

## **Standards for Accreditation of Graduate Education Programs in Audiology and Speech-Language Pathology**

**Approved February 2016 | Last Updated October 2017**  
***Effective August 1, 2017***

### ***Introduction***

The Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) of the American Speech-Language-Hearing Association (ASHA) accredits graduate programs that prepare individuals to enter professional practice in audiology or speech-language pathology. The CAA and its predecessors were established by ASHA, which authorized the CAA to function autonomously in setting and implementing standards and awarding accreditation. The CAA is recognized by the Council for Higher Education Accreditation (CHEA) and by the U.S. Secretary of Education as the accrediting body for the accreditation and pre-accreditation (accreditation candidate) of education programs leading to the first professional or clinical degree at the master's or doctoral level and for the accreditation of these programs offered via distance education, throughout the United States.

To maintain recognition by the U.S Secretary of Education and the CHEA, the CAA continues to meet the Department of Education (ED) Criteria for Recognition and the CHEA Recognition Standards, provides periodic reports on its success in meeting those standards, and undergoes periodic reviews to demonstrate continued compliance.

The CAA operates within a set of core values that are used to guide decisions to ensure excellence in graduate education. Because the CAA has been entrusted to act on behalf of the professions of audiology and speech-language pathology, the Council's actions and decisions must be credible and trustworthy. Members of the CAA, in conducting the business of accreditation of academic programs, act with:

- honesty and integrity,
- accountability,
- fairness and validity,
- clarity and consistency,
- recognition of the role of creativity and innovation in meeting the established accreditation standards.

The Council is committed to using a peer-review process that is facilitative and transparent and supports programs in delivering a high quality educational experience. Graduates of CAA-accredited programs enter the workforce prepared to meet the expectations of the public and the professions and to achieve the credentials required to practice. The CAA is responsible for evaluating the adequacy of an applicant program's efforts to satisfy each standard. Compliance with all standards indicates that the program meets the expectations of the CAA for

accreditation, regardless of mode of delivery, including distance education. The CAA evaluates programs to ensure that there is equivalence across all modes of delivery, that students enrolled in distance education or other modes of education delivery are held to the same standards as students in residential programs, and that students enrolled in all modes of education are afforded equal access to all aspects of the education program, including courses, clinical practicum opportunities, supervision, advising, student support services, and program resources.

Accreditation by the CAA indicates that a program is committed to excellence and ongoing quality improvement so that students and the public are assured that graduates are prepared to meet the challenges they will face when entering the workforce.

### ***Preamble***

The CAA recognizes that programs are responding to a range of pressures from within their institutions (e.g., to increase enrollment) and outside the institutions (e.g., to provide more employment-ready, highly educated professionals to fill the vast need for practitioners). Not only is there a demand for more professionals, but—in the changing health care and educational arenas—these new professionals are expected to be able to function in complex, interdisciplinary, and collaborative models of service delivery. They also must be prepared to meet the need to provide efficacious service based on a strong base of evidence to all individuals who seek the services of audiologists and speech-language pathologists. Further, they must have at least introductory preparation to provide clinical education to future professionals.

The Council recognizes the diversity of models of educational delivery, institutions providing these programs, and missions of the education programs. At the same time, the CAA is committed to excellence in educational preparation, while assuring the public that graduates of accredited programs possess a core set of knowledge and skills necessary to qualify for state and national credentials for independent professional practice. Further, the CAA acknowledges that there are distinct sets of knowledge and skills and methods of service delivery required of individuals who will become audiologists or speech-language pathologists and, thus, has different expectations with regard to the curricular elements of the programs that educate future audiologists and speech-language pathologists.

Understanding the impact of these many challenges, the CAA designed the accreditation standards to ensure the provision of high quality educational experiences. These standards are not prescriptive because the CAA values the variety of ways that high quality education can be achieved. The standards and each program's implementation of them should allow for consistency in the quality of graduates from the accredited programs. At the same time, each program should be innovative, flexible, and creative in meeting the standards, in congruence with its individual mission and goals.

To that end, the accreditation standards have been written to address six essential components. The standards are designed to ensure that, when programs are in full compliance, their graduate students are prepared to function in the complex and ever-changing service provision (or delivery) arenas. The components are:

- Standard 1.0: Administrative structure and governance
- Standard 2.0: Faculty

- Standard 3.0A: Curriculum (academic and clinical education) for audiology programs
- Standard 3.0B: Curriculum (academic and clinical education) for speech-language pathology programs
- Standard 4:0 Students
- Standard 5:0 Assessment
- Standard 6:0 Program resources

Standards for accreditation appear in **bold**. Following each standard, the Requirement for Review provides interpretations or explanations of the standard.

A [Glossary](#) is provided following the standards with definitions to assist in interpreting the accreditation standards.

### Citation

Cite as: Council on Academic Accreditation in Audiology and Speech-Language Pathology. (2017). *Standards for accreditation of graduate education programs in audiology and speech-language pathology* (2017). Retrieved [date] from <http://caa.asha.org/wp-content/uploads/Accreditation-Standards-for-Graduate-Programs.pdf>

## **Standard 1.0 Administrative Structure and Governance**

### **1.1 The sponsoring institution of higher education holds current regional accreditation.**

#### *Requirement for Review:*

- The institution of higher education within which the audiology and/or speech-language pathology program is housed must hold regional accreditation from one of the following regional accrediting bodies:
  - Middle States Commission on Higher Education;
  - New England Association of Schools and Colleges, Commission on Institutions of Higher Education;
  - North Central Association of Colleges and Schools, The Higher Learning Commission;
  - Northwest Commission on Colleges and Universities;
  - Southern Association of Colleges and Schools, Commission on Colleges;
  - Western Association of Schools and Colleges, Accrediting Commission for Senior Colleges and Universities.

### **1.2 The sponsoring institution of higher education must be authorized to provide the program of study in audiology and/or speech-language pathology.**

#### *Requirement for Review:*

- The sponsoring institution of higher education must be authorized under applicable laws or other acceptable authority to provide the program of post-secondary education.
- The sponsoring institution of higher education must have appropriate graduate degree-granting authority.

### **1.3 The program has a mission and goals that are consistent with preparation of students for professional practice.**

#### *Requirement for Review:*

- The mission statement and the goals of the program (including religious mission, if relevant) must be presented.
- The program must describe how the mission statement and program goals are used to guide decision making to prepare students for entry level into professional practice in audiology or speech-language pathology.

### **1.4 The program faculty must regularly evaluate the congruence of program and institutional missions and the extent to which the goals are achieved.**

#### *Requirement for Review:*

- The program monitors its mission and goals to ensure that they remain congruent with those of the institution.
- The program periodically reviews and revises its mission and goals.
- The program systematically evaluates its progress toward fulfillment of its mission and goals.

### **1.5 The program develops and implements a long-term strategic plan.**

#### *Requirement for Review:*

- The plan must be congruent with the mission and goals of the program and the sponsoring institution, have the support of the administration, and reflect the role of the program within its community.
- The plan identifies long-term goals, specific measurable objectives, strategies for attainment of the goals and objectives, and a schedule for analysis of the plan.
- The plan must include a mechanism for regular evaluation of the plan itself and of progress in meeting the plan's objectives.
- An executive summary of the strategic plan or the strategic plan must be shared with faculty, students, staff, alumni, and other interested parties.

### **1.6 The program's faculty has authority and responsibility for the program.**

#### *Requirement for Review:*

- The institution's administrative structure demonstrates that the program's faculty is recognized as the body that can initiate, implement, and evaluate decisions affecting all aspects of the professional education program, including the curriculum.
- The program faculty has reasonable access to higher levels of administration.

### **1.7 The individual responsible for the program of professional education seeking accreditation holds a graduate degree with a major emphasis in speech-language pathology, in audiology, or in speech, language, and hearing science and holds a full-time appointment in the institution.**

#### *Requirement for Review:*

- The individual designated as program director holds a graduate degree with a major emphasis in speech-language pathology, in audiology, or in speech, language, and hearing science
- The individual designated as program director holds a full-time appointment in the institution.

### **1.8 The institution and program must comply with all applicable laws, regulations, and executive orders prohibiting discrimination towards students, faculty, staff, and persons served in the program's clinics. This includes prohibitions on discrimination based on any category prohibited by applicable law but not limited to age, citizenship, disability, ethnicity, gender identity, genetic information, national origin, race, religion, sex, sexual orientation, and veteran status.**

#### *Requirement for Review:*

- The institution and program must comply with all applicable federal, state, and local laws, regulations, and executive orders prohibiting discrimination, including laws that prohibit discrimination based on age, citizenship, disability, ethnicity, gender identity, genetic information, national origin, race, religion, sex, sexual orientation, and veteran status.
- The program must adhere to its institutional policies and procedures—including non-harassment policies, internal complaint procedures, and appropriate educational programs—to ensure that the program complies with all applicable nondiscrimination

statutes and that all staff and faculty are made aware of the policies and the conduct they prohibit.

- The program must maintain, as relevant, a record of internal and external complaints, charges, and litigation alleging violations of such policies and procedures and ensure that appropriate action has been taken.

**1.9 The program provides information about the program and the institution to students and to the public that is current, accurate, and readily available.**

*Requirement for Review:*

- Websites, catalogs, advertisements, and other publications/electronic media must be accurate regarding the program's accreditation status. The program must indicate the program's CAA accreditation status in accordance with the language specified in the Public Notice of Accreditation Status in the CAA [Accreditation Handbook](#), as required under federal regulations.
- Websites, catalogs, advertisements, and other publications/electronic media must be accurate regarding standards and policies regarding recruiting and admission practices, academic offerings, matriculation expectations, academic calendars, grading policies and requirements, and fees and other charges.
- The program must make student outcome measures available to the general public by posting the results on the program's website via a clearly visible and readily accessible link.
- The program must make public the number of expected terms for program completion for full-time and part-time students.
- At a minimum, the following results of student outcome measures for the most recently completed 3 academic years must be provided:
  - number and percentage of students completing the program within the program's published time frame for each of the 3 most recently completed academic years,
  - number and percentage of program test-takers who pass the *Praxis*<sup>®</sup> Subject Assessment examination for each of the 3 most recently completed academic years (programs need report only the results once for test-takers who take the test more than one time in the reporting period),
  - number and percentage of program graduates employed in the profession or pursuing further education in the profession within 1 year of graduation for each of the 3 most recently completed academic years.
- Student outcome measures must be labeled "Student Achievement Data" or "Student Outcome Data."
  - If both the audiology and the speech-language programs are accredited, separate data tables must be provided for each program.
  - If the program has a distance education component or a satellite campus, the student outcome data must be presented for each modality.

## Standard 2.0 Faculty

**2.1 The number and composition of the full-time program faculty (academic doctoral, clinical doctoral, other) are sufficient to deliver a program of study that:**

**2.1.1 allows students to acquire the knowledge and skills required in Standard 3,  
2.1.2 allows students to acquire the scientific and research fundamentals of the discipline,**

**2.1.3 allows students to meet the program's established goals and objectives,**

**2.1.4 meets the expectations set forth in the program's mission and goals,**

**2.1.5 is offered on a regular basis so that it will allow the students to complete the program within the published time frame.**

*Requirement for Review:*

- The program must document
  - the number of individuals in and composition of the group that delivers the program of study;
  - the distribution of faculty in terms of the number of full-time and part-time individuals who hold academic doctoral degrees, clinical doctoral degrees, and master's degrees;
  - how the faculty composition is sufficient to allow students to acquire the knowledge and skills required in Standard 3;
  - how the faculty composition is sufficient to allow students to acquire the scientific and research fundamentals of the profession;
  - how the faculty composition is sufficient to allow students to meet the program's established learning goals and objectives;
  - how the faculty composition is sufficient to allow students to meet the expectations set forth in the program's mission and goals;
  - how the faculty composition ensures that the elements (classes and clinical practica) of the program are offered on a regular basis so that students can complete the program within the published time frame.

**2.2 The number, composition, and workload of the full-time program faculty are sufficient to allow faculty to meet expectations with regard to teaching, research, and service of the sponsoring institution.**

*Requirement for Review:*

- The program must demonstrate that all faculty who have responsibility in the graduate program and have obligations to provide teaching, research, and service as part of their workload
  - are accessible to students,
  - have sufficient time for scholarly and creative activities,
  - have sufficient time to advise students,
  - have sufficient time to participate in faculty governance,
  - have sufficient time to participate in other activities that are consistent with the expectations of the sponsoring institution.
- The program must demonstrate that all faculty who have responsibility in the graduate program and have obligations to provide clinical education and service as part of their workload
  - are accessible to students,

- o have sufficient time for scholarly and creative activities,
- o have sufficient time to advise students,
- o have sufficient time to participate in faculty governance,
- o have sufficient time to participate in other activities that are consistent with the expectations of the sponsoring institution.
- The program must demonstrate that faculty who are tenure eligible have the opportunity to meet the criteria for tenure of the sponsoring institution.
- The program must demonstrate that faculty who are eligible for promotion have the opportunity to meet the criteria for promotion of the sponsoring institution.
- The program must demonstrate that faculty who are eligible for continuing employment have the opportunity to meet the expectations for continued employment of the sponsoring institution.

**2.3 All faculty members (full-time, part-time, adjuncts), including all individuals providing clinical education, are qualified and competent by virtue of their education, experience, and professional credentials to provide academic and clinical education as assigned by the program leadership.**

*Requirement for Review:*

- The program must demonstrate that the qualifications and competence to teach graduate-level courses and to provide clinical education are evident in terms of appropriateness of degree level, practical or educational experiences specific to responsibilities in the program, and other indicators of competence to offer graduate education.
- The program must demonstrate that all individuals providing didactic and clinical education, both on-site and off-site, have appropriate experience and qualifications for the professional area in which education is provided.
- The program must demonstrate that the faculty possess appropriate qualifications and expertise to provide the depth and breadth of instruction for the curriculum as specified in Standard 3.
- The program must demonstrate that the majority of academic content is taught by doctoral faculty who hold the appropriate terminal academic degree (PhD, EdD).

**2.4 All faculty members maintain continuing competence and demonstrate pursuit of lifelong learning.**

*Requirement for Review:*

- The program must demonstrate that all individuals who have responsibility to deliver academic and clinical components of the graduate program maintain continuing competence.
- The program must demonstrate that all individuals who have responsibility to deliver the graduate program pursue lifelong learning.



## Standard 3.0A Curriculum (Academic and Clinical Education) in Audiology

**3.1A An effective entry-level professional audiology program allows each student to acquire knowledge and skills in sufficient breadth and depth to enable the student to function as an effective, well-educated, and competent clinical audiologist (i.e., one who can practice within the full scope of practice of audiology). The education program is designed to afford each student with opportunities to meet the expectations of the program that are consistent with the program's mission and goals and that prepare each student for independent professional practice as an audiologist.**

### *Requirement for Review:*

The doctoral program in audiology must meet the following requirements.

- Provide evidence of a curriculum that allows students to achieve the knowledge and skills listed below. Typically, the achievement of these outcomes requires the completion of 4 years of graduate education or the equivalent.
- Include a minimum of 12 months' full-time equivalent of supervised clinical experiences. These include short-term rotations and longer term externships and should be distributed throughout the program of study.
- Establish a clear set of program goals and objectives that must be met for students to acquire the knowledge and skills needed for entry into independent professional practice.
- Establish a clear process to evaluate student achievement of the program's established objectives.
- Offer opportunities for each student to acquire the knowledge and skills needed for entry into independent professional practice, consistent with the scope of practice for audiology, and across the range of practice settings.
- Offer a plan of study that encompasses the following domains:
  - professional practice competencies;
  - foundations of audiology practice;
  - identification and prevention of hearing loss, tinnitus, and vestibular disorders;
  - assessment of the structure and function of the auditory and vestibular systems;
  - assessment of the impact of changes in the structure and function of the auditory and vestibular systems;
  - intervention to minimize the effects of changes in the structure and function of the auditory and vestibular systems on an individual's ability to participate in his or her environment.
- Offer high quality learning environments that are learner centered, knowledge and skill centered, and assessment centered.
- Offer the academic and clinical program on a regular basis so that students are able to satisfy degree and other requirements within the published time frame.
- Offer opportunities to qualify for state and national credentials that are required for entry into independent professional practice that are consistent with the program mission and goals.

### **3.1.1A Professional Practice Competencies**

The program must provide content and opportunities for students to learn so that each student can demonstrate the following attributes and abilities and demonstrate those attributes and abilities in the manners identified.

### Accountability

- Practice in a manner that is consistent with the professional codes of ethics and the scope of practice documents for the profession of audiology.
- Adhere to federal, state, and institutional regulations and policies that are related to care provided by audiologists.
- Understand the professional's fiduciary responsibility for each individual served.
- Understand the various models of delivery of audiologic services (e.g., hospital, private practice, education, etc.).
- Use self-reflection to understand the effects of his or her actions and make changes accordingly.
- Understand the health care and education landscapes and how to facilitate access to services.
- Understand how to work on interprofessional teams to maintain a climate of mutual respect and shared values.

### Integrity

- Use the highest level of clinical integrity with each individual served, family members, caregivers, other service providers, students, other consumers, and payers.
- Understand and use best professional practices as they relate to maintenance of confidentiality for all individuals in accordance with requirements of the Health Insurance Portability and Accountability Act (HIPAA) and the Family Educational Rights and Privacy Act (FERPA).

### Effective Communication Skills

- Use all forms of expressive communication—including written, spoken, and nonverbal communication—with individuals served, family members, caregivers, and any others involved in the interaction to ensure the highest quality of care that is delivered in a culturally competent manner.
- Communicate—with patients, families, communities, interprofessional team colleagues, and other professionals caring for individuals—in a responsive and responsible manner that supports a team approach to maximize care outcomes.

### Clinical Reasoning

- Use valid scientific and clinical evidence in decision making regarding assessment and intervention.
- Apply current knowledge, theory, and sound professional judgment in approaches to intervention and management of individuals served.
- Use clinical judgment and self-reflection to enhance clinical reasoning.

### Evidence-Based Practice

- Access sources of information to support clinical decisions regarding assessment and intervention and management.
- Critically evaluate information sources and apply that information to appropriate populations.
- Integrate evidence in the provision of audiologic services.

### Concern for Individuals Served

- Show evidence of care, compassion, and appropriate empathy during interactions with each individual served, family members, caregivers, and any others involved in care.
- Encourage active involvement of the individual in his or her own care.

### Cultural Competence

- Understand the impact of his or her own set of cultural and linguistic variables on delivery of effective care (these include, but are not limited to, variables such as age, ethnicity, linguistic background, national origin, race, religion, gender, and sexual orientation).
- Understand the impact of the cultural and linguistic variables of the individuals served on delivery of effective care (these include, but are not limited to, variables such as age, ethnicity, linguistic background, national origin, race, religion, gender, and sexual orientation).
- Understand the interaction of cultural and linguistic variables between the caregivers and the individual served in order to maximize service delivery.
- Understand the characteristics of the individuals served (e.g., age, demographics, cultural and linguistic diversity, educational history and status, medical history and status, cognitive status, physical and sensory abilities) and how they relate to clinical services.
- Understand the role of manual and other communication systems and the use of sign and spoken interpreters/transliterators and assistive technology to deliver the highest quality care.

### Professional Duty

- Engage in self-assessment to improve his or her effectiveness in the delivery of clinical services.
- Understand the roles and importance of professional organizations in advocating for the rights of access to comprehensive audiologic services.
- Understand the role of clinical teaching and clinical modeling, as well as supervision of students and other support personnel.
- Understand the roles and importance of interdisciplinary/interprofessional assessment and intervention and be able to interact and coordinate care effectively with other disciplines and community resources.
- Understand and practice the principles of universal precautions to prevent the spread of infectious and contagious diseases.
- Understand and use the knowledge of one's own role and the roles of other professionals to appropriately assess and address the needs of the individuals and populations served.

### Collaborative Practice

- Understand how to apply values and principles of interprofessional team dynamics.
- Understand how to perform effectively in different interprofessional team roles to plan and deliver care—centered on the individual served—that is safe, timely, efficient, effective, and equitable.

### **3.1.2A Foundations of Audiology Practice**

The program includes content and opportunities to learn so that each student can demonstrate knowledge of the

- embryology, anatomy, and physiology of the auditory, vestibular, and related body systems;
- normal aspects of auditory and vestibular function across the lifespan;
- normal aspects of speech production and language function across the lifespan;
- normal aspects of speech perception across the lifespan;

- effects and role of genetics in auditory function, diagnosis, and management of hearing loss;
- effects and role of genetics in vestibular function, diagnosis, and management of vestibular disorders;
- effects of chemicals and other noxious elements on auditory and vestibular function;
- effects of pathophysiology on the auditory, vestibular, and related body systems;
- medical and surgical interventions that may be used to treat the results of pathophysiology in these systems;
- interaction and interdependence of speech, language, and hearing in the discipline of human communication sciences and disorders;
- effects of hearing loss on the speech and language characteristics of individuals across the life span and the continuum of care;
- effects of hearing impairment on educational, vocational, social, and psychological function and, consequently, on full and active participation in life activities;
- physical characteristics and measurement of simple and complex acoustic stimuli;
- physical characteristics and measurement of non-acoustic stimuli (e.g., EEG, tactile, electrical signals);
- methods of biologic, acoustic, and electroacoustic calibration of clinical equipment to ensure compliance with current American National Standards Institute (ANSI) standards (where available) and other recommendations regarding equipment function;
- principles of psychoacoustics as related to auditory perception in individuals with normal hearing and those with hearing loss;
- principles and practices of research, including experimental design, evidence-based practice, statistical methods, and application of research to clinical populations.

### **3.1.3A Identification and prevention of hearing loss, tinnitus, and vestibular disorders**

The program provides academic content and clinical education experiences so that each student can learn and demonstrate knowledge and skills in

- the prevention of the onset of loss of auditory system function, loss of vestibular system function, development of tinnitus, and development of communication disorders;
- the use of protocols to minimize the impact of the loss of hearing, tinnitus, loss of vestibular system function, and development of communication disorders;
- the use of screening protocols, including clinically appropriate and culturally sensitive screening measures, to assess individuals who may be at risk for hearing impairment and activity limitation or participation restriction;
- the screening of individuals for speech and language impairments and other factors affecting communication function using clinically appropriate and culturally sensitive screening measures;
- the use of screening tools for functional assessment;
- administering programs designed to reduce the effects of noise exposure, tinnitus, and agents that are toxic to the auditory and vestibular systems;
- applying psychometrics and principles of screening;
- applying the principles of evidence-based practice;
- selection and use of outcomes measures that are valid and reliable indicators of success of prevention programs.

### **3.1.4A Assessment of the structure and function of the auditory and vestibular systems**

The program provides academic content and clinical education experiences so that each student can learn and demonstrate knowledge and skills in order to

- evaluate information from appropriate sources to facilitate assessment planning;
- obtain a case history;
- perform an otoscopic examination;
- remove cerumen, when appropriate;
- administer clinically appropriate and culturally sensitive assessment measures;
- perform audiologic assessment using behavioral, physiological (e.g., immittance, wideband reflectance, evoked potentials), psychophysical, and self-assessment tools;
- perform audiologic assessment using techniques that are representative of the challenges listeners may face in everyday communication situations;
- perform assessment to plan for rehabilitation;
- perform assessment to characterize tinnitus;
- perform balance system assessment and determine the need for balance rehabilitation;
- document evaluation procedures and results;
- interpret results of the evaluation to establish type and severity of disorder;
- generate recommendations and referrals resulting from the evaluation processes;
- provide counseling in a culturally sensitive manner to facilitate understanding of the hearing loss, tinnitus, or balance disorder of the individual being served;
- maintain records in a manner consistent with legal and professional standards;
- communicate results and recommendations orally and in writing to the individual being served and other appropriate individual(s);
- engage in interprofessional practice to facilitate optimal assessment of the individual being served;
- assign the correct Common Procedural Terminology (CPT) code(s) and the correct International Classification of Diseases (ICD) code(s);
- apply the principles of evidence-based practice;
- select and use outcomes measures that are valid and reliable indicators of success in assessment protocols that are used.

### **3.1.5A Assessment of the impact of changes in the structure and function of the auditory and vestibular systems**

The program provides academic content and clinical education experiences so that each student can learn and demonstrate knowledge and skills in order to

- administer clinically appropriate and culturally sensitive self-assessment measures of communication function for individuals across the lifespan and the continuum of care,
- administer clinically appropriate and culturally sensitive scales of communication function to communication partners of the individual being served,
- administer clinically appropriate and culturally sensitive functional assessment tools for individuals across the lifespan and the continuum of care,
- determine contextual factors that may facilitate or impede an individual's participation in everyday life,
- select and use outcomes measures that are valid and reliable indicators of success in determining the impact of changes in structure and function of the auditory and vestibular systems.

### **3.1.6A Intervention to minimize the effects of changes in the auditory and vestibular systems on an individual's ability to participate in his or her environment**

The program's curriculum provides academic content and clinical education experiences so that each student can learn and demonstrate knowledge and skills in order to

- perform assessment for aural (re)habilitation;
- perform assessment for tinnitus intervention;
- perform assessment for vestibular rehabilitation;
- develop and implement treatment plans using appropriate data;
- counsel individuals served, families, and other appropriate individuals regarding prognosis and treatment options;
- develop culturally sensitive and age-appropriate management strategies;
- perform hearing aid, assistive listening device, and sensory aid assessment;
- perform assessment of devices used to manage tinnitus;
- recommend, dispense, and service prosthetic and assistive devices;
- provide hearing aid, assistive listening device, and sensory aid orientation;
- conduct audiologic (re)habilitation and engage in interprofessional practice to maximize outcomes for individuals served;
- serve as an advocate for individuals served, their families, and other appropriate individuals;
- monitor and summarize treatment progress and outcomes;
- assess efficacy of interventions for auditory, tinnitus, and balance disorders;
- apply the principles of evidence-based practice;
- document treatment procedures and results;
- maintain records in a manner consistent with legal and professional standards;
- communicate results, recommendations, and progress in a culturally sensitive and age-appropriate manner to appropriate individual(s);
- select and use outcomes measures that are valid and reliable indicators of success in determining the impact of the interventions used to minimize the effects of changes in structure and function of the auditory and vestibular systems.

### **3.2A An effective audiology program is characterized by planning and organization, is reviewed systematically and on a regular basis, and is consistent with current knowledge and practice guidelines of the profession.**

*Requirement for Review:*

- The program must demonstrate that the
  - curriculum is planned and based on current standards of audiology practice;
  - curriculum is based on current literature and other current documents related to professional practice and education in audiology;
  - curriculum is delivered using sound pedagogical methods;
  - curriculum is reviewed systematically and on a regular basis;
  - review of the curriculum is conducted by comparing existing plans to current standards of audiology practice, current literature, and other documents related to professional practice and education in audiology.

**3.3A An effective audiology program is planned and delivered in an organized, sequential, and integrated manner to allow each student to meet the program's established learning goals and objectives and develop into an independent, competent audiologist.**

*Requirement for Review:*

- The program must demonstrate how the courses and clinical experiences are organized and sequenced and allow for integration across all elements of the program.

**3.4A An effective audiology program is organized and delivered in such a manner that the diversity of society is reflected in the program.**

*Requirement for Review:*

- The program must provide evidence that issues related to diversity are infused throughout the academic and clinical program.

**3.5A An effective audiology program is organized so that the scientific and research foundations of the profession are evident.**

*Requirement for Review:*

- The program must demonstrate the procedures used to verify that students obtain knowledge in
  - o the basic sciences;
  - o basic science skills (e.g., scientific methods, critical thinking);
  - o the basics of communication sciences (e.g., acoustics, psychoacoustics and neurological processes of speech, language, and hearing).
- The program must demonstrate how the curriculum provides opportunities for students to
  - o understand and apply the scientific bases of the profession,
  - o understand and apply research methodology,
  - o become knowledgeable consumers of research literature,
  - o become knowledgeable about the fundamentals of evidence-based practice,
  - o apply the scientific bases and research principles to clinical populations.
- The program must include research and scholarship participation opportunities that are consistent with the mission and goals of the program.

**3.6A The clinical education component of an effective entry-level audiology program is planned for each student so that there is access to a base of individuals who may be served that is sufficient to achieve the program's stated mission and goals. That base includes a variety of clinical settings, populations, and age groups. The comprehensive clinical experiences must include direct contact with individuals seeking services, consultation, recordkeeping, and administrative duties relevant to professional service delivery in audiology.**

*Requirement for Review:*

The program must demonstrate that it has mechanisms to develop comprehensive plans of clinical educational experiences so that each student has an opportunity to

- experience the breadth and depth of clinical practice,
- obtain experiences with different populations,
- obtain a variety of clinical experiences in different work settings,

- obtain experiences with appropriate equipment and resources,
- learn from experienced audiologists who will serve as effective clinical educators.

**3.7A An effective audiology program ensures that clinical education is provided in a manner that supports student development so that each student is prepared to enter independent professional practice. The type and structure of the clinical education are commensurate with the development of knowledge and skills of each student.**

*Requirement for Review:*

- The program must demonstrate that the procedures used in clinical education ensure that student development is supported and that each student acquires the independence needed to enter professional practice.
- The program must demonstrate that the clinical education component of the program is structured to be consistent with the knowledge and skill levels of each student.

**3.8A Clinical education is provided in a manner that ensures that the welfare of each person served by a student and clinical educator team is protected and in accordance with recognized standards of ethical practice and relevant federal and state regulations.**

*Requirement for Review:*

- The program must demonstrate that the supervision provided to each student is adjusted to ensure that the specific needs are met for each individual who is receiving services.
- The program must demonstrate that the procedures used in clinical education ensure that the welfare of each person being served by the student and clinical educator team is protected.
- The program must demonstrate that the services provided by the student and clinical educator team is in accordance with recognized standards of ethical practice and relevant federal and state regulations.

**3.9A Clinical education obtained in external placements is governed by agreements between the program and the external facility and is monitored by program faculty.**

*Requirement for Review:*

- The program must have evidence of valid agreements (written or electronic) with all active external facilities in which students are placed for clinical practicum experiences.
- The program must have written policies regarding the role of students in the selection of externship sites and the placement of students in the sites.
- The program must have written policies that describe the processes used by the program to select and place students in external facilities.
- The program must have written policies and procedures that describe the processes used to determine whether a clinical site has the appropriate clinical population and personnel to provide an appropriate clinical education experience for each student.
- The program must have processes to ensure that the clinical education in external facilities is monitored by the program to verify that educational objectives are met.



**3.10A An effective entry-level audiology program ensures that its students know the expectations regarding their exercise of the highest level of academic and clinical integrity during all aspects of their education.**

*Requirement for Review:*

- The program must have written policies and procedures that describe its expectations of student behavior with regard to academic and clinical conduct.
- The program must have policies and procedures that describe the processes used to address violations of academic and clinical conduct, including, but not limited, to plagiarism, dishonesty, all aspects of cheating, and violations of ethical practice.

## **Standard 3.0B Curriculum (Academic and Clinical Education) in Speech-Language Pathology**

**3.1B An effective entry-level professional speech-language pathology program allows each student to acquire knowledge and skills in sufficient breadth and depth to function as an effective, well-educated, and competent clinical speech-language pathologist (i.e., one who can practice within the full scope of practice of speech-language pathology). The education program is designed to afford each student with opportunities to meet the expectations of the program that are consistent with the program's mission and goals and that prepare each student for professional practice in speech-language pathology.**

### *Requirement for Review:*

The master's program in speech-language pathology must perform the following functions.

- Provide the opportunity for students to complete a minimum of 400 supervised clinical practice hours, 25 of which may be in clinical observation; 325 of these hours must be attained at the graduate level. The supervised clinical experiences should be distributed throughout the program of study.
- The program must provide sufficient breadth and depth of opportunities for students to obtain a variety of clinical education experiences in different work settings, with different populations, and with appropriate equipment and resources in order to acquire and demonstrate skills across the scope of practice in speech-language pathology, sufficient to enter professional practice. Typically, the achievement of these outcomes requires the completion of 2 years of graduate education or the equivalent.
- Establish a clear set of program goals and objectives that must be met for students to acquire the knowledge and skills needed for entry into professional practice.
- Establish a clear process to evaluate student achievement of the program's established objectives.
- Offer opportunities for each student to acquire the knowledge and skills needed for entry into professional practice, consistent with the scope of practice for speech-language pathology, and across the range of practice settings.
- Offer a plan of study that encompasses the following domains:
  - professional practice competencies;
  - foundations of speech-language pathology practice;
  - identification and prevention of speech, language, and swallowing disorders and differences;
  - assessment of speech, language, and swallowing disorders and differences;
  - intervention to minimize the impact for speech, language, and swallowing disorders and differences.
- Offer high quality learning environments that are learner centered, knowledge and skill centered, and assessment centered.
- Offer the academic and clinical program on a regular basis so that students are able to satisfy degree and other requirements within the program's published time frame.
- Offer opportunities for students to qualify for state and national credentials that are required for entry into professional practice, consistent with the program's mission and goals (e.g., state license, state teacher certification, national credential).

### **3.1.1B Professional Practice Competencies**

The program must provide content and opportunities for students to learn so that each student can demonstrate the following attributes and abilities and demonstrate those attributes and abilities in the manners identified.

#### Accountability

- Practice in a manner that is consistent with the professional code of ethics and the scope of practice documents for the profession of speech-language pathology.
- Adhere to federal, state, and institutional regulations and policies that are related to services provided by speech-language pathologists.
- Understand the fiduciary responsibility for each individual served.
- Understand the various models of delivery of speech-language pathology services (e.g., hospital, private practice, education, etc.).
- Use self-reflection to understand the effects of his or her actions and makes changes accordingly.
- Understand the health care and education landscape and how to facilitate access to services.
- Understand how to work on interprofessional teams to maintain a climate of mutual respect and shared values.

#### Integrity

- Use the highest level of clinical integrity with each individual served, family members, caregivers, other service providers, students, other consumers, and payers; and
- Understand and use best professional practices related to maintenance of confidentiality for all individuals in accordance with HIPAA and FERPA requirements.

#### Effective Communication Skills

- Use all forms of expressive communication—including written, spoken, and non-verbal communication—with individuals served, family members, caregivers, and any others involved in the interaction to ensure the highest quality of care that is delivered in a culturally competent manner.
- Communicate—with patients, families, communities, and interprofessional team colleagues and other professionals caring for individuals in a responsive and responsible manner that supports a team approach to maximize care outcomes.

#### Clinical Reasoning

- Use valid scientific and clinical evidence in decision-making regarding assessment and intervention.
- Apply current knowledge, theory, and sound professional judgment in approaches to intervention and management of individuals served.
- Use clinical judgment and self-reflection to enhance clinical reasoning.

#### Evidence-Based Practice

- Access sources of information to support clinical decisions regarding assessment and intervention/management,
- Critically evaluate information sources and applies that information to appropriate populations, and
- Integrate evidence in provision of speech-language pathology services.

### Concern for Individuals Served

- Show evidence of care, compassion, and appropriate empathy during interactions with each individual served, family members, caregivers, and any others involved in care; and
- Encourage active involvement of the individual served in his or her own care.

### Cultural Competence

- Understand the impact of his or her own set of cultural and linguistic variables on delivery of effective care. These include, but are not limited to, variables such as age, ethnicity, linguistic background, national origin, race, religion, gender, and sexual orientation.
- Understand the impact of the cultural and linguistic variables of the individuals served on delivery of care. These include but are not limited to variables such as age, ethnicity, linguistic background, national origin, race, religion, gender, and sexual orientation.
- Understand the interaction of cultural and linguistic variables between the caregivers and the individuals served in order to maximize service delivery.
- Understand the characteristics of the individuals served (e.g., age, demographics, cultural and linguistic diversity, educational history and status, medical history and status, cognitive status, and physical and sensory abilities) and how these characteristics relate to clinical services.

### Professional Duty

- Engage in self-assessment to improve his or her effectiveness in the delivery of services.
- Understand the roles and importance of professional organizations in advocating for rights to access to speech-language pathology services.
- Understand the role of clinical teaching and clinical modeling as well as supervision of students and other support personnel.
- Understand the roles and importance of interdisciplinary/interprofessional assessment and intervention and be able to interact and coordinate care effectively with other disciplines and community resources.
- Understand and practice the principles of universal precautions to prevent the spread of infectious and contagious diseases.
- Understand and use the knowledge of one's own role and those of other professions to appropriately assess and address the needs of the individuals and populations served.

### Collaborative Practice

- Understand how to apply values and principles of interprofessional team dynamics.
- Understand how to perform effectively in different interprofessional team roles to plan and deliver care centered on the individual served that is safe, timely, efficient, effective, and equitable.

### **3.1.2B Foundations of Speech-Language Pathology Practice**

The program must include content and opportunities to learn so that each student can demonstrate knowledge of the

- discipline of human communication sciences and disorders;
- basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases;
- ability to integrate information pertaining to normal and abnormal human development across the life span;
- nature of communication and swallowing processes
  - elements
    - articulation;
    - fluency;
    - voice and resonance, including respiration and phonation;
    - receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication, and paralinguistic communication) in speaking, listening, reading, writing, and manual modalities;
    - hearing, including the impact on speech and language;
    - swallowing (oral, pharyngeal, esophageal, and related functions, including oral function for feeding; orofacial myology);
    - cognitive aspects of communication (e.g., attention, memory, sequencing, problem solving, executive functioning);
    - social aspects of communication (e.g., behavioral and social skills affecting communication);
    - augmentative and alternative communication.
  - knowledge of the above elements includes each of the following:
    - etiology of the disorders or differences,
    - characteristics of the disorders or differences,
    - underlying anatomical and physiological characteristics of the disorders or differences,
    - acoustic characteristics of the disorders or differences (where applicable),
    - psychological characteristics associated with the disorders or differences,
    - developmental nature of the disorders or differences,
    - linguistic characteristics of the disorders or differences (where applicable),
    - cultural characteristics of the disorders or differences.

### **3.1.3B Identification and Prevention of Speech, Language, and Swallowing Disorders and Differences**

The program must include content and opportunities to learn so that each student can demonstrate knowledge of

- principles and methods of identification of communication and swallowing disorders and differences,
- principles and methods of prevention of communication and swallowing disorders.

### **3.1.4B Evaluation of Speech, Language, and Swallowing Disorders and Differences**

The program must include content and opportunities to learn so that each student can demonstrate knowledge and skills in assessment across the lifespan for disorders and differences associated with

- articulation;
- fluency;
- voice and resonance, including respiration and phonation;
- receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication, and paralinguistic communication) in speaking, listening, reading, writing, and manual modalities;
- hearing, including the impact on speech and language;
- swallowing (oral, pharyngeal, esophageal, and related functions, including oral function for feeding; orofacial myology);
- cognitive aspects of communication (e.g., attention, memory, sequencing, problem solving, executive functioning);
- social aspects of communication (e.g., behavioral and social skills affecting communication); and
- augmentative and alternative communication needs.

### **3.1.5B Intervention to Minimize the Effects of Changes in the Speech, Language, and Swallowing Mechanisms**

The program must include content and opportunities to learn so that each student can demonstrate knowledge and skills in

- intervention for communication and swallowing differences with individuals across the lifespan to minimize the effect of those disorders and differences on the ability to participate as fully as possible in the environment.
- intervention for disorders and differences of
  - articulation;
  - fluency;
  - voice and resonance, including respiration and phonation;
  - receptive and expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication, and paralinguistic communication) in speaking, listening, reading, writing, and manual modalities;
  - hearing, including the impact on speech and language;
  - swallowing (oral, pharyngeal, esophageal, and related functions, including oral function for feeding; orofacial myology);
  - cognitive aspects of communication (e.g., attention, memory, sequencing, problem solving, executive functioning);
  - social aspects of communication (e.g., behavioral and social skills affecting communication);
  - augmentative and alternative communication needs.

### **3.1.6B General Knowledge and Skills Applicable to Professional Practice**

The program must include content and opportunities to learn so that each student acquires knowledge and skills in working with individuals with the aforementioned communication and swallowing disorders across the lifespan and by demonstration of

- ethical conduct;

- integration and application of knowledge of the interdependence of speech, language, and hearing;
- engagement in contemporary professional issues and advocacy;
- processes of clinical education and supervision;
- professionalism and professional behavior in keeping with the expectations for a speech-language pathologist;
- interaction skills and personal qualities, including counseling and collaboration;
- self-evaluation of effectiveness of practice.

**3.2B An effective speech-language pathology program is characterized by planning and organization, is reviewed systematically and on a regular basis, and is consistent with current knowledge and practice guidelines of the profession.**

*Requirement for Review:*

- The program must demonstrate that the
  - o curriculum is planned and based on current standards of speech-language pathology practice;
  - o curriculum is based on current literature and other current documents related to professional practice and education in speech-language pathology;
  - o curriculum is delivered using sound pedagogical methods;
  - o curriculum is reviewed systematically and on a regular basis;
  - o review of the curriculum is conducted by comparing existing plans with current standards of speech-language pathology practice, current literature, and other documents related to professional practice and education in speech-language pathology.

**3.3B An effective speech-language pathology program is planned and delivered in an organized, sequential, and integrated manner to allow each student to meet the program's established learning goals and objectives and develop into a competent speech-language pathologist.**

*Requirement for Review:*

- The program must demonstrate how the courses and clinical experiences are organized and sequenced and allow for integration across all elements of the program.

**3.4B An effective speech-language pathology program is organized and delivered in such a manner that the diversity of society is reflected in the program.**

*Requirement for Review:*

- The program must provide evidence that issues related to diversity are infused throughout the academic and clinical program.

**3.5B An effective speech-language pathology program is organized so that the scientific and research foundations of the profession are evident.**

*Requirement for Review:*

- The program must demonstrate the procedures used to verify that students obtain knowledge in
  - the basic sciences and statistics;
  - basic science skills (e.g., scientific methods, critical thinking);
  - the basics of communication sciences (e.g., acoustics, linguistics, and neurological processes of speech, language, and hearing).
- The program must demonstrate how the curriculum provides opportunities for students to
  - understand and apply the scientific bases of the profession,
  - understand and apply research methodology,
  - become knowledgeable consumers of research literature,
  - become knowledgeable about the fundamentals of evidence-based practice,
  - apply the scientific bases and research principles to clinical populations.

The program must include research and scholarship participation opportunities that are consistent with the mission and goals of the program.

**3.6B The clinical education component of an effective entry-level speech-language pathology program is planned for each student so that there is access to a base of individuals who may be served that is sufficient to achieve the program's stated mission and goals and includes a variety of clinical settings, populations, and age groups. The comprehensive clinical experiences must include direct contact with individuals seeking service, consultation, recordkeeping, and administrative duties relevant to professional service delivery in speech-language pathology.**

*Requirement for Review:*

- The program must demonstrate that it has mechanisms to develop comprehensive plans of clinical educational experiences so that each student has an opportunity to
  - experience the breadth and depth of clinical practice,
  - obtain experiences with diverse populations,
  - obtain a variety of clinical experiences in different work settings,
  - obtain experiences with appropriate equipment and resources,
  - learn from experienced speech-language pathologists who will serve as effective clinical educators.

**3.7B An effective speech-language pathology program ensures that clinical education is provided in a manner that supports student development so that each student is prepared to enter professional practice. The type and structure of the clinical education is commensurate with the development of knowledge and skills of each student.**

*Requirement for Review:*

- The program must demonstrate that the procedures used in clinical education ensure that student development is supported and that each student acquires the independence needed to enter professional practice.



- The program must demonstrate that the clinical education component of the program is structured to be consistent with the knowledge and skills levels of each student.

**3.8B Clinical education is provided in a manner that ensures that the welfare of each person served by a student and clinical educator team is protected and in accordance with recognized standards of ethical practice and relevant federal and state regulations.**

*Requirement for Review:*

- The program must demonstrate that the supervision provided to each student is adjusted to ensure that the specific needs are met for each individual who is receiving services.
- The program must demonstrate that the procedures used in clinical education ensure that the welfare of each person being served by the student and clinical educator team is protected.
- The program must demonstrate that the services provided by the student and clinical educator team are in accordance with recognized standards of ethical practice and relevant federal and state regulations.

**3.9B Clinical education obtained in external placements is governed by agreements between the program and the external facility and is monitored by program faculty.**

*Requirement for Review:*

- The program must have evidence of valid agreements (written or electronic) with all active external facilities in which students are placed for clinical practicum experiences.
- The program must have written policies regarding the role of students in the selection of externship sites and the placement of students in the sites.
- The program must have written policies that describe the processes used by the program to select and place students in external facilities.
- The program must have written policies and procedures that describe the processes used to determine whether a clinical site has the appropriate clinical population and personnel to provide an appropriate clinical education experience for each student.
- The program must have processes to ensure that the clinical education in external facilities is monitored by the program to verify that educational objectives are met.

**3.10B An effective entry-level speech-language pathology program ensures that its students know the expectations regarding their exercise of the highest level of academic and clinical integrity during all aspects of their education.**

*Requirement for Review:*

- The program must have written policies and procedures that describe program expectations of student behavior with regard to academic and clinical conduct.
- The program must have policies and procedures that describe the processes used to address violations of academic and clinical conduct, including, but not limited to, plagiarism, dishonesty, and all aspects of cheating, and violations of ethical practice.

## Standard 4.0 Students

**4.1 The program criteria for accepting students for graduate study in audiology or speech-language pathology meet or exceed the institutional policy for admission to graduate study.**

*Requirement for Review:*

- The admission criteria must meet or exceed those of the institution and be appropriate for the degree being offered.
- Policies regarding any exceptions to the criteria (such as "conditional" status) must be clearly explained and consistently followed.

**4.2 The program makes reasonable adaptations in curriculum, policies, and procedures to accommodate differences among individual students.**

*Requirement for Review:*

- The program must provide evidence that its curriculum and program policies and procedures for admission, internal and external clinical placements, and retention of students reflect a respect for and understanding of cultural, linguistic, and individual diversity.
- The program must have a policy regarding proficiency in spoken and written English and other languages of instruction and service delivery and all other performance expectations.
- The program must demonstrate that its language proficiency policy is applied consistently.
- The program must have a policy regarding the use of accommodations for students with reported disabilities.

**4.3 The program has policies and procedures for identifying the need to provide intervention for each student who does not meet program expectations for the acquisition of knowledge and skills in the academic and clinical components of the program.**

*Requirement for Review:*

- The program has policies and procedures for identifying students who need intervention to meet program expectations for the acquisition of knowledge and skills in the academic component of the curriculum.
- The program has policies and procedures for identifying students who need intervention to meet program expectations for the acquisition of knowledge and skills in the clinical component of the curriculum.
- The program has policies and procedures for implementing and documenting all forms of intervention used to facilitate each student's success in meeting the program's expectations.
- The program must demonstrate that the policies and procedures are applied consistently across all students who are identified as needing intervention.

**4.4 Students are informed about the program's policies and procedures, expectations regarding academic integrity and honesty, ethical practice, degree requirements, and requirements for professional credentialing.**

*Requirement for Review:*

- The program must provide information regarding
  - program policies and procedures,
  - program expectations regarding academic integrity and honesty,
  - program expectations for ethical practice,
  - the degree requirements,
  - the requirements for professional credentialing.

**4.5 Students are informed about the processes that are available to them for filing a complaint against the program.**

*Requirement for Review:*

- The program must provide information regarding the process and mechanism to file a complaint against the program within the sponsoring institution.
- The program must maintain a record of student complaints filed against the program within the sponsoring institution.
- The program must maintain a record of student complaints regarding any of the program's policies and procedures or regarding unlawful conduct and make these available to the CAA upon request.
- Students must be made aware of the process and mechanism, including contact information for the CAA, to file a complaint related to the program's compliance with standards for accreditation.

**4.6 Students receive advising on a regular basis that pertains to both academic and clinical performance and progress.**

*Requirement for Review:*

- The program must maintain records of advisement for each of its students.
- The program must maintain records demonstrating that students are advised on a timely and continuing basis regarding their academic and clinical progress.
- The program must maintain records demonstrating that any concerns about a student's performance in meeting the program requirements, including language proficiency, are addressed with the student.

**4.7 The program documents student progress toward completion of the graduate degree and professional credentialing requirements.**

*Requirement for Review:*

- The program must maintain complete and accurate records of all students' progress during the entire time of their matriculation in the program.
- The records for each student must include documentation that can demonstrate that the student has met all the academic, clinical, and other requirements for the degree and the credential(s) that are identified by the program in its mission and goals.

**4.8 The program makes the documentation of student progress toward completing the graduate degree and meeting professional credentialing requirements available to its students to assist them in qualifying for the credential(s).**

*Requirement for Review:*

- The program must provide each student access to his or her own records upon request.
- The program must make records available to program graduates and those who attended the program, but did not graduate.
- The availability of records for program graduates and those who attended the program, but did not graduate, must be consistent with the institution's and the program's policies regarding retention of student records.

**4.9 Students are provided information about student support services available within the program and institution.**

*Requirement for Review:*

- The program must have a mechanism to inform students about the full range of student support services (beyond accommodations for disabilities addressed in Standard 4.2) available at the sponsoring institution.

**4.10 The program must adhere to its institutional policies and procedures to verify that a student who registers for a distance education course or program is the same student who participates in and completes the program and receives the academic credit.**

*Requirement for Review:*

- The program must document that the institutional policies regarding verification of a student's identity are followed and implemented and applied consistently.
- The program must make clear that the identities of students enrolled in a distance education course or program are protected.
- If there are fees associated with learning within a distance modality, the program must document how that information is provided to students.

## Standard 5.0 Assessment

### 5.1 The program regularly assesses student learning.

*Requirement for Review:*

- The program must demonstrate that it assesses the achievement of student learning outcomes to determine student success in the acquisition of expected knowledge and skills.
- The program must demonstrate that it provides a learning environment that provides each student with consistent feedback.

### 5.2 The program conducts ongoing and systematic formative and summative assessments of the performance of its students.

*Requirement for Review:*

- The program must develop an assessment plan that is used throughout the program for each student. The plan must include the purpose of the assessments and use a variety of assessment techniques, including both formative and summative methods.
- Assessments must be administered by multiple academic and clinical faculty members.
- The program must demonstrate how it uses its assessments to evaluate and enhance student progress and acquisition of knowledge and skills.
- The program must demonstrate that student assessment is applied consistently and systematically.

### 5.3 The program administers regular and ongoing assessment protocols to evaluate the quality of the program and to facilitate continuous quality improvement.

*Requirement for Review:*

- The assessment protocols must be used to evaluate the academic and clinical aspects of the entire program.
- The program must collect data from multiple sources (e.g., alumni, faculty, employers, off-site clinical educators, community members, individuals receiving services) and allow evaluation of the program's success in achieving its goals, objectives, and the extent to which student learning outcomes have been met.
- The program must systematically collect evaluations of the academic and clinical aspects of the program from students and use these to assess those aspects of the program.
- The program must use the results of its assessment protocols to improve and refine the program goals and objectives and ensure alignment between the program's stated goals and objectives and the measured student learning outcomes.

**5.4 The program uses the results of its ongoing programmatic assessments for continuous quality improvement and evaluates the improvements.**

*Requirement for Review:*

- The program must describe how it uses programmatic assessment data to promote continuous quality improvement of the program.
- The program must describe the processes it uses to evaluate program improvements for congruence with its stated mission and goals.

**5.5 The percentage of students who are enrolled on the first census date of the program and complete the program within the program's published academic terms meets or exceeds the CAA's established threshold.**

*Requirement for Review:*

- The CAA's established threshold requires that at least 80% of students must have completed the program within the program's published time frame (number of academic terms), as averaged over the 3 most recently completed academic years.
- If, when averaged over 3 academic years, the program's completion rate does not meet or exceed the CAA's established threshold, the program must provide an explanation and a plan for improving the results.

**5.6 The percentage of test-takers who pass the *Praxis*<sup>®</sup> Subject Assessments in audiology or speech-language pathology meets or exceeds the CAA's established threshold.**

*Requirement for Review:*

- The CAA's established threshold requires that at least 80% of test-takers from the program pass the *Praxis*<sup>®</sup> Subject Assessment examination, as averaged over the 3 most recently completed academic years; results should be reported only once for test-takers who took the exam multiple times in the same examination reporting period.
- If, when averaged over 3 academic years, the program's *Praxis*<sup>®</sup> Subject Assessment exam pass rate does not meet or exceed the CAA's established threshold, the program must provide an explanation and a plan for improving the results.

**5.7 The percentage of program graduates who are employed in the profession or pursuing further education in the profession within 1 year of graduation meets or exceeds the CAA's established threshold.**

*Requirement for Review:*

- The CAA's established threshold requires that at least 80% of program graduates must be employed in the profession or pursuing further education in the profession within 1 year of graduation, as averaged over the 3 most recently completed academic years.
- If, when averaged over 3 academic years, the program's employment rate does not meet or exceed the CAA's established threshold, the program must provide an explanation and a plan for improving the results.

**5.8 The program demonstrates how it uses the results of its analyses of success in meeting the established CAA thresholds for program completion rate, Praxis® Subject Assessments pass rate, and employment rate or the rate of continuation of education in the field for continuous quality improvement at the programmatic level.**

*Requirement for Review:*

- The program must demonstrate its analysis processes to determine whether the program is meeting or exceeding each established CAA threshold.
- The program must demonstrate how it uses the results of these analyses to ensure continuous quality improvement.

**5.9 The program regularly evaluates and documents the results of the assessment of all faculty and staff to determine their effectiveness in delivering a thorough and current program.**

*Requirement for Review:*

- The program must demonstrate the mechanisms that it uses to evaluate the effectiveness of the faculty and staff in delivering the program.
- The program must demonstrate that the evaluation takes place in a fair and systematic fashion that is consistent with institutional policy and procedures.
- The program faculty must be actively involved in these evaluations in a manner that is consistent with institutional policy and procedures.

**5.10 The faculty and staff involved in delivering the program to students use the results of the evaluation of their performance to guide continuous professional development that facilitates the delivery of a high quality program.**

*Requirement for Review:*

- The program must demonstrate how the faculty and staff use the results of evaluations of performance to guide continuous professional growth and development.
- The program must demonstrate how the growth and development of its faculty and staff facilitate the delivery of a high quality program.

**5.11 The individual responsible for the program of professional education seeking accreditation effectively leads and administers the program.**

*Requirement for Review:*

- The program director's effectiveness in advancing the goals of the program and in leadership and administration of the program must be regularly evaluated.

## Standard 6.0 Program Resources

### **6.1 The institution provides adequate financial support to the program so that it can achieve its stated mission and goals.**

#### *Requirement for Review:*

- The program must demonstrate
  - that its budgetary allocation is regular, appropriate, and sufficient to deliver a high quality program that is consistent with its mission and goals;
  - that there is sufficient support, consistent with the program mission and goals, for personnel, equipment, educational and clinical materials, and research activities;
  - consistency of sources of funds that are received outside the usual university budgeting processes, if the program is dependent on them.

### **6.2 The institution provides adequate support to the program so that its faculty and staff have the opportunities to maintain continuing competence.**

#### *Requirement for Review:*

- The program must demonstrate that support, incentives, and resources are available for the continued professional development of the faculty.

### **6.3 The program has adequate physical facilities (classrooms, offices, clinical space, research laboratories) that are accessible, appropriate, safe, and sufficient to achieve the program's mission and goals.**

#### *Requirement for Review:*

- The program must demonstrate that its facilities are adequate to deliver a program that is consistent with its mission and goals.
- The program must demonstrate that the facility has been evaluated and that the program includes access and accommodations for the needs of individuals with disabilities, in accordance with federal regulations.

### **6.4 The program's equipment and educational and clinical materials are appropriate and sufficient to achieve the program's mission and goals.**

#### *Requirement for Review:*

- The program must demonstrate that the quantity, quality, currency, and accessibility of materials and equipment are sufficient to meet the mission and goals of the program.
- The program must demonstrate that it has a process for reviewing and updating materials and equipment to determine whether the quantity, quality, and currency are sufficient to meet the mission and goals of the program.
- The program must demonstrate that the equipment is maintained in good working order.
- The program must demonstrate that any equipment for which there are ANSI or other standards-setting body requirements meets the expectations of the standard(s).



**6.5 The program has access to an adequate technical infrastructure to support the work of the students, faculty, and staff. The technical infrastructure includes access to the Internet, the online and physical resources of the library, and any streaming or videoconferencing facilities needed for the program to meet its mission and goals**

*Requirement for Review:*

- The program must demonstrate adequate access to a technical infrastructure that supports the work of the students, faculty, and staff.
- The program must demonstrate how access to this infrastructure helps the program meet its mission and goals.

**6.6 The program has access to clerical and technical staff that is appropriate and sufficient to support the work of the students, faculty, and staff. The access is appropriate and sufficient for the program to meet its mission and goals.**

*Requirement for Review:*

- The program must demonstrate adequate access to clerical and technical staff to support the work of the students, faculty, and staff.
- The program must demonstrate how access to the clerical and technical staff helps the program meet its mission and goals.

## Resources

- Accreditation Council for Pharmacy Education. (2015). *Accreditation standards and key elements for the professional program in pharmacy leading to the doctor of pharmacy degree*. Retrieved from [www.acpe-accredit.org/pdf/Standards2016FINAL.pdf](http://www.acpe-accredit.org/pdf/Standards2016FINAL.pdf).
- Accreditation Council on Optometric Education. (2014). *Accreditation manual: Professional optometric degree programs*. Retrieved from [www.aoa.org/Documents/students/od\\_manual\\_08\\_2014.pdf](http://www.aoa.org/Documents/students/od_manual_08_2014.pdf).
- American Academy of Audiology. (2004). *Scope of practice*. Retrieved from [www.audiology.org/publications-resources/document-library/scope-practice](http://www.audiology.org/publications-resources/document-library/scope-practice).
- American Academy of Audiology. (n.d.). *Code of ethics*. Retrieved from [www.audiology.org/publications-resources/document-library/code-ethics](http://www.audiology.org/publications-resources/document-library/code-ethics).
- American Occupational Therapy Association Accreditation Council for Occupational Therapy Education. (2013). *Accreditation Council for Occupational Therapy Education (ACOTE®) standards and interpretive guide*. Retrieved from [www.aota.org/Education-Careers/Accreditation/StandardsReview.aspx](http://www.aota.org/Education-Careers/Accreditation/StandardsReview.aspx).
- American Physical Therapy Association Commission on Accreditation in Physical Therapy Education. (2014). *Evaluative criteria: Physical therapy programs*. Retrieved from [www.capteonline.org/uploadedFiles/CAPTEorg/About\\_CAPTE/Resources/Accreditation\\_Handbook/EvaluativeCriteria\\_PT.pdf](http://www.capteonline.org/uploadedFiles/CAPTEorg/About_CAPTE/Resources/Accreditation_Handbook/EvaluativeCriteria_PT.pdf).
- American Psychological Association. (n.d.). *Competency initiatives in professional psychology*. Retrieved from [www.apa.org/ed/graduate/competency.aspx](http://www.apa.org/ed/graduate/competency.aspx).
- American Speech-Language-Hearing Association. (2004a). *Preferred practice patterns for the profession of speech-language pathology*. Retrieved from [www.asha.org/policy/PP2004-00191](http://www.asha.org/policy/PP2004-00191).
- American Speech-Language-Hearing Association. (2004b). *Scope of practice in audiology*. Retrieved from [www.asha.org/policy/SP2004-00192](http://www.asha.org/policy/SP2004-00192).
- American Speech-Language-Hearing Association. (2006). *Preferred practice patterns for the profession of audiology*. Retrieved from [www.asha.org/policy/PP2006-00274](http://www.asha.org/policy/PP2006-00274).
- American Speech-Language-Hearing Association. (2007). *Scope of practice in speech-language pathology*. Retrieved from [www.asha.org/policy/sp2007-00283](http://www.asha.org/policy/sp2007-00283).
- American Speech-Language-Hearing Association. (2008). *A practice and curriculum analysis for the profession of audiology*. Retrieved from <http://www.asha.org/Academic/Audiology-Practice-Analysis-and-Curriculum-Study/>
- American Speech-Language-Hearing Association. (2010). *A practice and curriculum analysis for the profession of speech-language pathology*. Retrieved from <http://www.asha.org/Academic/SLP-Practice-Analysis-and-Curriculum-Study/>
- American Speech-Language-Hearing Association. (2010r). *Code of ethics*.

- American Speech-Language-Hearing Association. (2011). *Evidence-based practice*. Retrieved from [www.asha.org/Members/ebp](http://www.asha.org/Members/ebp).
- American Speech-Language-Hearing Association. (2014). *Academic program self-assessment: quality indicators for integrating research and clinical practice into CSD programs*. Retrieved from [www.asha.org/academic/teach-tools/QIAssess](http://www.asha.org/academic/teach-tools/QIAssess).
- American Speech-Language-Hearing Association. (n.d.-a). *Guidelines*. Retrieved from [www.asha.org/policy/type/](http://www.asha.org/policy/type/).
- American Speech-Language-Hearing Association. (n.d.-b). *Knowledge and skills*. Retrieved from [www.asha.org/policy/type/](http://www.asha.org/policy/type/).
- American Speech-Language-Hearing Association. (n.d.-c). *Practice Portal*. Retrieved from [www.asha.org/policy/type/](http://www.asha.org/policy/type/).
- American Speech-Language-Hearing Association. (n.d.-d). *Reimbursement*. Retrieved from [www.asha.org/practice/reimbursement/](http://www.asha.org/practice/reimbursement/).
- American Speech-Language-Hearing Association. (n.d.-e). *Technical reports*. Retrieved from [www.asha.org/policy/type](http://www.asha.org/policy/type).
- Association to Advance Collegiate Schools of Business. (2015). *Eligibility procedures and accreditation standards for business accreditation*. Retrieved from [www.aacsb.edu/accreditation/standards/2013-business](http://www.aacsb.edu/accreditation/standards/2013-business).
- Burkard, R., & Trembath, S. (2013). Navigating the turbulent seas of health care economics. *Perspectives on Hearing and Hearing Disorders: Research and Diagnostics*, 17(2), 62–70.
- Commission on Accreditation of Athletic Training Education. (2012). *Standards for the accreditation of professional athletic training programs*. Retrieved from [caate.net/wp-content/uploads/2014/07/2012-Professional-Standards.pdf](http://caate.net/wp-content/uploads/2014/07/2012-Professional-Standards.pdf).
- Commission on Collegiate Nursing Education. (2013). *Standards for accreditation of baccalaureate and graduate nursing programs (amended)*. Retrieved from [www.aacn.nche.edu/ccne-accreditation/Standards-Amended-2013.pdf](http://www.aacn.nche.edu/ccne-accreditation/Standards-Amended-2013.pdf)
- Council for Clinical Certification in Audiology and Speech-Language Pathology. (2014). *Standards and implementation procedures for the Certificate of Clinical Competence in Speech-Language Pathology*. Retrieved from [www.asha.org/Certification/2014-Speech-Language-Pathology-Certification-Standards/](http://www.asha.org/Certification/2014-Speech-Language-Pathology-Certification-Standards/).
- Council for Higher Education Accreditation. (2012). *An overview of U.S. accreditation*. Retrieved from [www.chea.org/pdf/Overview%20of%20US%20Accreditation%202012.pdf](http://www.chea.org/pdf/Overview%20of%20US%20Accreditation%202012.pdf).
- Council on Academic Accreditation in Audiology and Speech-Language Pathology. (2014). *Standards for accreditation of graduate education programs in audiology and speech-language pathology* (2008, revised 2014). Retrieved from <http://caa.asha.org/wp-content/uploads/Accreditation-Standards-for-Graduate-Programs.pdf>.

- DiSarno, N., & Lusic, I. (2013). How to best position the profession of audiology within the landscape of our changing health care environment: A professional organization's view. *Perspectives on Hearing and Hearing Disorders: Research and Diagnostics*, 17(2), 71–79.
- Epstein, R. M., & Hundert, E. M. (2002). Defining and assessing professional competence. *Journal of the American Medical Association*, 287(2), 226–235.
- Hammer, D. P. (2000). Professional attitudes and behaviors: The "A's and B's" of professionalism. *American Journal of Pharmaceutical Education*, 64 (Winter), 456–464.
- Hay-McCutcheon, M. J. (2010). Our emerging interest in the interaction of hearing, aging, and cognition for speech perception. *Perspectives on Hearing and Hearing Disorders: Research and Diagnostics*, 14(2), 39–45.
- Interprofessional Education Collaborative Expert Panel. (2011). *Core competencies for interprofessional collaborate practice*. Retrieved from <https://ipecollaborative.org/Resources.html>.
- National Institutes for Health Clinical Training Center. (2014). *Introduction to the principles and practice of clinical research (IPPCR)*. Retrieved from <http://clinicalcenter.nih.gov/training/training/ipPCR.html>.
- National Postsecondary Education Cooperative. (2010). *Suggestions for improving the IPEDS graduation rate survey data collection and reporting* (NPEC 2010–832). Retrieved from <http://nces.ed.gov/pubs2010/2010832.pdf>.
- Shepard, N. T. (2013). What do audiologists need to know to prepare for the future of the economics of health care? *Perspectives on Hearing and Hearing Disorders: Research and Diagnostics*, 17(2), 80–85.
- U.S. Department of Education Office of Postsecondary Education. (2012). *Preparing/reviewing petitions and compliance reports in accordance with 34 CFR Part 602, the secretary's recognition of accrediting agencies*. Retrieved from [www2.ed.gov/admins/finaid/accred/agency-guidelines.pdf](http://www2.ed.gov/admins/finaid/accred/agency-guidelines.pdf).
- World Health Organization. (2001). *International Classification of Functioning, Disability and Health (ICF)*. Geneva, Switzerland: Author.
- World Health Organization. (2010). *Framework for action on interprofessional education and collaborative practice*. Retrieved from [www.who.int/hrh/resources/framework\\_action/en/](http://www.who.int/hrh/resources/framework_action/en/).

## **GLOSSARY**

**Last Updated March 2018**

*For the purpose of interpreting the accreditation standards, the following definitions are provided.*

### **Academic content**

Lectures or other pedagogical methods, laboratory experiences, and/or clinically related activities or experiences provided within the context of a credit-earning didactic course or research experience

### **Academic year**

The period of time that is covered from a fall term through the end of the subsequent summer term.

### **Academic term or term**

The period of time used by an institution to capture a portion of an academic year in which it holds classes (e.g., semester, quarter, trimester)

### **Breadth and depth**

Qualities associated with the extent to which a learning experience, or a series of learning experiences, includes: (1) a diversity of subject matter (breadth) and/or (2) a focus on one subject (depth). In the context of prerequisite education, breadth is usually achieved through the general education component of an undergraduate degree program and usually, though not always, through lower division courses, while depth is achieved through the major/minor requirements at the upper division levels. In the context of course content and objectives, breadth is usually demonstrated by objectives that describe the variety of knowledge, behaviors, or skills the student is expected to achieve, while depth is demonstrated by the description of the degree of student achievement expected and (e.g., the taxonomic level within a domain of learning) described in the objectives.

### **Care**

The provision of professional clinical service to students/patients/clients by audiologists or speech-language pathologists. This term is to be interpreted broadly to include delivery of services to individuals across all ages and conditions and in all settings.

### **Census Date**

The official fall reporting date used by the institution of higher education to determine a cohort of students. According to the National Postsecondary Education Cooperative

“Institutions may use a census date of October 15, 20xx, or the end of the institution’s drop-add period or another official fall reporting date to determine the cohort.”<sup>1</sup>

### **Clinical Education Experiences**

That aspect of the professional curriculum that includes the spectrum of experiential learning and clinical education settings where students practice applying knowledge, skills and professional behaviors under the direction of a qualified clinical educator.

### **Cohort**

A group of students that is created for the purpose of tracking progress. For the purposes of these standards, a cohort is a group of students who enter a program in the same term and are enrolled in the same program (e.g., residential, distance education).

### **Completion or Graduation Rate**

A student outcome measure that is designed to capture the success of students completing their programs of study in the expected time frame. Specifically, it is the number and percentage of students admitted to the professional program who complete the program (e.g., are awarded the appropriate degree) within the expected number of terms published by the program as averaged over the 3 most recently completed academic years.

### **Cultural Competence (culturally competent)**

“Cultural and linguistic competence is an asset of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations. ‘Culture’ refers to integrated patterns of human behavior that include the language, thought, communications, actions, customs, beliefs, values, and institutions of racial, ethnic, religious, or social groups. ‘Competence’ implies having the capacity to function effectively as an individual and an organization within the context of the cultural beliefs, behaviors, and needs presented by consumers and their communities.”<sup>2</sup>

### **Distance Education**

Education that uses one or more of the technologies listed below to deliver instruction to students who are separated from the instructor and to support regular and substantive interaction between the students and the instructor, either synchronously or asynchronously. The technologies may include

- the Internet;
- one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices;
- audio conferencing; or
- video cassettes, DVDs, and CD-ROMs, if the cassettes, DVDs, or CD-ROMs are used in a course.

---

<sup>1</sup> National Postsecondary Education Cooperative. (2010). Suggestions for improving the IPEDS graduation rate survey data collection and reporting (NPEC 2010–832). Retrieved from <http://nces.ed.gov/pubs2010/2010832.pdf>

<sup>2</sup> Based on Cross T, Bazron B, Dennis K, Isaacs M. Towards A Culturally Competent System of Care. Volume I. Washington, DC: Georgetown University Child Development Center, CASSP Technical PT Evaluative Criteria Revised January 2014 xi.

### **Employment rate**

A student outcome measure that is designed to capture the success of graduates in finding employment in the profession or in continuing for further education in the profession. Specifically, it is the number and percentage of program graduates employed in the profession or pursuing further education in the profession within 1 year of graduation, as averaged over the 3 most recently completed academic years.

### **Entry-Level Clinical Degree**

The degree required to qualify for credentials to practice independently in one's profession (e.g., ASHA's Certificate of Clinical Competence, state licensure).

### **Executive Summary of the Program's Strategic Plan**

A short document that summarizes the essential elements of the program's strategic plan including a description of the evaluation of the plan. The executive summary should be written so that stakeholders can rapidly grasp the key elements of the plan. Details of the strategic plan are included in the full strategic plan.

### **Faculty**

The CAA recognizes that individual institutions may have different definitions or faculty classifications than those identified below; however, for the purposes of these Standards and related accreditation activities, the following definitions are to be used.

- Adjunct - Persons who are responsible for teaching at least 50% of a course and are part-time, non-tenure-track faculty members who are paid for each class they teach.
- Clinical Educator - Individuals engaged in providing the clinical education components of the curriculum.
- Full-Time - Faculty members who hold a full-time appointment, as defined by the institution, and whose job responsibilities include teaching, research, service and contribute to the delivery of the designed curriculum regardless of the position title (e.g., full-time instructional staff, and clinical instructors would be considered faculty). Only those full-time faculty members who contribute to the accredited program are considered in the review of the program's compliance with the accreditation standards.
- Part-Time - Faculty members who hold an appointment that is considered by that institution to constitute less than full-time service and whose job responsibilities include teaching and/or contributing to the delivery of the designed curriculum regardless of the position title.
- Rank – This is a status that is defined by institutional policy. Typically, faculty who are on a tenure track or are tenured hold the rank of Professor, Associate Professor, or Assistant Professor. In some cases, Instructor and Lecturer are considered ranks. A similar system may be used for individuals whose primary responsibility is in the clinical realm. These positions may or may not have tenure associated with them and are typically Clinical Professor, Clinical Associate Professor, and Clinical Assistant Professor. In some cases, Clinical Instructor is considered a rank.
- Academic Doctoral – Those individuals who hold a terminal academic degree (PhD, EdD) designed to prepare individuals for an academic and research career with the expectation that the degree holder will contribute to the science of the discipline.

### **FERPA**

The acronym for the Family Educational Rights and Privacy Act of 1974. Compliance with this act assures that personally identifiable information (PII) of students is private and

secure. All institutions that receive federal funds must abide by this privacy act. For more detailed information see <http://www2.ed.gov/policy/gen/reg/ferpa/index.html>

### **Formative Assessment**

Ongoing measurement throughout educational preparation for the purpose of monitoring acquisition of knowledge and skills and improving student learning; provides feedback and information during the instructional process while learning is taking place.

### **Full-Time Equivalent (FTE)**

Typically, FTE is based on an institution's definition of a full-time academic or clinical faculty or full-time staff. The definition of full-time faculty is typically tied to the number of (semester/quarter) hours or student credit hours (SCH) expected. The definition of full-time staff is typically tied to the full-time work week as defined by the institution.

### **Goals**

The ends or desired results toward which program faculty and student efforts are directed. Goals are general statements of what the program must achieve in order to accomplish its mission. Goals are long range and generally provide some structure and stability to the planning process. In the discipline of communication sciences and disorders, goals are typically related to the educational setting, the educational process, the scholarly work of faculty and students, the service activities of faculty and students, etc.

### **HIPAA**

An acronym for the Health Insurance Portability and Accountability Act of 1996. An aspect of this act is the HIPAA Privacy Rule. This Privacy Rule is also known as "Standards for Privacy of Individually Identifiable Health Information. Compliance with this portion of the act assures that clinicians, health plans, healthcare clearinghouses, business associates, and other covered entities assure that private health information (PHI) is protected and secure. For more detailed information concerning HIPAA see <http://www.hhs.gov/ocr/privacy/hipaa/understanding/summary/>

### **Interprofessional Education**

Interprofessional education occurs when individuals of two or more professions learn about, from, and with each other to enable effective collaboration and improve outcomes for individuals and families whom are served. (Definition adapted by ASHA from the *Framework for Action on Interprofessional Education and Collaborative Practice* [World Health Organization, 2010]).

### **Interprofessional Collaborative Practice**

When multiple service providers from different professional backgrounds provide comprehensive health care or educational services by working with individuals, their families, caregivers, and communities to deliver the highest quality of service across settings. (Definition adapted by ASHA from the *Framework for Action on Interprofessional Education and Collaborative Practice* [World Health Organization, 2010]).

### **Knowledge and Skills**



Subject matter content and abilities within identified domains required to perform a specific task or job, often designated as competencies or outcomes to be achieved associated with a degree or credential. Knowledge and skills are typically developed by a panel of subject matter experts and validated through a peer review process.

### **Learning Outcomes**

Brief statements that identify what a learner will know and be able to do at the end of a course or a program. These include the required knowledge and skills, attributes and abilities including professionalism and professional behaviors that involve the integrated learning needed by a graduate of a program. Learning outcomes are the achieved results of what was learned

### **Mission Statement**

A statement that explains the unique nature of a program or institution and how it helps fulfill or advance the goals of the sponsoring institution, including religious mission. The mission is distinct from the program's goals, which indicate how the mission is to be achieved.

### **Non-consecutive terms**

The number of terms used to calculate program completion rates, which allows programs to count only those terms for which students are enrolled. This allowance is to be used only for students who receive an approved leave of absence as defined by the institution and cannot be used for students who are delayed in completing their program because of the need for remediation or poor academic performance.

### **Objectives**

Brief, clear statements that describe the desired learning outcomes of instruction that students should exhibit that are reflective of the broader goals

### **Policy**

A general principle by which a program is guided in its management.

### **Procedure**

A description of the methods, activities, or processes used to implement a policy.

### **Practices**

Common actions or activities; customary ways of operation or behavior.

### **Praxis® Subject Assessment Examination Pass Rate**

A student outcome measure that is designed to capture the success of a program's test-takers who achieve a passing score on the exam. Specifically, it is the number and percentage of test-takers from the program who passed the Praxis examination as averaged over the 3 most recently completed academic years.

### **Preceptor/Clinical Educator**

Individuals who are clinical educators, preceptors, or mentors who guide students or others who are developing clinical knowledge and skills in the profession of audiology or speech-language pathology. The term supervision is used to refer to all of the activities used to guide students and others in developing such skills.

**Program Outcomes**

Predictable and demonstrable results of program faculty and student activities directed toward achievement of the stated program goals.

**Service**

Activities in which faculty may be expected to engage including, but not limited to, institution/program governance and committee work, clinical practice, consultation, involvement in professional organizations, and involvement in community organizations.

**Strategic Plan**

The strategic plan should be longer than 1 year and identify the program's long-term goals, specific measurable objectives, strategies for attainment, a schedule for analysis, and a mechanism for regular evaluation of the plan itself and of progress in meeting the plan's objectives. (See related: Executive Summary of the Strategic Plan)

Strategic plans include, but are not be limited to,

- evidence that the plan is based on program evaluation and an analysis of external and internal environments,
- long-term goals that address the vision and mission of both the institution and program, as well as specific needs of the program,
- specific measurable action steps with expected timelines by which the program will reach its long-term goals,
- person(s) responsible for action steps, and
- evidence of periodic updating of action steps and long-term goals as they are met or as circumstances change.

**Student Outcome Measures**

Competencies that the program expects students to have achieved at the completion of the program (e.g., stated expectations for success in relationship to graduation rates, Praxis pass rates, and employment rates).

**Summative Assessment**

Comprehensive evaluation of learning outcomes, including acquisition of knowledge and skills, at the culmination of course work and at the culmination of the program. The assessment takes place after the learning has been completed and provides information and feedback about both teaching and learning effectiveness.

**Teaching**

Activities related to developing the knowledge, skills, attitudes, and behaviors of students necessary for entry to the profession. These activities include, but are not limited to:

- design, implementation, and evaluation of classroom, laboratory, clinical, and other teaching/learning activities;
- design, implementation, and evaluation of methods to assess student learning;
- student advisement; and
- supervision of student-generated research projects.