



**QUALITATIVE CRITERIA FOR NUMERICAL SCALE PERFORMANCE LEVELS**

**(INADEQUATE)**

**Level 1: Not Evident**

**Competency/skill not evident; inability to perform effectively; supports and/or direction from supervisor not implemented**

**Level 2: Poor**

**Competency/skill poor; requires frequent and specific demonstration or extensive instructions to perform effectively; supervisor supports and direction are rarely or poorly implemented and do not alter performance**

**Level 3: Limited**

**Competency/skill limited; continues to require frequent or specific demonstration or instruction to perform effectively; supervisor supports and direction may be implemented but not consistently**

**(ADEQUATE)**

**Level 4: Emerging**

**Competency/skill present but needs further development; some specific demonstration or instruction is still needed to perform effectively; supports and direction from supervisor are present/implemented and in the process of generalization**

**Level 5: Refining**

**Competency/skill developed but needs refinement; requires general or intermittent demonstration or instruction to perform effectively; supports and direction from supervisor are consistently implemented and appropriate changes are made when necessary**

**(TARGET)**

**Level 6: Competent**

**Competency/skill evident and consistent; recognizes and takes initiative to make necessary changes when appropriate to perform effectively; needed supports and direction from supervisor are minimal**

**Level 7: Mastery**

**Competency/skill well developed and performed accurately; independently makes appropriate changes when necessary to perform effectively; requires supervisor monitoring and/or consultation only**

**Note: Skills are delineated per the ASHA Standards for the Certificate of Clinical Competence in Speech-Language Pathology (effective September 2014)**

**The applicant must have acquired the skills applicable across the nine major areas (Standard IV-C) and (Standard V-B) must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skill outcomes:**

**1. EVALUATION**

**a. Conducts screening and prevention procedures (including prevention activities)**

	1	2	3	4	5	6	7	NA
<b>Articulation</b>								
<b>Fluency</b>								
<b>Voice and resonance</b>								
<b>Receptive and Expressive Language</b>								
<b>Hearing</b>								
<b>Swallowing</b>								
<b>Cognitive Aspects</b>								
<b>Social Aspects</b>								
<b>AAC modalities</b>								

**b. Collects case history information and integrates information from clients/patients, family, caregivers, teachers, and relevant others, including other professionals**

	1	2	3	4	5	6	7	NA
<b>Articulation</b>								
<b>Fluency</b>								
<b>Voice and resonance</b>								
<b>Receptive and Expressive Language</b>								
<b>Hearing</b>								
<b>Swallowing</b>								
<b>Cognitive Aspects</b>								
<b>Social Aspects</b>								
<b>AAC modalities</b>								

**c (1). Selects appropriate evaluation procedures, such as behavioral observations, non-standardized and standardized tests, and instrumental procedures (and prepares adequately providing a rationale for selection when necessary)**

	1	2	3	4	5	6	7	NA
<b>Articulation</b>								
<b>Fluency</b>								
<b>Voice and resonance</b>								
<b>Receptive and Expressive Language</b>								
<b>Hearing</b>								
<b>Swallowing</b>								
<b>Cognitive Aspects</b>								
<b>Social Aspects</b>								
<b>AAC modalities</b>								

**c (2). Administers appropriate evaluation procedures, non-standardized and standardized tests and instrumentation procedures (and maintains appropriate documentation of results including scoring)**

	1	2	3	4	5	6	7	NA
<b>Articulation</b>								
<b>Fluency</b>								
<b>Voice and resonance</b>								
<b>Receptive and Expressive Language</b>								
<b>Hearing</b>								
<b>Swallowing</b>								
<b>Cognitive Aspects</b>								
<b>Social Aspects</b>								
<b>AAC modalities</b>								

**d. Adapts evaluation procedures to meet client/patient needs**

	1	2	3	4	5	6	7	NA
<b>Articulation</b>								
<b>Fluency</b>								
<b>Voice and resonance</b>								
<b>Receptive and Expressive Language</b>								
<b>Hearing</b>								
<b>Swallowing</b>								
<b>Cognitive Aspects</b>								
<b>Social Aspects</b>								
<b>AAC modalities</b>								

**e (1). Interprets (accurately), integrates, and synthesizes all information to develop diagnoses (including information from family/caregivers and other professionals)**

	1	2	3	4	5	6	7	NA
<b>Articulation</b>								
<b>Fluency</b>								
<b>Voice and resonance</b>								
<b>Receptive and Expressive Language</b>								
<b>Hearing</b>								
<b>Swallowing</b>								
<b>Cognitive Aspects</b>								
<b>Social Aspects</b>								
<b>AAC modalities</b>								

**e (2). Makes appropriate recommendations for intervention based upon evaluation results**

	1	2	3	4	5	6	7	NA
<b>Articulation</b>								
<b>Fluency</b>								
<b>Voice and resonance</b>								
<b>Receptive and Expressive Language</b>								
<b>Hearing</b>								
<b>Swallowing</b>								
<b>Cognitive Aspects</b>								
<b>Social Aspects</b>								
<b>AAC modalities</b>								

**f. Completes administrative and reporting functions necessary to support evaluation (includes informing relevant others of results)**

	1	2	3	4	5	6	7	NA
<b>Articulation</b>								
<b>Fluency</b>								
<b>Voice and resonance</b>								
<b>Receptive and Expressive Language</b>								
<b>Hearing</b>								
<b>Swallowing</b>								
<b>Cognitive Aspects</b>								
<b>Social Aspects</b>								
<b>AAC modalities</b>								

**g. Refers clients/patients for appropriate services**

	1	2	3	4	5	6	7	NA
<b>Articulation</b>								
<b>Fluency</b>								
<b>Voice and resonance</b>								
<b>Receptive and Expressive Language</b>								
<b>Hearing</b>								
<b>Swallowing</b>								
<b>Cognitive Aspects</b>								
<b>Social Aspects</b>								
<b>AAC modalities</b>								

## 2. INTERVENTION

**a (1). Develops setting-appropriate intervention plans with measurable and achievable goals that meet client's/patient's needs (includes methods that are appropriate for clients' age, developmental level and learning style)**

	1	2	3	4	5	6	7	NA
<b>Articulation</b>								
<b>Fluency</b>								
<b>Voice and resonance</b>								
<b>Receptive and Expressive Language</b>								
<b>Hearing</b>								
<b>Swallowing</b>								
<b>Cognitive Aspects</b>								
<b>Social Aspects</b>								
<b>AAC modalities</b>								

**a (2). Collaborates with and involves clients/patients and relevant others in the planning and intervention processes**

	1	2	3	4	5	6	7	NA
<b>Articulation</b>								
<b>Fluency</b>								
<b>Voice and resonance</b>								
<b>Receptive and Expressive Language</b>								
<b>Hearing</b>								
<b>Swallowing</b>								
<b>Cognitive Aspects</b>								
<b>Social Aspects</b>								
<b>AAC modalities</b>								

**b (1). Implements intervention plans (includes use and delivery of appropriate instructions, modeling, cueing, feedback, and reinforcement strategies)**

	1	2	3	4	5	6	7	NA
<b>Articulation</b>								
<b>Fluency</b>								
<b>Voice and resonance</b>								
<b>Receptive and Expressive Language</b>								
<b>Hearing</b>								
<b>Swallowing</b>								
<b>Cognitive Aspects</b>								
<b>Social Aspects</b>								
<b>AAC modalities</b>								

- c. **Selects or develops and uses appropriate materials and instrumentation for prevention and intervention (includes effective use to elicit type and level of response required and maximum number of responses)**

	1	2	3	4	5	6	7	NA
<b>Articulation</b>								
<b>Fluency</b>								
<b>Voice and resonance</b>								
<b>Receptive and Expressive Language</b>								
<b>Hearing</b>								
<b>Swallowing</b>								
<b>Cognitive Aspects</b>								
<b>Social Aspects</b>								
<b>AAC modalities</b>								

- d. **Measures and evaluates clients/patients performance and progress (including maintaining appropriate data)**

	1	2	3	4	5	6	7	NA
<b>Articulation</b>								
<b>Fluency</b>								
<b>Voice and resonance</b>								
<b>Receptive and Expressive Language</b>								
<b>Hearing</b>								
<b>Swallowing</b>								
<b>Cognitive Aspects</b>								
<b>Social Aspects</b>								
<b>AAC modalities</b>								

- e. **Modifies intervention plans, strategies, materials, or instrumentation as appropriate to meet the needs of clients/patients (includes flexibility in management of challenging behaviors)**

	1	2	3	4	5	6	7	NA
<b>Articulation</b>								
<b>Fluency</b>								
<b>Voice and resonance</b>								
<b>Receptive and Expressive Language</b>								
<b>Hearing</b>								
<b>Swallowing</b>								
<b>Cognitive Aspects</b>								
<b>Social Aspects</b>								
<b>AAC modalities</b>								

f. Completes administrative and reporting functions necessary to support intervention (includes informing relevant others of intervention results)

	1	2	3	4	5	6	7	NA
<b>Articulation</b>								
<b>Fluency</b>								
<b>Voice and resonance</b>								
<b>Receptive and Expressive Language</b>								
<b>Hearing</b>								
<b>Swallowing</b>								
<b>Cognitive Aspects</b>								
<b>Social Aspects</b>								
<b>AAC modalities</b>								

g. Refers clients/patients for appropriate services (includes counseling regarding communication and swallowing disorders to clients/patients, caregivers and relevant others)

	1	2	3	4	5	6	7	NA
<b>Articulation</b>								
<b>Fluency</b>								
<b>Voice and resonance</b>								
<b>Receptive and Expressive Language</b>								
<b>Hearing</b>								
<b>Swallowing</b>								
<b>Cognitive Aspects</b>								
<b>Social Aspects</b>								
<b>AAC modalities</b>								

### 3. Professional Qualities

<b>Skill (please check skill level)</b>	<b>Present</b>	<b>Emerging</b>	<b>Needs Improvement</b>
<b>Demonstrates professional demeanor and presents self appropriately</b>			
<b>Works effectively with supervisor and support staff</b>			
<b>Responds appropriately to constructive criticism and feedback</b>			
<b>Demonstrates effective organization and time management</b>			
<b>Demonstrates regular attendance and is punctual</b>			
<b>Respects and maintains confidentiality of client information</b>			
<b>Respects cultural beliefs and linguistic diversity of clients and caregivers</b>			
<b>Adheres to the ASHA Code of Ethics</b>			



**Standard V-A: The applicant must have demonstrated skills in oral and written forms of communication sufficient for entry into professional practice**

**4. Oral and Written Communication**

<b>Oral Skills</b>	<b>Present</b>	<b>Emerging</b>	<b>Needs Improvement</b>
<b>Effectively builds rapport with clients, supervisor and relevant others</b>			
<b>Integrates and presents necessary and relevant information in a clear and concise manner</b>			
<b>Provides appropriate speech/language models for intervention</b>			

<b>Written Skills</b>	<b>Present</b>	<b>Emerging</b>	<b>Needs Improvement</b>
<b>Uses appropriate technical writing skills for reports and plans (spelling, punctuation, grammar, sentence structure, etc.)</b>			
<b>Content of reports and plans is cohesive, accurate, and shows some in-depth interpretation</b>			
<b>Proofreads reports and plans accurately and provides revisions within provided deadlines</b>			

**Comments:**