



Welcome to Sweet Pea's Therapy! We are so excited to have you visit our clinic for your fieldwork. We have enclosed the following information to help ensure a successful visit. Please sign, complete, and bring with you on your first day.

Observation Behavior

- Please be on time (10 minutes early) for your scheduled observation
- Please do not use cell phones or other technology during your observation time – all devices are to be on silent in a designated area while at the clinic.
- Observation means watching – when observing therapy treatments, be courteous and interact with the therapist or patient when you are prompted. There will be time after the session for questions to be answered.

Dress Code

Your personal appearance and hygiene is a reflection on the company's character. We ask that you dress appropriately and professionally. Sweet Pea's enacts a "business casual" dress code of employees and students. Most of our staff here wears black or khaki pants without holes or rips. If you choose to wear a skirt or a dress, it must be of an appropriate length as you could be conducting therapy at a floor level. Professional shoes should be worn. The following: Shorts, hats, headbands, rubber thong flip-flops, athletic pants or yoga pants, and strapless tops are **not allowed**. When choosing attire, please remember that you are in a professional position at a medical facility. If you have any questions on what is appropriate, please feel free to ask your supervisor.

Attendance

Attendance and punctuality is very important here at our clinic as we need to be respectful of our patient's time. In the case of a sudden illness or emergency, please call 563-441-3000 and leave a

detailed message with a call back number to ensure we are able to contact you to reschedule observation hours (if you would like). Please park on the curbside of 56th Street, next to our building, in the event of snow during the winters you may park in the stalls facing 56th Street so all parking in the front of the building is available to our patients. Hours of operation are:

Monday: 8:30-5:00
Tuesday: 8:30-1:00
Wednesday: 8:30-5:00
Thursday: 8:30-5:00
Friday: 9:00-1:00

Patient Privacy

One of our main goals here at Sweet Pea's is to act in the best manner for our patients. The Health Insurance Portability and Accountability Act (HIPAA) protect individuals' identifiable health information held by covered entities. The Privacy Rule regulates the uses and disclosures that a covered entity or business associate can disclose. You will be privy to sensitive information that could affect patients and their families here in our community. Please be respectful, considerate, and confidential as **NONE** of the patient's information is to be shared (this includes the fact that the patient even attends therapy here at Sweet Pea's). Patient charts, as well as the information they contain, are never to leave the facility of Sweet Pea's Therapy. You will be personally responsible for any fines resulting in the violation of the HIPAA agreement which can reach up to \$30,000. *Please sign the enclosed privacy/HIPAA notice and bring it with you to your observation.*

Social Media

In regards to social media, we ask that you do not request to follow/friend any of the patients that attend Sweet Pea's. If a family initiates the contact, you can accept/deny at your own discretion. We maintain professional relationships with the families at Sweet Pea's and would not wish to put this in jeopardy due to social media. Also, we ask that you do not take to social media to discuss your day at Sweet Pea's. Whether it be good or bad, we would not like to see any postings talking about patients and the various experiences you may encounter here.

Documentation of Hours Observed

At the end of your observation for the day please have your therapist sign the documentation in which you need. *It is your responsibility to ensure that this document is kept in your possession as we will not maintain a record of your observation hours.*

We look forward to having you complete your student work at our facility. We will do our best to provide you with any information and training to assist you with your schooling in this profession.

Becky Drish, M.S., CCC-SLP
Speech-Language Pathologist
Owner

I have read and understand the expectation and guidelines expected during my observation at Sweet Pea's Therapy. At any time, these guidelines are not followed you may be asked to discontinue any future observation hours at this site.

Student:

X

Date:

X

College:

X

Anticipated Specialty:

X

Sweet Pea's Therapy HIPAA Confidentiality Agreement

Students will have limited access to confidential information, both written and oral, in the course of their employment and job responsibilities. It is imperative that this information is not disclosed to any unauthorized individuals to maintain the integrity of the patient information. An unauthorized individual would be any person that is not currently an employee of the practice and/or any information.

I have read and understood the practice's policies with regards to privacy and security of personal health information. I agree to maintain confidentiality of all information obtained in the course of my employment/observation including but not limited to financial, technical, or propriety information of the organization and personal and sensitive information regarding patients, employees, and vendors. I understand that inappropriate disclosure or release of patient information can result in fines up to but not limited to \$30,000.

Printed Name:

X

Signature:

X

Date:

X

Name:

OFFICE USE ONLY

- | | | |
|---|------------|-----------|
| 1. Observation paperwork completed prior to arriving to office on first day | YES | NO |
| 2. Arrived 10 minutes early | YES | NO |
| 3. Dressed appropriately | YES | NO |
| 4. Courteous and professional of clients and staff | YES | NO |
| 5. Engaged with therapists during rotation | YES | NO |

Additional Comments: _____

