduation address information or be prepared to monitor their utoronto email address in the fall.

Instructions:

See above for eligible expenses and then follow these instructions:

Accommodation

Students requesting accommodation reimbursement complete G1.1 and submit with rental receipts.

Travel

Students requesting travel expense reimbursement of airfare must complete G1.1 and submit with boarding pass.

Students requesting travel expense involving train fare, bus fare or car rental must complete G1.1 and submit with receipts.

Students requesting travel expense for mileage must complete G1.1 and submit with G1.2.

[Clinical Placement Expense Fund Expense Report Appendix G1.1](#)

[Travel Log Appendix G1.2](#)

Quercus

As with academic courses, Quercus is used for course management for clinical placements and related communication with students. On Quercus, students can access resource materials, links to on-line resources, information about Teaching Clinics, upload areas for placement paperwork and other material that the course instructor may post from time to time. Students are responsible for checking Quercus on a regular basis.

MHSc Student Handbook

See the “Student” section of the SLP Website

Clinical Resource and Teaching Laboratory

The Clinic Resource Teaching Lab (CRTL) is located in Room 414 and is a group work / departmental study room.

Case Study Rooms

Case Study Rooms are located on the second floor. Included are 222, 224, 238, 240, 251, 255. The primary purpose for these rooms is for academic and clinical teaching; however students may use these rooms for quiet study when they are not being used for teaching purposes.

Clinical Resources and Tests

Clinical Resources and tests are available for students to use for teaching and learning purposes. To access and/or return these materials students must be in touch with the student rep assigned to their year.

Photo Credits

Cover

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Clip Art Credits

Tips - <https://openclipart.org/user-detail/maus80>

Note - <https://openclipart.org/detail/285792/take-note> - Arvin61r58