

Master of Science Program in Speech-Language Pathology
School of Rehabilitation Science

PROGRAM HANDBOOK

2020-21

McMaster University – 2020

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Table of Contents

SECTION 1 – INTRODUCTION	4
WELCOME FROM THE ASSISTANT DEAN	4
HANDBOOK OVERVIEW	4
PROGRAM ADMINISTRATION	5
SECTION 2 – GETTING STARTED.....	6
PROGRAM AND NON-ACADEMIC REQUIREMENTS	6
IDENTIFICATION BADGES AND PASS CARDS.....	6
ANATOMY LAB TRAINING	6
IMPORTANT DATES & DEADLINES	6
IMPORTANT LINKS	6
GENERAL INFORMATION	7
PROFESSIONALISM.....	8
SECTION 3 – SPEECH-LANGUAGE PATHOLOGY	9
THE SPEECH-LANGUAGE PATHOLOGY PROFESSION	9
SECTION 4 – THE SLP PROGRAM.....	9
PROGRAM REQUIREMENTS	9
ACCREDITATION.....	9
REGULATION OF PRACTICE	10
MISSION, GOALS, AND VALUES	10
PROGRAM EDUCATIONAL PHILOSOPHY	10
Self-Directed Learning	10
Problem-based learning (PBL)*	11
Small-Group Learning	11
Interprofessional Education Activities.....	11
PROGRAM LEARNING OUTCOMES	12
LEARNING METHODS.....	12
Problem-Based Tutorials.....	12
Clinical Skills Labs.....	12
Large Group Seminars.....	12
Clinical Education.....	12
Learning Resources.....	13
STUDENT EVALUATION.....	13
REVIEW OF STUDENT PROGRESS.....	21
REMEDICATION (PASC)	21
SECTION 5 – PROGRAM CURRICULUM OVERVIEW.....	23
UNIT 1: FUNDAMENTALS OF CLINICAL PRACTICE I: PRINCIPLES, KNOWLEDGE, AND SKILLS FOR CLINICAL PRACTICE.....	23

UNIT 2: FUNDAMENTALS OF CLINICAL PRACTICE II: ROLES AND PRACTICE SETTINGS ACROSS THE LIFESPAN	23
UNIT 3: CLINICAL PRACTICE WITH CHILDREN, YOUTH, & YOUNG ADULTS	24
UNIT 4: CLINICAL PRACTICE WITH ADULTS AND OLDER ADULTS	24
UNIT 5: COMPLEX PRACTICE AND PROFESSIONAL TRANSITION	24
SECTION 6 - PROGRAM COURSE DESCRIPTIONS	26
UNIT 1 COURSES	26
UNIT 2 COURSES	26
UNIT 3 COURSES	27
UNIT 4 COURSES	27
UNIT 5 COURSES	28
SECTION 7 – FINANCIAL INFORMATION	29
SECTION 8 – STUDENT SERVICES AND RESOURCES	29
SECTION 9 – FIRE/EMERGENCY	29
Empower Me (Graduate Students)	32
SECTION 10 – POLICIES & PROCEDURES.....	33
ABSENCES.....	33
ACADEMIC & CLINICAL ADVISING.....	33
ACADEMIC INTEGRITY POLICY	33
ACADEMIC REGULATIONS.....	33
COPYRIGHT POLICY AT MCMASTER UNIVERSITY.....	33
DISCRIMINATION, HARASSMENT & SEXUAL HARASSMENT PREVENTION AND RESPONSE POLICY:	33
GRADING SYSTEM.....	33
See	
https://academiccalendars.romcmaster.ca/content.php?catoid=37&navoid=7553#2.6.1_Averaging_of_Letter_Grades	
GRADUATE COURSE LOAD.....	34
GRADUATE EXAMINATIONS POLICY	35
IDENTIFICATION BADGES AND PASS CARDS.....	35
PROFESSIONAL BEHAVIOUR GUIDELINES.....	35
RELIGIOUS HOLIDAYS.....	35
REPORTING INJURIES.....	36
RESCHEDULING OF EXAMINATIONS	36
STORM PROCEDURES	36
STUDENT ACCESSIBILITY SERVICES (SAS).....	36
STUDENT APPEALS PROCESS	36

SECTION 1 – INTRODUCTION

WELCOME FROM THE ASSISTANT DEAN

Welcome to the Master of Science Program in Speech-Language Pathology! Our mission is to train excellent clinician-scholars who will work to maximize life participation for all people with communication and swallowing disorders. To achieve that mission, we use an educational framework focused on self-directed learning, problem-based learning, and small-group learning. This educational framework may be new to many of you, and the handbooks will be an important resource.

We look forward to your participation in the Mac SLP program, and are excited to be part of your journey to excellence in clinical practice in Speech-Language Pathology.

HANDBOOK OVERVIEW

The Program Handbook is designed for students enrolled in the Master of Science Program in Speech-Language Pathology at McMaster University. It outlines specific academic regulations and general information related to the program.

It is the student's responsibility to be familiar with the information in this Program Handbook, as well as University policies and procedures outlined in this Handbook, the Graduate Calendar, and the University Senate Policy Statements. These may be viewed on the McMaster website. This Program Handbook supplements the policies and procedures outlined in the Graduate Calendar. This document is not intended to replicate or modify the information found in the School of Graduate Studies (SGS) Calendar. <http://academiccalendars.romcmaster.ca/index.php?catoid=20>

Policies must be responsive to changes in the environment and may be revised. Students are advised to check "Avenue to Learn" (the learning management system) for the most up-to-date information. Complete versions of the policies may also be obtained from the Program Coordinator.

In addition to this Handbook, the Master of Science Program in Speech-Language Pathology provides a Clinical Education Handbook and course outlines for each class in the Program. The course outlines outline the requirements for the specific courses within each Unit and are supplemented by information about the Learning Objectives across all courses in the program. The Clinical Education Handbook outlines information, policies, and procedures related to clinical practice and is distributed to students during Orientation Week. The Clinical Education Handbook is a supplement to the SLP Program Handbook.

If there is any discrepancy between this document and the SGS Calendar, then the School of Graduate Studies Calendar shall prevail, with the exception of policies that are approved by the McMaster University Senate.

PROGRAM ADMINISTRATION

Assistant Dean	Dr. Lyn Turkstra	turkstrl@mcmaster.ca ext. 28648
Director of Clinical Education	Justine Hamilton	hamilj13@mcmaster.ca 289-426-0846
Program Manager	Jessica Gasewicz	gasewijw@mcmaster.ca ext. 27801
Program Coordinator	Vanessa Killinger	slpadmin@mcmaster.ca ext. 27344
Program Assistant	Megan Carvalho	slpadmin@mcmaster.ca ext. 20181

SECTION 2 – GETTING STARTED

PROGRAM AND NON-ACADEMIC REQUIREMENTS

Students are required to meet a number of program and non-academic requirements to progress in the program, many of which are related to health and safety for all individuals. Details can be found here <http://srs-mcmaster.ca/slp-year-one-requirements/>, and here <https://srs-mcmaster.ca/slp-year-two/>. Students are required to maintain current non-academic requirements for the duration of their registration in the MSc(SLP) program. **Failure to maintain current requirements may result in the student being withdrawn from the program and/or clinical placement.** Note: The VSC may not lapse at any time during either academic courses or clinical placements.

IDENTIFICATION BADGES AND PASS CARDS

- **University Student Identification Cards**

Fully registered students (financially registered) will receive a University Student Photo Identification

(ID) card with an ID number and bar code. For information regarding ID cards, including loss of ID cards, contact the Graduate Studies Office:
GH 212, 905-525-9140 Ext. 23679

- **Hospital ID Badges/Anatomy Pass Card**

At the beginning of the program, students will be issued a hospital photo-ID badge, which also serves as the Anatomy Lab pass card. The fee for obtaining this card is \$15 and is non-refundable.

The fee to replace the card is \$50 and is non-refundable. To obtain a replacement card, please contact the SLP Program Coordinator (IAHS 402) at slpadmin@mcmaster.ca.

Badges are to be worn when in Hamilton Health Science hospitals and when in other health care facilities for clinical practica or educational purposes. Students must have their identification badge readily available at all times. Under no circumstances should you allow others to use your identification badge. Failure to produce identification upon request may lead to removal from the building by security staff. In the event that a student withdraws from the program, the hospital identification card must be returned to the program.

ANATOMY LAB TRAINING

The Anatomy Facility within the Education Program in Anatomy is under the auspices of the Chief Coroner of Ontario. It is therefore a restricted area with access limited to those who have a legitimate need to work with cadaveric material. Access is limited because of the regulations defined by the Chief Coroner as per the Coroner's Act. Furthermore, the University has a responsibility to those donors (and to their families) who bequeathed their bodies to us, to ensure appropriate use.

Students are required to undergo training before they are allowed access to the Anatomy facility. This training session is mandated; this means it is NOT optional. Student access cards will be activated when, and only when, they have completed proper orientation to the use and handling of human material. The anatomy program staff members enforce this requirement strictly, and students without an activated card will not be allowed access to attend resource sessions. Access cards allow Anatomy Staff to know how many people are in the lab at any time. Therefore, students should also not attempt to gain access using another person's access card. This behaviour will not be tolerated and will be referred to the appropriate authorities.

IMPORTANT DATES & DEADLINES

Please see the Graduate Calendar. <http://academiccalendars.romcmaster.ca/index.php?catoid=25> – to be updated

IMPORTANT LINKS

- **Mosaic** - <https://gs.mcmaster.ca/academic-services/how-enroll>
- **Avenue to Learn (A2L)** - <http://avenue.mcmaster.ca/>

GENERAL INFORMATION

- **Change of Address/Name**

Students may change personal information (e.g., name and/or address) within MOSAIC. **It is imperative that this information is kept current in case of emergencies.**

It is the responsibility of the student to inform the Program Coordinator of a change in name, address, or telephone number. The Program Coordinator's office is located in IAHS- 407.

- **Email Information**

Information from the SRS programs and the University is sent regularly to students via their McMaster e-mail accounts. Email is a critical communication avenue and students are expected to monitor their McMaster email accounts at least daily. Student email accounts are active from September 1st of the enrolment year and to October 15th of the graduation year.

- **Confirmation of Enrollment Letters**

Occasionally a student requires a letter confirming enrollment in the program. Students may obtain this type of letter by logging into MOSAIC (Student Services Center/ Finances) and selecting the "Course Enrollment" letter option from the drop-down menu.

- **Confirmation of Graduation Letters**

Between the completion of Unit 5 and convocation, students occasionally require a letter acknowledging that upon successful completion of all requirements of the program, the student is eligible to graduate in November. Students may obtain this type of letter by logging into MOSAIC (Student Services Center/ Finances), and selecting the "Approved to Graduate" letter option from the drop-down menu.

- **Transcripts**

It is the McMaster policy that transcript requests must be received in writing, and the student's signature is required to release confidential information. Requests for transcripts can be faxed to 905-527-1105 or mailed to McMaster University, Office of the Registrar, Gilmour Hall Room 108, 1280 Main St W., Hamilton ON, L8S 4L8.

- **Reference Requests During and Post Program**

Students and alumni who request reference letters from School of Rehabilitation Science faculty and staff are required to fill out a Reference Request Form. This form is available from the program staff, and on the School Website (under "Alumni" and "Current Students"). Questions and concerns should be directed to the Program Manager.

- **Withdrawal Procedures**

Students seeking voluntary withdrawal from the Speech-Language Pathology Program are requested to book an appointment with the Assistant Dean and the Program Coordinator.

- **SRS Learning Resource Room**

SLP students have access to the SRS Learning Resource Room (IAHS 307/A). The Resource Room is outfitted with resource books and journals, and is shared with the OT/PT and Rehabilitation Science Programs. The Resource Room may be used as the meeting room for the OT/PT/SLP Student Council. The pass code to the Resource Room is 403*.

- **Lockers**

Lockers may be rented through Mohawk Building Services, located on the first floor. If you wish to rent a locker, please collect a form from the Welcome Desk opposite IAHS 143.

- **Posting Announcements**

The Student Engagement Office administers the Mohawk College Posting Policy. Any posting on walls or area not designated for specific programs or departments should be brought to the Student Engagement Office in IAHS 144 for approval. Any posting not bearing the Mohawk stamped approval may be removed without notice.

- **Photocopying/Faxing**

Students are responsible for their own photocopying. If a student requires any document to be photocopied or faxed (e.g. program or non-academic requirements), the charge is \$30 per item. Only cash or cheques (made out to McMaster University) will be accepted.

- **Room Bookings- IAHS**

Requests for booking space (e.g., classrooms, conference rooms) in IAHS must be directed to the Program Assistant. All rooms that are rearranged for specific classes/activities must be returned to their original set up at the end of the class/activity, and garbage collected off the floor and disposed into designated bins in that rooms. Some spaces have a rental cost. For more information, see the “Student-Initiated Extra Curricular Learning Events” Guideline.

PROFESSIONALISM

- **Professional Behaviour Guidelines**

All Faculty of Health Sciences learners shall demonstrate the following professional behaviours in all academic and clinical settings at all times. For the purposes of this Code, Faculty of Health Sciences learners, including post graduate medical learners, shall be governed by this policy whether they are engaged in purely academic or academic/clinical activities, engaged in administrative functions associated with their learning, or conducting or assisting in research, and whether the activities are on or off site, in in-person interactions or online environments. The Faculty of Health Sciences Professional Behaviour Code of Conduct for Learners shall be applicable to all contexts and circumstances in which learners are, or could reasonably be considered to be, representing their educational program. The full guideline is available here:

<http://www.mcmaster.ca/policy/Students-AcademicStudies/Professional%20Code-Graduate.pdf>

This policy describes three domains of professional behaviour requirements for all academic and clinical settings:

- Professional Responsibility, Integrity and Accountability
 - Self-Improvement and Pursuit of Excellence
 - Respectful Professional Relationships and Communication
- McMaster is committed to an inclusive and respectful community. These principles and expectations extend to online activities including electronic chat groups, video calls, and other learning platforms. If you are concerned about your virtual classroom experiences, the [Equity and Inclusion Office \(EIO\)](#) is available to advise and assist students who may be experiencing any equity, accessibility, inclusion, harassment, discrimination or sexual violence concerns. You can reach the EIO at equity@mcmaster.ca. Thank you for joining us in ensuring that our McMaster online communities are spaces where no one feels excluded and everyone is able to enjoy learning together. Hyperlink: <https://equity.mcmaster.ca/contact-us>
 - Students who have access to authorized live or recorded lectures or lecture-related materials (e.g., clinical videos) in a course may access these lectures and materials only for personal or group study and should not reproduce, share, or upload any recording or other class-related material to any publicly accessible web environment. Similarly, notes, slides, evaluations and tests are for personal use and should not be shared with others outside of a course.
 - **Student Code of Conduct**
As current and future members of the caring professions, Health Science learners at McMaster shall demonstrate their commitment to the professional behaviours that are outlined in this document - <http://fhs.mcmaster.ca/pcbe/policies.html>
 - **Essential Skills and Attributes Required for the Study of Speech-Language Pathology**
Students are expected to demonstrate the Essential Skills and Attributes Required for the Study of Speech-Language Pathology as identified by CAASPR. Specifically, students must be able to communicate with, examine, and provide care for all clients, and show respect for and interact with all peers—including those whose gender, ethnicity, culture, sexual orientation, or spiritual beliefs are different from students' own.
 - **On-Line Behaviour**
As a student enrolled in this course you have been granted permission to access an online learning management system, Avenue to Learn. Avenue to Learn course pages are considered an extension of the classroom and usage is provided as a privilege subject to the same code of conduct expected in a lecture hall (see relevant section of the Code of Student Rights and Responsibilities below). This privilege allows participation in course discussion forums and

access to supplementary course materials. Please be advised that all areas of Avenue to Learn, including discussion forums, are owned and operated by McMaster University. Any content or communications deemed inappropriate by the course instructor (or designated individual) may be removed at his/her discretion. Per the University Technology Services Code of Conduct, all members of the McMaster community are obligated to use computing resources in ways that are responsible, ethical and professional. Avenue to Learn Terms of Use are available at <http://avenue.mcmaster.ca>.

SECTION 3 – SPEECH-LANGUAGE PATHOLOGY

THE SPEECH-LANGUAGE PATHOLOGY PROFESSION

Speech-Language Pathologists (SLPs) are autonomous regulated health professionals with specialized knowledge, skills, and clinical training in the prevention, screening, identification, assessment, and management of congenital and acquired communication and swallowing disorders (<http://sac-oac.ca/public/what-do-speech-language-pathologists-do>). Service is provided to individuals of all ages in a variety of health care, education, and private settings. SLPs are in demand due to changing demographics, in particular due to increased needs among children and seniors. In children, an increased awareness of the importance of communication to positive academic, social, and vocational outcomes has fostered a rise in demand for SLPs in health, education, and private sectors. In seniors, a rise in life expectancy has meant an increased need to manage speech, language, and swallowing problems in older adults that are associated with stroke, brain injury and other neurological disorders. Indeed, the Canadian Occupational Projection system indicates that there is likely to be a shortage of SLPs between 2013 - 2022 (<http://occupations.esdc.gc.ca>) and SLPs are listed on Canada's Department of Citizenship and Immigration website as eligible for express entry to Canada in the Federal Skilled Worker Program (<http://www.immigration.ca/en/fast-track-high-demand-occupations.html>).

The SLP functions as a knowledge expert, communicator, collaborator, advocate, scholar, manager and professional. A list of Essential Competencies related to each of these roles is currently [available on the Speech-Language Pathology Program website](#)

SECTION 4 – THE SLP PROGRAM

PROGRAM REQUIREMENTS

The Master of Science in Speech-Language Pathology is a full-time course-based professional Master's program. It prepares students with knowledge, skills, and professional behaviours to practice as entry level speech-language pathologists. Students will complete course work and clinical practica during their two study years. All courses are required.

ACCREDITATION

In accordance with guidelines from the [Council for Accreditation of Canadian University Programs in Audiology and Speech-Language Pathology \(CACUP-ASLP\)](#) the program will complete a two-stage process for accreditation. The first phase, completed in the first two years of operation, is the application for Candidate Status. The second phase, completed after 3 years with Candidate Status, is full Accreditation.

On April 16, 2019, the program's application for **Candidate Status was granted**. Students graduating from a Candidate program are entitled to register to practice in Ontario.

As required by CACUP, within three years, the program will apply for Accreditation.

REGULATION OF PRACTICE

To practice in Canada, speech-language pathologists must be registered with the appropriate provincial or territorial regulatory organization, if such an organization exists, or with an equivalent regulatory body determined by that province or territory. Each regulatory body has a separate and distinct registration process; however, in all circumstances, a master's degree in speech-language pathology is required. Beginning in 2021, all regulated provinces will also require SLP graduates to pass the Canadian Entrance to Practice (CETP) examination before being registered with the regulatory body. SAC has created an [information hub for the new CETP Exam](#) in English and French. Up to date information is now posted online and will be updated as we receive more information. Graduates from the MSc(SLP) Program will be eligible to apply for registration with the College of Audiologists and Speech-Language Pathologists of Ontario (CASLPO). Students may choose to seek registration in other provinces or territories. While standards for registration in Ontario are generally similar to those in other provinces or territories, there may be some differences. Students planning to practice outside of Ontario must notify the Director of Clinical Education in their first semester of study of any requirements that differ from those in Ontario.

MISSION, GOALS, AND VALUES

Our mission is to train excellent clinician-scholars who will work to maximize life participation for all people with communication and swallowing disorders. A speech-language pathologist functions as a scholar, communicator, collaborator, clinician, professional, advocate, and leader. We provide our graduate students with opportunities to develop knowledge and skills in each of these roles.

Our goal is to prepare speech-language pathologists who

- Communicate effectively and respectfully with clients, families, other providers, community organizations, and colleagues;
- Have “deep” knowledge of the discipline and understand the impact of contextual factors on clinical practice;
- Can think critically and problem-solve creatively;
- Are reflective practitioners;
- Advocate for the role of SLP and for the needs of clients and families/caregivers;
- Are flexible and adaptable in a changing health and education context;
- Engage in evidence-informed practice;
- Learn to grow as leaders in consultation, collaboration, education, and clinical practice;
- Approach clinical practice and their role with the spirit of curiosity and inquiry; and
- Are life-long learners.

To achieve this goal, the MSc(SLP) Program is committed to providing excellent and innovative educational opportunities for its students. We value critical thinking, respect, honesty, integrity, self-directed learning, and integrated academic and clinical education. Our program is deeply connected with the broader community of speech-language pathologists and other healthcare professionals, patients and their families, and other stakeholders. We value these community relationships and the perspectives of all members of the healthcare team.

PROGRAM EDUCATIONAL PHILOSOPHY

Self-Directed Learning

The philosophy of self-directed learning (SDL) recognizes that with some guidance, adult learners should be able to take responsibility for their own learning. The more active students are in determining their own needs and learning goals, the more effective their learning is likely to be. Within broad guidelines, MSc (SLP) students are expected to determine: 1) their own learning needs; 2) how they will best set and achieve objectives to address those needs; 3) how to select learning resources; and 4) whether their learning needs have been met.

An overall goal of self-directed learning is to exercise the student's capacity to think and discover during the process of gaining knowledge. The MSc (SLP) Program is designed to guide, stimulate, and challenge students in order to produce excellent clinician-scholars who will work to maximize life participation for all people with communication and swallowing disorders.

Although the MSc (SLP) Program emphasizes the importance of SDL, it is not a self-paced program. Attendance and participation in tutorials, clinical laboratories, and other courses is required. MSc (SLP) students must demonstrate satisfactory progress via results of self, peer, and faculty evaluations. While the MSc (SLP) Program is student-centred, it is the mutual role and responsibility of faculty and students to create an effective learning environment, select appropriate learning resources, effectively facilitate and support learning, and evaluate the learning process.

Problem-based learning (PBL)*

Learning based on problems represents an alternative to lecture-based, didactic instruction. In problem-based learning, students focus on a problem (or situation) within a small (7-8 student) tutorial group. Students bring to the examination of the problem all of their previous knowledge and experience as well as their ability to think rationally and critically.

As the student begins to ask questions, certain issues become well defined and require a search for additional information. After assembling the appropriate information, students synthesize a solution that includes a re-evaluation of their initial hypothesis (or hypotheses). The student learns how wrestling with any one problem opens up many other questions. Problem-based learning contributes to the student's motivation; enhances transfer, integration, and retention of information; and encourages curiosity and systematic thinking. Consistent with the PBL philosophy, we select students not only on academic qualifications but also on personal characteristics and abilities, such as problem-solving ability, self-appraisal ability, the ability to relate to others, motivation to study speech-language pathology, and learning styles that are suited for learning at McMaster.

The educational system at McMaster is not ideal for everyone. Some individuals may enjoy working in tutorials, with self-directed and problem-based learning. Others may need or enjoy a more structured environment, and thus prefer a more traditional lecture-based learning environment.

** Adapted from McMaster University School of Medicine*

Small-Group Learning

Small-group learning is a natural extension of problem-based learning. To maximize small-group learning, we believe it is important to bring students from various educational and work experience backgrounds together so that the heterogeneity of the group itself becomes a valuable learning resource. Transfer of knowledge is enhanced through the use of problems that encourage students to not only learn content, but also to develop strategies to recognize the 'analogy' or 'principle' that can then be transferred to new problems and contexts.

Interprofessional Education Activities

In order to provide effective patient care, speech-language pathologists must work in teams and in partnership with other health professions. As a student in the Faculty of Health Sciences, you are expected to achieve objectives in interprofessional education (IPE) during your education. Activities toward achieving IPE competencies are sometimes embedded in courses and clinical placements, and at other times are offered through School of Rehabilitation Science or Faculty of Health Science initiatives. The latter include events offered through the Program for Interprofessional Practice, Education and Research (PIPER). For more information on PIPER and the learning opportunities available, visit <http://piper.mcmaster.ca>. As a self-directed learner, it is expected that you continue to develop IPE competencies not only throughout your graduate program but beyond graduation as a practicing clinician.

PROGRAM LEARNING OUTCOMES

The following statements reflect the competencies with which students from the MSc program will graduate. The successful MSc graduate:

- Has a systematic understanding of human communication and its disorders across the lifespan, including key theoretical approaches and concepts that inform our understanding of human communication in health and disease.
- Understands the influence of health, economic, educational, social, and cultural factors on communication across the lifespan and in health and disease.
- Demonstrates knowledge of and critically evaluates published qualitative and quantitative research, and identifies gaps in knowledge and research methods to address those gaps.
- Applies knowledge, critical thinking, and problem solving skills to solve complex clinical problems.
- Engages in evidence-informed practice to provide efficient and effective client and patient care.
- Communicates effectively with patients, families, other health providers, community organization, and colleagues; as a leading member of a team, collaborator, advocate, and representative of the profession.
- Understands the limitations of his or her own knowledge and recognizes the value of other perspectives, methods, and disciplines.
- Is a self-directed learner and reflective practitioner: identifies areas for personal growth in knowledge and skills and develops plans to achieve that growth.
- Can work autonomously and collaboratively across practice settings. Is flexible and adaptable in changing healthcare contexts.
- Meets professional standards for integrity and ethical conduct.

LEARNING METHODS

Problem-Based Tutorials

Problem-Based Tutorials are central to the learning process. Students, in small groups, meet the course objectives by exploring a variety of health and professional problems likely to be encountered in practice. The focus is on problem-based learning to gain knowledge, and on clinical reasoning to apply and integrate knowledge within a relevant context. The tutor functions as a facilitator of learning rather than a disseminator of information. Tutorial size may vary from seven to eight students. Tutorial group membership is changed from unit to unit to maximize interaction among faculty and students.

Clinical Skills Labs

Clinical Skills Labs provide students with the opportunity to acquire the skills needed to develop and implement assessment and intervention plans for clients of all ages. Lab sessions complement the health problems encountered in problem-based tutorials and facilitate the integration of theory and practice. Lab instructors include the course coordinators and clinical experts drawn from the faculty and the community. Class discussion, demonstration of techniques, practice sessions, community experiences, observation of performance and feedback to students are some of the strategies used to help students develop competence in core Speech-Language Pathology skills.

Large Group Seminars

Large Group Seminars are most commonly used in the Foundational Knowledge Courses, Inquiry Seminars, and Research and Evidence-Based Practice Courses. Seminar sessions may include presentations by guest lecturers, small group activities, large group discussion, and student presentations.

Clinical Education

Students spend a total of 28-29 weeks in full-time clinical practice, with additional individual days possible for audiology placements. Clinical education courses take place in a variety of settings including in hospitals, schools, preschool speech and language programs, children's treatment centres, private clinics, home care, and other community organizations. During clinical placements, students practice under the supervision of clinical instructors, who are primarily Speech-Language Pathologists but may

also include other health care providers. All expenses incurred by the student while completing clinical placements are the responsibility of the student. Please refer to the Clinical Education Handbook.

Learning Resources

The educational approach used in the program depends heavily on the use of learning resources. Students will access learning resources in order to meet their individual learning needs and to enable them to meet the specific objectives of each curriculum unit and the overall program goals. Identifying learning needs and accessing learning resources is largely a self-directed activity.

Examples of resources are:

- Health Care Problems: Health care problems are the principal resource used to stimulate learning in the small group tutorial setting. They are designed to reflect the important health problems of individuals, groups, and communities served by speech-language pathologists, as well as broader professional issues. Health care problems are reviewed and revised annually by Unit Chairs with input from students, curriculum committees, community partners, and other content experts.
- Standardized Patients: Standardized patients are individuals who are trained to simulate a health care problem. They provide opportunities for students to learn and practice clinical skills such as interviewing, assessment, treatment, or to explore attitudes, values, and professional behaviour. Standardized patients are also trained to provide immediate and constructive feedback to students.
- Patients and Clients: Patients and clients are used as the primary resource for learning in the clinical education component of each unit. Under the supervision of a clinical instructor, students have the opportunity to integrate their knowledge, skills, and professional behaviours. Patients and clients also participate in Clinical Skills Lab sessions.
- Reference Resources: Consistent with the emphasis on self-directed learning, students are expected to consult a wide variety of reference resources to address their specific learning objectives. These may include but are not limited to:
 - Resource people, including faculty in the School of Rehabilitation Science, the Faculty of Health Sciences, and other Faculties of the university; and tutors, clinical instructors, expert clinicians, community health professionals, patients and families, and student peers. A resource person's main task is to help students find and critically appraise information for use in problem-solving.
 - Books, journals, and government documents, which are available through the Health Sciences Libraries at McMaster University.
 - Audio-visual materials that are available through the Health Sciences Libraries at McMaster University, online platforms (e.g., Master Clinician), and other sources
 - Online course materials available in Avenue 2 Learn as part of curricular units.
 - Software for word processing, desktop publishing, statistics and graphic packages, computer-assisted instruction, and literature searching.
 - Anatomy and pathology resources, which include both anatomical specimens (e.g., prosections, plastic models), and digital content (e.g., MacAnatomy, self-study modules).

STUDENT EVALUATION

Student performance is evaluated on a regular basis throughout the MSc (SLP) Program, using a variety of evaluation tools that are consistent with the basic principles of problem-based and self-directed learning.

The evaluation process can be formative or summative and as such, it provides valuable feedback to students to enhance their learning. Evaluations are also used to assure faculty, students, clients, and society that graduates possess the required knowledge, skills, and professional behaviours to function as competent professionals.

Evaluation presents a challenge for any curriculum. A curriculum based on problem-based, self-directed learning lends additional dimensions to this challenge. As no single evaluation method can assess all

domains of learning or competence, various methods must be used. The choice of the evaluation method or tool is based on educational value (e.g., formative or summative), learning objective domain (e.g., knowledge vs. skills), measurement instrument properties (e.g., reliability, validity, generalizability), and feasibility (e.g., time needed, resources required, costs).

Student evaluation methods and tools used in the MSc (SLP) Program include the following:

- Self- and peer-evaluations. Tutorial performance of the group as a whole and of each of its members (including the tutor) is evaluated on a regular basis throughout each unit. The final student grade is based on knowledge, use of learning resources, group participation and facilitation, critical appraisal skills, professional behaviours and evaluation skills (i.e., self-assessment, peer-assessment, and tutor evaluation).
- Written exams. Knowledge may be assessed using written exams that use a short-answer format, multiple choice questions (MCQs), or modified essay questions (MEQs). MEQs are designed to assess aspects of clinical reasoning and problem-solving using a paper problem as a stimulus. The MEQ presents the student with progressive amounts of information about a practice problem in a sequence predetermined by the examiner. At successive stages, the student responds to the information and is asked to make and explain his/her decisions.
- Papers. Written essays and other papers are used to evaluate knowledge, critical appraisal skills, critical thinking, analysis, and synthesis skills. Papers test the understanding of principles or relationships, foster independent thinking and learning, and develop and evaluate writing skills. Papers are assessed on content, organization, style, and mechanics.
- Direct Observation. Direct observation is used primarily to evaluate technical and behavioural skills. This type of practical examination might be used to evaluate interviewing skills, assessment techniques, or use of therapeutic interventions.
- Objective and Structured Clinical Examination (OSCE). The OSCE is an objective evaluation used to assess components of clinical competence. It has the potential for testing a wide range of knowledge and clinical skills, and can be utilized to evaluate a large number of students during one examination period. The OSCE can be used as a formative or summative measure of student performance and provides valuable feedback to faculty for the purpose of curriculum revision.
- The OSCE is structured in such a way as to sample student performance in a variety of areas and to make maximum use of the time available. Students rotate around a series of timed stations. There may be up to 10 stations of 5 or 10 minutes in duration. At each station, students are asked to perform a specific task such as taking a patient history; performing an assessment task; teaching, counselling, or advising a patient; writing a report; performing a treatment technique or other clinical procedure; or interpreting findings such as test results. Examiner stations, where an observer is asked to score a student's performance, usually entail interaction with a standardized patient. There also are marker stations, where a student is asked to answer written questions, record findings, or interpret patient data.
- OSCE evaluation criteria are determined in advance on the basis of course objectives and student learning activities. A standardized rating form is used for evaluation by the examiners. Safety and professionalism are included within the evaluative criteria.
- Presentations. Presentations are also used throughout the program. A health care professional must be able to articulate and defend an opinion or position, and, to present information and ideas in an organized and clear manner. To help the students develop these skills, individual and group presentations are used as evaluation components in most units.
- SMART (Specific, Measurable, Agreed Upon, Realistic, Time-Limited) Goals and Reflection Logs. These are used to evaluate student performance during clinical placement experiences and for remedial work, in order to reinforce the student's role as an active participant in the process of learning, rather than a passive recipient. In the professional preparation setting, SMART Goals and Reflection Logs allow the student to meet program objectives and also pursue individual objectives. The learning contract is a document comprised of SMART goals (Specific, Measurable, Achievable, Realistic, Timely) and is developed by the student and approved by a faculty member. The contract specifies what the student will learn, how learning will be accomplished and within what time frame, and what specific evaluation criteria will be used for

each objective. The learning contract reconciles the "imposed" requirements of the program with the learner's own personal goals and objectives. It enables the student to choose his or her own way of achieving the objectives and self-evaluate progress towards achieving them.

Please see the unit handbooks for the policy on late assignments and late/missed tests & exams (including OSCEs).

GRADING RUBRIC FOR WRITTEN WORK Descriptors / Grade	CRITICAL THINKING, IDEAS, CONNECTIONS and SELF-AWARENESS	CONTENT	ORGANIZATION and COHERENCE	INTEGRATION OF EVIDENCE / SOURCES	STYLE and MECHANICS
<p>Exceptional (A+) A superior performance (consistent and strong) evidenced by:</p> <ul style="list-style-type: none"> - A comprehensive, incisive grasp of subject matter; - An ability to make insightful, critical evaluation of information; - An exceptional capacity for original, creative and/or logical thinking; - An exceptional ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently; - An exceptional ability to analyze and solve difficult problems related to subject matter 	<p>Interesting, demonstrates sophistication of thought. Central ideas are clearly communicated; Demonstrates insight into complexity of issues, ideas and points of view Highly insightful; sees relationships of experiences to more general issues/ideas Highly perceptive deductions and inferences</p>	<p>Excels in responding to assignment Critical insight and freshness of thought in analyzing the issues Logical and analytical thought is clearly evident in assessment of the problem Clear and penetrating ideas Presents sound arguments for conclusions about the issue Intelligent and critical synthesis and integration of resources/evidence</p>	<p>Cogent, focused presentation of structured ideas Introduction engages the reader and the conclusion is thoughtfully presented Easy, ordered flow of ideas Uses a logical structure appropriate to purpose, assignment and ideas Sophisticated transitional sentences often develop one idea from the previous one or identify their logical relations - guides the reader through the chain of reasoning or progression of ideas</p>	<p>Clear evidence that sources are understood Critically evaluates sources, appropriately defines terms Uses evidence and sources appropriately and effectively Provides sufficient evidence and explanation to convince the reader of the arguments being made</p>	<p>Extensive and accurate vocabulary. Use of words is precise, efficient, and appropriate Sentences are varied and engaging, yet clearly structured and carefully focused, not long and rambling Sentence style fits paper's audience and purpose Mechanics of good writing are evident through skillful and creative use of form The format of the paper leads the reader easily through the writer's thinking of the problem Almost entirely free of spelling, punctuation, and grammatical errors</p>

Descriptors / Grade	CRITICAL THINKING, IDEAS, CONNECTIONS and SELF-AWARENESS	CONTENT	ORGANIZATION and COHERENCE	INTEGRATION OF EVIDENCE / SOURCES	STYLE and MECHANICS
<p style="text-align: center;">Very Good to Excellent (A- to A)</p> <p>A very good to excellent (strong) performance as evidenced by:</p> <ul style="list-style-type: none"> - A comprehensive grasp of subject matter; - An ability to make sound critical evaluation of information; - A very good to excellent capacity for original, creative and/or logical thinking; - A very good to excellent ability to organize, to analyze, to synthesize, to integrate ideas, and to express thoughts fluently; - A very good to excellent ability to analyze and solve difficult problems related to subject matter 	<p>Clearly states central ideas, but may have minor lapses in development</p> <p>Begins to acknowledge the complexity of ideas and the possibility of other points of view</p> <p>Makes more than a few observations, linking theory and reality</p> <p>Demonstrates ability to construct meaning from experiences</p> <p>In touch with self and offers examples of reactions and connects them to own values and emotions</p>	<p>Solid paper, responds appropriately to assignment</p> <p>Clear and interesting ideas about the issues</p> <p>Good grasp of the major aspects of the issues</p> <p>Careful presentation of evidence for arguments, accurately documented</p> <p>Examples presented bear some relevance to the topic at hand</p>	<p>Shows a logical progression of ideas and uses fairly sophisticated transitions; e.g., may move from least to more important idea</p> <p>Some logical links may be faulty, but each component clearly relates to central ideas</p> <p>Effective introduction and conclusion. Main argument is clear and logically developed</p> <p>Effective paragraphs. Good use of details. Occasional pursuit of the irrelevant, for its own sake</p>	<p>Shows careful reading of sources, but may not evaluate them critically</p> <p>Attempts to define terms, not always successfully</p> <p>Begins to offer reasons to support points, perhaps using varied kinds of evidence or sources</p> <p>Begins to interpret the evidence and explain connections between evidence and main ideas</p>	<p>A sound use of tasteful English. A respectable vocabulary</p> <p>Few, if any, lapses from appropriate grammar</p> <p>Sentences vary in kind and in length, with generally pleasing effect. Generally uses words accurately and effectively, but may sometimes be too general</p> <p>Sentences generally clear, well structured, and focused, though some may be awkward or ineffective</p> <p>Habitually and consistently correct spelling, punctuation, grammar, and the like</p> <p>Occasional errors, perhaps in exotic words, or forms, but not to extent of impeding understanding</p>

DESCRIPTORS / GRADE	CRITICAL THINKING, IDEAS, CONNECTIONS and SELF-AWARENESS	CONTENT	ORGANIZATION and COHERENCE	INTEGRATION OF EVIDENCE / SOURCES	STYLE and MECHANICS
<p>Satisfactory to Good (B to B+)</p> <p>A satisfactory to good performance as evidenced by:</p> <ul style="list-style-type: none"> - A substantial knowledge of subject matter; - A satisfactory to good understanding of the relevant issues and satisfactory to good familiarity with the relevant literature and technology; - A satisfactory to good capacity for logical thinking; - Some capacity for original and creative thinking; - A satisfactory to good ability to organize, to analyze, and to examine the subject matter in a critical and constructive manner; - A satisfactory to good ability to analyze and solve moderately difficult problems 	<p>Presents central ideas in general terms, often depending on platitudes or clichés</p> <p>Usually does not acknowledge other views</p> <p>Makes some observations, linking theory and reality</p> <p>Able to construct meaning from experiences, but does so inconsistently</p> <p>In touch with self, perhaps a little guardedly</p> <p>Offers some examples of reactions and connects them to own values and emotions, but does not do consistently</p>	<p>Adequate but weaker and less effective, responding less well to assignment</p> <p>Contains some interesting ideas, but at times, superficial ones, too</p> <p>Topic not completely handled, either because of poor understanding of the issue or from little effort at critically assessing it</p> <p>May use examples, but they may be obvious or not relevant</p> <p>Often has lapses in logic</p>	<p>May list ideas or arrange them randomly rather than using any evident logical structure</p> <p>May use transitions, but they are likely to be sequential, rather than logic-based</p> <p>While each paragraph may relate to central idea, logic is not always clear</p> <p>Paragraphs have topic sentences but may be overly general, and arrangement of sentences within paragraphs may lack coherence</p> <p>Introduction and conclusion tend to be dull or strained</p> <p>Heavy-handed organization, but main points are clear</p> <p>Adequate paragraph use</p>	<p>Shows some comprehension of sources, perhaps with lapses in understanding</p> <p>Terms, often depends on dictionary definitions</p> <p>Often uses generalizations to support points</p> <p>Often depends on unsupported opinion or personal experience, or assumes that evidence speaks for itself does not apply the evidence to the point being discussed (e.g. limited critical analysis)</p> <p>Documentation of resources used is present, but variety is limited</p>	<p>Basic sound use of the language. Limited vocabulary</p> <p>Some variation in sentences, but the style is largely repetitive</p> <p>Uses relatively vague and general words, may use some inappropriate language</p> <p>Sentence structure generally correct, but sentences may be wordy, unfocused, repetitive, or confusing</p> <p>Considerable grasp of principles, but some erratic applications may lead to faults in punctuation, spelling, grammar, and the like</p> <p>Usually contains several mechanical errors, which may temporarily confuse the reader, but not impede the overall understanding</p>

Descriptors / Grade	CRITICAL THINKING, IDEAS, CONNECTIONS and SELF-AWARENESS	CONTENT	ORGANIZATION and COHERENCE	INTEGRATION OF EVIDENCE / SOURCES	STYLE and MECHANICS
<p>Poor (B-)</p> <p>A generally weak performance:</p> <ul style="list-style-type: none"> - Some evidence of a basic grasp of the subject matter; - Some understanding of the basic issues; - Some familiarity with the relevant literature and techniques; - Some ability to develop solutions to moderately difficult problems related to the subject matter; - Some ability to examine the material in a critical and analytical manner 	<p>Does not have a clear central idea or does not respond appropriately to the assignment</p> <p>Ideas too vague or underdeveloped</p> <p>Describes a few examples where theory is played out in reality, but few links; or makes tentative new connections</p> <p>Offers limited and guarded glimpses of self-awareness</p> <p>May relate examples of reactions, but little self-reflection</p> <p>Limited evidence of ability to construct meaning from experiences</p> <p>Limited examples of reactions and connections to own values and emotions</p>	<p>Commonplace ideas about the issue</p> <p>Superficial arguments</p> <p>Lack of strong evidence of problem-solving process</p> <p>Some documentation of arguments, but critical analysis is limited</p> <p>Lapses in logic</p>	<p>Introduction and conclusion vague, weak, or cursory</p> <p>Argument is discernible, but inadequately developed</p> <p>Use of paragraphs and sentences is repetitive and the paper does not read smoothly</p> <p>May have random organization; lacking internal paragraph coherence and using few or inappropriate transitions</p> <p>Lacks topic sentences or main ideas, or may be too general or too specific to be effective. Paragraphs may not all relate to central ideas</p>	<p>Misunderstands or misinterprets sources</p> <p>Depends on clichés or over-generalizations for support</p> <p>Offers limited evidence or inappropriate evidence for nature of content</p> <p>May be personal narrative rather than evidence, or summary of sources rather than analysis of sources</p>	<p>Much misuse of words</p> <p>Weak grasp of appropriate use of the language</p> <p>Limited vocabulary. Little sentence variety. May be too vague and abstract, or very personal and specific</p> <p>Contains several awkward or grammatically incorrect sentences</p> <p>Sentence structure is simple or monotonous</p> <p>Weak grasp of fundamental principles of mechanics, leading to a high incidence of errors</p> <p>Usually contains either many mechanical errors or a few important errors that block the reader's understanding and ability to see connections between thoughts</p>

Descriptors / Grade	CRITICAL THINKING, IDEAS, CONNECTIONS and SELF-AWARENESS	CONTENT	ORGANIZATION and COHERENCE	INTEGRATION OF EVIDENCE / SOURCES	STYLE and MECHANICS
<p>Unacceptable (<B-)</p> <p>An unacceptable performance.</p> <ul style="list-style-type: none"> - Limited or no evidence of a basic grasp of the subject matter; - Limited or no understanding of the basic issues; - Limited or no familiarity with the relevant literature and techniques; - Limited or no ability to develop solutions to moderately difficult problems related to the subject matter; - Limited or no ability to examine the material in a critical and analytical manner 	<p>Does not respond to the assignment, lacks central ideas</p> <p>Extremely limited examples where theory is played out in reality and very few new connections</p> <p>Extremely limited glimpses of self-awareness and ability to reflect</p>	<p>Ideas trite or platitudinous</p> <p>Consists mainly of a summary of the issue</p> <p>No evidence of logical, problem-solving, or critical approach</p>	<p>Lack of continuity</p> <p>Neglect of introduction or conclusion</p> <p>No logical development</p> <p>Use of paragraphs is not clear</p> <p>Details irrelevant</p> <p>No appreciable organization; lacks appropriate / adequate transitions and coherence</p>	<p>Neglects to use sources where appropriate</p> <p>Uses irrelevant details or lacks supporting evidence entirely</p> <p>Extent and variety of resources are unduly limited</p> <p>Presents only insignificant evidence or none at all</p>	<p>Language use limited and often inappropriate</p> <p>Errors in common language</p> <p>Primer-type sentences, with impoverished vocabulary</p> <p>Usually contains many awkward sentences, misuses words, employs inappropriate language</p> <p>Gross failure, through carelessness or otherwise, to observe minimum standards of form (syntax, grammar, spelling, punctuation) and format</p> <p>Contains so many mechanical errors that it is impossible for the reader to follow the thinking from sentence to sentence</p>

REVIEW OF STUDENT PROGRESS

All students seeking to practice as a speech-language pathologist are expected to demonstrate clinical performance consistent with the minimum standards and clinical competencies of graduate study. This performance is expected to be developmental, reflecting increasing levels of clinical skill and independence over the two years of the program. Only those students whose clinical performance is consistent with such standards will be recommended to graduate.

Graduate student progress is overseen by McMaster faculty and registered therapists. Student progress includes progress in academic coursework, clinical skills, and professional attributes required of all students at graduation. Student progress in the program is regularly reviewed by a Program Academic Study Committee (PASC). The PASC is responsible for determining if a student may proceed to the next term of study.

The program may, in appropriate circumstances, defer or remove a student from a clinical practicum if the student fails to meet program requirements, including but not limited to requirements for professionalism, ethical behaviour, knowledge and skills, and communication. Failure to meet any requirement may result in restrictions or termination of a practicum placement or other program experience. In most cases termination of the clinical placement constitutes a failure, will result in the student receiving a grade of F in the course, and may result in dismissal from the program. It is program policy that all in-unit grades, including exams, will be posted as soon as the grading is complete.

REMEDATION (PASC)

GUIDELINE FOR REVIEW OF STUDENT PERFORMANCE AND PROGRESS MASTER OF SCIENCE PROGRAM IN SPEECH-LANGUAGE PATHOLOGY

Preamble: Progress of all students is reviewed by the Program Academic Study Committee (PASC). PASC meets at regular intervals with additional meeting scheduled as needed throughout the academic year. The PASC meets upon completion of each university-based term and at the end of each practicum to review students' academic progress, discuss any concerns (e.g. safety, course grades, professionalism), and determine if students are in a position to proceed in the program. PASC has the authority to:

- recommend informal remediation;
- require formal remediation through enrollment in a remediation course; and/or
- make recommendations for withdrawal. Remediation is intended to support students to address learning gaps in an effort to enable them to meet academic expectations.

The following are guidelines for Student Progression in the program:

- Students must achieve a grade of at least B- in each course in order to continue in the program.
- Students must receive a PASS in each Speech-Language Pathology Program Clinical Placement Course.
- Students must consistently demonstrate professional behaviours as per the FHS Professional Behaviour Code of Conduct for Learners.

The following actions may be considered by the PASC:

1. As part of its deliberations, the PASC will consider all relevant evidence, which includes, but is not limited to: each student's overall academic standing and progress in the program to date, documentation related to specific course components or evaluations, and documentation related to specific events or circumstances considered relevant to the review of a student's progress.
2. If a student passes a course but performs below expectations in any area, the PASC may recommend informal remediation.
3. If a student fails a course as determined by the PASC, he or she is assigned a grade of F for the course grade.
4. If a student fails a course, the PASC will then make a determination if the student is eligible for

formal remediation.

5. If the student is eligible for formal remediation as determined by the PASC, and if the student chooses to undertake the formal remediation, he or she will register for the appropriate remediation course. If the student successfully completes the remediation course, a grade of PASS will be assigned to that course. The student will then be eligible to continue in the program in good academic standing. If the student is unsuccessful in completing the remediation course, a grade of FAIL will be assigned, and PASC would make a recommendation for required withdrawal to the Associate Dean, Graduate Studies (Health Sciences).
6. In some situations, the PASC may determine that to support current or future student performance, it is necessary for information to be conveyed to a future evaluator as part of remediation.
7. If a student is not eligible for formal remediation as determined by the PASC, the PASC would make a recommendation for required withdrawal to the Associate Dean, Graduate Studies (Health Sciences). A student is not eligible for remediation if:
 - a) he or she fails two courses in one term (constitutes 2 failures); or
 - b) he or she has previously enrolled in a remediation course; or
 - c) the PASC determines that the deficits are significant and remediation would not result in the student meeting academic expectations.

All recommendations of the PASC concerning required withdrawals will be forwarded to the Associate Dean of Graduate Studies (Health Sciences) who makes a decision on the recommendation on behalf of the Graduate Admissions and Study Committee.

Typical Procedures:

1. If the PASC makes a recommendation for remediation or withdrawal, the student will be notified as soon as possible by the Assistant Dean.
2. If the recommendation is for informal remediation, the student will typically receive a letter from the Assistant Dean as Chair of the PASC.
3. If enrollment in a remediation course is required by the PASC, the Assistant Dean will typically request a meeting with the student to review the remediation process. The student will also receive a letter from the Assistant Dean as Chair of the PASC. NOTE: Students who undertake a remediation course may incur additional tuition and supplementary fees, and/or may be required to extend the duration of their studies within the program.
4. If the PASC makes a recommendation for required withdrawal, the Assistant Dean will typically request a meeting with the student to review the process. The student will also receive a letter from the Assistant Dean as Chair of the PASC. The student will submit their hospital identification/anatomy badge. The program will complete the Request for Change in a Graduate Student's Status form and forward this to the Associate Dean, Graduate Studies (Health Sciences), who will make a decision on behalf of the Graduate Admission and Study Committee.

Disclaimer: If there is a discrepancy between the electronic copy and the written copy held by the Guideline owner, the written copy prevails.

SECTION 5 – PROGRAM CURRICULUM OVERVIEW

The MSc(SLP) program is a course-based, full-time program that is 23 months in duration. The program consists of 5 units of study of required courses with no electives. Clinical placements follow each academic unit and vary in length from 2 weeks following Unit 1 to 8-9 weeks following Unit 5. Throughout the program, there will be a total of 28-29 full-time clinical practicum weeks, with the potential of additional individual days to obtain any needed audiology hours. There are 12 weeks of break throughout the program. The specific timing is subject to change and based on availability of clinical placements.

Throughout the program, there will be several academic, off-site field trips. Students are responsible for arranging their own transportation to and from field trip locations for all components of the courses. All field trips are mandatory. See individual course outlines for details.

Unit 1

SLP 712: Clinical Skills Lab - There are no off-site field trips in Unit 1 Clinical Skills Lab. However, there will be two, 1-hour visits to the McMaster Children's Centre.

SLP 714: Inquiry Seminar - There will be one, 2-hour meeting with a community volunteer who has a disability for Exploring Perspectives on Disability (EPOD).

Unit 2

SLP 722: Clinical Skills Lab - There will be three, 3-hour clinic visits in the Hamilton and Burlington area.

Unit 3

There are no planned field trips.

Unit 4

SLP 742: Clinical Skills Lab - There will be a trip to the Aphasia Institute in Toronto.

Unit 5

There are no planned field trips

UNIT 1: FUNDAMENTALS OF CLINICAL PRACTICE I: PRINCIPLES, KNOWLEDGE, AND SKILLS FOR CLINICAL PRACTICE

The aim of this unit is to provide students with foundational knowledge related to communication and communication disorders across the lifespan as well as basic skills in clinical practice. Principles include professional ethics, models of disability, interprofessional practice, and evidence-based practice. Knowledge outcomes include anatomy and physiology; psychology and linguistics in the context of communication across the lifespan; and basic constructs in articulation, phonology, and language development. Students develop a framework and basic skills for assessment, intervention, and professional conduct. Within Unit 1, students will complete simulated clinical practicum experiences and a 2-week off-site clinical practicum focused on observation.

UNIT 2: FUNDAMENTALS OF CLINICAL PRACTICE II: ROLES AND PRACTICE SETTINGS ACROSS THE LIFESPAN

The aim of this unit is to further develop students' foundational knowledge and skills and to introduce them to varied contexts of speech-language pathology practice. Knowledge and skill outcomes address professional performance as a direct service provider, consultant, collaborator and team member, manager and supervisor, and advocate. Settings include children's treatment centers, early childhood centers, schools, hospitals, rehabilitation centres, home healthcare, long-term care facilities, and private community based practice. Within Unit 2, students will continue to learn via simulated clinical experiences. Then, following the academic portion of Unit 2, students will complete a 6-week off-site clinical practicum focused on evidence-based practice. Knowledge outcomes include fundamentals of counseling, speech perception and acoustics, and instrumentation.

In Unit 2, students will obtain the first 10 of their 20 required clinical hours in Audiology, with the goal of

gaining an appreciation of audiology and aural rehabilitation. Hours will be obtained in part through development and implementation of free hearing screenings in the community, under the supervision of a licensed Audiologist. This experience will introduce students to hearing assessment and referral, and communication strategies for individuals with hearing loss and their communication partners. Knowledge outcomes include assessment and intervention related to hearing disorders, as well as strategies for prevention of hearing loss.

UNIT 3: CLINICAL PRACTICE WITH CHILDREN, YOUTH, & YOUNG ADULTS

The aim of this unit is to introduce students to developmental communication disorders. Knowledge outcomes relate to developmental articulation, phonological, and language disorders; speech and language impairments associated with cognitive disabilities, and voice and fluency disorders. Students also will build on knowledge outcomes related to hearing disorders, this time in the context of young children, and will explore genetic influences on communication. Key themes of Unit 3 are family-centered service, service delivery models for children, and transition to adulthood. Following Unit 3, students will complete a 6-week off-site clinical practicum that may be in a school, community, hospital, rehabilitation, or role-emerging setting

UNIT 4: CLINICAL PRACTICE WITH ADULTS AND OLDER ADULTS

This unit emphasizes assessment and treatment of individuals with acquired communication disorders, with a special emphasis on problems of older adults. Knowledge outcomes relate to acquired speech, language, and cognitive disorders, with a focus on neurologically based communication disorders; dysphagia in adults; normal aging of speech, hearing, and language. Students will build further on knowledge outcomes related to hearing disorders and aural rehabilitation, this time in contexts relevant to older adults. Following Unit 4, students will complete a 6-week off-site clinical practicum that may be in a community, hospital, rehabilitation, or role-emerging setting.

UNIT 5: COMPLEX PRACTICE AND PROFESSIONAL TRANSITION

The aim of this unit is to prepare students for the transition to professional practice. This advanced unit provides students with knowledge and skills to assume current and emergent health care roles in the community, with an emphasis on complex conditions across the lifespan. With respect to children, knowledge outcomes relate to populations with multiple or complex disabilities, advanced hearing technology (e.g., cochlear implants) and aural rehabilitation, augmentative and alternative communication, and pediatric dysphagia. With respect to adults, key themes of Unit 5 are client-centered service, end-of-life decisions, chronic health conditions and aging with a communication disorder, and communication partner training. Medical intervention and pharmacology will be considered for both children and adults. Following Unit 5, students will complete a 8-9-week off-site clinical practicum that may be in a community, hospital, rehabilitation, or role-emerging setting.

Figure 1 provides an overview of the curriculum.

SLP CURRICULUM MAP - CLASS OF 2022

YEAR 1

	SEP 2020	OCT 2020	NOV 2020	DEC 2020	JAN 2021	FEB 2021	MAR 2021	APR 2021	MAY 2021	JUN 2021	JUL 2021	AUG 2021
	7-11 14-18 21-25 28-2	5-9 12-16 19-23 26-30	2-6 9-13 16-20 23-27 30-4	7-11 14-18 21-25 28-1	4-8 11-15 18-22 25-29 1-5	8-12 15-19 22-26 1-5	8-12 15-19 22-26 29-2	5-9 12-16 19-23 26-30	3-7 10-14 17-21 24-28 31-4	7-11 14-18 21-25 28-2	5-9 12-16 19-23 26-30	2-6 9-13 16-20 23-27 30-3
O - W e e k	Academic - Unit 1 Core Principles, Knowledge & Skills 12 weeks (Sep 14 to Dec 4) Fall Term SLP711, SLP712, SLP713, SLP714			Clinical Placement 2 weeks (Dec 7-18) SLP712	Break 2 weeks (Dec 21 to Jan 1)	Academic - Unit 2 Roles & Practice Settings Across the Lifespan 12 weeks (Jan 4 to Mar 26) Winter Term SLP721, SLP722, SLP723, SLP724		Clinical Placement 6 weeks (Mar 29 to May 7) Winter Term SLP 725	Break May 10-14	Academic - Unit 3 Children, Youth & Young Adults 12 weeks (May 17 to Aug 6) Spring/Summer Term SLP731, SLP732, SLP733, SLP734		Break 5 weeks (Aug to Sep 10)

YEAR 2

	SEP 2021	OCT 2021	NOV 2021	DEC 2021	JAN 2022	FEB 2022	MAR 2022	APR 2022	MAY 2022	JUN 2022	JUL 2022	AUG 2022
	6-10 13-17 20-24 27-1	4-8 11-15 18-22 25-29	1-5 8-12 15-19 22-26 29-3	6-10 13-17 20-24 27-31	3-7 10-14 17-21 24-28 31-4	7-11 14-18 21-25 28-4	7-11 14-18 21-25 28-1	4-8 11-15 18-22 25-29	2-6 9-13 16-20 23-27 30-3	6-10 13-17 20-24 27-1	4-8 11-15 18-22 25-29	1-5
Break cont'd	Clinical Placement 6 weeks (Sep 13 to Oct 22) Fall Term SLP735	Academic - Unit 4 Adults & Older Adults 12 weeks (9 + 3) (Oct 25 to Dec 24 and Jan 10 to Jan 28) Fall Term SLP741, SLP742, SLP743A/B, SLP744		Break 2 weeks (Dec 27 to Jan 7)	Academic - Unit 4 cont'd Adults & Older Adults	Clinical Placement 6 weeks (Jan 31 to Mar 11) Winter Term SLP 745	Academic - Unit 5 Complex Practice & Professional Transition 10 weeks (6 + 4) (Mar 14 to Apr 22 and Jul 11 to Aug 5) Winter Term SLP743A/B, SLP751, SLP752, SLP754	Break 2 weeks (Apr 25 to May 6)	Clinical Placement 8-9 weeks (May 9 to Jul 1; flex week Jul 4 to July 8 to obtain additional clinical hours as needed) Spring/Summer Term SLP 755	Flex Week	Academic - Unit 5 cont'd Complex Practice & Professional Transition	Finished

SECTION 6 - PROGRAM COURSE DESCRIPTIONS

Course descriptions can be found in the School of Graduate Studies Graduate Calendar, found at: <http://academiccalendars.romcmaster.ca/index.php?catoid=20>

The instructor and university reserve the right to modify elements of the course during the term, excluding course objectives, method of evaluation, and grading scheme. The university may change the dates and deadlines for any or all courses due to any unforeseen circumstances such as building/university closures or instructor absences (e.g. fire alarms, snow storms, illness). If such modifications become necessary, reasonable notice and communication with the students will be given with explanation and the opportunity to comment on changes. It is the responsibility of the student to check their McMaster email and course website regularly during the term and to note any changes.

UNIT 1 COURSES

SLP711/Problem-based Tutorial I

This Unit I tutorial course will introduce students to fundamental knowledge related to communication and communication disorders across the lifespan as well as basic skills in clinical practice. Psychosocial, cultural, and ethical influences on clinical practice will be addressed.

SLP712/Clinical Skills Lab I

The Unit I Clinical Skills course develops basic skills for observing and recording speech and language, communicating with individuals with communication disorders, and professional conduct. Clinical reasoning and technical skill development are integrated with relevant research evidence and theory. The course includes exposure to typically developing children and adults as well as simulated clinical interactions. The final two weeks of the course is spent offsite completing an observational placement.

SLP713/Foundational Knowledge I

This first-year course will address foundational knowledge for the speech-language pathologist. Topics include anatomy and physiology; neuroanatomy and neurophysiology; development of articulation, phonology, and language; and psychology and linguistics in the context of communication.

SLP714/Inquiry Seminar I

This course will provide a forum for introducing topics related to the theory and principles that underlie clinical practice in speech-language pathology, including theories of language acquisition and speech production; theories and models of disability; exploring the perspectives of people with disabilities; interprofessional practice; and evidence-based practice

UNIT 2 COURSES

SLP721/Problem-based Tutorial II

This Unit II tutorial course will further develop students' fundamental knowledge and skills and provide an overview of roles and contexts relevant to speech-language pathology practice in diverse settings and across the lifespan.

SLP722/Clinical Skills Lab II

This Unit II clinical skills course further develops skills in screening and assessment, including hearing screening and hearing conservation, and introduces skills in outcome evaluation and reporting. Simulated clinical experiences will provide a context for learning fundamentals of counseling. Clinical reasoning and technical skill development are integrated with relevant research evidence and theory.

SLP723/Foundational Knowledge II

This Unit II course will address foundational knowledge related to speech perception and acoustics, and instrumentation related to assessment and intervention.

SLP724/Inquiry Seminar II

This course will provide a forum for discussing topics related to the theory and principles underlying clinical practice in speech-language pathology across settings and populations, including models and frameworks for assessment and intervention; principles of measurement related to conducting clinical assessments; fundamental knowledge related to working with individuals who have hearing disorders; perspectives of individuals with communication disorders and their families/caretakers; professional ethics; and evidence-based practice.

SLP725/Clinical Practice I

Students will complete a 6-week full-time clinical practicum experience focused on evidence-based practice. Clinical settings may include hospitals, school boards, children's treatment centres, preschool services, home care, and private practices.

UNIT 3 COURSES

SLP731/Problem-based Tutorial III

This Unit III tutorial course will introduce students to screening, assessment, and treatment issues related to developmental communication disorders, including speech, language, and fluency disorders in children and adolescents.

SLP732/Clinical Skills Lab III

This Unit III clinical skills course will provide students with the clinical problem-solving skills to assess and treat children with communication disorders, including developing skills needed to differentiate language differences associated with multilingualism from language disorders associated with underlying impairments. Students will use appropriate assessment tools and clinical processes to set goals for intervention. Clinical reasoning and technical skill development are integrated with relevant research evidence and theory.

SLP733/Foundational Knowledge III

This first-year course will address foundational knowledge for the speech-language pathologist. Topics will build on those addressed in 713 and 723 and will focus on communication disorders in children and intermediate neuroanatomy and neurophysiology.

SLP734/Inquiry Seminar III

This course will provide a forum for considering topics related to the clinical practice with children, including family-centered service, service delivery models, and transition to adulthood.

SLP735/Clinical Practice II

Students will complete a 6-week full-time clinical practicum experience focused on evidence-based practice. Clinical settings may include hospitals, school boards, children's treatment centres, preschool services, home care, and private practices.

UNIT 4 COURSES

SLP741/Problem-based Tutorial IV

This Unit IV tutorial course will introduce students to screening, assessment, and treatment issues related to adults, with a special emphasis on acquired speech, language, voice, swallowing, or hearing disorders, and aging with a communication disorder.

SLP742/Clinical Skills Lab IV

This Unit IV clinical skills course will provide students with opportunities to develop advanced clinical reasoning skills necessary to assess and treat individuals with acquired communication or swallowing disorders, with a focus on neurological disorders and differentiating communication disorders from normal aging. Students will use appropriate assessment tools and clinical processes to set goals for intervention. Clinical reasoning and technical skill development are integrated with relevant research evidence and theory.

SLP743A/Evidence-based Practice and Clinical Research

This 2nd year course over two terms will enable students to critically analyze the literature and collaborate on a research project relevant to speech-language pathology. During the first term of this course, students will be provided with information on study design, data acquisition, and data analysis. They will acquire skills in searching the literature, analyzing and interpreting data, presenting results and making clinical decisions that incorporate best evidence, patient values and clinical expertise. During the second term of the course, students will work in teams to participate in an ongoing research project under the supervision of a faculty member or clinician.

SLP744/Foundational Knowledge IV This course will provide students with the theoretical and conceptual knowledge they need for application in all other speech-language pathology courses, including Problem based Tutorials, Clinical Skills Labs, and Practica. This is a required course for all

students in the MSc (SLP) program.

SLP745/Clinical Practice III

Students will complete a 6-week clinical practicum experience in a community, hospital, rehabilitation, or role-emerging setting.

UNIT 5 COURSES

SLP743B/Evidence-based Practice and Clinical Research

This 2nd year course over two terms will enable students to critically analyze the literature and collaborate on a research project relevant to speech-language pathology. During the first term of this course, students will be provided with information on study design, data acquisition, and data analysis. They will acquire skills in searching the literature, analyzing and interpreting data, presenting results and making clinical decisions that incorporate best evidence, patient values and clinical expertise. During the second term of the course, students will work in teams to participate in an ongoing research project under the supervision of a faculty member or clinician.

SLP751/Problem-based Tutorial V

This Unit V tutorial course will provide students the opportunity to explore clinical practice with clients of all ages who have complex health conditions for which multiple systems and a range of health care issues are likely to be involved. Knowledge outcomes include frameworks for medical intervention, and foundations in pharmacology. Students are expected to use both previous and new knowledge when planning assessment and intervention.

SLP752/Clinical Skills Lab V

This Unit V clinical laboratory course will provide students with advanced skills that will enable them to assume traditional and emerging roles in clinical practice. Students will acquire the skills needed to assess and manage clients with complex health conditions that involve multiple systems and a range of health care issues, including skills related to Augmentative and Alternative Communication, advanced hearing technology, aural rehabilitation, assessment and treatment of swallowing in children with complex medical conditions, and assessment and treatment of children with resonance disorders.

SLP754/Foundational Knowledge V

. In this advanced course in the final Unit of study, students are integrating and applying knowledge about communication and swallowing disorders across the lifespan and in complex populations and practice settings they will encounter as professionals. This course is in Unit V of the curriculum and is a required course for all students in the MSc(SLP) program

SLP755/Clinical Practice IV

Students will complete an 8-9-week clinical practicum experience in a community, hospital, rehabilitation, or role-emerging setting.

SECTION 7 – FINANCIAL INFORMATION

STUDENT FINANCIAL AID AND SCHOLARSHIP OFFICE

The McMaster Student Financial Aid and Scholarships Office provides services and supports to all students, relating to OSAP, bursaries, and drop in counselling.

Student Financial Aid and Scholarships Gilmour Hall, Room 120

E-mail: awards@mcmaster.ca Phone: (905) 525-9140 ext. 24319

<http://sfas.mcmaster.ca/>

SECTION 8 – STUDENT SERVICES AND RESOURCES

DENTAL/DRUG/HEALTH PLAN

http://studentcare.ca/rte/en/McMasterUniversity_Home

FHS STUDENT FEDERATION

<https://fhs.mcmaster.ca/hsgsf/>

<https://gsamcmaster.org/mandate/>

HUMAN RIGHTS AND EQUITY SERVICES

<http://www.hres.mcmaster.ca/>

INDIGENOUS STUDENTS HEALTH SCIENCES OFFICE

<https://ishs.mcmaster.ca/>

INTERNATIONAL STUDENT SERVICES

<https://iss.mcmaster.ca/>

LIBRARY RESOURCES

<http://library.mcmaster.ca/>

OFF-CAMPUS RESOURCE CENTRE

<http://macoffcampus.mcmaster.ca/>

OMBUDS OFFICE

<http://www.mcmaster.ca/ombuds/>

OHIP

<https://www.ontario.ca/page/apply-ohip-and-get-health-card#section-2>

OSLA

<https://www.osla.on.ca/>

STUDENT ACCESSIBILITY SERVICES

<https://sas.mcmaster.ca/>

STUDENT SUCCESS CENTRE

<https://studentsuccess.mcmaster.ca/>

STUDENT WELLNESS CENTRE

<https://wellness.mcmaster.ca/>

UHIP

<https://iss.mcmaster.ca/studentlife/healthcare/>

UNIVERSITY TECHNOLOGY SERVICES (UTS)

<https://www.mcmaster.ca/uts/index.html>

SECTION 9 – FIRE/EMERGENCY

IAHS FIRE PROCEDURES

In the event that you are directed to leave the IAHS due to fire, please leave immediately by the nearest exit, and make your way across the street in front of the IAHS Building on the grass beside JHE (South side), or to the back of IAHS close to rear parking lot. Please do not stand directly in front of IAHS because it blocks the fire route.

HEALTH SCIENCE CENTRE FIRE PROCEDURES

When the Alarm System is activated:

- Building occupants are alerted by bells that a possible fire emergency exists
- The location of the fire is identified automatically and the Fire Department is notified.
- Smoke and fire separation doors close automatically
- Magnetic locking devices on doors release
- Air handling systems shut down to help control smoke movement
- Elevators stop functioning

The fire alarm system is a TWO stage alarm.

STAGE 1 = approximately 20 bells/minute.

This is the Fire Emergency Alert signal.

Along with the alarm will be an overhead page, announcing the location of the fire CODE RED ZONE/AREA. Some areas may not have overhead paging. Overhead page is heard in elevator lobbies in the Purple and Blue Quadrants.

STAGE 2 = a short rapid bell sequence, pause, short rapid bell sequence, pause etc. This is the Code Green – Emergency Evacuation signal. Along with the alarm bells, an overhead page is heard (elevator lobbies – Purple and Blue) announcing,

“CODE GREEN – STANDBY” OR
“CODE GREEN IN-EFFECT”

To gain emergency code information it will require that a member of the area staff is immediately dispatched to the closest elevator lobby, either purple or blue, to listen for the overhead paged information.

FHS EVACUATION PLAN

If you are a Faculty of Health Sciences staff or student and there is clear and present danger – fire and smoke threaten or you hear the second stage alarm CODE GREEN IN-EFFECT, EVACUATE VERTICALLY from the building, using the closest safe stairwell down and out of the building. Meet at your group’s previously designated location outside the building.

Areas to avoid are: The Hospital Main Entrance Ramp, Ewart Angus Center and the Shipping and Receiving Areas

SECURITY FOR IAHS:

If you are alone in the building and wish to be escorted to your car, contact security. Please note that this service is available after the Student Walk Home Attendant Team finishes for the evening.

- **Student Walk Home Attendant Team (SWHAT) ext. 27500**
SWHAT is a student run volunteer organization dedicated to improving personal safety on campus. Volunteer teams (one male & one female) will walk anywhere within a 30-minute radius from campus or take the bus with students traveling to downtown Hamilton
- **McMaster Security Services ext. 88**
McMaster Security Services are sworn Peace Officers - appointed under the authority of the Ontario Police Services Act. Their appointments give them the powers of a Peace Officer and enable them to enforce the Criminal Code of Canada, Federal and Provincial statutes and Municipal by-laws on the University Campus when on foot, on a bike, and in a car.
- **Red Assistance Poles (Emergency Stations)**
Poles are located throughout campus. Push the button on Red Assistance phones for security assistance.
- **Emergency Siren Alert System (Lockdown Procedures)**
To hear what the siren sounds like, please visit:
http://security.mcmaster.ca/campus_emergencies.html

If you are directly involved, or upon receipt of notification of a lockdown AND if exiting the building is not possible or safe, the following actions are recommended:

- Go to the nearest room or office
- Close and lock the door if possible. Barricade with available furniture if possible
- Cover the door windows. Turn off the lights
- Keep quiet and act as if no one is in the room
- DO NOT open the door (emergency personnel will have a key)
- Notify campus security (if possible) - Give the dispatcher the following information:
 - Your name
 - Your location (be as specific as possible)
 - Number of shooters (if known)
 - Identification or description of shooter
 - Number of persons involved
 - Your location
- A volunteer in the group should record names of all persons present
- Wait for Police or Security to assist you out of the building or provide further instructions

EMERGENCY FIRST RESPONSE TEAM (EFRT) EXT. 88

EFRT is a volunteer organization, on call 24 hours a day, 7 days a week during the school year. They respond to any medical emergency on campus in a team of 3 responders, with an impressive response time of 1-2 minutes. Trained in both the Red Cross Emergency First Responder and Toronto Ambulance's International Trauma Life Support courses, these responders come equipped with oxygen, an automated external defibrillator (AED), and EpiPens.

SECURITY TIPS IN HEALTH SCIENCES CENTRE:

- Always wear your identification; ID must be visible at all times.
- Report all suspicious persons or activity to Security immediately (ext.76444) or HSC Tip line (905) 524-0732.
- Please challenge all visitors or unknown persons without ID, if safe to do so, and have a sense of ownership of the building; by simply acknowledging the presence of a "would-be criminal" – he/she/they will probably leave the area.
- Be a good witness by being observant and make note of physical characteristics of suspicious persons
- If you would like to be accompanied by Security to your vehicle, call them (ext.76444)
- Please report all facility defects (i.e., broken windows, doors, etc.) to Security (ext.76444) and Engineering Services (ext.75501).

STUDENT EXPECTATIONS WHILE ATTENDING VIRTUAL COURSES

Students attending virtual courses are encouraged to develop a plan in case of emergency or other distress. Students should be aware that instructors will not know the physical location of a student. The plan should include but is not limited to the following;

- Know the location of the nearest exit in case of fire or the need to evacuate
- Ensure that a first aid kit is available for incidents or injuries which may require first aid
- Prepare for medical emergencies by having a cell phone available or an individual who can provide emergency assistance; ensure that this individual is aware of the student's location
- Individuals off campus with immediate safety concerns should call 911
- Individuals on campus (i.e. living in residence) should call McMaster Security at 905-522-4135

The University is not responsible for the availability of cell phones, first aid kits or any other items as part of a student emergency plan. Students will be responsible for all necessary supports as part of their individual plan.

McMaster Resources

- The McMaster Student Wellness Centre has both on-site and virtual services available. They provide a range of counselling options, medical services and wellness programs.
<https://wellness.mcmaster.ca/>
- Student Wellness Centre Crisis Supports: <https://wellness.mcmaster.ca/crisis-support/>
- 24/7 Resources
- Good2Talk is a free, confidential helpline providing professional counselling and information and referrals for mental health, addictions and well-being to post-secondary students in Ontario, 24/7/365. **1-866-925-5454 or dial 211 and ask to be connected to Good2Talk.**

Empower Me (Graduate Students)

24/7 accessible counselling services to empower you to thrive, crisis support, mental health and well-being services - 1-844-741-6389

For Instructors:

Should someone visually appear to be in distress and require immediate assistance:

- Call 911 (either yourself or direct someone else on the call to do this)
- Encourage the individual in distress to stay on the call with you until help arrives
- Ask them for their current location/address, phone number
- Ask them what is wrong and provide this information to first responders
- Ask participants not involved in providing support to disconnect from the call

For non-urgent matters – students can be referred to the Student Wellness Centre or their healthcare practitioner.

For information on how to support a student in distress:

<https://wellness.mcmaster.ca/resources/#tab-content-helping-a-student-in-distress>

SECTION 10 – POLICIES & PROCEDURES

ABSENCES

http://academiccalendars.romcmaster.ca/content.php?catoid=20&navoid=3572&hl=%22absence%22&returnto=search#2-5-7_leaves_of_absence

Guideline for Leave of Absence for a Graduate Student who is a new parent in the MSc SLP Program – see Appendix A

Guideline for Requesting/Returning from a Leave of Absence in the MSc SLP Program – See Appendix B

ACADEMIC & CLINICAL ADVISING

The Assistant Dean serves as student academic advisor, and the DCE serves as clinical student advisor. Students are encouraged to contact instructors as a first step for advice and to resolve any issues, and then the appropriate program advisor (Assistant Dean or DCE) as appropriate. The Program Handbook includes a link to the McMaster Student Appeal Process, to guide students in lodging and hearing of their complaints.

ACADEMIC INTEGRITY POLICY

<http://www.mcmaster.ca/policy/Students-AcademicStudies/AcademicIntegrity.pdf>

ACADEMIC REGULATIONS

<https://academiccalendars.romcmaster.ca/index.php>

Students in the MSc (SLP) Program, in addition to meeting the academic regulations of the School of Graduate Studies, must follow their specific program regulations.

Registration in the MSc (SLP) Program implies acceptance on the part of the student of the objectives of that program and the method by which progress towards those objectives is measured.

COPYRIGHT POLICY AT MCMASTER UNIVERSITY

<http://www.copyright.mcmaster.ca/> or consult the copyright officer at copyright@mcmaster.ca

DISCRIMINATION, HARASSMENT & SEXUAL HARASSMENT PREVENTION AND RESPONSE POLICY:

http://www.mcmaster.ca/policy/General/HR/Discrimination_Harassment_Sexual_Harassment-Prevention&Response.pdf

GRADING SYSTEM

Grades in graduate courses are reported as letter grades. However, instructors may record grades for individual components of the course either as letter or numerical grades. The averaging of letter grades assigned to individual components of a course must be done by using the McMaster 12-point scale, as follows: A+ = 12, A = 11, A- = 10, B+ = 9, B = 8, B- = 7, C+ = 6, C = 5, C- = 4, D+ = 3, D = 2, D- = 1, F = 0. Further, all .5 marks should be rounded up. The passing grades for courses at the graduate level are A+, A, A-, B+, B, and B-. Graduate students enrolled in undergraduate courses will be subject to the grading scale as courses in the graduate level. The minimum passing grade is a B-. Final grades are normally converted to letter grades after the numerical grade is determined.

Graduate Student Grading Scale:

Grade	Points	Equivalent Percentages	Pass/Fail
A+	12	90 – 100	P+

A	11	85 – 89	P
A-	10	80 – 84	
B+	9	77 – 79	
B	8	73 – 76	
B-	7	70 – 72	
F	0	69 and below	F

See

https://academiccalendars.romcmaster.ca/content.php?catoid=37&navoid=7553#2.6.1_Averaging_of_Letter_Grades

GRADUATE COURSE LOAD

All courses are required. No exemptions or substitutions will be granted. All course work toward the MSc (SLP) degree must be completed as McMaster University courses. All courses within each unit must be taken concurrently.

GRADUATE EXAMINATIONS POLICY

<https://secretariat.mcmaster.ca/app/uploads/Graduate-Examinations-Policy.pdf>

All exams, including OSCEs, will be retained by the program for a period of 1 year, and will not be returned to the student. All material submitted on A2L will remain accessible to the student until the completion of the program.

<https://srs-mcmaster.ca/slp-year-one-requirements/>

IDENTIFICATION BADGES AND PASS CARDS

- **University Student Identification Cards**

Fully registered students (financially registered) will receive a University Student Photo Identification (ID) card with ID number and bar code.

The expiry date on all ID cards is prior to the date of convocation. For any information regarding ID cards including loss of ID cards, please contact the Graduate Studies Office:

School of Graduate Studies, Reception: (905) 525-9140 ext. 23679, GH 212

- **Hospital Id Badges/Anatomy Pass Card**

Students are issued a hospital photo-ID badge, which also serves as the Anatomy Lab pass card, at the beginning of the program.

The fee for obtaining this card is \$15 and is non-refundable.

The fee to replace the card is \$50 and is non-refundable. To obtain a replacement card, please contact the OT/SLP Admissions Coordinator.

The badges are to be worn when in Hamilton Health Science hospitals and when in other health care facilities for clinical placement or educational purposes.

Students must have their identification badge readily available at all times. Under no circumstances should you allow others to use your identification badge. Failure to produce identification upon request may lead to removal from the building by security staff.

In the event that a student withdraws from the program, the hospital identification card must be returned to the Program.

PROFESSIONAL BEHAVIOUR GUIDELINES

McMaster is committed to an inclusive and respectful community. These principles and expectations **include in-person experiences and also** online activities **such as** electronic chat groups, video calls, and other learning platforms. If you are concerned about **your in-person or** virtual classroom experiences, the [Equity and Inclusion Office \(EIO\)](#) is available to advise and assist students who may be experiencing any equity, accessibility, inclusion, harassment, discrimination, or sexual violence concerns. You can reach the EIO at equity@mcmaster.ca. Thank you for joining us in ensuring that all of our McMaster communities are spaces where no one feels excluded and everyone is able to enjoy learning together.

<http://www.mcmaster.ca/policy/Students-AcademicStudies/Professional%20Code-Graduate.pdf>

RELIGIOUS HOLIDAYS

<http://www.mcmaster.ca/policy/Students-AcademicStudies/AcademicAccommodation-Observances.pdf>

Students who require an academic accommodation as a result of a religious holiday should contact the appropriate Course Coordinator, Program Coordinator or Assistant Dean as soon as possible to arrange accommodations for classes, assignments, tests and examinations that might be affected by a religious holiday. Please be advised that documentation may be required.

REPORTING INJURIES

<http://reportit.mcmaster.ca/>

RESCHEDULING OF EXAMINATIONS

In the event a student is ill, or needs to reschedule an examination due to extenuating circumstances, students may email the Course Coordinator and copy the Assistant Dean and Program Coordinator. In all instances, students will be required to submit appropriate documentation e.g., If a student is ill, medical documentation will be submitted. Students will also be required to sign off on the Confirmation of Academic Integrity form, confirming that they have/will not speak to their classmates about any relevant examination material. The program also reserves the right to provide the student with a different examination.

STORM PROCEDURES

http://www.mcmaster.ca/opr/html/opr/reports_documents/main/reports_documents/storm.html

STUDENT ACCESSIBILITY SERVICES (SAS)

<https://sas.mcmaster.ca/>

STUDENT APPEALS PROCESS

<http://www.mcmaster.ca/policy/Students-AcademicStudies/StudentAppeal.pdf>