

# Progress Monitoring Forms

## Purpose:

The Progress Monitoring Forms allow therapists or other personnel to track an individual's motor skills over time. By monitoring the skills over the course of the year(s), the therapist can get a visual picture of improvement, decline or maintenance of different skills. This can assist the therapist to make clinical decisions regarding Response to Intervention programs, regular treatment sessions and discharge planning.

## How to Use the Forms:

Step 1: Determine which form is suitable for the individual's goal. You may need more than one form for each individual.

Step 2: For each therapy session or consultation indicate the intervention and the date.

Step 3: When an assessment is completed, indicate the individual's abilities in the graph. For example, if the therapist observes that the child held the scissors correctly when cutting 2 out of 4 trials in November mark it on the graph.

Step 4: Continue to graph the dates of assessment and results throughout the year.

Step 5: Analyze the graph to answer the following questions:

Are the interventions successful?

Do different interventions yield better results?

Is there a pattern over vacations (i.e skills decline over a break)?

Are no gains being made at all?

Step 6: Plan ahead.

Does the individual need an increase or decrease in therapy services? If no progress has been made following several different interventions do you need to discontinue therapy services? If following a Response to Intervention model, does the individual need more intensive services or not?

Here is an example of a completed form. →

Progress Monitoring Forms Holding Scissors		School Year: 2011																				
Name: <u>John Doe</u>	Therapist: <u>Jane Doe</u>																					
Dates of Interventions																						
Practicing the skill: <u>9/21/10, 10/20/10, 11/10/11</u>																						
Visual perceptual activities: <u>2/6/11, 3/5/11</u>																						
Fine motor skill practice: <u>11/13/10, 12/10/10, 1/3/11</u>																						
Coordination activities:																						
Muscle strengthening activities: <u>4/10/11, 5/19/11</u>																						
Consultation with staff or parents: <u>9/21/10, 10/20/10, 11/10/11, 5/10/11</u>																						
Other:																						
Type of scissors used: <u>Bentow</u>	Circle: <u>Right handed</u> or left handed scissors																					
<p>Out of 4 trials, how often does the child hold the scissors correctly?</p> <table border="1"> <caption>Data for Scissors Graph</caption> <thead> <tr> <th>Date</th> <th># of times completed out of 4 trials</th> </tr> </thead> <tbody> <tr><td>9/21/10</td><td>1</td></tr> <tr><td>10/20/10</td><td>2</td></tr> <tr><td>11/10/11</td><td>2</td></tr> <tr><td>12/10/10</td><td>3</td></tr> <tr><td>1/3/11</td><td>4</td></tr> <tr><td>2/6/11</td><td>4</td></tr> <tr><td>3/5/11</td><td>4</td></tr> <tr><td>4/10/11</td><td>4</td></tr> <tr><td>5/19/11</td><td>4</td></tr> </tbody> </table>			Date	# of times completed out of 4 trials	9/21/10	1	10/20/10	2	11/10/11	2	12/10/10	3	1/3/11	4	2/6/11	4	3/5/11	4	4/10/11	4	5/19/11	4
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<p>Out of 4 trials, how often does the child hold the piece of paper he/she is cutting correctly?</p> <table border="1"> <caption>Data for Paper Graph</caption> <thead> <tr> <th>Date</th> <th># of times completed out of 4 trials</th> </tr> </thead> <tbody> <tr><td>9/21/10</td><td>1</td></tr> <tr><td>10/20/10</td><td>1</td></tr> <tr><td>11/10/11</td><td>1</td></tr> <tr><td>12/10/10</td><td>1</td></tr> <tr><td>1/3/11</td><td>2</td></tr> <tr><td>2/6/11</td><td>2</td></tr> <tr><td>3/5/11</td><td>2</td></tr> <tr><td>4/10/11</td><td>2</td></tr> <tr><td>5/19/11</td><td>2</td></tr> </tbody> </table>			Date	# of times completed out of 4 trials	9/21/10	1	10/20/10	1	11/10/11	1	12/10/10	1	1/3/11	2	2/6/11	2	3/5/11	2	4/10/11	2	5/19/11	2
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Comments:																						

# Progress Monitoring Forms Holding Scissors

School Year: \_\_\_\_\_

Name: \_\_\_\_\_

Therapist: \_\_\_\_\_

## Dates of Interventions

Practicing the skill:

Visual perceptual activities:

Fine motor skill practice:

Coordination activities:

Muscle strengthening activities:

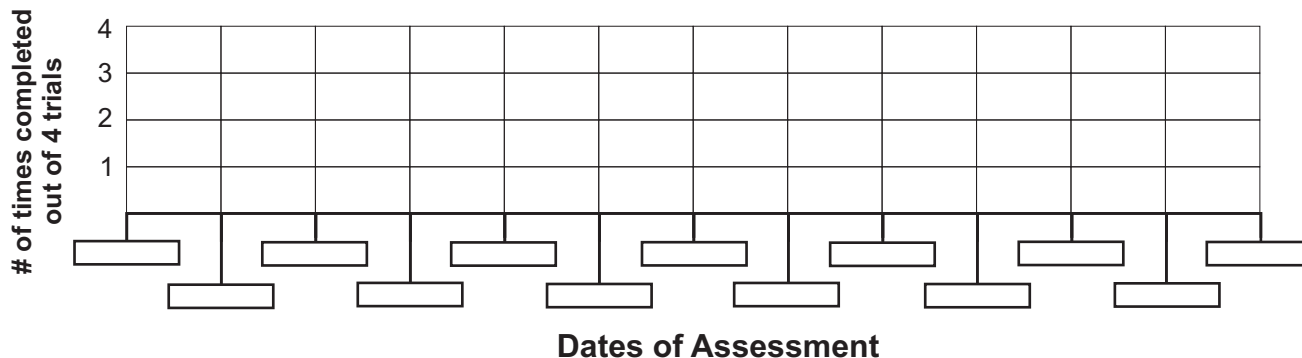
Consultation with staff or parents:

Other:

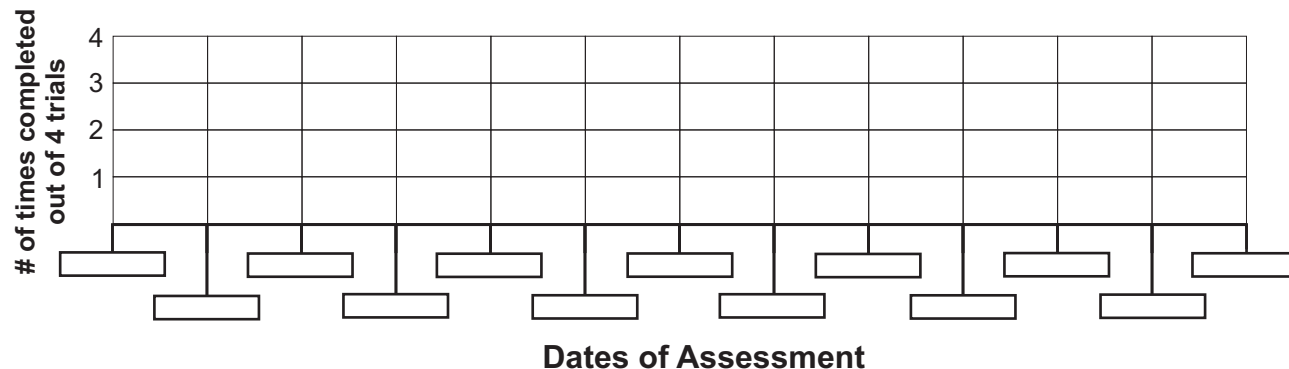
Type of scissors used:

Circle: Right handed or left handed scissors

Out of 4 trials, how often does the child hold the scissors correctly?



Out of 4 trials, how often does the child hold and move the piece of paper he/she is cutting correctly?



Comments: