General Information & Instructions

Reports submitted to the CAA are major sources of substantiating information about elements of an education program in relation to its compliance with the Standards for Accreditation of Graduate Education Programs in Audiology and Speech-Language Pathology. Programs must report on the continuity and recovery of the program’s operations if events occur that significantly interrupt normal institutional operations, as applicable. It is the responsibility of the program director to submit completed reports to the CAA on or before the due date.

Programs are required to submit accreditation review materials by February 1 or August 1, except for programs applying for candidacy status for which applications are scheduled to be submitted January 1 or July 1. Due dates for programs that hold an accreditation status, e.g., accredited, candidate, are assigned based on the dates of the programs’ accreditation or candidacy cycles. Accreditation reports must be filed through the on-line reporting system unless otherwise directed.

The CAA has provided programs with a PDF slide show and YouTube video tutorial that gives a basic overview of accessing and using the Armature Fabric platform, along with other helpful resources, on the Resources page of the CAA website.

I. Entering Responses
   a. Save often! When entering data, clicking the NEXT button will advance you to the next section of the instrument, however the SAVE feature should be used often to prevent loss of data.
   b. If more than one user is accessing the report instrument to provide data, report editors should not work on the same Standard section simultaneously. Changes to a page may not save correctly if multiple users have the same Standard page open at the same time.
   c. Whenever possible, responses to questions within this instrument should be plain, unformatted text. Using other text formatting may cause the system to slow and content may be lost. If content needs to be added from a website, Word document, or other computer application, users should do the following:
      i. Open Notepad or a similar application to create a new text file.
      ii. Copy the desired content from the website, Word document, or other application.
      iii. Paste the copied content into the Notepad text file (this will strip out formatting).
      iv. Copy your now unformatted content from the text file and paste into the report.
      v. Save. Failure to follow these steps will cause the system to freeze and content will be lost.

II. Responding to Prior Concerns
   a. You must respond to any non-compliance citations or areas for follow-up that were noted on the previous year’s Accreditation Action Report. There is a text box at the start of each standard section to respond to prior concerns.
   b. When providing supporting evidence to the CAA for Standards and especially prior concerns, refer to the Document Guidance resource from the CAA website for tips on how to respond that can be found here:

III. Use of Distance Education Technologies
   a. If (during the last reporting period) your program offered (or is currently offering) coursework via distance education or if your program has been approved for a permanent distance education modality, your program must address institutional policies regarding verification of student identity.
b. Standard 4.10 states the following:

- **Standard 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.
  
  - 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.
    
    - All programs who utilized distance education technologies, even if on a temporary basis, are required to answer the questions related to distance education.

c. The online report instrument is designed with conditional logic throughout so that if the response under the modalities section is "yes", additional questions related to distance education will appear for you to respond to.

IV. Submitting Your Report

a. Before submitting:

   i. Review and verify all data reported is accurate and current.

   ii. Ensure that all links to websites are accurate and are working.

b. **Only Program Directors may submit the report.** To submit the report, you must click the submit button at the bottom of the instrument and confirm that you are submitting your annual report. You can verify that you have submitted your report by clicking the Instruments tab and reviewing the status of this report instrument.

c. It is understood that any information submitted for the purposes of this evaluation shall be used to determine compliance with CAA Standards; furthermore, non-identifying program data may be analyzed and published in the aggregate in order to further the purpose of the CAA, which is to assure quality in preparation of students in audiology and speech-language pathology to serve the professions and the public.

V. Additional Resources

a. Refer to the following policies regarding report submission and timelines which are outlined in the Accreditation Handbook (Chapter XI. EXPECTATIONS OF PROGRAMS). Make sure you are familiar with the rationale, criteria, and timelines for each of these policies.

   i. Requests for Submission Extension (Chapter XI.C)

   ii. Administrative Probation (Chapter XI.D)

   iii. Lapse of Accreditation (Chapter XI.E)

b. Additional reporting resources may be found on the CAA website ([https://caa.asha.org/Resources/](https://caa.asha.org/Resources/)) and include data collection worksheets, templates for documents to be uploaded with your CAA report, additional documentation guidance ([https://caa.asha.org/siteassets/files/accreditation-standards-documentation-guidance.pdf](https://caa.asha.org/siteassets/files/accreditation-standards-documentation-guidance.pdf)), and other information about submitting your CAA report.

Modalities

**Modality Information and Confirmation**

If coursework is offered via [distance learning](#) (DE) or [satellite](#) campus, then any changes and updates in both residential and DE and/or satellite must be noted throughout the report with respect to all program offerings.
**Your response to the following questions could enable additional questions to appear within this report. If you later alter your response to these questions, you risk losing information entered.**

Distance Education
Are graduate courses for the entry-level graduate program available through distance education?

Satellite Location
Is this graduate program or a component of the program offered through a satellite location?

Standard 1.0 Administrative Structure and Governance

Standard 1.1 Institutional Accreditation

The sponsoring institution of higher education holds current institutional accreditation.

Requirement for Review:

- The institution of higher education within which the audiology and/or speech-language pathology program is housed must hold institutional accreditation from one of the following institutional accrediting bodies:
  - Middle States Commission on Higher Education;
  - New England Commission 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.

FINDINGS

Standard 1.1 Prior Concerns

If there were areas of non-compliance, partial compliance or follow-up regarding Institutional Accreditation noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.
Standard 1.1 Institutional Accreditation Changes

Describe any changes that have occurred in the last reporting period regarding the program's institutional accreditation.

Standard 1.1 Institutional Accreditor

Name of Institutional Accreditor:

Standard 1.1 Institutional Accreditation Dates

Provide current dates of Institutional Accreditation.

<table>
<thead>
<tr>
<th>Start Date</th>
<th>End Date</th>
</tr>
</thead>
</table>

Standard 1.1 Institutional Accreditor Review

Is the program currently undergoing review by the institutional accreditor?

Standard 1.1 Consortium Table

List all institutions participating in the consortium, the institutional accreditation for the participating entity, and which entity(s) will be granting the degree.

<table>
<thead>
<tr>
<th>Check the Degree Granting Entity (Check all that apply)</th>
<th>Name of Institution</th>
<th>Name of Institutional Accreditor</th>
</tr>
</thead>
</table>

Standard 1.1 Clarifying Information

Use the text box below to describe any additional clarifying information regarding the program's compliance with Standard 1.1.

Standard 1.2 Degree Granting Authority

Standard 1.2 Degree Granting Authority

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.

**FINDINGS**

**Standard 1.2 Prior Concerns**

If there were areas of non-compliance, partial compliance or follow-up regarding Institutional Accreditation noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

**Standard 1.2 Degree Granting Authority Changes**

Describe any changes that have occurred in the last reporting period regarding the program's Degree Granting Authority.

**Standard 1.2 Clarifying Information**

Use the text box below to describe any additional clarifying information regarding the program's compliance with Standard 1.2.

**Standard 1.3 Mission, Goals and Objectives**

**Standard 1.3 Mission, Goals, and Objectives**

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.

**FINDINGS**
Standard 1.3 Prior Concerns

If there were areas of non-compliance or follow-up regarding Mission, Goals and Objectives noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 1.3 Mission, Goals and Objectives Changes

Describe any changes that have occurred in the last reporting period regarding the program’s mission, goals and objectives.

Standard 1.3 Credentials

For which credentials are students prepared? Select all that are relevant to the program’s mission and goals.

Standard 1.3 Clarifying Information

Use the text box below to describe any additional clarifying information regarding the program’s compliance with Standard 1.3.

Standard 1.4 Evaluation of Mission and Goals

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.
Standard 1.4 Prior Concerns
If there were areas of non-compliance or follow-up regarding the Evaluation of Mission and Goals noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 1.4 Evaluation of Mission and Goals Changes
Describe any changes that have occurred in the last reporting period regarding the program’s evaluation of mission and goals.

Standard 1.4 Clarifying Information
Use the text box below to describe any additional clarifying information you wish to provide regarding the program’s compliance with Standard 1.4.

Standard 1.5 Program Strategic Plan

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.

FINDINGS
Standard 1.5 Prior Concerns

If there were areas of non-compliance or follow-up regarding the Strategic Plan noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 1.5 Strategic Plan Changes

Describe any changes that have occurred in the last reporting period regarding the program's strategic plan.

Standard 1.5 Executive Summary of Plan

Provide an executive summary of the strategic plan that is shared with faculty, students, staff, alumni, and other interested parties.

Standard 1.5 Method for Plan in Community

Describe the methods used to ensure that the strategic plan reflects the role of the program within its community.

Standard 1.5 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.5.

Standard 1.6 Program Authority and Responsibility

Standard 1.6 Program Authority and Responsibility
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.

FINDINGS

Standard 1.6 Prior Concerns

If there were areas of non-compliance or follow-up regarding Program Authority and Responsibility noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 1.6 Program’s Authority and Responsibility Changes

Describe any changes that have occurred in the last reporting period regarding the program’s authority and responsibility.

Standard 1.6 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program’s compliance with Standard 1.6.

Standard 1.7 Program Director

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.

FINDINGS

Standard 1.7 Prior Concerns

If there were areas of non-compliance or follow-up regarding the Program Director noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 1.7 Program Director Changes

Describe any changes that have occurred in the last reporting period regarding the program's director.

Standard 1.7 Program Director

Provide the name of the individual designated as program director below.

Name of Program Director:

[ ]

Information about reporting changes can be found on the CAA website at https://caa.asha.org/reporting/reporting-changes/

Standard 1.7 Program Director Appointed

Program Director date appointed:

Standard 1.7 New Program Director

Is the Program Director new since submission of the last CAA report?

Standard 1.7 Clarifying Information
Standard 1.8 Equitable Treatment

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, faculty, and students 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.

FINDINGS

Standard 1.8 Prior Concerns

If there were areas of non-compliance or follow-up regarding Equitable Treatment noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 1.8 Exemption Request

Have you ever requested an exemption from any federal anti-discrimination provisions based on your institution's religious tenets?
Standard 1.8 Exemption Qualification

If you have not requested an exemption from federal anti-discrimination provisions, do you believe you qualify for such an exemption? If so, please clarify which provisions and for what reasons.

Standard 1.8 Equitable Treatment Changes

Describe any changes that have occurred in the last reporting period regarding the program's Equitable Treatment.

Standard 1.8 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.8.

Standard 1.9 Public Information

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:

- The program must publish to the general public on its website 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. This must be displayed in a clearly visible and readily accessible location. Additional references to the program's accreditation status must be accurate but need not include all components of the accreditation statement.
- 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® 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),
- 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.

**FINDINGS**

**Standard 1.9 Prior Concerns**

If there were areas of non-compliance or follow-up regarding Public Information noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

**Standard 1.9 Public Information Changes**

Describe any changes that have occurred in the last reporting period regarding the currency, accuracy and availability of public information about the program.

**Standard 1.9 Accreditation Statement**

The CAA requires programs to disclose accurate and complete information on their respective websites about their accreditation status to include the specific degree program holding the accreditation status and the full name, address, and phone number of the accrediting agency: Council on Academic Accreditation in Audiology and Speech-Language Pathology.

See chapter XII.C Public Notice of Accreditation Status within the Accreditation Handbook for guidance and examples of applicable accreditation statements.

Be sure to confirm the current Accreditation Statement is written in accordance with the Accreditation Handbook, then provide the URL where this information can be found:
Standard 1.9 Checklist for Programs

The CAA has developed guidance on presenting student achievement data and has created a checklist for programs to use related to Standard 1.9 – Public Information:

- Are the student data labeled as “Student Achievement Data” or “Student Outcome Data”?
- Are the outcome data separated by professional area and modality (if applicable)?
- Do you have the number AND percentage for each of the required outcomes listed?
- Do the data reflect the last 3 mostly recently completed years?
- Are the specific academic years listed, so that timelines are clear to a potential student?
- Do you have written policies and procedures for updating the website content at least annually? If so, where is that documentation stored for faculty/staff to reference? Does it specify when the program data will be updated?

☐

Standard 1.9 Praxis URL

Provide the URL where the Praxis pass rates are located on the program’s website.

Standard 1.9 Completion URL

Provide the URL where the completion rates are located on the program’s website.

Standard 1.9 Student Achievement Data Posted

In addition to publishing these student achievement data (Praxis pass rate and program completion rates) on the program’s website, does the program publish student achievement information anywhere else? (Select all that apply)

☐

Standard 1.9 Completion Public

Describe how information regarding the number of expected terms for program completion (full-time, part-time, different delivery modalities, etc.) is made available to the public and to students. If it is available on the program’s website, include the specific URL.

Standard 1.9 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program’s compliance with Standard 1.9.
Standard 2.0 Faculty Roster and Details

Standard 2.0 Faculty Roster and Details

Provide information about individuals who are currently employed by the university and contribute to the graduate program for which you are seeking accreditation.

Visit the CAA website's Program Resources webpage to download the Faculty Roster Summary Worksheet. Once this worksheet is completed, you will need to upload it below using the Upload link.

No document provided

Standard 2.0 Faculty Roster and Details Confirmation

For each faculty member listed on the Faculty Roster Summary Worksheet, a Faculty Data Collection Worksheet must be downloaded and completed. Each worksheet's file name should contain the first name and last name of the faculty member.

Each completed faculty data collection worksheet must be uploaded to the Documents section of the annual report instrument in Fabric. This can be accomplished by logging into the Armature Fabric site and selecting the Instruments tab from your home screen. Once you select your program's annual report and you are redirected to the Instrument Summary screen, click the Documents tab. You will then need to upload each faculty data collection worksheet by using the "Touch, Click or Drag Files here to Upload" link.

Once you have uploaded all faculty data collection worksheets, please check the box below indicating that you agree to the attestation statement.

"I confirm that a Faculty Data Collection Worksheet has been uploaded to the Documents tab of this reporting instrument for each faculty member listed in the Faculty Roster Summary Worksheet."

☐

Standard 2.1 Faculty Sufficiency – Overall Program

The number and composition of the 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.

FINDINGS

Standard 2.1 Prior Concerns

If there were areas of non-compliance or follow-up regarding Overall Program Faculty Sufficiency noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 2.1 Faculty Sufficiency

Describe any changes that have occurred in the last reporting period regarding overall program faculty sufficiency.

Standard 2.1 Faculty Changes

Have there been any faculty changes since your last report to the CAA?

Standard 2.1 Residential Enrollment
What is the total number of students currently enrolled in the residential component of the CAA accredited graduate education program?

<table>
<thead>
<tr>
<th>Student Status</th>
<th>Current Report</th>
<th>Prior Report</th>
<th>Percent Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Part-time</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Standard 2.1 Enrollment Totals

Percentage change of enrollment across all modalities:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>% Change Full-time</td>
<td></td>
</tr>
<tr>
<td>% Change Part-time</td>
<td></td>
</tr>
</tbody>
</table>

Standard 2.1 Enrollment Increase

If student enrollment has increased 50% or more since last year for any modality (residential, distance education, satellite), explain steps taken by the program to ensure:

- Sufficient faculty
- Sufficient financial and other resources
- Students meet student outcome measures (Praxis pass rates, program completion rates, employment rates)
- Students have access to client/patient base that is sufficient to achieve the program's stated mission and goals and includes a variety of clinical settings, client/patient populations, and age groups
- Program mission and goals are met
- Long-term stability and quality programming

Standard 2.1 Undergraduate Enrollment

Do you offer an undergraduate program in the field of Communication Sciences and Disorders?

Standard 2.1 Other Graduate Programs

Does your department offer any other graduate programs in addition to the one you are currently reporting on?

Standard 2.1 Other Graduate Programs Table

No response provided

Standard 2.1 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 2.1.
Standard 2.2 Faculty Sufficiency – Institutional Expectations

The number, composition, and workload of all full-time faculty who have responsibility in the graduate program are sufficient to allow them 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,
  - 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 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.

FINDINGS

Standard 2.2 Prior Concerns

If there were areas of non-compliance or follow-up regarding Institutional Expectations for Faculty Sufficiency noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.
**Standard 2.2 Faculty Sufficiency – Institutional Expectations Changes**

Describe any changes that have occurred in the last reporting period regarding Faculty Sufficiency – Institutional Expectations.

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**Standard 2.2 Clarifying Information**

Use the text box below to describe any additional clarifying information you wish to provide regarding the program’s compliance with Standard 2.2.

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**Standard 2.3 Faculty Qualifications**

**Standard 2.3 Faculty Qualifications**

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).

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**FINDINGS**
Standard 2.3 Prior Concerns
If there were areas of non-compliance or follow-up regarding Faculty Qualifications noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 2.3 Faculty Qualifications Changes
Describe any changes that have occurred in the last reporting period regarding faculty qualifications.

Standard 2.3 Majority Doctoral Faculty
If the information provided in the Standard 2.0 Faculty and Standard 3.0 Courses section do not demonstrate that the majority of academic content is taught by doctoral faculty who hold a PhD or EdD degree, provide rationale.

**NOTE:** The majority of academic content should be calculated based on credit hours (not the number of courses) for academic courses only, not clinical coursework. Academic content includes 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.

Standard 2.3 Clarifying Information
Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 2.3.

Standard 2.4 Faculty Continuing Competence

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.

**FINDINGS**

**Standard 2.4 Prior Concerns**
If there were areas of non-compliance or follow-up regarding Faculty Continuing Competence noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

**Standard 2.4 Faculty Continuing Competence Changes**
Describe any changes that have occurred in the last reporting period regarding the program’s Faculty Continuing Competence.

**Standard 2.4 Clarifying Information**
Use the text box below to describe any additional clarifying information you wish to provide regarding the program’s compliance with Standard 2.4.

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

**Standard 3.0B Courses Worksheet**
Visit the CAA website's Program Resources webpage to download the Standard 3.0 Courses Worksheet. Once this worksheet is completed, you will be able to upload it below.

*No document provided*
Standard 3.1B Overall Curriculum

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).

FINDINGS

Standard 3.1B Prior Concerns
If there were areas of non-compliance or follow-up regarding Overall Curriculum noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 3.1B Overall Curriculum Changes
Describe any changes that have occurred in the last reporting period regarding the program’s Overall Curriculum.

Standard 3.1B Course Descriptions URL
Provide the URL for the current graduate program course descriptions.

Standard 3.1B Degree Requirements
Based on full-time enrollment, indicate the academic and clinical requirements for the degree, including the minimum number of graduate semester/quarter credit hours required to earn the degree.

<table>
<thead>
<tr>
<th>Requirements</th>
<th>Number of Credits</th>
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<tbody>
<tr>
<td>Minimum required academic credits</td>
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<td>Minimum elective academic credits</td>
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<tr>
<td>Minimum required practicum/clinical credits</td>
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<td>Minimum elective practicum/clinical credits</td>
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<tr>
<td>Minimum required research credits (include dissertation if applicable)</td>
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<td>Minimum elective research credits (include dissertation if applicable)</td>
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<td>Indicate any other requirements below</td>
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</table>

Standard 3.1B Clarifying Information
Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.1B.

Standard 3.2B Curriculum Currency

Standard 3.2B Curriculum Currency

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
  - curriculum is planned and based on current standards of speech-language pathology practice;
  - curriculum is based on current literature and other current documents related to professional practice and education in speech-language pathology;
  - 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 with current standards of speech-language pathology practice, current literature, and other documents related to professional practice and education in speech-language pathology.

FINDINGS

Standard 3.2B Prior Concerns

If there were areas of non-compliance or follow-up regarding the Curriculum Currency noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 3.2B Curriculum Currency Changes

Describe any changes that have occurred in the last reporting period regarding the program's curriculum currency.
Standard 3.2B Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program’s compliance with Standard 3.2B.

Standard 3.3B Sequence of Learning Experiences

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.

FINDINGS

Standard 3.3B Prior Concerns

If there were areas of non-compliance or follow-up regarding the Sequence of Learning Experiences noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 3.3B Sequence of Learning Experiences Changes

Describe any changes that have occurred in the last reporting period regarding the program’s sequence of learning experiences.

Standard 3.3B Differences in Tracks
Describe any differences in the expected sequence of courses and clinical experiences that result from different tracks.

**Standard 3.3B Clarifying Information**

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.3B.

**Standard 3.4B Diversity Reflected in the Curriculum**

*An effective speech-language pathology program is organized and delivered in such a manner that diversity, equity, and inclusion are reflected in the program and throughout academic and clinical education.*

**Requirement for Review:**

- The program must provide evidence that diversity, equity, and inclusion are incorporated throughout the academic and clinical program, in theory and practice.
- The program must provide evidence that students are given opportunities to identify and acknowledge approaches to addressing culture and language that include cultural humility, cultural responsiveness, and cultural competence in service delivery.
- The program must provide evidence that students are given opportunities to identify and acknowledge the impact of both implicit and explicit bias on clinical service delivery and actively explore individual biases and how they relate to clinical services.
- The program must provide evidence that students are given opportunities to identify and acknowledge:
  - The impact of how their own set of cultural and linguistic variables affect patients/clients/students care. These variables include, but are not limited to, age, disability, ethnicity, gender expression, gender identity, national origin, race, religion, sex, sexual orientation, or veteran status.
  - The impact of cultural and linguistic variables of the individual served may have on delivery of effective care. These variables include, but are not limited to, age, disability, ethnicity, gender expression, gender identity, national origin, race, religion, sex, sexual orientation, or veteran status.
  - The interaction of cultural and linguistic variables between the caregivers and the individual served. These variables include, but are not limited to, age, disability, ethnicity, gender expression, gender identity, national origin, race, religion, sex, sexual orientation, or veteran status.
  - The social determinants of health and environmental factors for individuals served. These variables include, but are not limited to, health and healthcare, education, economic stability, social and community context, and neighborhood and built environment, and how these determinants relate to clinical services.
The impact of multiple languages and ability to explore approaches to addressing bilingual/multilingual individuals requiring services, including understanding the difference in cultural perspectives of being d/Deaf and acknowledge Deaf cultural identities.

The program must provide evidence that students are given opportunities to recognize that cultural and linguistic diversity exists among various groups, including among d/Deaf and hard of hearing individuals, and foster the acquisition and use of all languages (verbal and nonverbal), in accordance with individual priorities and needs.

**FINDINGS**

**Standard 3.4B Prior Concerns**

If there were any areas of non-compliance or follow-up regarding Diversity Reflected in the Curriculum noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

**Standard 3.4B Issues of Diversity**

Describe how and where diversity, equity, and inclusion are incorporated throughout the academic and clinical program, in theory and in practice.

**Standard 3.4B Clinic Diversity**

Describe how students are given opportunities to identify and acknowledge approaches to addressing culture and language that include cultural humility, cultural responsiveness, and cultural competence in service delivery.

**Standard 3.4B Multicultural Education**

Describe how students are given opportunities to identify and acknowledge the impact of both implicit and explicit bias on clinical service delivery and actively explore individual biases and how they relate to clinical services.
Note on Variables: For each of the following questions, “variables” include, but are not limited to, age, disability, ethnicity, gender expression, gender identity, national origin, race, religion, sex, sexual orientation, or veteran status.

Standard 3.4B Variables Impact
Describe how students are given the opportunities to identify and acknowledge the impact of how their own set of cultural and linguistic variables affects clients/patients/students’ care.

Standard 3.4B Variables Impact Delivery
Describe how students are given the opportunities to identify and acknowledge the impact cultural and linguistic variables of the individual served may have on delivery of effective care.

Standard 3.4B Variables Interaction
Describe how students are given the opportunities to identify and acknowledge the interaction of cultural and linguistic variables between the caregivers and the individual served.

Standard 3.4B Social Determinants
Describe how students are given the opportunities to identify and acknowledge the social determinants of health and environmental factors for individuals served.

Standard 3.4B Multiple Languages
Describe how students are given the opportunities to identify and acknowledge the impact of multiple languages and ability to explore approaches to addressing bilingual/multilingual individuals requiring services, including understand the difference in cultural perspectives of being d/Deaf and acknowledge Deaf cultural identities.
Standard 3.4B Diversity/Foster Acquisition

Describe how students are given opportunities to 1) recognize that cultural and linguistic diversity exists among various groups, including among d/Deaf and hard of hearing individuals, and 2) foster the acquisition and use of all languages (verbal and nonverbal), in accordance with individual priorities and needs.

Standard 3.4B Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.4B.

Standard 3.5B Scientific and Research Foundation

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.
Standard 3.5B Prior Concerns

If there were areas of non-compliance or follow-up regarding the Scientific and Research Foundations noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 3.5B Research Foundations Changes

Describe any changes that have occurred in the last reporting period regarding the program's Scientific and research foundations.

Standard 3.5B Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.5B.

Standard 3.6B Clinical Settings/Populations

Standard 3.6B Clinical Settings/Populations

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.

FINDINGS

Standard 3.6B Prior Concerns

If there were areas of non-compliance or follow-up regarding Clinical Settings/Populations noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 3.6B Clinical Settings/Populations Changes

Describe any changes that have occurred in the last reporting period regarding the program's clinical settings/populations.

Standard 3.6B Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.6B.

Standard 3.7B Clinical Education - Students

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.

FINDINGS

Standard 3.7B Prior Concerns

If there were areas of non-compliance or follow-up regarding Clinical Education - Students noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 3.7B Clinical Education - Students Changes

Describe any changes that have occurred in the last reporting period regarding the program's clinical education - students.

Standard 3.7B Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.7B.

Standard 3.8B Clinical Education - Client Welfare

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.
- The program must demonstrate that it provides the opportunity for students to understand and practice the principles of universal precautions to prevent the spread of infectious and contagious diseases.

FINDINGS

Standard 3.8B Prior Concerns

If there were areas of non-compliance or follow-up regarding Clinical Education – Client Welfare noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 3.8B Disease Prevention

Provide policies and procedures that demonstrate how the program provides the opportunity for students to understand and practice the principles of universal precautions to prevent the spread of infectious and contagious diseases.

Standard 3.8B Clinical Education - Client Welfare Changes

Describe any changes that have occurred in the last reporting period regarding the program's clinical education - client welfare.

Standard 3.8B Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.8B.
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.

FINDINGS

Standard 3.9B Prior Concerns

If there were areas of non-compliance or follow-up regarding External Placements noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 3.9B External Placements Changes

Describe any changes that have occurred in the last reporting period regarding the program’s external placements.

Standard 3.9B Clarifying Information
Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.9B.

Standard 3.10B Student Conduct

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.

FINDINGS

Standard 3.10B Prior Concerns

If there were areas of non-compliance or follow-up regarding Student Conduct noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 3.10B Student Conduct Changes

Describe any changes that have occurred in the last reporting period regarding the program's student conduct.

Standard 3.10B Clarifying Information
Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.10B.

Standard 4.0 Students

Standard 4.1 Student Admission Criteria

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.

FINDINGS

Standard 4.1 Prior Concerns

If there were areas of non-compliance or follow-up regarding Student Admission Criteria noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 4.1 Admission Criteria Changes

Describe any changes that have occurred in the last reporting period regarding the program's admission criteria.
Standard 4.1 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 4.1.

Standard 4.2 Student Adaptations

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.

FINDINGS

Standard 4.2 Prior Concerns

If there were areas of non-compliance or follow-up regarding Student Adaptations noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 4.2 Student Adaptations Changes

Describe any changes that have occurred in the last reporting period regarding student adaptations.
Standard 4.2 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 4.2.

Standard 4.3 Student Intervention

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.

FINDINGS

Standard 4.3 Prior Concerns

If there were areas of non-compliance or follow-up regarding Student Intervention noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 4.3 Student Intervention Changes

Describe any changes that have occurred in the last reporting period regarding student intervention.
Standard 4.3 Feedback Mechanism
Describe how these policies and procedures will be applied consistently across all students who are identified as needing intervention.

Standard 4.3 Clarifying Information
Use the text box below to describe provide any additional clarifying information regarding the program's compliance with Standard 4.3.

Standard 4.4 Student Information

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.

FINDINGS

Standard 4.4 Prior Concerns

If there were areas of non-compliance or follow-up regarding Student Information noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.
Standard 4.4 Student Information Changes

Describe any changes that have occurred in the last reporting period regarding the program's student information.

Standard 4.4 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 4.4.

Standard 4.5 Student Complaints

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.

FINDINGS

Standard 4.5 Prior Concerns

If there were areas of non-compliance or follow-up regarding Student Complaints noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.
Standard 4.5 Student Complaints Changes

Describe any changes that have occurred in the last reporting period regarding student complaints.

Standard 4.5 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program’s compliance with Standard 4.5.

Standard 4.6 Student Advising

Standard 4.6 Student Advising

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.

FINDINGS

Standard 4.6 Prior Concerns

If there were areas of non-compliance or follow-up regarding Student Advising noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 4.6 Student Advising Changes
Describe any changes that have occurred in the last reporting period regarding student advising.

Standard 4.6 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 4.6.

Standard 4.7 Student Progress Documentation

Standard 4.7 Student Progress Documentation

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.

FINDINGS

Standard 4.7 Prior Concerns

If there were areas of non-compliance or follow-up regarding Student Progress Documentation noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 4.7 Student Progress Documentation Changes

Describe any changes that have occurred in the last reporting period regarding the documentation of student progress.
Standard 4.7 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 4.7.

Standard 4.8 Availability of Student Records

Standard 4.8 Availability of Student Records

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.

FINDINGS

Standard 4.8 Prior Concerns

If there were areas of non-compliance or follow-up regarding Availability of Student Records noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 4.8 Student Records Changes

Describe any changes that have occurred in the last reporting period regarding the program's availability of student records.
Standard 4.8 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program’s compliance with Standard 4.8.

Standard 4.9 Student Support Services

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.

FINDINGS

Standard 4.9 Prior Concerns

If there were areas of non-compliance or follow-up regarding Student Support Services noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 4.9 Student Support Services Changes

Describe any changes that have occurred in the last reporting period regarding the program’s student support services.

Standard 4.9 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program’s compliance with Standard 4.9.
Standard 4.10 Verification of Student Identity

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.
- If the institution does not have specific policies, the program must develop and implement its own policies for this purpose.

FINDINGS

Standard 4.10 Prior Concerns

If there were areas of non-compliance or follow-up regarding Verification of Student Identity noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 4.10 Verification of Student Identity Changes

Describe any changes that have occurred in the last reporting period regarding the program’s verification of student identity.

Standard 4.10 Institution Policy for ID
Describe the institution's 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.

**Note:** If the institution does not have specific policies, indicate below.

### Standard 4.10 DE Program ID Policy

Describe the program's policies and procedures for verifying that a student who registers for a distance education course or program is the same student who participates in and completes the course or program and receives the academic credit.

**Note:** If the institution does not have specific policies, the program must develop and implement its own policies for this purpose.

### Standard 4.10 DE Program ID Process

Describe the program's policy for ensuring that the identity verification process protects the privacy of a student enrolled in the distance education course or program and that the process for implementing the policy is conducted in a consistent manner.

### Standard 4.10 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 4.10.

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### Standard 5.0 Assessment

### Standard 5.1 Assessment of Student Learning

*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.

FINDINGS

Standard 5.1 Prior Concerns

If there were areas of non-compliance or follow-up regarding Assessment of Student Learning noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 5.1 Assessment of Students Changes

Describe any changes that have occurred in the last reporting period regarding assessment of students.

Standard 5.1 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 5.1.

Standard 5.2 Program Assessment of Students

Standard 5.2 Program Assessment of Students

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

For purposes of assessing compliance, the Praxis examination cannot be used to meet this standard as a form of summative assessment.

**FINDINGS**

If there were areas of non-compliance or follow-up regarding Program Assessment of Students noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

**Standard 5.2 Prior Concerns**

If there were areas of non-compliance or follow-up regarding Program Assessment of Students noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

**Standard 5.2 Program Assessment of Students Changes**

Describe any changes that have occurred in the last reporting period regarding program assessment of students.

**Standard 5.2 Clarifying Information**

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 5.2.

**Standard 5.3 Ongoing Program Assessment**

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.

**FINDINGS**

**Standard 5.3 Prior Concerns**

If there were areas of non-compliance or follow-up regarding Program Assessment noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

**Standard 5.3 Ongoing Program Assessment Changes**

Describe any changes that have occurred in the last reporting period regarding the program's ongoing program assessment.

**Standard 5.3 Clarifying Information**

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 5.3.

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

- 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.

FINDINGS

Standard 5.4 Prior Concerns

If there were areas of non-compliance or follow-up regarding Ongoing Program Improvement noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 5.4 Continuous Quality Improvement

Describe the procedures that the program follows to use the results of the ongoing programmatic assessments in planning and implementing program improvements that ensure continuous quality improvement.

Standard 5.4 Program Changes Mission and Goals

Describe the processes that the program uses to ensure that any program changes are consistent with the program's stated mission, goals, and objectives.

Standard 5.4 Ongoing Program Improvement Changes

Describe any changes that have occurred in the last reporting period regarding the program's ongoing program improvement.
Standard 5.4 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 5.4.

Standard 5.5 Program Completion Rate

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.

FINDINGS

Standard 5.5 Prior Concerns

If there were areas of non-compliance or follow-up regarding Program Completion Rates noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 5.5 Program Completion Rate Changes

Describe any changes that have occurred in the last reporting period regarding the program's program completion rate.
Standard 5.5 Completion Times
Provide the published length of time (stated in semesters/quarters) for students to complete the residential program of study.

<table>
<thead>
<tr>
<th>Type of Study</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time with CSD undergraduate major</td>
<td></td>
</tr>
<tr>
<td>Full-time without CSD undergraduate major</td>
<td></td>
</tr>
<tr>
<td>Part-time with CSD undergraduate major</td>
<td></td>
</tr>
<tr>
<td>Part-time without CSD undergraduate major</td>
<td></td>
</tr>
</tbody>
</table>

Standard 5.5 Completion Rate Calculator
Download and complete the Program Completion Rate Calculator worksheet, complete it, and then upload it as evidence in support of the data you have provided in this report. If there are additional components of the program (distance education or satellite), please complete the additional tabs in the excel workbook with this data.

No document provided

Standard 5.5 Program Completion Rates
Provide the program completion rate for graduation cohorts in the residential program for the most recently completed academic years (based on enrollment data). This information should match the information contained in the Program Completion Rate Calculator worksheet that has been uploaded in the Standard 5.5 Completion Rate Calculator question above.

<table>
<thead>
<tr>
<th>Period</th>
<th>Number completing on time</th>
<th>Number completing later than on-time</th>
<th>Number not completing</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recent Year</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Year Prior</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Years Prior</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3-year average program completion rate</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Standard 5.5 Completion Below 80%
Provide an explanation and a plan that will be used for improvement if the program’s 3-year average for completion rate does not meet or exceed the CAA’s established (80%) threshold. Include a timeline for implementing and assessing these steps. In your explanation, provide details on how the program has addressed the following areas in regard to their impact on program completion rates:

- The number, composition, and qualifications of faculty sufficient to meet the mission of the program (Std. 2.1, 2.3)
- Academic and clinical courses offered sufficiently enough for students to graduate on time (Std. 3.1B)
- Academic and clinical advising offered along with remediation (Stds. 4.2, 4.3, 4.6, 4.9)
- Appropriate admissions policies (Std. 4.1)
- Classes that are more likely to be causing students to drop out or take longer to complete the program (3.0B)

Standard 5.5 Clarifying Information
Standard 5.6 Praxis Examination Pass Rate

The percentage of test-takers who pass the Praxis® 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® 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® 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.

FINDINGS

Standard 5.6 Prior Concerns

If there were areas of non-compliance or follow-up regarding Praxis Examination Pass Rates noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 5.6 Praxis Examination Pass Rate Changes

Describe any changes that have occurred in the last reporting period regarding the program’s Praxis examination pass rate.

Standard 5.6 Praxis Rates
For the residential program, provide the number of test-takers who took and passed the Praxis examination for the three most recently completed academic years. Results must be reported only once for test-takers who took the exam multiple times in the same reporting period (The ETS reporting period is September - August). Exclude individuals who graduated more than 3 years ago.

The CAA has developed guidance for programs on reporting student achievement measures and presenting student achievement data, which can be found on the CAA's website.

<table>
<thead>
<tr>
<th>Period</th>
<th>Number of Test-takers Taking the Exam</th>
<th>Number of Test-takers Passed</th>
<th>Pass Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recent Year</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Year Prior</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Years Prior</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3-year average</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Standard 5.6 Praxis Below 80%**

Provide an explanation and a plan for improvement that will be used if the program's 3-year average for exam pass rate does not meet or exceed the CAA's established (80%) threshold. Include a timeline for implementing and assessing these steps.

**Standard 5.6 Clarifying Information**

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 5.6.

**Standard 5.7 RESERVED**

**Standard 5.7 RESERVED**

The CAA has eliminated employment rates as a required student outcome measure along with the related CAA-established threshold. Programs may still choose to use employment rates as their own measure, but CAA will not require it. Thus, Standard 5.7 has been reserved. Please confirm that you understand this change by checking the box below. If you have any questions, please contact accreditation staff at accreditation@asha.org.

**Standard 5.8 Program Improvement – Student Outcomes**

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.

FINDINGS

Standard 5.8 Prior Concerns

If there were areas of non-compliance or follow-up regarding Program Improvement – Student Outcomes noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 5.8 Program Improvement – Student Outcomes Changes

Describe any changes that have occurred in the last reporting period regarding the program's program improvement – student outcomes.

Standard 5.8 Outcome Improvement

Describe the analysis processes that the program uses to evaluate the results of graduation rate and Praxis Subject Assessment pass rate to facilitate continuous quality improvement.

Standard 5.8 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 5.8.

Standard 5.9 Evaluation of Faculty
Standard 5.9 Evaluation of Faculty

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.

FINDINGS

If there were areas of non-compliance or follow-up regarding the Evaluation of Faculty noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 5.9 Prior Concerns

Standard 5.9 Evaluation of Faculty Changes

Describe any changes that have occurred in the last reporting period regarding the program's evaluation of faculty.

Standard 5.9 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 5.9.

Standard 5.10 Faculty Improvement
Standard 5.10 Faculty Improvement

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.

FINDINGS

Standard 5.10 Prior Concerns

If there were areas of non-compliance or follow-up regarding the Faculty Improvement noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 5.10 Faculty Improvement Changes

Describe any changes that have occurred in the last reporting period regarding the program's faculty improvement.

Standard 5.10 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 5.10.

Standard 5.11 Effective Leadership

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

**Requirement for Review:**

- The program must demonstrate how the individual responsible for the program of professional education effectively leads and administers the program.
- The program director's effectiveness in advancing the goals of the program and in leadership and administration of the program must be regularly evaluated.

**FINDINGS**

**Standard 5.11 Prior Concerns**

If there were areas of non-compliance or follow-up regarding the Effective Leadership noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

**Standard 5.11 Effective Leadership Changes**

Describe any changes that have occurred in the last reporting period regarding the program's effective leadership.

**Standard 5.11 Clarifying Information**

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 5.11.

**Standard 6.0 Program Resources**

**Standard 6.1 Institutional Financial Support**
Standard 6.1 Institutional Financial Support

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.

FINDINGS

Standard 6.1 Prior Concerns

If there were areas of non-compliance or follow-up regarding Institutional Financial Support noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 6.1 Institutional Financial Support Changes

Describe any changes that have occurred in the last reporting period regarding the program's institutional financial support.

Standard 6.1 Budget Process

Describe the budgeting process for the program.

Standard 6.1 Budget Table

Report the total budget for the accredited program. Enter "0" where none.
<table>
<thead>
<tr>
<th>Sources of Support</th>
<th>Prior Year Annual Budget (Amount in $)</th>
<th>Current Year Annual Budget (Amount in $)</th>
<th>% increase/decrease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty/Staff Salaries</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supplies &amp; Expenses (non-capital/non-salary expenses)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Capital Equipment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Institutional Support Sub-Total</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grants/contracts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clinic Fees</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Funding</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Institutional Support Sub-Total</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Budget</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of budget represented by non-institutional support</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Standard 6.1 Other Funding Descriptions**

If you included funding in the "Other Funding" category in the Program Budget Table above, describe the source(s).

**Standard 6.1 Budget Difference**

For each budget category in the Program Budget Table above that displays a variance of greater than 10% in the %increase/decrease column, explain the reasons for and the impact of each variance.

**Standard 6.1 Adequate Support**

Describe how the program determines that there is sufficient support for the specific areas of personnel, equipment, educational and clinical materials, and research.

**Standard 6.1 Anticipated Financial Changes**

Describe potential budget insufficiencies or anticipated changes to financial resources that may impact program capacity in the near and long term. Discuss steps that will be taken by the program to ensure sufficient financial resources to achieve the program’s mission and goals.
Standard 6.1 Outside Funds

If the program's budget includes funds generated from activities outside the usual budgeting processes, describe the consistency of these funds and the portion of the budget that is accounted for by these funds. Describe the possible impact on program viability if these funds are not available.

Standard 6.1 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.1.

Standard 6.2 Support for Faculty Continuing Competence

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.

FINDINGS

Standard 6.2 Prior Concerns

If there were any areas of non-compliance or follow-up regarding Support for Faculty Continuing Competence noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.
Standard 6.2 Faculty Continuing Competence Changes

Describe any changes that have occurred in the last reporting period regarding the program's Support for faculty continuing competence.

Standard 6.2 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.2.

Standard 6.3 Physical Facilities

Standard 6.3 Physical Facilities

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.

FINDINGS

Standard 6.3 Prior Concerns

If there were areas of non-compliance or follow-up regarding Physical Facilities noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 6.3 Physical Facilities Changes

Describe any changes that have occurred in the last reporting period regarding the program's physical facilities.
Standard 6.3 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.3.

Standard 6.4 Program Equipment and Materials

Standard 6.4 Program Equipment and Materials

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).

FINDINGS

Standard 6.4 Prior Concerns

If there were areas of non-compliance or follow-up regarding Program Equipment noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 6.4 Program Equipment and Materials Changes

Describe any changes that have occurred in the last reporting period regarding the program's equipment, educational and clinical materials.
Standard 6.4 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.4.

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Standard 6.5 Technical Infrastructure

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.

FINDINGS

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Standard 6.5 Prior Concerns

If there were areas of non-compliance or follow-up regarding Technical Infrastructure noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 6.5 Infrastructure Changes

Describe any changes that have occurred in the last reporting period regarding the program's technical infrastructure.
Standard 6.5 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.5.

Standard 6.6 Clerical and Technical Staff Support

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.

FINDINGS

Standard 6.6 Prior Concerns

If there were areas of non-compliance or follow-up regarding Clerical and Technical Staff Support noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

Standard 6.6 Clerical and Technical Staff Support Changes

Describe any changes that have occurred in the last reporting period regarding the program's clerical and technical staff support.
**Standard 6.6 Clarifying Information**

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.6.