



THE HERBERT H. &
GRACE A. DOW COLLEGE OF
**HEALTH
PROFESSIONS**
CENTRAL MICHIGAN UNIVERSITY

Department of Communication Sciences and Disorders

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DEPARTMENT OF COMMUNICATION SCIENCES AND DISORDERS THE HERBERT H. AND GRACE A. DOW COLLEGE OF HEALTH PROFESSIONS

Core Functions

The Communication Sciences and Disorders (CSD), Speech-Language Pathology (SLP), and Audiology (AuD) programs at Central Michigan University are designed to prepare graduates for clinical careers as speech-language pathologists or audiologists through rigorous academic training and intense clinical preparation. The requirements for graduation meet or exceed the standards set forth by the American Speech-Language-Hearing Association (ASHA), which is the accrediting agency for both the academic and clinical components of the program. The core functions set forth by the programs establish the essential qualities that each graduate of the program must possess and are necessary for Michigan licensure and ASHA certification in their respective professions.

Core Functions for Future Practitioners in Audiology and Speech-Language Pathology

This document identifies the core functions that individuals of each program typically are expected to employ in didactic and clinical experiences to acquire the knowledge and demonstrate the competencies that will lead to graduation and successful entry into professional practice. This document replaces the SLP and AuD Technical Standards and Essential Functions documents. The document is designed to specify core functions and to be inclusive of differences in behavioral and learning preferences associated with race, ethnicity, culture, sexual orientation, gender identity, language, and sensory, physical, or neurological status.

This document may be used to:

- *inform individuals* about the core functions associated with the professions of audiology and speech-language pathology
- *initiate discussions* regarding student success
- *empower students* to make informed choices regarding their pursuit of professions in audiology and speech-language pathology
- *facilitate strategies* to achieve student success
- assist programs and students in *identifying and advocating* for appropriate resources and accommodations
- *advance* the professions of audiology and speech-language pathology through the lens of justice, diversity, equity, and inclusion

This document must not be used:

- to *discriminate* against individuals for any reason
- as a measure of *acceptance or denial* into an educational program
- as a tool to *presumptively judge* individuals' potential for success
- as a *stand-alone* student assessment or intervention plan
- to *dismiss* students from a program

The term “core functions” refers to behavioral or cognitive functions that an individual must be able to perform with or without accommodation necessary to ensure equitable access. In our programs, communication, interpersonal, culturally responsiveness, motor, sensory, and intellectual/cognitive skills are core functions. How stated core functions are demonstrated is specifically not addressed, recognizing that there are multiple ways an individual can successfully meet the demands of clinical education and practice. The determination of possible accommodation exemplified in this document varies from student to student based on many factors not covered in its scope. The degree to which accommodation is determined is under the governance of the Americans with Disabilities Act, Section 504 of the Rehabilitation Act of 1973. The student is responsible for initiating contact with Student Disability Services. It is the responsibility of the institution and the student to work together to identify possible services and reasonable accommodation. In cases where students have off-campus clinical placements, it is the student’s responsibility to contact Human Resources of other appropriate offices at the agency to identify possible accommodation.

1. Communication

Statements in this section acknowledge that audiologists and speech-language pathologists must communicate in a way that is understood by their clients/patients and others. It is recognized that linguistic, paralinguistic, stylistic, and pragmatic variations are part of every culture, and accent, dialects, idiolects, and communication styles can differ from general American English expectations. Communication may occur in different modalities depending on the joint needs of involved parties and may be supported through various accommodations as deemed reasonable and appropriate to client/patient needs. Some examples of these accommodations include augmentative and alternative communication (AAC) devices, written displays, voice amplification, attendant-supported communication, oral translators, assistive listening devices, sign interpreters, and other non-verbal communication modes.

Throughout the program, students are expected to:

- Employ oral, written, auditory, and non-verbal communication at a level sufficient to meet academic and clinical competencies.
- Adapt communication style to effectively interact with colleagues, clients, patients, caregivers, and stakeholders of diverse backgrounds in various modes such as in person, over the phone, and in electronic format.
- Take personal responsibility for communicating to cultivate safe, respectful, and successful participation in academic and clinical activities.

2. Interpersonal

This section acknowledges that audiologists and speech-language pathologists must interact with a diverse community of individuals in a safe, ethical, and supportive way. It is recognized that personal interaction styles may vary by individual and cultures. Interactions with peers, instructors, clients, caregivers, families, and staff must honor such diversity.

Throughout the program, students are expected to:

- Display honesty, compassion, respect, and concern for others during all academic and clinical interactions.
- Adhere to all aspects of relevant professional [codes of ethics](#), [Michigan Bureau of Professional Licensing](#), [CMU University Policies and Guidelines](#), [HIPAA](#), [FERPA privacy/confidentiality](#), and information management policies.
- Take personal responsibility for receiving and implementing feedback in academic and clinical activities.

- Take personal responsibility for maintaining physical and mental health at a level that ensures safe, respectful, and successful participation in academic and clinical activities.

3. Cultural Responsiveness

Cultural responsiveness involves “understanding and respecting the unique cultural and linguistic differences that clients bring to the clinical interaction” (ASHA, 2017) and includes “incorporating knowledge of and sensitivity to cultural and linguistic differences into clinical and educational practices.” Statements in this section acknowledge that audiologists and speech-language pathologists have an obligation to practice in a manner responsive to individuals from different cultures, linguistic communities, social identities, beliefs, values, and worldviews. This includes people representing a variety of abilities, ages, cultures, dialects, disabilities, ethnicities, genders, gender identities or expressions, languages, national/regional origins, races, religions, sexes, sexual orientations, socioeconomic statuses, and lived experiences.

Throughout the program, students are expected to:

- Engage in ongoing learning about cultures and belief systems different from one's own and the impacts of these on healthcare and educational disparities to foster effective provision of services.
- Demonstrate the application of culturally responsive evidence-based decisions to guide clinical practice. **Evidence-based decisions** involve “integrating the best available research with clinical expertise in the context of patient characteristics, culture, and preferences” (*Evidence- Based Practice in Psychology*, n.d.).
- Take personal responsibility for using culturally responsive strategies at a level that ensures safe, respectful, and successful participation in academic and clinical activities.

4. Motor

Statements in this section acknowledge that clinical practice by audiologists and speech- language pathologists involve a variety of tasks that require manipulation of items and environments. It is recognized that this may be accomplished through a variety of means, including, but not limited to, independent motor movement, assistive technology, attendant support, or other accommodations/modifications as deemed reasonable to offer and appropriate to client/patient needs.

Throughout the program, students are expected to:

- Engage in physical activities at a level required to accurately implement classroom and clinical responsibilities (e.g., manipulating testing and therapeutic equipment and technology, client/patient equipment, and practice management technology) while retaining the integrity of the academic and clinical processes.
- Respond in a manner that ensures the safety of clients and others.
- Take personal responsibility for performing physical responsibilities at a level that ensures safe, respectful, and successful participation in academic and clinical activities.

5. Sensory

Statements in this section acknowledge that audiologists and speech-language pathologists use sensory information, including auditory, visual, tactile, and olfactory senses to guide clinical practice. Such information may be accessed through various means, including direct sensory perception and/or adaptive strategies. Some examples of these strategies include visual translation displays, text readers, assistive listening devices, and perceptual descriptions by clinical assistants as deemed reasonable to offer and appropriate to client/patient needs.

Throughout the program, students are expected to:

- Access sensory information to differentiate functional and disordered auditory, oral, written, and visual communication.
- Access sensory information to correctly differentiate functional and disordered movement and characteristics of anatomical structures, and diagnostic imaging findings.
- Access sensory information to correctly differentiate and discriminate text, numbers, tables, and graphs associated with diagnostic instruments and tests.
- Access sensory information to correctly manage diagnostic and (re)habilitative equipment, materials, and procedures.
- Take personal responsibility for accessing sensory information at a level that ensures safe, respectful, and successful participation in academic and clinical activities.

6. Intellectual/Cognitive

Statements in this section acknowledge that audiologists and speech-language pathologists must engage in sustained attention, critical thinking, reasoning, and comprehension and retention of information required in clinical practice. Such skills may be fostered through various means, including assistive technology and/or accommodation/modifications as deemed reasonable and appropriate to client/patient needs. Audiologists and speech-language pathologists must use intellectual/cognitive skills in navigating interactions with their clinical and academic teams.

Throughout the program, students are expected to:

- Attend to, retain, analyze, synthesize, evaluate, and apply auditory, written/visual, and oral information at a level sufficient to meet curricular and clinical competencies.
- Employ informed critical thinking and ethical reasoning to formulate a differential diagnosis and create, implement, and adjust evaluation and treatment plans as appropriate for the client/patient's needs.
- Utilize informed critical thinking and ethical reasoning to fulfill academic requirements.
- Engage in ongoing self-reflection and evaluation of one's existing knowledge and skills.
- Critically examine and make evidence-based decisions in alignment with best practices for client/patient care. **Evidence-based decisions** involve “integrating the best available research with clinical expertise in the context of patient characteristics, culture, and preferences” (*Evidence- Based Practice in Psychology*, n.d.).
- Take personal responsibility for receiving and implementing feedback in academic and clinical activities.
- Take personal responsibility for intellectual/cognitive skills at a level that ensures safe, respectful, and successful participation in academic and clinical activities.

References

American Speech-Language-Hearing Association. (2017). Cultural competence in professional service delivery [Position statement]. Available from <https://www.asha.org/policy/ps2017-00346/>

Evidence-Based Practice in Psychology. (n.d.). <https://www.apa.org/practice/resources/evidence>

This document should be considered a living document and therefore reviewed by CSD at regular intervals to ensure that current terminology, practice, and ideas are reflected.



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CORE FUNCTIONS FOR FUTURE PRACTITIONERS IN AUDIOLOGY
AND SPEECH-LANGUAGE PATHOLOGY**

Signature page for uploading to CALIPSO

Please sign one of the following

I certify that I have read and understand the **CORE FUNCTIONS FOR FUTURE PRACTITIONERS IN AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY**, and I believe to the best of my knowledge that I meet each of these standards without accommodation.

Signature of Applicant

Date

Print Name

Alternative statement for students requesting accommodation

I certify that I have read and understand the **CORE FUNCTIONS FOR FUTURE PRACTITIONERS IN AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY**, and I believe to the best of my knowledge that I can meet each of these standards with certain accommodation. I will contact the Student Disability Office and appropriate department representative(s) to determine what reasonable accommodation may be available.

Signature of Applicant

Date

Print Name