

Alternative Options to Video Recording

If your Field Experience site prohibits video recording of client sessions you will need to take the following steps and choose one of the options.

Steps

1. Inform your Field Experience Instructor of the video recording situation at your site
2. Complete and sign the *Alternative to Video Recording Request Form*.
3. Turn in the completed and signed form to the Field Experience Coordinator.
4. Wait for approval – The Field Experience Coordinator and Site Developer will review the request form, confirm with your On-Site Supervisor, and then will notify you of the decision.
5. Once you have received approval, you will need to check out an AGS issued video camera from the Field Experience Coordinator.

Alternative Options

- A. Audio Record and Transcribe a Therapy Session
 - Use an AGS issued video camera to audio record a client session.
 - Transcribe verbatim what each person said in the session (e.g. client, intern, therapist, etc...).
 - De-identify confidential information discussed in session (e.g. client's name, place of employment, family members' names, date of birth, etc...) .
 - Highlight and identify within the transcription specific sections (e.g. joining, interventions, Adlerian terms, etc.) as directed by the instructor
 - Type a written description of what was visually occurring in session (e.g. client's and other participants' in session body language, facial expressions, posturing, reactions, etc...).
 - Present audio recording, transcribed session, and written description in class.
- B. Video Record and Transcribe a Mock Therapy Session
 - Use an AGS issued video camera.
 - Find participants for the mock therapy session.
 - Current AGS students are preferred.
 - Other participants (non-AGS students) must complete and sign a *Consent for Video Recording and Direct Observation* form. The form is given to your instructor.
 - Transcribe verbatim what each person said in the session (e.g. client, intern, therapist, etc...).
 - Highlight and identify within the transcription specific sections (e.g. joining, interventions, Adlerian terms, etc.) as directed by the instructor
 - Type a written description of what was visually occurring in session (e.g. client's and other participants' in session body language, facial expressions, posturing, reactions, etc...)
 - Present video recording, transcribed mock therapy session, and written description in class.

Alternative to Video Recording Request Form

Student Information

Student Name: _____

Student Phone #: _____ Student Email: _____

Term: Summer Fall Winter Spring Year: _____

Current Field Experience Class: 948 949

Site Information

Name of Site: _____

Site Address: _____
Street Address City State Zip Code

On-Site Supervisor Name: _____

On-Site Supervisor Phone #: _____ Email: _____

Alternative Options

Please indicate which alternative option you are requesting.

A. Audio Record and Transcribe a Therapy Session

B. Video Record and Transcribe a Mock Therapy Session

Reason for request: _____

Signature of Student: _____ Date: _____

Signature of On-Site Supervisor: _____ Date: _____

Signature of Field Experience Instructor: _____ Date: _____

This request is: Approved OR Not Approved _____

Signature of Field Experience Coordinator: _____ Date: _____