



# American Board of Fluency and Fluency Disorders

## Guidelines for the Fluency Portfolio Submission Process

### *Introduction*

As an active candidate for BCS-F, you will be submitting a Fluency Portfolio to the American Board of Fluency and Fluency Disorders. The Fluency Portfolio provides the ABFFD with information regarding your knowledge and understanding of fluency disorders, and your ability to demonstrate specialist-level skills through your case presentations.

This Fluency Portfolio Guide will assist you in preparing the necessary documents for your portfolio. When you are ready to submit your completed Fluency Portfolio, please contact the ABFFD at [info@stutteringspecialists.org](mailto:info@stutteringspecialists.org) to obtain information regarding submission of your portfolio. If you have any questions regarding your portfolio, please contact the ABFFD and we will be happy to assist you.

**Note:** *If any portion of the Fluency Portfolio is incomplete, missing, or lacking HIPPA compliance, it will be returned to you for re submission, which may result in a delay of the board review.*

## ***The Fluency Portfolio***

Each component of the Fluency Portfolio references the Major Domains and Competencies required for BCS-F. At the end of this guide, the Fluency Portfolio Review evaluation indicators utilized by the ABFFD is provided for your reference. For more information regarding the Major Domains and Competencies, please see the Standards and Procedures Manual on our website, *stutteringspecialists.org*.

### ***Components of the Fluency Portfolio***

The submitted Fluency Portfolio includes *two major components*: the (a) **Statement of Philosophy** and three (b) **Case Presentations**.

#### **Component 1: Statement of Philosophy**

Each candidate will provide his or her statement of philosophy regarding assessment and treatment of individuals with fluency disorders. This statement provides the ABFFD with your personal theoretical perspectives and philosophy regarding the evaluation and treatment of fluency disorders, considering your training, personal study, interaction with professionals and/or mentors in the field, and clinical experience. The Statement of Philosophy may be a *maximum* of three pages, 12pt font, single-spaced. Proper *citation* of a minimum of 5 references is required.

#### **Component 2: Case Presentations**

The second component of your Fluency Portfolio contains *three* Case Presentations, *one each* from within the following age ranges:

- Preschool (ages 2-6)
- School Age (ages 7-15)
- Adolescent-Adult (16-Adult)

Each Case Presentation contains *three parts* and is presented in the following manner:

### **Part 1. Authorization for Release of Information**

An Authorization for Release of Information form must be provided for *each* case study presented in the portfolio. In addition, all information provided in the case documentation and video recordings must be in a format that meets with HIPPA Compliance Standards.

### **Part 2. Case Presentation**

Each case is presented to the ABFFD by utilizing the **Case Presentation Form**. This form allows you to present each of your cases including all necessary information pertaining to the Domains and Competencies for BCS-F. All cases *must be presented utilizing this form*.

### **Part 3. Video Clips**

For all three cases, 3 video recorded examples of 5-7 minutes in length each are required. The purpose of these clips is for the reviewers of your portfolio to observe your ability to engage in the therapeutic process, responding to the needs of the client at a particular moment in time. Thus, both the clinician and the client must be in the video frame.

## **CASE SELECTION GUIDELINES**

The following guidelines apply to each case selected for the Fluency Portfolio:

1. Each case must be either evaluated or re-evaluated by you. If the case received an initial evaluation from another individual, a summary of the findings of the initial evaluation must be included in the Case Presentation as well as a summary of the re-evaluation you performed.
2. Length of Time in treatment: While there is no requirement regarding length of treatment time, it is suggested you select cases where the time in treatment was sufficient for you to demonstrate the progression of treatment from the time of evaluation, providing *clear evidence of your ability to provide relevant treatment and modify treatment over time*. A total of three summaries of client progress is required to be included for each case.



## American Board of Fluency and Fluency Disorders

### **Portfolio Submission: Authorization for Release of Information**

Date: \_\_\_\_\_

I, (name of client or guardian for client)

\_\_\_\_\_ authorize (speech-language pathologist) \_\_\_\_\_ to release evaluation and treatment information/reports and three 5-7 minute video clips for all three cases to the American Board of Fluency and Fluency Disorders. The purpose for this request is to provide a sample of clinical work as part of a submitted Portfolio for the process of obtaining Board Certification in Fluency and Fluency Disorders. I understand that my (or my child's name) will not appear on these reports; only initials are used in order to maintain confidentiality.

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of parent/guardian & relationship to client**



**American Board of Fluency  
and Fluency Disorders**

**Portfolio Submission:  
Statement of Philosophy**

<b>Name of Candidate:</b>	<b>Date:</b>
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## Fluency Portfolio Reviewer Evaluation Indicators

The following areas are those that will be rated by each reviewer of your portfolio. The number/letters in parentheses indicate which domains and competencies are being rated:

### Rating of Philosophy Essay:

- Statement of philosophy shows depth of knowledge in fluency & fluency disorders. (1a, 1b, 1c)
- Points supported with evidence from the literature. (1a, 1b, 1c)
- Demonstrates effective written communication skills. (1c)

### CASE STUDIES

- Provides rationale regarding the need for an evaluation or re-evaluation, based on screening or initial intake information. (4b, 4c, 4d)
- Conducts a multidimensional differential assessment, including all aspects of communication, providing clear rationale for assessment measures used. (4d, 4e)
- Interprets informal and formal measures to determine the overall life impact of the problem and the client's strengths, coping strategies, resources and supports. (4f)
- Bases diagnosis on assessment results. (4g)
- Develops a differential treatment plan based on the assessment results. (4g, 4h)
- Develops a differential treatment plan based on client and/or stakeholder needs and preferences. (2d, 4j)
- Provides clear rationale for treatment objectives supported by evidence-based practice. (1a, 1b, 1c, 4g, 4h)
- Conducts treatment consistent with stated objectives and methods. (2d, 4f, 4g, 4h, 4j)
- Demonstrates mastery of clinical methods utilized with client. (1a, 1b, 1c, 3e, 4j)
- Modifies treatment based on data across sessions. (1c, 4j)
- Modifies treatment based on client and/or other stakeholders interests or needs. (4i, 4j)
- Rationale for treatment modifications are evidence-based. (1a, 1c)
- Integrates effective counseling and/or problem-solving skills throughout the provision of service. (3a, 4a)
- Implements and modifies appropriate follow-up and maintenance planning, if appropriate to case. (4k)
- Demonstrates ability to interact professionally and appropriately with the client and significant others during assessment and treatment. (3a, 4a, 4d, 4j)
- Demonstrates effective written communication skills. (1c, 2a, 2e, 4i)