

IU Speech & Language Clinic

CLINIC OBSERVATION INSTRUCTIONS

I. General Introduction

Observation is one of the significant learning experiences of students. The American Speech Language and Hearing Association (ASHA) requires that students complete a minimum of 25 hours of observation before or during their graduate program. This requirement may be met in a variety of ways. How to document your hours varies, depending on whether the clinical observation takes place inside or outside the Speech, Language and Hearing Sciences (SLHS) Department.

SLHS Department

- Students observing in clinic MUST FIRST complete the IU HIPAA e-training module https://expand.iu.edu/browse/e-training/courses/hipaa
- Students may obtain observation hours through the Speech and Language Clinic at IU. The Clinic is located at the Regional Academic Health Center Health Sciences Building located at 2631 E. Discovery Parkway.
- Please note that classroom videos can no longer be used to fulfill ASHA requirements.
- To count towards your 25 observation hours, EVERY observation you complete within the SPHS Department must be recorded on a separate <u>Guided Observation</u> form that can be downloaded from the departmental website.
- Also required and available for download on the website is a <u>Guided Observation</u>
 <u>Summary Form</u> that provides a concise outline of your observations within the
 Department. Further instructions for how to keep track of your observation hours are explained in Section III.

Outside the Department

- Students may also obtain observation hours outside of the department in a variety of settings including schools, clinics, nursing homes, and hospitals, both in Bloomington and in other communities.
- Observations at these outside sites should be under the direction of ASHA-certified clinicians or students supervised by ASHA-certified clinicians.
- Students are responsible for coordinating their own outside observations and for keeping records of those observations. Given the volume of students, please DO NOT contact Bloomington Hospital for observation opportunities.
- Please note that IU faculty will no longer sign off on hours obtained outside the Department. However, a formal letter from an ASHA certified SLP at the outside site on the institution's letterhead can be obtained and submitted to your future graduate

program to count towards fulfilling ASHA requirements. Note that the ASHA certified SLP must include their ASHA number as well as signature.

II. Professional Etiquette

Students are responsible for conducting themselves in a manner consistent with that of working professionals while engaged in observations both in the SLHS clinic and in the community. These guidelines are made to relieve the clients and their parents from undue stress and concern that occurs naturally when one is being observed by a group of strangers. These guidelines also protect the rights of the clients to receive the best service in a confidential manner.

Courtesy

- TURN OFF CELL PHONES. Anyone using a cell phone during an observation session will be asked to leave the observation room immediately.
- DO NOT EAT OR DRINK in the observation room.
- OFFER YOUR SEAT to parents and supervisors when present and position yourself so that everyone can watch the session. The supervisor will be wearing a name badge. Other adults will be family members or caregivers.
- BE DISCREET by exercising self-restraint in speech and conduct. Some clients get nervous if they know they are being watched.

Confidentiality

- Care must be taken at all times to protect the clients' privacy and insure confidentiality.
 Observations must not be discussed outside the clinic/hospital/school.
- **Do not discuss the client with a parent or caregiver**. You may talk privately with the student clinician or supervisor before or after the session never in the presence of the client or anyone else.

Professional Dress

Jeans, shorts, tank tops, miniskirts, leggings and athletic wear (including sneakers and yoga pants) are not appropriate attire.

Questions regarding the above stated policy should be discussed with the Speech/Language Clinic Director. If in doubt, don't wear it.

III. Observation Forms

It is important for you to remember that YOU ARE ACCOUNTABLE FOR KEEPING TRACK OF YOUR OBSERVATION HOURS. The Department does NOT keep a copy of undergraduate observation hours.

Record Keeping

- There are two forms to use for keeping track of all observation hours that take place in the IU Speech and Language Clinic. Both forms can be downloaded from the departmental website.
- All forms are to be kept by you as evidence of completing the observations. You are strongly advised to keep a folder with this information and, if needed, to make copies. The Department will NOT keep independent records of your observation hours.

(A) Guided Observation Form

- This form is filled out by you after EVERY observation.
- Record your name, date and time of observation, percentage of time observed, circle the area of disorder observed, the client's initials and the name of the supervisor.
- Indicate whether you agree with the statements and write an explanation for your choice in the space provided.
- Obtain the signature of the graduate clinician in charge to verify your presence.

B) Guided Observation Summary Form

- This form is signed by the faculty supervisor after you transfer the information from your Guided Observation Form to this summary sheet.
- Record the date, age/disorder area and total hours on the summary sheet after each observation.
- Obtain the signature and ASHA certification number from the faculty supervisor immediately following the session or you may turn it in along with the Guided Observation Form to the front office. You may pick up the signed form in 3-5 days. You will need to show the supervisor a Guided Observation Form record for each entry.
- Although it may not be possible to locate the faculty supervisor immediately following every observation, do not wait until the end of the semester to obtain the necessary signatures.

	(Use one per observation)
Observ	ver Name (print): Observation Date:
Observ	vation Time:Total Observation Hours (e.g., .5, 1.0, 1.5):
Client	Initials/Age: Supervisor Name:
	er Area(s) (circle all appropriate): Articulation Receptive/Expressive Language Fluency Hearing ive Aspects Social Aspects Communication Modalities (AAC/sign)_Voice/Resonance Swallowing
1.	The goals and objectives were clearly identifiable A: (circle one) agree disagree Explanation (required):
2.	The therapy activities were developmentally appropriate A: (circle one) agree disagree Explanation (required):
3.	The clinician collected data using a reliable and valid method A: (circle one) agree disagree Explanation (required):
4.	The clinician adapted to unexpected changes during the <u>assessment. A:</u> (circle one) agree disagre Explanation (required):
5.	The clinician provided treatment that was fluid and well-paced A: (circle <u>onel_agree</u> disagree Explanation (required):
6.	The clinician exhibited an empathetic (caring, compassionate) attitude? A: (circle one) agree disagn Explanation (required);

			EARING CLINIC	- GUIDED OBSERVATIO	N
	100	ild = 0-17	(A) Adult = 18-	older	700
1 Articulation		tive/Expressive Language	T a Communic	iro)	
4 Hearing		5 Cognitive Aspects 8 Voice/Resonance		6 Social Aspects 9 Swallowing	
7 Fluency					
		ons from the Guided Obse			
Date of Observation	Age/ Supervisor Instructor Sign Disorder Area (see above)		ASHA II		Total Hours Observed (e.g., .5, 1.0, 1.25)

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