**STAMMA WEBSITE COPY TEMPLATE**

Approaches & Therapies for People Who Stammer

The purpose of this form is first to collect clear accurate information by which we can assess whether a therapy or approach can be advertised on our website, and second, to collect and present your information in a manner which is factual, accessible and neutral.

Please do not give value judgements (e.g. this is a fantastic service) and ensure that your claims are evidence-based, in compliance with the Advertising Standards Agency. We reserve the right, at our sole discretion, to edit, refuse to publish or remove any content, at any time and for any reason.

We are committed to providing high quality, unbiased information about approaches available to children and adults who stammer. There are many types of therapy or approaches that may be beneficial (Baxter et al., 2016), we want to provide everyone with the information they need so they can make the decision about what is right for them. Our review process is aimed at ensuring that the information we provide reflects best practice and recent developments in the field.

Use the template below to give us up-to-date information about your services or approach.

**Please return the form below to editor@stamma.org**.

|  |  |
| --- | --- |
| Name of the approach (10 words max) |  |
| Overview of approach (100 words max) |  |
| Who the approach is suitable for? | [ ]  Children up to and including 7 years-old[ ]  Children 8-12 years-old[ ]  Teenagers 13-17 years-old[ ]  Adults (18 years and over)  |
| How are participants selected or screened? |  |
| Who the approach is delivered by? |  |
| What are the relevant qualifications and experience of the person or people delivering the approach? |  |
| Where do you physically deliver your service – please describe the location and the physical environment. |  |
| Time commitment required: - the course/programme - ongoing work- follow-up |  |
| Please describe your pricing structure and what it includes |  |
| What follow-up support do you provide? |  |
| What are your payment and refund policies? |  |
| Please provide detail about your approach, including how it is thought to work and available evaluation data (500 words max) |  |
| What research evidence is there to support you approach (articles published in peer-reviewed journals), if applicable? |  |
| How can people find out more ?(50 words max) |  |
| What is the status of your company: CIC, Charity, company? Please provide registration details |  |
| When was the organisation established? |  |
| How many courses or therapies have you provided? |  |

🞏 Please tick to indicate that you have attached your safeguarding policies

🞏 Please tick to indicate that you have attached your complaints procedure

Your full name: Signature

Date: