

Parent Checklist for Diagnostic SLPs

Performance Assessment of Contributions and Effectiveness of Speech-Language Pathologists (PACE)

Date: _____

Speech-language pathologist being reviewed: _____

Parent completing the survey: _____

Name of building/school: _____

Please use the table below to describe how the speech-language pathologist interacts with you and your child. Please add comments as appropriate.

SLP's Actions	Yes	No	Comments
Asks me for information about my child when conducting an evaluation			
Provides the diagnostic report in a timely manner			
Clearly explains the results of my child's speech and language assessment in an understandable way			
Responds to e-mails and other communication promptly and satisfactorily			
Provides me with suggestions for helping my child communicate better if my child is found not to be eligible for services			
Provides clear explanation of my child's current communication strengths and weaknesses			

Would you like to receive additional information to help you understand your child's speech and language skills?

Yes

No

Please add any additional comments that you feel are helpful.