



Laver Fawcett, Alison ORCID logoORCID: <https://orcid.org/0000-0002-9924-1319> and Marrison, Eden (2025) The Structured Observation Test of Function (SOTOF) 2nd ed: Test manual. Manual. York St John University, York.

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# Structured Observational Test of Function (SOTOF) 2<sup>nd</sup> edition

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## Record and scoring forms for:

Screening Assessment

Task 1: Eating from a bowl using a spoon

Task 2: Washing and drying hands

Task 3: Pouring and Drinking

Task 4: Dressing – putting on a long-sleeved, front fastening garment

**Reference:** Laver-Fawcett AJ, Marrison E (2016) **Structured Observational Test of Function (SOTOF) 2<sup>nd</sup> edition**. York: York St John University

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## Summary scores for the four ADL Tasks

Divide each total score by the maximum possible score and multiple by 100 to calculate the percentage score.

Tasks	Total Score	Percentage score
Screening Assessment	/ 25	
Task 1: Eating	/ 140	
Task 2: Washing	/ 135	
Task 3: Pouring and Drinking	/ 135	
Task 4: Dressing	/ 100	



## Overall Score for each of the four ADL tasks

**To score:** Place ticks in the boxes that correspond to the highest level of mediation required for any of the test items in that task.

OCCUPATIONAL PERFORMANCE	0 INDEPENDENT	1 NEEDED GENERAL PROMPT	2 NEEDED GESTURAL CUE	3 NEEDED SPECIFIC FEEDBACK / CUE	4 NEEDED PHYSICAL ASSISTANCE	5 DO FOR CLIENT
<b>Eating:</b> Client's ability to eat independently from a bowl.						
<b>Washing:</b> Client's ability to wash and dry hands.						
<b>Pouring and Drinking:</b> Client's ability to pour from a jug and to drink from a cup.						
<b>Dressing:</b> Client's ability to put on a front-fastening, long-sleeved garment.						

**Summary of results:**

**Recommendations:**

**Signature:**

**Date:**



## Record Form: Screening Assessment

### Structured Observational Test of Function (SOTOF) 2<sup>nd</sup> edition

#### Screening Assessment Record Form

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Key: (EL) items can be administered to clients with expressive language

(ED) items provide alternative assessment methods for clients with expressive dysphasia

<b>Client's name:</b>	<b>Date:</b>
<b>Tester's name:</b>	

Item	Able	Unable	Level of mediation required	Hypotheses, further assessments required, comments
1	Name		0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
2	Dominant hand	Right <input type="checkbox"/> Left <input type="checkbox"/>	Ambidextrous <input type="checkbox"/>	
3	Equipment needed			
4	Vision		0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
5.	Upper limb	<input type="checkbox"/> Right <input type="checkbox"/> Left	<input type="checkbox"/> Right <input type="checkbox"/> Left	0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>

## Record Form: Screening Assessment

6.	Sitting Balance			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
7.	Hand grip	<input type="checkbox"/> Right <input type="checkbox"/> Left	<input type="checkbox"/> Right <input type="checkbox"/> Left	0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
8.	Colour blindness	Yes <input type="checkbox"/> No <input type="checkbox"/> Colours affected			
9.	Comfortable closing eyes				
10.	Record any allergies or food intolerances (to consider for food, drink and soap used in the assessment)				
Total score for graduated mediation: For items 1, 4-7				Maximum score 5 x 5 = 25	

### Screening Assessment

#### Observations/Hypothesis

Person's learning potential/mediation method/level which was the most effective:

## Record Form Task 1: Eating from a Bowl with a spoon

### Structured Observational Test of Function (SOTOF) 2<sup>nd</sup> edition

#### Record Form Task 1: Eating

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Key: (EL) items can be administered to clients with expressive language

(ED) items provide alternative assessment methods for clients with expressive dysphasia

<b>Tester's name:</b>	<b>Date:</b>
<b>Dominant hand:</b> <input type="checkbox"/> Right <input type="checkbox"/> Left	<b>Hand used for spoon:</b> <input type="checkbox"/> Right <input type="checkbox"/> Left

	Item	Able	Unable	Level of mediation required	Hypotheses, further assessments required, comments
1	(EL) Identifies spoon through touch. Test affected limb or non-dominant hand first. If unable with first hand test the other hand.	<input type="checkbox"/> Right <input type="checkbox"/> Left	<input type="checkbox"/> Right <input type="checkbox"/> Left	0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
2	Scans table for objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
2	Fixes gaze on objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
2	Recognises objects by (EL) naming or (ED) pointing.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
3	Put spoon on table on right of bowl			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	

## Record Form Task 1: Eating from a Bowl with a spoon

4	Puts spoon in front of the bowl.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
5	Puts spoon in bowl.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
6	Puts spoon behind the bowl.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
7	Puts spoon on the left of the bowl.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
8	(EL) Describes use of objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
9	Mimes use of objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
10	Demonstrates use of objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
11	Correctly identifies colours of all objects by (EL) naming or (ED) pointing.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	

## Record Form Task 1: Eating from a Bowl with a spoon

12	Initiates eating on command.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
12	Reaches for spoon.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
12	Judges distance to spoon.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
13	Places spoon in bowl.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
13	Judges distance from spoon to bowl.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
13	Puts food on spoon.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
14	Lifts spoon to mouth.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	



## Record Form Task 1: Eating from a Bowl with a spoon

15	Takes food into mouth.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
16	Correctly identifies or describes taste of food.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
17	Chews food.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
17	Swallows food.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
18	Replaces spoon in bowl.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
19	Repeats sequence.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
20	Stops sequence when food is finished.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
21	Leaves food in bowl. (note: if person was aware food was left, e.g. does not want to eat it all, or has neglected some food)	<input type="checkbox"/> No, does not neglect food	<input type="checkbox"/> Yes neglects food	0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
Total score for graduated mediation:					Maximum score 28 x 5 = 140

## Record Form Task 1: Eating from a Bowl with a spoon

### Task 1: Eating

Observations/Hypotheses:

Person's learning potential; mediation method/level which was most effective:

## Record Form Task 2: Washing and Drying Hands

### Structured Observational Test of Function (SOTOF) 2<sup>nd</sup> edition

#### Record Form Task 2: Washing

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Key: (EL) items can be administered to clients with expressive language

(ED) items provide alternative assessment methods for clients with expressive dysphasia

<b>Tester's name:</b>	<b>Date:</b>
<b>Dominant hand:</b> <input type="checkbox"/> Right <input type="checkbox"/> Left	<b>Hand used for soap:</b> <input type="checkbox"/> Right <input type="checkbox"/> Left

	Item	Able	Unable	Level of mediation required	Hypotheses, further assessments required, comments
1	(EL) Identifies soap through touch. Test affected limb or non-dominant hand first. If unable with first hand test the other hand.	<input type="checkbox"/> Right <input type="checkbox"/> Left	<input type="checkbox"/> Right <input type="checkbox"/> Left	0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
2	Scans table for objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
2	Fixes gaze on objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
2	Recognises objects by (EL) naming or (ED) pointing.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
3	Put soap on table on right of bowl.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	

## Record Form Task 2: Washing and Drying Hands

4	Put soap in front of bowl.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
5	Put soap in the bowl.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
6	Put soap behind the bowl.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
7	Put soap on left of bowl.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
8	(EL) Describes use of objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
9	Mimes use of objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
10	Demonstrates use of objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
11	Correctly identifies colours of all objects by (EL) naming or (ED) pointing.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	

## Record Form Task 2: Washing and Drying Hands

12	Correctly identifies or describes temperature water.	<input type="checkbox"/> Right <input type="checkbox"/> Left	<input type="checkbox"/> Right <input type="checkbox"/> Left	0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
13	Initiates washing hands.  Picks up soap.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
13	Reaches for soap			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
13	Judges distance to the soap.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
14	Picks up soap			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
15	Places hands in water.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
15	Judges distance to bowl.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
16	Rubs soap between hands.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	

## Record Form Task 2: Washing and Drying Hands

17	Puts down soap.  Note: If the person continues soaping hands unnecessarily.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
18	Rinses hands in water.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
19	Reaches for towel.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
20	Picks up towel.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
20	Dries hands.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
21	Uses correct sequence.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
Total score for graduated mediation:					(Note: Maximum possible score is 27 x 5 = 135)

## **Task 2: Washing**

### **Observations/Hypothesis**

**Person's learning potential; the mediation method/level which was most effective:**

## Record Form Task 3: Pouring and Drinking

### Structured Observational Test of Function (SOTOF) 2<sup>nd</sup> edition

#### Record Form Task 3: Pouring and Drinking

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Key: (EL) items can be administered to clients with expressive language

(ED) items provide alternative assessment methods for clients with expressive dysphasia

<b>Tester's name:</b>	<b>Date:</b>
<b>Dominant hand:</b> <input type="checkbox"/> Right <input type="checkbox"/> Left	<b>Hand used to pour:</b> <input type="checkbox"/> Right <input type="checkbox"/> Left

	Item	Able	Unable	Level of mediation required	Hypotheses, further assessments required, comments
1	(EL) Identifies cup through touch. Test affected limb or non-dominant hand first. If unable with first hand test the other hand.	<input type="checkbox"/> Right <input type="checkbox"/> Left	<input type="checkbox"/> Right <input type="checkbox"/> Left	0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
2	Scans table for objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
2	Fixes gaze on objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
2	Recognises objects by (EL) naming or (ED) pointing.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
3	Put cup on table on right of jug.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	



## Record Form Task 3: Pouring and Drinking

4	Put cup in front of jug.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
5	Put cup on left of jug.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
6	Put cup behind jug.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
7	(EL) Describes use of objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
8	Mimes use of objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
9	Demonstrate use of objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
10	Correctly identifies colours of all objects by (EL) naming or (ED) pointing.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
11	Initiates pouring on command.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	

## Record Form Task 3: Pouring and Drinking

11	Reaches for jug.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
11	Judges distance to jug.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
12	Picks up jug.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
13	Pours drink into cup.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
13	Judges distance from jug to cup.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
14	Stops pouring before cup is full – no spill.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
15	Puts down jug.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	

## Record Form Task 3: Pouring and Drinking

16	Reaches for cup.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
17	Picks up cup.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
18	Lifts cup to mouth.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
19	Correctly identifies taste of drink.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
20	Swallows drink.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
21	Replaces cup on table.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
22	Uses correct sequence.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
Total score for graduated mediation:					Maximum score 27 x 5 = 135

## Record Form Task 3: Pouring and Drinking

### Task 3: Pouring and Drinking

Observations/Hypotheses:

Person's learning potential; mediation method/level which was most effective:

## Record Form Task 4: Dressing

### Structured Observational Test of Function (SOTOF) 2<sup>nd</sup> edition

#### Record Form Task 4: Dressing

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Key: (EL) items can be administered to clients with expressive language

(ED) items provide alternative assessment methods for clients with expressive dysphasia

<b>Tester's name:</b>	<b>Date:</b>
<b>Dominant hand:</b> <input type="checkbox"/> Right <input type="checkbox"/> Left	<b>Hand used to dress:</b> <input type="checkbox"/> Right <input type="checkbox"/> Left

	Item	Able	Unable	Level of mediation required	Hypotheses, further assessments required, comments
1	(EL) Identifies button through touch. Test affected limb or non-dominant hand first. If unable with first hand test the other hand.	<input type="checkbox"/> Right <input type="checkbox"/> Left	<input type="checkbox"/> Right <input type="checkbox"/> Left	0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
2	Scans table for objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
2	Fixes gaze on objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
2	Recognises objects by (EL) naming or (ED) pointing.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
3	Puts button on table on right of the garment.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	

## Record Form Task 4: Dressing

3	Puts button on top of the garment.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
3	Puts button on table on left of the garment.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
4	(EL) Describes use of objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
5	Mimes use of objects.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
6	Correctly identifies colours of all objects by (EL) naming or (ED) pointing.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
7	Initiates dressing on command.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
7	Reaches for garment.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
7	Judges distance to garment.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	

## Record Form Task 4: Dressing

8	Picks up garment.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
9	Organises garment (shirt) before putting on.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
10	Locates sleeve.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
11	Puts correct arm into sleeve.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
12	Puts collar behind neck.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
13	Puts other arm into correct sleeve.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
14	Fastens garment (shirt) correctly.  Note type of fastening: buttons, zip, poppers, Velcro.			0. Independent <input type="checkbox"/> 1. General prompt <input type="checkbox"/> 2. Gestural cue <input type="checkbox"/> 3. Specific feedback/cue <input type="checkbox"/> 4. Physical assistance <input type="checkbox"/> 5. Do for client <input type="checkbox"/>	
Total score for graduated mediation:					Maximum score 20 x 5 = 100

## Record Form Task 4: Dressing

### Task 4: Dressing

#### Observations/Hypothesis

Person's learning potential: mediation method/level which was the most effective:



## Structured Observational Test of Function (SOTOF) 2<sup>nd</sup> edition

### Neuropsychological Checklist and summary scores

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<b>Client's name:</b>	
<b>Tester's name:</b>	<b>Date of testing:</b>
<b>Diagnosis:</b>	

**To score:** Place ticks in the boxes that correspond to the deficits you feel are indicated by the client's performance and the tasks in which the indicative performance was observed. Look down the left-hand column for deficit(s) and across the columns at the top for tasks.

DEFICIT	SCREENING ASSESSMENT	EATING TASK 1	WASHING TASK 2	POURING AND DRINKING TASK 3	DRESSING TASK 4
<b>LANGUAGE</b>					
Comprehension					
Expression					
<b>HEARING</b>					
Hearing acuity					
Auditory agnosia					
<b>COGNITION</b>					
Orientation					
Attention					
Short-term memory					
Long-term memory					
Initiation					
<b>MOTOR</b>					
Abnormal tone (spasticity or flaccidity)					



DEFICIT	SCREENING ASSESSMENT	EATING TASK 1	WASHING TASK 2	POURING AND DRINKING TASK 3	DRESSING TASK 4
Bilateral integration					
Fine motor coordination/dexterity					
<b>SENSATION</b>					
Proprioception					
Tactile discrimination					
Taste discrimination					
Temperature discrimination					
<b>VISION</b>					
Visual acuity					
Visual attention					
Visual scanning					
Visual field loss					
Visual neglect					
<b>AGNOSIA</b>					
Visual spatial agnosia					
Visual object agnosia					
Colour agnosia					
Tactile agnosia					
<b>APRAXIA</b>					
Constructional apraxia					
Motor apraxia					
Ideomotor apraxia					
Ideational apraxia					
Dressing apraxia					

DEFICIT	SCREENING ASSESSMENT	EATING TASK 1	WASHING TASK 2	POURING AND DRINKING TASK 3	DRESSING TASK 4
<b>BODY SCHEME</b>					
Somatognosia					
Unilateral neglect					
Anosognosia					
Right/left discrimination					
<b>SPATIAL RELATIONS</b>					
Figure-ground discrimination					
Position in space					
Form constancy					
Spatial relations					
Depth perception					
Distance perception					
<b>PESERVERATION</b>					
Perseveration					