

**Communication Disorders Assistant workload form by patient**

**Statistics**

FACE-TO-FACE CONTACT

|  |            |
|--|------------|
|  | check mark |
|--|------------|

NO CONTACT

|  |            |
|--|------------|
|  | check mark |
|--|------------|

**Treatments/Procedures**

\* Intervention/Treatment - Individual

|  |         |
|--|---------|
|  | Minutes |
|--|---------|

Treatment material preparation

|  |         |
|--|---------|
|  | Minutes |
|--|---------|

**Documentation**

Clinical Documentation/Reporting

|  |         |
|--|---------|
|  | Minutes |
|--|---------|

**Consultation/Collaboration**

Assist SLP with Assessment and/or Therapy

|  |         |
|--|---------|
|  | Minutes |
|--|---------|

Interdisciplinary Case Conference

|  |         |
|--|---------|
|  | Minutes |
|--|---------|

Patient/Family Meeting

|  |         |
|--|---------|
|  | Minutes |
|--|---------|

Professional Consultation

|  |         |
|--|---------|
|  | Minutes |
|--|---------|

Rounds

|  |         |
|--|---------|
|  | Minutes |
|--|---------|

**\*\*\*No Therapy Time Statistics**

No therapy time today

|  |         |
|--|---------|
|  | Minutes |
|--|---------|

Patient sick

|  |            |
|--|------------|
|  | check mark |
|--|------------|

Patient Unavailable

|  |            |
|--|------------|
|  | check mark |
|--|------------|

Patient Declined

|  |            |
|--|------------|
|  | check mark |
|--|------------|

Patient listed as ALC (alternative level of care)

|  |            |
|--|------------|
|  | check mark |
|--|------------|

Scheduling Issues

|  |            |
|--|------------|
|  | check mark |
|--|------------|

Staffing related - SLP

|  |       |
|--|-------|
|  | Count |
|--|-------|

\*the minutes recorded in these lines are used to calculate the average therapy the patient received

\*\*\*"No Therapy Time Statistics" are collected to understand why the patient did not receive therapy.