Semester Therapy Summary Rubric and Grading Criteria

Supervisors will consider these elements when reviewing and grading the STS.

1.	Ger	neral Elements (ensures that the STS is written in a professional, logical, relevant,
	an	d concise but comprehensive manner)
		Double spaced submission of new STS content; initial STP content is single spaced
		Update client's age (pediatric) and number of total sessions to date (all)-highlight
		Carefully edit for format (IPA, underline test names, abbreviations, spelling, grammar,

- Avoid passive voice and use parallel verb tenses within sentences
- Avoid sentences void of meaningful content-keep content and observations clinically remarkable.
- Follow Clinic Manual format and example

etc.)

- □ Demonstrate correct use of punctuation (colons, semi colons, commas, i.e., versus, e.g., etc.)
- Use clinical and professional terminology throughout
- STS represents best and most professional documentation to clients or professional community
- 2. Specific Elements (ensures the STS reflects the client's progress and current status in a professionally written and relevant summary)

A. Results (written in past tense)

For EACH Terminal Objective: □ First sentence reflects whether or not objective was met ("the goal was/was

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not met", "was partially met", "almost met", "not addressed".
Brief statement about why this goal was necessary and/or appropriate for the
client. Do not simply restate the goal.
Provide baseline description of skill at start of therapy; add supportive
information, as needed.
Discuss relevant facilitative techniques, significant modifications, instruction,
procedures, cues and activities that were beneficial for client.
Discuss relevant information re: therapy progression or TO modification
Provide any information which would be helpful for the next clinician (activities,
behavior management, etc.)

Additi

ditional Objectives:		
	Note any new objectives added since STP was approved	
	Rationale for additional T.O.	
	Discuss status toward objective and report relevant information, noted	
	above	
	Create separate heading for Family/Caregiver Training, to include at a	
	minimum, training of specific Home Program activities, client and/or caregive	
	response, as well as homework, additional trainings, etc.	

□ End section final data statement and relevant supportive information

B. Present Status (written in present tense) paragraph #1 includes full name, age, diagnosis, brief reference to previous assessment information, and relevant history (e.g. special day class, recent change in program, medical status) □ First paragraph also includes a functional communication description: a specific, clear and typical description of client as a communicator without reference to any test or scores-this functional description does not include progress toward goals. Provide brief examples of speech or language, if helpful. Briefly reference all domains, even if to state WNL. paragraph #2 to reflect a few sentences noting client's progress toward each goal this term and overall response to treatment, but no data. Discuss any problems or interfering factors, including positive or negative (e.g., absences, attention, response to token reinforcement, works well in group) Statement which notes, as appropriate, family/caregiver participation and impact on progress paragraph #3 as a final paragraph to include remaining history, noting additional services as applicable, ending with number of terms at CSUEB Speech Clinic. Avoid redundancy. □ Follows logically with no new information □ The **Present Status** should provide an adequate summary to stand alone **C. Recommendations** (written in present tense) Opening sentence addresses continuation of TX, individual or group, frequency & duration, including semester & year □ CSUEB therapy recommendations presented in prioritized, numerical list form

- <u>CSUEB therapy recommendations</u> presented in prioritized, numerical list form as specific verb statements (e.g., continue, improve, decrease, eliminate, assess, reinforce, monitor, reassess & treat)
- □ Any recommendation must be supported as an areas of need in the Present Status section, either in the Functional Description or the Progress paragraphs
- Additional, non-therapy recommendations (e.g., school district assessment, social groups in the community) should be presented as a separate list or in narrative form
- $\hfill\Box$ Include need for further assessment, in this clinic or elsewhere, if appropriate
- □ Indicate amount of parental/family involvement, if necessary.

Grading reference:

**A range (Report is consistent, well developed. and generally reflects independence in its development. It is logical, sequential, and professionally written, including clearly presented data and supportive details/descriptions, with few corrections required. Strong analysis with appropriate and specific recommendations)

**B range (Report requires further development and a moderate amount of correction to content, grammar and/or format. Data reporting is weak, insufficient or unclear; analyses are limited and/or incomplete; recommendations may be unclear. Some essential elements are weak or missing).

**C range (Report is inadequate. It requires a significant amount of feedback with weaknesses in any of the above areas. Data reporting is weak, unclear, or inaccurate; analyses are weak and/or incomplete; recommendations may be unclear, unjustified or inappropriate. Essential elements are weak or missing).