

PORTFOLIO CHECKLIST

Name: _____ Evaluator: _____ Date: _____

SECTION	YES	NO	COMMENTS
COVER LETTER			
SECTION ONE: THE SRP <ul style="list-style-type: none"> ○ Vita ○ SRP Application ○ Date SRP approved: _____ ○ Annual Reports 			
SECTION TWO: CONTINUING EDUCATION <ul style="list-style-type: none"> ○ Documentation of 100 hours within past 10 years ○ ASHA approved CEUs ○ Variety of educational opportunities 			
SECTION THREE: OBSERVATIONS <ul style="list-style-type: none"> ○ Observations started on _____ ○ Observations ended on _____ ○ Total number of hours _____ (must have 25 hours) ○ Letters of verification of observation hours 			
SECTION FOUR: DIRECT CLINICAL ACTIVITY <ul style="list-style-type: none"> ○ Documentation of at least 75 hours of client contact ○ Clinical activity log sheet ○ Clinical practice across the age span 			
SECTION FIVE: MENTOR CONTACTS <ul style="list-style-type: none"> ○ Documentation of ongoing mentor contacts ○ Mentor contact log sheet 			
SECTION SIX: CASE STUDY ONE- PRESCHOOL <ul style="list-style-type: none"> ○ Release of Information ○ Summary introducing case ○ Evaluation report (across ABCs components) ○ Treatment plan to include rationales for selection of goals across ABCs components ○ Client progress report documenting change over time in ABC components. ○ Indicate how you modified treatment based on your learning experience ○ What would you do differently based on your learning experience 			
SECTION SEVEN: CASE STUDY TWO- SCHOOL-AGE <ul style="list-style-type: none"> ○ Release of Information ○ Summary introducing case ○ Evaluation report (across ABCs components) ○ Treatment plan to include rationales for selection of goals across ABCs components ○ Client progress report documenting change over time in ABC components. 			

<ul style="list-style-type: none"> ○ Indicate how you modified treatment based on your learning experience ○ What would you do differently based on your learning experience 			
<p>SECTION EIGHT: CASE STUDY THREE- ADOLESCENT/ADULT</p> <ul style="list-style-type: none"> ○ Release of Information ○ Summary report introducing case ○ Evaluation report (across ABCs components) ○ Treatment plan to include rationales for selection of goals across ABCs components ○ Client progress report documenting change over time in ABC components. ○ Indicate how you modified treatment based on your learning experience ○ What would you do differently based on your learning experience 			
<p>SECTION NINE: MENTOR REPORT</p> <ul style="list-style-type: none"> ○ Letter from mentor supporting readiness for specialization 			
<p>SECTION TEN: VIDEO GUIDE</p> <ul style="list-style-type: none"> ○ 5 video clips ○ Each clip cannot be longer than 3 minutes ○ Clips clearly identified ○ Complete video clip guide including information in each section (clip number, type of treatment, goal of clip, rationale for selection of goal, evaluation of client performance, and clinician self-evaluation) ○ Must have one clip for each of the following treatment components: <ul style="list-style-type: none"> • Establishing a baseline in affective, behavioral, and/or cognitive components • Teaching the client a particular skill • Practicing and reinforcing a skill • Planning transfer/maintenance with the client • Engaging in counseling with the family to include parents, significant others, siblings, or peers 			
<p>SECTION ELEVEN: EVALUATION OF LEARNING EXPERIENCE</p> <ul style="list-style-type: none"> ○ Clinician summary of what he/she learned through the specialization process ○ Must include information on each component of the specialization process: <ul style="list-style-type: none"> • Continuing education • Observations • Mentoring contacts 			

<p>SECTION TWELVE: APPLICATION OF THE GUIDELINES TO PRACTICE TO LEARNING EXPERIENCE</p> <ul style="list-style-type: none"> ○ Summary of how clinician applied the ASHA preferred practice guidelines during the specialization process and current treatment practices 			
<p>SECTION THIRTEEN: MENTOR VERIFICATION DOCUMENT</p> <ul style="list-style-type: none"> ○ Signed document verifying mentor's review and approval of the portfolio 			

*REVISED 8/26/09