Council on Academic Accreditation
Audiology | Speech-Language Pathology

ACCREDITATION HANDBOOK

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PREFACE

This *Handbook* is intended to provide the reader with information about accreditation of audiology and speech-language pathology entry-level graduate education programs. To accomplish this, the *Handbook* includes the following information:

- history of the involvement of the American Speech-Language-Hearing Association and the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) in specialized accreditation of audiology and speech-language pathology entry-level graduate programs;
- the CAA's mission, vision, and guiding principles;
- the Standards for Accreditation used by the CAA in the review process;
- the CAA's policies and procedures that outline the parameters under which the CAA operates;
- additional information of interest to programs involved in the pre-accreditation and accreditation processes;
- expectations related to conflict of interest and confidentiality.

The *Handbook* is intended for use by program directors, administrators, members of the CAA, CAA Nominating Committee members, CAA site visitors, accreditation staff, and the general public interested in or affected by the quality of education in the discipline of communication sciences and disorders.

It is imperative that any user of this *Handbook* who may be preparing documentation and/or official materials for submission to the CAA obtain access to the web portal or copies of the most recently revised and published forms, if applicable, and consult staff of the Accreditation Office when any question relating to the accreditation process arises.

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INTRODUCTION

A. Role and Value of Accreditation in the Professions

ASHA's interest in accreditation is based upon the belief that all professions that provide services to the public have an obligation to ensure, as far as possible, that services provided by its members are of high professional quality. One effective way in which this obligation can be met is by establishing appropriate standards of educational quality and by identifying publicly those education programs that meet or exceed these standards. Accreditation is intended to protect the interests of students, benefit the public, and improve the quality of teaching, learning, research, and professional practice. Through its accreditation standards, the accrediting body encourages institutional freedom, ongoing improvement of institutions of higher education and graduate education programs, sound educational experimentation, and constructive innovation.

The accreditation process involves evaluating programs in light of their own mission, goals and education models—judging the degree to which a program has achieved those goals and objectives. Therefore, the CAA does not explicitly prescribe the processes by which the program's outcomes should be reached; rather, it evaluates a program's success in achieving outcomes and goals that are consistent with its stated mission (including religious mission, if relevant). If a program's goals and education model are clearly and accurately described, the different "publics" served by this program should be able to make intelligent and informed decisions about the quality of the program and the qualifications of the students it educates.

B. Benefits of CAA Accreditation

The public is assured that accredited programs in audiology and in speech-language pathology are evaluated extensively and conform to standards established by the professions.

Students can identify those education programs that meet their chosen profession's standards for a high-quality education. Accreditation offers students the assurance that the academic and clinical education provided by the graduate education program will prepare them for entry into the professions. For example, the ASHA Standards and Implementation Procedures for the Certificate of Clinical Competence (CCC) in audiology and in speech-language pathology require that applicants obtain a graduate degree from a CAA-accredited program, which automatically satisfies the academic and clinical practicum requirements for the CCC. Similarly, graduates from CAA-accredited programs will be prepared to meet state licensing and/or state teacher certification requirements, if these elements are included in the program goals.

Colleges and universities benefit from the stimulus for self-evaluation and self-directed improvement that the accreditation process provides. The professions benefit from their members' vital input into the standards established for the graduate education of future professionals.

PART 1 – HISTORY & PURPOSE

I. HISTORY OF THE ACCREDITATION PROGRAM

A. American Speech-Language-Hearing Association

The American Speech-Language-Hearing Association (ASHA), founded in 1925, is a national voluntary membership association whose primary scientific and professional focus is on human communication behavior and disorders. According to Association Bylaws, Article II, the purposes of the American Speech-Language-Hearing Association are to:

- encourage basic scientific study of the processes of individual human communication with special reference to speech, language, hearing, and related disorders;
- promote high standards and ethics for the academic and clinical preparation of individuals entering the discipline of human communication sciences and disorders;
- promote the acquisition of new knowledge and skills for those within the discipline;
- promote investigation, prevention, and the diagnosis and treatment of disorders of human communication and related disorders;
- foster improvement of clinical services and intervention procedures concerning such disorders;
- stimulate the exchange of information among persons and organizations and disseminate such information;
- inform the public about communication sciences and disorders, related disorders, and the professionals who provide services;
- advocate on behalf of persons with communication and related disorders;
- promote the individual and collective professional interests of the members of the Association.

B. History of ASHA's Accreditation Bodies

ASHA established the American Board of Examiners in Speech Pathology and Audiology (ABESPA) in 1959 to foster the purposes of the Association and ensure the provision of quality services to persons with communication disorders.

ABESPA designated the Educational Training Board (ETB), later named the Educational Standards Board (ESB), to evaluate programs that offered master's degrees in audiology and in speech-language pathology and that voluntarily submitted applications for accreditation.

Association Bylaws were amended to replace ABESPA with the Council on Professional Standards in Speech-Language Pathology and Audiology (Standards Council), effective January 1, 1980. The Standards Council, a semi-autonomous body established by ASHA's Legislative Council, was responsible for establishing and monitoring all standards programs of ASHA. The standards were implemented by three operating boards: the Educational Standards Board, the Professional Services Board (for professional services facility accreditation), and the Clinical Certification Board (for individual's professional certification). The Standards Council also arbitrated appeals of decisions rendered by the operating boards (LC 59-78, LC 54-79, and LC 12-84 [PDF]).

In September 1993, an Ad Hoc Joint Committee on Academic Accreditation Issues was formed by ASHA and the Council of Graduate Programs in Communication Sciences and Disorders (CGPCSD). This Joint Committee, comprising members from each organization, was charged to examine and study issues related to accreditation of education programs in response to internal and external influences, prepare analyses of these influences on the process of standards setting and implementation and related matters, and make recommendations for action. The committee's report, published in 1994, resulted in a set of accreditation principles and a recommended structure for a new accrediting body.

C. Council on Academic Accreditation in Audiology and Speech-Language Pathology

Effective January 1, 1996, the Educational Standards Board was replaced by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA), having responsibility for oversight of the accreditation of graduate education programs that prepare entry-level professionals in audiology and in speech-language pathology (LC 25-94, LC 26-94, LC 27-94, and LC 28-96 [PDF]). The CAA is charged with establishing, defining, monitoring, and implementing accreditation of graduate education programs. "Graduate" refers to post-baccalaureate programs leading to a master's or doctoral degree, whether offered through graduate or professional schools.

The charge to the CAA by act of the Legislative Council (LC 26-94) is to:

- formulate standards for the accreditation of graduate education programs that provide entry-level professional preparation in audiology or speech-language pathology,
- evaluate programs that voluntarily apply for accreditation,
- grant certificates and recognize those programs deemed to have fulfilled requirements for accreditation,
- maintain a registry of holders of such certificates,
- prepare and furnish to appropriate persons and agencies lists of accredited programs.

The following excerpt from the ASHA Bylaws relates to the role of the CAA in defining and implementing the standards for accreditation:

> **ARTICLE VIII - Professional Standards and Ethics**
>
> 8.2 Council on Academic Accreditation in Audiology and Speech-Language Pathology
>
> The Association, by action of the Board of Directors, shall establish and maintain a program of academic accreditation. The Association shall establish the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA), which shall define the standards for the accreditation of graduate education programs and apply those standards in the accreditation of such programs. The CAA may also develop standards and processes for approval for programs that prepare support personnel. Members of the CAA shall be appointed following policies established by the CAA and shall have final authority to establish the standards and processes for academic accreditation. Subject to the application of established appeal procedures, the decisions of the CAA concerning the award, withholding, or withdrawal of academic accreditation shall be final.

D. Autonomy of the CAA

The CAA is autonomous in the development of accreditation standards, in the establishment and implementation of policies and procedures, and in making its accreditation decisions. As required in the criteria for external recognition of the CAA as an accrediting agency (see Recognition and Scope below), the CAA must maintain appropriate separation from any entity in conducting the accreditation program activities. However, it does receive support from ASHA and the academic program community. Through agreements with ASHA, checks and balances are built into the CAA's processes (e.g., ex officio members, ASHA board liaisons, observers, widespread peer review, etc.) in order to provide appropriate stakeholder input and to ensure consistency with ASHA's mission.

II. PURPOSE AND PRINCIPLES OF THE COUNCIL ON ACADEMIC ACCREDITATION

A. Vision

To engage academic programs in strategic partnerships for the advancement of quality education and enhancement of the professions.

B. Purpose

To assure quality in preparation of students in audiology and speech-language pathology to serve the professions and the public.

C. Principles of Accreditation

In 1994, the Ad Hoc Joint Committee on Academic Accreditation Issues developed a set of working principles, which served as guidelines to re-establish the academic accreditation program in the professions of audiology and speech-language pathology. The CAA reviews and refreshes these Principles of Accreditation as part of its continuing development, strategic planning, and quality management of the accreditation program.

D. Accreditation Quality Management System (AQMS)

The CAA operates a systematic evaluation process that includes assessment of all individuals involved in the process, as well as the process itself. This periodic review evaluates the extent to which the CAA is achieving the goals and objectives it has established and utilizes the results as a basis for making appropriate improvements. Assessments may include evaluations of the (a) administrative procedures and day-to-day program operations, (b) application process, (c) performance of site visitors, (d) performance of CAA members, (e) timeliness of actions taken, (f) complaint and appeal procedures, (g) consistency in application of standards and CAA decisions, and (h) the accreditation standards.

The CAA adopted a formalized quality management system in 2005, with the goal of creating, implementing, and maintaining an ongoing mechanism for assessment and improvement of accreditation administration, operations, and services to academic programs and for the public. Objectives of the system include:

- create constancy in improvement of services to appropriate stakeholders (e.g., academic programs, students, faculty, Council members, regulators, consumers, general public);
- identify opportunities for improvement through the use of evaluation mechanisms that seek feedback from all stakeholders in the accreditation process;
- regularly implement monitors to ensure that improvements in quality of service and operations are controlled and maintained;
- sustain program administration such that rigor, integrity, and competitive positioning are end results for the Accreditation Office of ASHA.

The Accreditation Quality Management System (AQMS) follows a traditional DMAIC model of quality improvement:

1. **Define** current process (e.g., standard operating procedures, documentation, visioning where we want to be in the future)
2. **Measure** current process (e.g., internal and external audits, customer satisfaction surveys, performance assessments)
3. **Analyze** current process to identify indicators for focus of improvement
4. **Improve** current process, using results of measurements
5. **Control** and maintain improvements

As part of the comprehensive AQMS, the CAA identifies opportunities for improvement through the use of retrospective, concurrent, and prospective evaluation mechanisms that seek feedback from all stakeholders in the accreditation process. This includes specific, targeted evaluations of the CAA meetings (structure, function, effectiveness), as well as personnel (continued qualifications,

performance, function) who support the accreditation program—council members, site visitors, and staff—via formal written and verbal mechanisms (e.g., surveys, focus groups, etc.).

E. Recognition and Scope

When the accreditation program was first conceived in 1959, the scope of accreditation activities was to evaluate programs that offered master's degrees in audiology and master's degrees in speech-language pathology. As knowledge and skills necessary to enter independent professional practice in audiology evolved to a doctoral level, the CAA ceased accrediting audiology master's programs as of January 1, 2007. The CAA's scope is for the accreditation of clinical doctoral programs in audiology and master's degree programs in speech-language pathology.

The CAA is recognized by the Secretary of the U.S. Department of Education (ED) and by the Council for Higher Education Accreditation (CHEA), formerly the Council on Postsecondary Accreditation. The CAA and its predecessors have been recognized continually by CHEA and its predecessors since 1964. The CAA and its predecessors have been recognized continually by the Secretary of Education since 1967.

The CAA's scope of recognition with both agencies is for the accreditation and pre-accreditation (Accreditation Candidate) throughout the United States of education programs in audiology and speech-language pathology leading to the first professional or clinical degree at the master's or doctoral level and the accreditation of these programs offered via distance education. The CAA's scope[1] of accreditation was clarified by both recognition agencies in 1997 to include accreditation and pre-accreditation (Accreditation Candidate) of such programs. The scope of recognition with ED was further clarified in 2002 and with CHEA in 2014 to also include the accreditation of these programs offered via distance education.

As required by ED for continued recognition, the CAA will provide to the Department a copy of its annual report to ASHA's Board of Directors (including a data summary of its major accrediting activities during the previous year), a copy of its list of accredited and candidacy graduate education programs at least twice annually, and any proposed change in its policies, procedures, or accreditation standards that might alter the CAA's scope of recognition or compliance with the criteria for recognition.

F. Self-Study and Its Relationship to Accreditation

What Is Self-Study?

Self-study is a procedure whereby an education program describes, evaluates, and subsequently improves the quality of its efforts. *Self-assessment* involves the identification of a program's strengths and limitations and the delineation of the steps necessary to address those limitations. Self-study requires a commitment to change rather than to maintain the status quo.

Through the self-study procedure, a program conducts a systematic and thorough examination of all of its components in light of its stated mission. Such an evaluation allows a program to determine the success it is having in accomplishing its self-established goals and objectives through careful evaluation of input obtained from individuals and groups directly and indirectly involved with the program.

Self-study is a process that should be ongoing. Active and continuous involvement in self-study reflects a commitment to the concept of providing students with a quality educational experience.

[1]The scope of accreditation was expanded in 1993 by the Council on Postsecondary Accreditation (a predecessor of CHEA) from master's degree programs to graduate education programs that provide entry-level professional preparation with a major emphasis in audiology and/or speech-language pathology. "Graduate" refers to post-baccalaureate programs leading to a master's or entry-level doctoral degree, whether offered through graduate or professional schools. The scope was similarly expanded by the Department of Education in 1997.

How Is Self-Study Accomplished?

There is no single way to complete the task of self-examination. It may take as long as 6 to 18 months to complete the initial phase of self-assessment. At the end of that period, a working document should have been developed that facilitates further program review. This document should be an accurate statement of the status of the program at that time.

In conducting a self-study, many programs have established steering committees to coordinate the various tasks involved in this complex effort. Other programs merely assign a project director.

Regardless of how the study is coordinated, if it is to be successful, it must be systematic. For this reason, a prospectus should be developed before initiation of the study. If properly developed, the prospectus guarantees that the self-study will be comprehensive.

The prospectus should specify the various components of the program to be assessed. It should indicate how data will be collected, what the review procedure is, how progress will be measured, how decisions will be reached, who will have the responsibility for each task, and what the general time lines will be.

A well-planned and successful self-study must involve collection of data from all who are associated with a program, either directly or indirectly. Information must be obtained throughout each of the various stages of the study and should be obtained from a representative sample of the parent institution's administration, academic and clinical faculty, student body, and governing body—as well as the program's graduates, employers of program graduates, and other appropriate constituencies.

Self-study goes beyond mere data collection and requires that a program evaluate the procedures it will use in attempting to alleviate limitations that the data reveal. Examination of problem-solving procedures allows a program to reflect on its own efficiency and to determine if the methods in use are, in fact, the most expeditious available. Efficient problem solving obviously is critical if a program is to attain its objectives.

One of the most important components of self-study is the data collected from the follow-up evaluation of a program's graduates and employers of those graduates. The quality of any program is ultimately determined by whether it produces competent professionals. In most cases, assessment relates to providers of clinical services to the public, but it can include research, teaching, administrative, community, and professional leadership activities of graduates. Therefore, a program must continually assess the achievement of its students and the performance of its graduates in light of its objectives and correct the observed discrepancies through program change.

The CAA has developed a series of questions [PDF] that might be asked during a program's self-study. They are offered only as suggestions to facilitate the conduct of self-study activities, as well as to help the program consider its compliance with the Standards for Accreditation.

What Is the Relation of Accreditation to Self-Study?

Self-study and accreditation are linked, but they also are essentially parallel and different procedures. *Self-study* is, as the name implies, a self-generated evaluation of one's own program, whereas the accreditation process involves external peer review. The *Handbook* can provide the basic framework by which a program may engage in self-evaluation activities. Although the accreditation application can act as a general guide to self-study, the application for accreditation is not synonymous with self-study. *Self-examination* is the first step toward accreditation, but it must be developed as an ongoing mechanism that is operational even after accreditation has been achieved. If a program is to remain viable, it must engage in continuous self-assessment and not depend on periodic external review to accomplish this end. The application for accreditation must grow out of self-study, not the reverse.

Although assessment of a program's readiness for external review is not the purpose of self-study, after such evaluation, a program should be able to determine if it is actually ready for peer review. When a

program, following self-study, deems itself unprepared for external review, it should not initiate the application for accreditation, but attempt to correct the deficiencies. Additional self-study should indicate if the problems have been solved and whether the program is then ready for external review. At any time during the accreditation process, the CAA Chair or members are available to provide ongoing guidance to programs. The Accreditation Office staff also is available to provide consultation on the accreditation process, policies, and procedural issues and interpretation of standards.

As previously noted, each program is responsible for developing and conducting its own self-assessment. Although there is no single way to complete the task, all successful self-studies involve singular procedures and obtain and evaluate information from relatively defined constituencies. As a result of the similarities in procedures, the CAA has developed a flow chart [PDF] that provides one example of the basic requirements of a successful self-study. A program may adapt the chart as it develops and implements its strategies for assessing its own quality or may develop a different process to better suit its needs and mission.

PART 2 – STRUCTURE & OPERATIONS (ADMINISTRATION)

III. ORGANIZATIONAL STRUCTURE

A. CAA

The Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) is the entity within ASHA that has the authority to establish and enforce a set of standards for the accreditation of graduate education programs in audiology and in speech-language pathology. The CAA has authority to make accreditation decisions.

B. Site Visitors

To support the CAA's accreditation process, reviewers are identified and trained to evaluate academic programs based on the Standards for Accreditation and to conduct an on-campus review of the program as part of a site visit team. A report of this visit is generated by the team and used by the CAA as part of the documentation in making accreditation decisions. The CAA has the authority to establish qualifications for service as a site visitor, select qualified candidates, and provide training and ongoing calibration for a pool of site visitors.

C. CAA Nominating Committee

A committee separate from the CAA has responsibility for preparing the slates for academic, practitioner, and public members of the Council as vacancies are anticipated. The CAA Nominating Committee follows procedures outlined by the CAA in the conduct of its work.

D. Appeal Panel

The CAA's accreditation process provides an option for a program that has had an adverse action rendered by the CAA to request further consideration and appeal the decision to deny or withdraw its accreditation status. If an appeal is filed, the program's adverse action decision is subject to review and decision by a separate appeal panel and the decision rendered is consistent with the appeals process.

E. Accreditation Staff

ASHA's Accreditation Office shall provide staff support to the CAA. The number, composition, and organization of the staff are determined by ASHA so as to ensure the effective management of the activities in support of the CAA and the accreditation process.

F. Board Liaison Vice Presidents

The ASHA Vice President for Academic Affairs in Audiology and the Vice President for Academic Affairs in Speech-Language Pathology shall serve as the Board of Directors' liaisons to the CAA. The responsibilities of the Vice Presidents shall be to:

- assist the CAA in matters involving the Board of Directors;
- consult with the CAA Chair and Executive Committee before the start of CAA meetings each year regarding academic issues and their relationship to accreditation;
- ensure that the needs of academic programs in audiology are addressed, established professional standards for audiology are maintained, and procedures for professional accreditation in audiology operate effectively and efficiently;
- ensure that the needs of academic programs in speech-language pathology are addressed, established professional standards for speech-language pathology are maintained, and procedures for professional accreditation in speech-language pathology operate effectively and efficiently.

IV. OPERATIONAL POLICIES FOR ALL ACCREDITATION PARTICIPANTS

A. Confidentiality and Conflict of Interest

To preserve the credibility of the accreditation process, members of the Council, site visitors, consultants, appeal panel members, paid staff, and other representatives of the CAA must avoid conflicts of interest in the discharge of their duties. Responsibility for determining and avoiding such conflicts rests primarily with the individual and with the CAA itself.

ASHA's Board of Ethics defines conflict of interest in its Issues in Ethics Statement "Conflicts of Professional Interest" as:

> a situation in which personal and/or financial considerations have the potential to influence or compromise judgment in clinical, service, research, consultation, instruction, administration, or any professional activity.

The above statement applies to every aspect of the accreditation process. Because of the significant impact of accreditation and accreditation decisions upon the welfare of students, faculties, and the institutions to which they are attached, it is especially important that members of the Council and other individuals named above be objective and display the highest degree of integrity. For this reason, these individuals must avoid both the fact and the appearance of conflict of interest and must be alert to any and all situations that might involve or give the appearance of bias.

Further, all individuals affiliated with the accreditation program are expected to keep confidential all records, discussions, and decisions about accredited or candidate programs or programs seeking an accreditation status with the CAA. This includes all information regarding site visit assignments or content; and all other information that is not otherwise publicly available on the CAA or ASHA websites. Individuals agree to not discuss or distribute confidential information in any manner whatsoever (orally, written, or digital form) with anyone except those authorized for the review of the program. Any material or other information related to the accreditation process (print or digital) must be disposed of in a manner that protects confidentiality.

Strict safeguards of confidentiality are maintained for discussions related to review and accreditation decisions of specific programs. Program discussions are held in closed session and the minutes are kept confidential. During open portions of meetings, participants must avoid references to specific programs by name or through descriptions that would reveal the program's identity.

ASHA's Board of Ethics has included in its "Confidentiality" Issues in Ethics statement a section on relations to peers and colleagues, which provides the following discussion and guidance:

> Issues of confidentiality also arise for ASHA members and certificate holders in their relationships with colleagues as a result of information they obtain as they serve in roles such as site visitor, consultant, supervisor, administrator, or reviewer of documents such as manuscripts, grant proposals, and fellowship applications. All of these roles allow access to peer information of a personal and confidential nature. These activities are covered broadly under Principle of Ethics IV, which calls upon ASHA members and certificate holders to honor their obligations to "colleagues" and "members of other professions and disciplines.
> Guidance: Information about colleagues and professional peers that is gathered or revealed in the course of evaluations, assessments, or reviews should be treated with the same care and respect that are appropriate to information about clients and research subjects.

Upon appointment or election to the Council, service as a volunteer, or hiring as a member of the accreditation staff, such persons shall review and sign a conflict of interest and confidentiality statement, subject to annual review and renewal.

B. Consultation

CAA members should not serve as accreditation consultants, paid or unpaid, to academic programs outside of the discharge of their regular duties in support of the accreditation process. Further, individuals who are currently serving on the ASHA Board of Directors are not eligible to serve, during their term of office on the Board, as consultants to programs seeking or maintaining accreditation.

If elected to the CAA, Council members are expected to divest themselves of any consultative activities within the first 6 months of their term of appointment.

Members of the site visitor pool shall declare themselves in conflict with any program(s) for which they have acted as paid consultants during the last accreditation review.

Accreditation Office staff may not serve as consultants to academic programs outside of the discharge of their regular duties in support of the accreditation process.

C. Social Media Guidelines for CAA Volunteers

Social media tools, including Facebook, blogs, social networking sites, video or picture sharing sites, wikis, and other means of communicating online are an important part our everyday life. Social media offers new opportunities to share information and be part of important conversations.

The use of social media also presents certain risks and carries with it certain responsibilities. CAA volunteers are free to express themselves and their opinions in whatever way they see fit as long as they are clearly representing themselves as individuals and not speaking on CAA's or ASHA's behalf.

Please consider the following guidelines when posting on social media.

- Respect confidentiality. First and foremost, know and follow CAA's Conflict of Interest and Confidentiality policy. All information in meetings and on site visits is confidential. This includes membership on committees and involvement in special projects. Please consider not posting when traveling for CAA. Posts can open the door for others to ask why you are traveling and result in an awkward situation.
- Be who you are. Always post as an individual, not as a CAA member or site visitor.
- Respect your audience. If posting on a personal related social media site, or one affiliated with CAA or ASHA, please be respectful; use language that is fair and courteous.
- Use your best judgment. Remember that there can be consequences to what you publish in any format. Assume that what you post on social networking sites or blogs will be part of a permanent public record, accessible to colleagues, friends, and members of the media. If you're about to publish something that makes you even the slightest bit uncomfortable, review the suggestions above and think twice about posting it.

V. OPERATION OF THE COUNCIL ON ACADEMIC ACCREDITATION

The CAA consolidates the standards setting and standards implementation functions into a single body (LC 26-94) whose composition is designed to reflect the fact that audiology and speech-language pathology are closely related but distinct professions (LC 39-92 [PDF]).

A. Composition

The Council's composition reflects the active stakeholders in the accreditation process and the beneficiaries of quality education—accredited academic programs, clinical service providers, and the public. Representatives should be engaged currently in educational and/or clinical processes that align with the mission and purposes of the accreditation program.

The Council shall consist of 19 voting members; 18 who serve a 4-year term, one Immediate Past-Chair who serves a one-year term, and two nonvoting ex officio representatives.

- Eleven (11) **academic members** are from the faculty/staff of CAA-accredited graduate education programs at the time of appointment.
  - Academic members bring their knowledge and experience about delivering a CAA-accredited graduate program to the Council. These individuals are currently involved in the operations of a CAA-accredited program (e.g., curriculum design and decisions, strategic plan implementation, outcome measurement, incorporating outcome findings, decisions about teaching and measuring knowledge and skills for clinical practice, department policy decisions). Teaching, supervising, advising, and/or conducting research within a CAA-accredited program, without active participation in program operations may not provide the necessary knowledge for contemporary and valid contributions to the CAA. Governance responsibilities outside a CAA-accredited program (e.g., higher administration, research institutes), without continued active participation in the day-to-day decision making and operations of a CAA-accredited program, would not provide the needed contributions to the CAA.
  - Individuals must have earned a graduate degree from an accredited institution—at least three (3) academic members in audiology and four (4) academic members in speech-language pathology must be research-qualified (PhD or EdD) doctoral level faculty.
  - Individuals must hold a rank of associate professor or above or be comparably experienced educators;
  - At least one (1) of the academic members shall have significant experience in clinical teaching (supervision). No more than three (3) may have clinical teaching as their primary role.
  - Individuals must be from a program accredited by CAA in the same professional area as the one he or she represents.[2]

- Five (5) **clinical practitioners** are employed full-time in non-academic settings.
  - Clinical practitioner members bring their knowledge and experience about the practice of the professions to the Council. These individuals are currently involved in the full-time delivery of clinical services to individuals with communication and/or swallowing disorders.
  - Individuals must have the direct delivery of speech-language-hearing services as the primary employment function at the time of appointment.
  - Individuals must have worked in the area that credentials are held for at least five (5) years.
  - At least one (1) of these practitioners shall have experience in supervising students and/or clinical fellows.
  - At least one (1) shall be an audiologist, and at least two (2) shall be speech-language pathologists.

  Note: An adjunct or complementary appointment to a graduate education program shall not disqualify practitioner members, provided they are employed full time in a non-university setting. Employment in more than one position or agency may be combined to meet the full-time requirement (i.e., at least 32 hours per week).

[2] This criterion was implemented with incoming CAA members in January 2017.

- One (1) additional member who represents the area of audiology could be either an academic member or a clinical practitioner, depending on the specific needs of the Council in a given year.

- One (1) **public member**, who by his or her dissociation from the professions and the delivery of a CAA-accredited program, brings a non-affiliated stakeholder's perspective to the Council.
  - The Public Member is not a member of the professions of audiology and/or speech-language pathology. In addition, in accordance with the U.S. Department of Education's definition, a "representative of the public" is a person who is not (a) an employee, member of the governing board, owner, or shareholder of or consultant to a program that either is accredited or has applied for accreditation by the CAA; (b) a current or past member of any trade association or membership organization which advocates on behalf of audiology and/or speech-language pathology issues; or (c) a spouse, parent, child, or sibling of an individual identified in (a) or (b).

- One (1) **Immediate Past-Chair**, who has completed their term as Chair of the Council and will assist with succession planning and support ongoing initiatives, depending on the needs of the Council.

- The chair of the body that establishes ASHA certification standards and the ASHA Chief Executive Officer's staff designee shall be nonvoting, ex officio members.

The Council shall consist of voting members with the following qualifications.

- Seven (7) shall represent the area of audiology, six (6) of whom must hold the Certificate of Clinical Competence in Audiology.

- Ten (10) shall represent the area of speech-language pathology, nine (9) of whom must hold the Certificate of Clinical Competence in Speech-Language Pathology.

- No more than one (1) individual from a specific educational institution or clinical facility may serve on the Council at the same time. Note: Adjunct or complementary appointment to an institution or facility shall not disqualify individuals from serving as voting members on the Council, provided they meet all other criteria for service.

- At least nine (9) shall have served as academic program accreditation site visitors.

The CAA recognizes that there may be need for certain waivers or exceptions to the above qualifications and criteria on an occasional and case-by-case basis to support the integrity of the accreditation program and its process.

Application Process

Individuals who meet these qualifications and are interested in serving as a member of the CAA must complete and submit an application to the Accreditation Office for consideration by the CAA Nominating Committee. All applicants will be required to furnish the following information:

- Curriculum vitae
- Personal statement of the qualifications regarding experience in accreditation, standards development, site visits, professional competence, university governance, etc.

Criteria for Selection

The CAA Nominating Committee must ensure that the CAA's composition is maintained to include individuals from accredited programs, practice settings, and the public to support the accreditation review process and the number of programs. The criteria for selection of CAA candidates include, but are not limited to:

- published qualifications for service;

- knowledge of the accreditation process and accreditation standards;
- sensitivity to issues regarding conflict of interest and the importance of impartial and objective judgment;
- professional experience;
- geographic location;
- gender, cultural, and ethnic background;
- work environment (i.e., type of facility).

B. Terms of Office

Members of the CAA shall serve 4-year staggered terms, beginning on the first day of January following election. The CAA maintains a rotation schedule [PDF] for all Council positions. Members shall not serve consecutive terms and shall serve no more than two total terms.

The CAA has authority to manage or adjust terms of service (e.g., balance member representation), when warranted.

C. Roles and Responsibilities of CAA Members

The roles and responsibilities of **all CAA members** (academic, practitioner, public) are as follows:

Fiduciary Responsibilities [PDF]

All CAA members are expected to uphold fiduciary responsibilities to work toward the fulfillment of the group's mission and objectives:
- Duty of care—diligence in carrying out duties
- Duty of loyalty—obligated to act in the association's best interests and not use their authority to advance personal interests
- Duty of fidelity to purpose—ensuring actions and decisions are consistent with stated mission and purpose of the association

This includes the following:
- inform his or her employer of the responsibilities and commitments required of CAA members,
- complete assignments delegated by the chair,
- acknowledge all communications concerning CAA work by requested deadlines,
- prepare for meetings and conference calls by reviewing all relevant material and pertinent background information,
- participate in all discussions,
- maintain a professional demeanor when other ideas or conflicting viewpoints are presented,
- disclose any possible conflict of interest.

Report Reviews

Applications—CAA members shall
- read, review, and evaluate approximately four self-study applications per semester within the requested time frame and evaluate program compliance with standards—public member will be assigned fewer applications,
- review program's response to any initial observations and site visit reports,
- review site visit report and compare site visit team's observations with own evaluation,
- vote on accreditation decisions,
- provide rationale regarding areas of noncompliance,
- provide comments or concerns in decision letter to be addressed in next report (e.g., first annual, probation, etc.).

Annual Reports—CAA members shall

- read, review, and evaluate approximately 10 annual reports per semester within the requested time frame and determine program compliance with standards for continuation of accredited status—public member will be assigned fewer annual reports,
- bring reports to the full CAA as necessary with rationale regarding areas of noncompliance and specific accreditation recommendations,
- vote on accreditation decisions, when appropriate,
- provide comments or concerns in approval letter to be addressed in next report (e.g., annual report, probation, etc.).

Candidacy Applications—CAA members shall

- review recommendations from the Candidacy Committee,
- vote on candidacy decisions.

Substantive Change Plans—CAA members shall

- review recommendations from the Substantive Change Plan Committee,
- vote on substantive change plan decisions.

Participation During Term

Setting Standards, Policies, and Procedures—CAA members shall

- discuss and vote on accreditation standards in own professional area,
- establish, review, or revise policy and procedures as needed.

Outreach—CAA members shall

- assist in preparation of CAA presentations and publications,
- attend relevant meetings and present on behalf of the CAA, including at the ASHA Convention, Council on Academic Programs in Communication Sciences and Disorders (CAPCSD) annual meeting, or other meetings as needed,
- present webinars and other workshops/training as needed,
- participate in other outreach activities as determined by the CAA.

Performance and Attendance—CAA members shall

- complete all orientation and training activities, including site visitor training if applicable, as described in the Orientation for New Members section in this chapter.
- attend all CAA meetings per year in their entirety (expenses for meetings held at the National Office in Rockville, Maryland are covered by CAA in accordance with ASHA Volunteer Travel Policy)
  - winter meeting is typically conducted on the third Wednesday through Saturday noon of February
  - summer meeting is typically conducted on the third Wednesday through Saturday noon of July
  - fall meeting is typically conducted on Thursday through Saturday in September or October.
- participate in other meetings called by the CAA Chair for the purpose of conducting the business of the Council or of the Executive Committee.

Committees and Mentoring—CAA members shall

- actively participate on one or more CAA committees as requested by the CAA Chair, including committee activities during and between CAA meetings, completing assignments as requested and described in the *Handbook*,
- serve on ad hoc committees of the Association, as requested by the CAA Chair,
- serve as a mentor for new members regarding full Council and committee assignments, as requested by the CAA Chair.

Technical Skills—CAA members shall

- maintain technical skills to effectively use a shared web portal to complete Council activities.

Conflict of Interest and Confidentiality—CAA members shall comply with all conflict of interest and confidentiality policies and protocols. While not an exhaustive list, the following principles should be followed to ensure informed and consistent application for all CAA members. Members

- should not be present in the meeting room or participate in accreditation discussions or decisions involving programs within the state in which they are employed, programs in which they have been employed within the previous 5 years, or programs that they attended as graduate students;

- should not participate in final accreditation decisions involving programs in which they have served as a regular site visitor during the last accreditation cycle or in which they have served as an observer on a site visit;

- should provide a list of programs where, in their judgment, there is the potential for or the appearance of bias—staff will verify conflicts when assigning reviews to CAA members;

- should provide voluntary, full, and prompt disclosure of a potential conflict of interest to the CAA Chair, Accreditation staff, and/or legal counsel to determine if a conflict of interest is, in fact, present, as evidence of good faith;

- must take the initiative to manage and resolve conflict of interest situations appropriately;

- shall not participate as site visitors while serving on the CAA except to
  - observe a site visit as part of the CAA orientation/site visitor training,
  - observe a site visit as part of the responsibilities as a Site Visit Committee member,
  - conduct a focused site visit. Note: Council members who serve as site visitors for a focused site visit should observe all conditions imposed upon site visitors as outlined in the *Handbook*, but may participate in the discussion of the program under review;

- should respect the confidentiality of materials submitted by the program in the accreditation process and refrain from use of such information for personal benefit or advancement;

- should not communicate with programs under review regarding the status of the review or report or imply the outcome of the review process;

- must avoid bias or avoid being influenced in any way by real or potential economic interests in, commitments to, or benefits derived from programs under consideration by the Council.

Participation After CAA Term Has Expired

- Appeal Panel Pool: The names of all former CAA members will be included in the Appeal Panel Pool and an individual may be requested to serve on an Appeal Panel as necessary.

- Site Visitor Pool: Academic and practitioner members may serve as a CAA site visitor, provided mandatory site visitor training has been completed and the individual meets qualifications.

Additional roles and responsibilities of the **public member** are to

- serve as a consumer advocate, represent and protect the public interest, and oversee the process for fairness and reasonable action;
- advise and make recommendations to the CAA regarding issues of fairness, due process, and consistency.

D. Orientation and Training for New Members of the CAA

The CAA Chair and staff shall provide an orientation for new CAA members. The orientation activities will include formal contact by the Chair prior to the first meeting, a planned presentation no later than the first meeting by members of the Council and staff, and ongoing informal consultation and advice from experienced CAA members. In addition, new members will be provided an orientation on the use of the shared web workspace to support the work of the Council.

Materials to be provided to new CAA members include, but are not limited to, the CAA *Accreditation Handbook*, minutes of all meetings of the CAA in the last year, and briefings on relevant policy and procedural issues.

Training will be provided on the evaluation of applications for accreditation and annual reports to ensure consistent application of standards. Sample applications, site visit reports, annual reports, and related program materials will be used to support the report review training.

Orientation also includes mandatory completion of the site visitor training, which must be satisfied within the first 2 years of service on the CAA, for new CAA members who have not had recent prior training and experience as a CAA site visitor. New CAA members also will participate as observers on a site visit as a component of site visitor training, at the discretion of the Site Visit Education and Training Committee.

E. Dismissal From the CAA

Any member of the CAA may be removed from the Council for not fulfilling the member responsibilities described above or for engaging in any conduct prejudicial to the best interests of the CAA in accordance with the following procedures.

- Any CAA member or the staff ex officio may bring to the attention of the CAA Chair any concerns related to an individual CAA member's performance related to the identified roles and responsibilities.
- After discussion with the member, the CAA Chair will make a recommendation to the Executive Committee related to the member's continuation on the CAA, giving due consideration to any extenuating circumstances.
- The Executive Committee has the discretion to make a decision regarding the member's continuation on the CAA, based on the nature and extent of any negative impact on the Council or on its members.
- If the decision results in a vacancy, the Council will follow the process outlined in the replacement procedures.

F. Resignation From the CAA

A member of the Council may resign from his/her position on the CAA in the event that he/she is unable to complete the assigned term. A replacement member with appropriate qualifications shall be appointed in accordance with appropriate replacement procedures.

G. Change in Qualifications

If an academic or practitioner member changes employment and no longer meets the qualifications under which he/she was selected in order to satisfy the required composition of the CAA (e.g., changes role as an academic or practitioner), the following actions will occur:

- If the member has 1 year or less remaining in his/her term on the Council, the member will complete the term.
- If the member has more than 1 year remaining in his/her term on the Council, the member will complete the calendar year that allows for a new member to be selected via regular CAA

Nominating Committee recruitment procedures. For example, if a member's qualifications change in May, he/she would complete his/her term that December (about 8 months), as the normal recruitment period occurs through June. If qualifications change in September (after the recruitment process has ended), then he/she would serve through the next calendar year allowing for the normal recruitment process to occur to identify a new member for that position (about 15 months).

Individuals who retire from their professional positions while serving on the CAA may complete their term and are not subject to this policy.

In the event that a public member's status changes during his/her term on the Council such that the individual no longer meets eligibility requirements or the definition of public member, he/she may not complete his/her term on the Council. A replacement member with appropriate qualifications shall be appointed in accordance with the CAA's policies.

The CAA recognizes that there may be need for certain waivers or exceptions to the above qualifications and criteria on an occasional and case-by-case basis to support the integrity of the accreditation program and its process.

H. Filling Unexpected Vacancies on the CAA

An unexpected vacancy on the CAA may occur due to dismissal, resignation, or a change in an individual's status making him/her ineligible to serve. If the vacancy occurs prior to a scheduled recruitment and election cycle for selecting new CAA members, the CAA Nominating Committee, if feasible, shall fill that vacancy through the established recruitment procedures, and the newly elected CAA member will be expected to serve a regular 4-year term.

If the vacancy occurs as a result of dismissal or resignation at a time that it cannot be filled through the recruitment/election process, the following procedures shall be followed.

- If the vacating member is an academic or practitioner member of the Council, a replacement member with appropriate qualifications shall be appointed by the CAA Executive Committee giving due consideration to recommendations from the current CAA Nominating Committee as described below, to complete the remaining time of the vacated term. As needed, academic or practitioner member vacancies may be temporarily filled by an EC decision to invite a current member of CAA to extend his or her term by one year.
- If the vacating member is a public member of the Council, a replacement member with appropriate qualifications shall be appointed by the CAA Nominating Committee to complete the remaining time of the vacated term.

Details of the replacement procedures for unanticipated vacancies are provided in the *Handbook*.

I. Voting and Participation

Members of the Council may participate in discussion of issues before the Council and may vote. Ex officio members of the Council may participate in Council discussions but may not vote, unless in executive session. Others may participate in Council discussions at the invitation of the Council but may not vote. Nonvoting participants (e.g., liaisons, observers) do not participate in nor do they attend closed or executive sessions of the Council.

Further discussion of voting protocols can be found in the "Conduct of Business" section of this *Handbook*.

J. Officers

The Council members shall elect individuals to the following offices:

- Chair,
- Chair-Elect,
- Vice Chair for Audiology,
- Vice Chair for Speech-Language Pathology.
- Immediate Past-Chair

Nominations and elections are governed by the following procedures.

- The Council Chair appoints a three-person Officers Nominating Committee (ONC) annually, no later than the summer meeting of the Council. All ONC members should be in their last year of service on the Council; at least one must be a current member of the Executive Committee.

- The ONC will solicit nominations from among Council members and develop a slate of nominees for the three officer positions for the following year: Chair-Elect and two Vice Chairs. One Vice Chair shall be a speech-language pathologist or speech-language scientist, and one shall be an audiologist or hearing scientist.

- Any Council member may serve as an officer, except ex officio members and the public member.

- Members may be nominated for multiple positions, but may hold only one position at a time. Elections will be staggered to accommodate any overlap in nominees as indicated below.

- As the Chair serves a one-year term, a Chair-Elect shall be identified annually and elected by majority vote of the Council members. The term of the Chair-Elect is one year. The Chair's term on the CAA may be extended, if necessary, to allow the Chair to complete the term. The individual elected as Chair-Elect will serve up to 3 years on the Executive Committee; one year as Chair-Elect, one as Chair, and one year as Immediate Past-Chair.

- Vice Chairs shall be elected by majority vote of the full Council for a 1-year term. Vice Chairs are eligible for re-election to the same position for one additional consecutive 1-year term.

- Officers may not serve more than two successive terms in the same position.

- The ONC will conduct an election by electronic ballot no later than the November meeting of the Council. The election for Chair-Elect may be conducted first, followed by the Vice Chair elections.

- The staff ex officio will distribute and receive the results of the electronic ballot and will ensure that all members have voted.

- Election is by majority vote of Council members cast in a secret ballot. In the case of a tie, the winner shall be determined by lot (e.g., coin toss).

- Terms of office begin on the first day of January following election.

- If the Chair is unable to complete the term of office, the Chair-Elect will become the Chair and assume all responsibilities related to that position.

- If one of the Vice Chairs is unable to complete the term of office, the Chair will appoint a replacement from among the remaining eligible Council members.

Duties of the Officers

The duties of officers are as follows.

- Chair
  - calls meetings of the CAA and the Executive Committee,
  - presides at meetings of the CAA and the Executive Committee,
  - prepares the agenda for meetings of the Executive Committee,
  - prepares the agenda for Council meetings,
  - serves as official spokesperson for the Council,
  - reviews and edits all site visit reports, consistent with conflict of interest policy,
  - submits the annual Officer-Committee-Board budget (OCB),
  - submits an annual report summarizing the CAA's activities for the year,
  - appoints members of committees and liaison representatives to ASHA committees and task forces, in consultation with the Executive Committee and with approval of the CAA as appropriate,
  - appoints the chair of the CAA Nominating Committee and participates in development of slate for CAA Nominating Committee members with the Officer Nominating Committee,
  - serves on the Committee of Chairs of Standards and Ethics,
  - serves as ex officio to ASHA's certification decision-making body.

- Chair-Elect
  - serves on the Council's Executive Committee,
  - presides at meetings in the absence of the Chair and represents the CAA when necessary,
  - serves as liaison to ASHA's certification decision-making body, at the request of the Chair,
  - assists in reviewing and editing site visit reports.

- Immediate Past-Chair

serves on the Council's Executive Committee,

- Vice Chairs
  - serve on the Council's Executive Committee.
  - serve as committee chairs, where appropriate.

K. Committees

Standing Committees

The CAA may establish standing committees as it deems necessary. Membership requirements and duties of standing committees include the following.

- Committees are ordinarily composed of CAA members appointed by the Chair in consultation with the Executive Committee, but they may include individuals other than CAA members.
- Committees conduct the CAA's ongoing business.
- Committee Chairs are assigned by the CAA Chair.
- Committees submit reports to the CAA at the request of the Chair.
- All recommendations from committees that result in a policy or procedural change or that may have a budget impact must come to the full CAA for consideration.

The Standing Committees and the charges of each are as follows:

CAA Executive Committee (EC)

Composition: Current Chair, Immediate Past-Chair, Chair-Elect, Vice Chair for Audiology, and Vice Chair for Speech-Language Pathology

Charge:

- Conduct the business of the CAA between meetings of the Council.
- Identify issues requiring the Council's deliberation.

- Make recommendations to the Council concerning actions on specific issues/items.
- Provide recommendations to the Chair regarding members and chairs of the Council's standing committees and liaison representatives to ASHA committees and task forces.
- Provide recommendations to the Chair in the preparation of the annual OCB budget.
- Review procedural issues, referring matters requiring accreditation decisions or policy action to the full CAA.
- Review complaints against an accredited program to determine whether jurisdictional criteria have been satisfied for the Council to initiate an investigation.
- Conduct comprehensive review of the CAA's fee structure every 3 years.
- Plan implementation and budgeting for CAA initiatives.
- Review the appropriateness of credentials of faculty who serve as instructional staff of accredited programs, as requested by programs or the CAA.
- Consider requests for observers at CAA meetings.
- Select replacement members of the CAA consistent with those procedures

Candidacy

Composition: three or four members of the Council who are experienced in completing accreditation reviews, including at least one academic member representing audiology and one academic member representing speech-language pathology

Charge:

- Assess program readiness for submission of an official candidacy application and determine readiness for a site visit.
- Serve as lead reviewers for all candidacy reports.
- Review and implement policies and procedures related to candidacy reviews and processes, including candidacy site visitor education as appropriate.
- Conduct comprehensive review of application and progress reports and provide feedback to programs.
- Liaise with other committees as appropriate.

Officer Nominating Committee (ONC)

Composition: three members of the Council who should be in their last year of service on the Council, at least one of whom must be a current member of the Executive Committee—the Chair-Elect may serve on the ONC as the EC representative as that individual would not be seeking a new office

Charge:

- Prepare a slate of officers for the Council election.
- Prepares a slate, with CAA chair or designate, for the CAA Nominating Committee

Site Visit Education and Training

Composition: members of the Council, including members representing audiology, members representing speech-language pathology, and at least one practitioner member

Charge:

- Train new and continuing site visitors and site visit chairs.
- Oversee candidacy site visitor training.
- Provide education and resources for programs.
- Evaluate and modify site visit resources as needed.
- Communicate the site visit process to stakeholders.
- Liaise with other committees, as appropriate.

Site Visitor Recruitment, Selection, and Evaluation

Composition: members of the Council, including members representing audiology, members representing speech-language pathology, and at least one practitioner member

Charge:

- Recruit qualified candidates for the site visitor pool.
- Select a viable pool of site visitors for ratification by the CAA.
- Identify eligible individuals from pool to serve as site visit chairs and candidacy site visitors.
- Evaluate the performance of site visitors and the site visit process.
- Select and mentor new and continuing site visit chairs; mentor new and continuing site visitors as appropriate.
- Liaise with other committees, as appropriate.

Standards

Composition: members of the Council, including two members representing audiology, two members representing speech-language pathology, one practitioner, and one public member

Charge:

- Conduct reviews and consider proposals for changes in standards for accreditation, including issues or changes for a single professional area (audiology or speech-language pathology).
- Propose revisions to the standards for consideration by the full CAA.
- Implement a peer review process for draft standards.
- Develop a plan to implement new accreditation standards.
- Liaise with other committees as appropriate.

Special Committees or Working Groups

Special committees or working groups are established on an ad hoc basis to study a specific issue and are dissolved by the CAA Chair on completion of their charge. Membership on any special committees or working groups may include nonmembers of the Council. The committee or working group is expected to submit reports at the completion of their assigned tasks or at the request of the CAA Chair. (See also Liaison With Other Boards and Committees about CAA members serving on ASHA committees.)

L. Meetings

Frequency

Meetings are called by the CAA Chair for the purpose of conducting the business of the Council or of the Executive Committee. A request for a meeting/telephone conference submitted by six or more members of the Council is to be honored by the Chair. The CAA meets at least three times yearly – winter, summer, and fall.

Closed and Executive Sessions

The CAA may deem to conduct any portion of its meetings in closed session or executive session. The CAA will employ the following definitions for those sessions.

- *Closed Session* – A meeting or a portion of a meeting in which the proceedings are confidential (e.g., during discussions regarding the accreditation status of education programs). Only CAA members and Accreditation Staff may attend closed sessions, consistent with the CAA's conflict of interest policy. Sessions are closed to observers including other ASHA staff, liaisons (ASHA BOD, CAPCSD), and non-staff ex officios (CFCC Chair), unless invited to participate by the CAA Chair.

- *Executive Session* – A meeting or a portion of a meeting in which the proceedings are confidential (e.g., for evaluation of staff or other personnel issues). Only voting members of the CAA may participate in this type of session unless invited to participate by the CAA Chair.

Meeting Observers

CAA meetings, except for closed or executive sessions as designated by the Council, are open to individuals as observers; requests to observe are submitted to the Council Chair prior to one of its regularly scheduled meetings. Council meetings are not open to observers during discussions regarding the accreditation status of education programs or other closed sessions of the Council.

An observer may address the CAA or obtain the privilege of participation without vote at one of its regularly scheduled meetings. An observer may be asked to participate by the CAA Chair or may request to attend. To request an invitation, the following procedures shall apply.

a. The request must be made in writing to the Chair of the CAA no later than 30 days before the scheduled meeting and must indicate the specific issue to be discussed with the CAA. The Chair will forward the request to the CAA Executive Committee for consideration.
b. If the Executive Committee determines that the issue requested falls within the purview and authority of the CAA, the request will be approved. The CAA Chair will so notify the individual at least 15 days before the scheduled meeting and will indicate the length of time that he/she will be permitted to address the Council.
c. If the issue is not within the purview of the CAA, the individual will be so notified within 15 days and referred to the appropriate ASHA committee or other entity for consideration.

Because CAA discussions regarding the accreditation status of any education program are conducted in closed session, participation in those sessions by a representative from any program under consideration will be allowed only at the request of the CAA. Regardless of whether a program representative is present for any discussions with the CAA, the Council will follow all published policies and procedures for notifying programs of accreditation decisions.

Any costs associated with attending the CAA meeting will be borne by the requesting individual.

Meeting Evaluation

As part of the AQMS, at the conclusion of each face-to-face CAA meeting, council members conduct a verbal debriefing in closed session to evaluate the effectiveness of the meeting, including the agenda, materials, resources, staff involvement, and appropriate use of Council member time in meeting the mission and goals of the CAA. In addition, each CAA member completes a written evaluation, which is submitted anonymously. Results are analyzed in the aggregate in order to improve CAA meeting effectiveness.

Further, Accreditation staff conduct a verbal debriefing after each CAA meeting and complete written meeting evaluations to assist in finding ways to improve services to the CAA and accredited programs.

All evaluation results are compiled and shared with the CAA's Executive Committee and ex officio; adjustments to the CAA face-to-face meetings are made, if needed, to ensure quality service to accredited programs and efficiency and effectiveness of CAA operations.

M. Conduct of Business

Robert's Rules of Order

Meetings of the Council are conducted in accordance with the latest edition of *Robert's Rules of Order Newly Revised*. These Rules may be modified by the consent of the Council to accommodate the informalities that may improve the effectiveness of small deliberative bodies.

Quorum

Robert's Rules of Order defines a quorum as "such a number as must be present in order that business can be legally transacted." The CAA has determined that a quorum consists of two thirds of the voting members of the Council.

Voting Protocols

All business is conducted by motion. The Chair is a voting member of the Council. A simple majority vote of members present is required for action on all issues except when the Council votes on accreditation standards. The Chair may not use absentee ballots or permit proxy votes. Council members will deliberate and make accreditation decisions about programs during at least two of the three face-to-face meetings each year.

Standards

An affirmative vote by two thirds of the voting members of the Council is required to adopt, modify, or abandon a **standard**.

Further, for standards specific to one of the two professions, the prevailing action (approval or disapproval) must be supported by at least two thirds of the eligible Council members; eligibility is defined as those representing that professional area and the public member.

Program Accreditation Decisions

Accreditation decisions will be made by all eligible CAA members, consistent with the conflict of interest policy, regardless of professional area.

An affirmative vote by a simple majority is required to award/continue, place on probation, withdraw/deny, or defer a program seeking an accreditation status.

As outlined in the Conflict of Interest and Confidentiality section for CAA members, there are specific circumstances when CAA members must refrain from participating in the discussion and/or vote of a program's accreditation status -- CAA members must:

- ***recuse*** from the discussion and abstain from voting on programs that are within the state in which they are employed, programs in which they have been employed within the previous 5 years, programs that they attended as graduate students, or other professional and/or personal considerations; individuals should not be present in the meeting room;
- ***abstain*** from voting on final accreditation decisions involving programs in which they have served as a regular site visitor during the last accreditation cycle or in which they have served as an observer on a site visit.

Minutes

Minutes of the CAA meetings will be shared by the Accreditation staff with all Council members. Copies of these minutes, with confidential material deleted, also are available to the chair of ASHA's certification decision-making body and to the ASHA board liaison Vice Presidents for Academic Affairs.

Communications

In exercising its authority and fulfilling its responsibilities, the CAA necessarily interacts with many groups and individuals within ASHA, including the Board of Directors, Advisory Councils, and National Office staff. Communications between the CAA and these ASHA entities occur as follows. The CAA Chair communicates with the

- Chief Executive Officer's designee, who is an ex officio member of the CAA regarding matters involving the ASHA National Office,

- Vice Presidents for Academic Affairs regarding matters relating to the ASHA Board of Directors,
- ASHA President regarding matters relating to the Advisory Councils.

When it is necessary to communicate directly with the Advisory Councils through the President of ASHA, the Vice Presidents for Academic Affairs and CAA members receive informational copies of the correspondence.

Liaison With Other Boards and Committees

In addition to interacting with the ASHA National Office, Board of Directors, and Advisory Councils, CAA members may, on occasion, become formal liaison representatives to various boards and committees of ASHA at the request of the board or committee chair and upon the approval of the ASHA Board of Directors. Such liaisons are appointed by the CAA Chair in consultation with the CAA Executive Committee and regularly provide information about their activities to the full CAA.

The CAA also maintains ongoing communications and interactions with the academic programs through the Council of Academic Programs in Communication Sciences and Disorders (CAPCSD), through a CAPCSD liaison to the CAA who is invited to participate in non-confidential portions of the CAA meetings and with other identified allied and related professional organizations, as appropriate.

N. Amending the *Accreditation Handbook*

The CAA will maintain an *Accreditation Handbook* that will reflect the policies and procedures of the Council. The *Handbook* will be reviewed on a periodic basis and changes, additions, or deletions will be approved by the Council consistent with the voting protocols in this *Handbook*.

Staff will make appropriate revisions to the *Accreditation Handbook* based on the CAA's approval of any changes to policies and procedures. Modifications to the *Accreditation Handbook* may be reviewed first by the Executive Committee as necessary.

O. Records Maintenance

Accreditation staff will maintain paper and/or electronic files in the Accreditation Office, including, but not limited to, the following.

Program Files

Staff will maintain a complete and accurate record for each program applying for accreditation or candidacy status. Materials to be kept in the program file should include the program's most recent application for accreditation or candidacy, including substantive change plans and materials from the last full accreditation review (as required by the U.S. Department of Education). The program file should include, but not be limited to, compilation of initial observations by CAA reviewers, site visit reports, response by the program to the site visit report, all official correspondence with the program, candidacy progress reports or accreditation annual reports, substantive change plans, written reports of any special reviews conducted by the CAA, records of appeal activities, and any accreditation decision letters by the CAA.

The CAA will not retain files for programs that do not achieve accreditation or candidacy status. Files for programs for which accreditation status is terminated, either as a result of voluntary withdrawal or by final action of the CAA, will be retained for 5 years. The CAA will maintain all decision letters that are issued indefinitely.

Complaints received regarding a program are maintained in a file separate from the program's accreditation file, in accordance with the procedures specified in the Complaints section of this *Handbook*.

CAA Meetings

Accreditation staff will maintain files related to CAA meetings, including agenda materials, minutes of CAA meetings and conference calls, and specific correspondence with CAA members related to agenda topics.

Site Visitor Files

An individual file will be maintained by Accreditation staff on each site visitor and will include, but not be limited to, the most recent site visitor application and resume, evaluations that assess the site visitor's performance, and any subsequent correspondence related to the visitor's evaluation. Site visitor availability for conducting visits each semester is maintained electronically.

Recognition Agencies

Files related to agencies recognizing the CAA as an accrediting body (i.e., ED, CHEA) will be maintained by staff in the Accreditation Office. These files will contain correspondence, publications, all information related to the procedures for recognition, most recent petitions for recognition, and any interim reports.

Council Member and Accreditation Staff

Files related to the qualifications of CAA members and staff will be maintained in the Accreditation Office for individuals currently serving on the CAA and for staff currently employed.

P. Evaluation of the CAA

As part of the AQMS, the performance of CAA members is regularly reviewed to assess effectiveness at meeting both the individual responsibilities of CAA members and the Council's annual goals and objectives as a whole. CAA members complete an individual self-assessment form, rating their performance annually on those areas for which they are responsible. All members rate their own performance in several areas, consistent with the roles and responsibilities identified in the *Handbook*. CAA members also have the opportunity to provide feedback on the performance of the CAA Chair, as well as the Council operations, collected at the same time.

The self-assessment activities are anonymous in order to receive candid feedback and ratings and give a more accurate picture of CAA member responsibilities that are not being met or require further training or clarification. The formal evaluation is typically conducted after the CAA's summer meeting.

All assessment results are compiled, aggregated, and shared with the CAA's Executive Committee and ex officio for their review. Adjustments may be made to the CAA member orientation process, or targeted calibration may be developed based on the assessment results, if needed, to ensure quality service to accredited programs and the accreditation program.

While this formal evaluation process occurs annually, feedback on CAA member performance can be received at any time throughout the year and is typically handled by the CAA Chair in consultation with the CAA ex officio.

VI. NOMINATING COMMITTEE

A. Composition

A five (5)-person nominating committee, appointed annually in accordance with LC 26-94 [PDF], shall have responsibility for preparing the slates for members of the Council on Academic Accreditation.

- Two (2) members shall represent practitioners. One (1) shall be an audiologist; one (1), a speech-language pathologist.
- Two (2) members shall represent accredited academic programs. One (1) shall be an audiologist; one (1), a speech-language pathologist.
- One (1) member, who will serve as Chair, shall be an outgoing or former member of the Council on Academic Accreditation.
- The Director of Accreditation's staff designee shall be a nonvoting, ex officio member.

B. Terms of Office

All committee members shall serve a 1-year term, beginning on the first day of January following appointment.

C. Selection of the Nominating Committee

Applications for the 4 academic and practitioner members of the CAA Nominating Committee will be solicited through a national call for applications, the ASHA Committee Pool, as well as recommendations from individuals. From the applications received, the internal CAA Officers Nominating Committee and the CAA Chair or designee, will prepare a slate of at least two individuals for each position for the CAA's selection of the external CAA Nominating Committee. The CAA Officers Nominating Committee reserves the right to allow a vetted applicant to be placed on the slate and run unopposed if there are an insufficient number of qualified applicants for one or more positions. If no applications are received for a position on the CAA Nominating Committee, the CAA will identify individuals who meet the requirements to serve on the CAA Nominating Committee and appoint them for the stated term of service.

CAA selection of the Nominating Committee members will be by simple majority vote of the full council. Those not selected will be considered alternates. The CAA's ex officio will notify all selected individuals, as well as those not selected. Appointments should be made no later than August 1 of each year.

The chair of the committee will be appointed by the current CAA Chair.

If an identified member of the CAA Nominating Committee is unable to accept the position or must resign, the ex officio will contact the alternate for that position to ascertain his or her willingness to serve. The CAA will approve the selection of the replacement member by a simple majority vote of the full council. If the appointed chair is unable to accept the position or must resign, the CAA Chair will appoint a new chair.

D. Role of the Nominating Committee

The Nominating Committee shall perform the following tasks:

- Identify vacancies on the Council on Academic Accreditation to be filled in a given year.
- Solicit applicants for such vacancies from accredited academic programs, appropriate ASHA committees and boards, ASHA membership, and other related groups.

- Select two persons as nominees for each position.
- Submit the slates of nominees for academic and practitioner member vacancies to accredited academic programs for vote and determine voting results.
- Select a person to fill a public member vacancy, if any.

E. Nominating Committee Procedures

The following procedures will be included in the materials provided to the CAA Nominating Committee.

- The CAA Nominating Committee shall identify vacancies by **February 1.** Application forms and information will be available in the accreditation section of the CAA website. Announcements for a call for applications will be sent to academic programs and faculty; ASHA certificate holders and members; ASHA committees, boards, and councils; and other agencies consistent with the vacancies' qualifications. Announcements also should be posted in relevant print and electronic ASHA publications (e.g., *The ASHA Leader,* e-zines). The deadline for receiving applications shall be **May 1**.

- Accreditation Office staff shall acknowledge receipt of all applications and conduct a preliminary review of all applicants' qualifications to ensure that, with the appointment of any of the applicants, the required composition of the CAA will be maintained, as specified in the **CAA Composition** section of this *Handbook*. Any individuals who do not meet the required qualifications, including potential public member applicants, will be so notified by staff. Staff will then forward the eligible applications received to the CAA Nominating Committee for review. Staff will advise the CAA Nominating Committee if the composition may not be maintained with the existing applicant pool.

- Each member of the CAA Nominating Committee shall independently rank applicants for positions based on a review of all application materials. Applicants for audiology will be ranked separately from applicants for speech-language pathology; applicants for academic positions will be ranked separately from practitioner positions. The entire Committee will then teleconference to discuss rankings and applicants and to prepare the final slate(s) of candidates. At least two (2) candidates should be identified for each vacant position. If there are an insufficient number of qualified applicants, the CAA Nominating Committee reserves the right to allow a vetted applicant to be placed on the slate and run unopposed. The Chair of the CAA Nominating Committee shall contact those individuals selected for the final slate, within 1 week of the Committee's decision, to confirm willingness to be placed on the slate and to serve if selected. The staff ex officio will contact all individuals not selected after the slates have been confirmed by the Committee Chair.

- The slate(s) for academic and practitioner members, including a brief statement by each individual on each slate, will be sent to program directors of eligible CAA-accredited programs by **September 1** to open the election. All voting must be completed no later than **September 15**. Programs that have not paid their annual fees by the final due date will not be eligible to vote for any vacancies on the CAA during that year. Each program, whether accredited in audiology or in speech-language pathology, may cast one vote for each vacancy on the CAA, regardless of whether the position is in audiology or speech-language pathology. Program directors are encouraged to include all faculty in the relevant profession in the discussion regarding the vote to be cast by the program.

- Election results will be confirmed by Accreditation Office staff by September 22, and results will be transmitted to the Chair of the CAA Nominating Committee. The candidates receiving the highest number of votes and who also maintain the CAA's required composition will be elected. The other candidates will be considered alternates. In the case of a tie, the winner shall be determined by lot (e.g., coin toss).

- The Chair of the Nominating Committee will contact all candidates for positions within 1 week of receipt of the election results and the final outcome of the selection process. Formal letters

of appointment will be mailed from the Accreditation Office. After the candidates have received notification, the election results will be announced via appropriate publication vehicles.

- The CAA Nominating Committee shall solicit applications for public members of the CAA through the same means as for other vacant positions on the Council. Solicitation may include the U.S. Department of Education and the Council for Higher Education Accreditation and their respective recognized accrediting agencies and members of the Association of Specialized and Professional Accreditors (ASPA). Applicants for the public member position will be required to submit current curriculum vitae along with a statement verifying that they meet the CAA's full definition of a public member, including the identification of any known conflicts of interest as outlined in the definition. The CAA Nominating Committee will select a public member by **July 1**, and all candidates will be advised of the outcome within 1 week of the decision. A formal letter of appointment will be mailed from the ASHA National Office. After the candidates have received notification, the appointment results will be announced via appropriate publication vehicles.

- In the event that an unscheduled vacancy on the CAA occurs that requires immediate replacement outside of the regular recruitment cycle, the process described below will be used to replace the CAA member.

- The CAA Nominating Committee shall adapt its recruitment, application, and election procedures in years when new CAA members may be placed on pre-approved staggered terms as identified in the CAA's rotation schedule [PDF]. All normal protocols, as outlined above, are to be observed and conditions should be adapted as follows:

    - Recruitment and promotional materials must clearly indicate availability of both 3-year and 4-year terms.
    - Applicants must select the term length for which they are applying and may select both term lengths.
    - Applicants for 3-year terms may be limited to those with CAA site visitor experience.
    - The slates for voting will differentiate between professional areas and term lengths.

F. Replacement Procedures When Unanticipated CAA Vacancies Occur Outside of the Regular Recruitment Cycle

The CAA Nominating Committee ex officio will notify the committee of any unanticipated vacancies that occur outside of the regular recruitment cycle. The following process will be followed in to identify, vet, and select appropriate replacement CAA members.

- The CAA Nominating Committee ex officio will contact individuals identified to ascertain their willingness to serve and have their names forwarded for consideration and selection by the CAA Executive Committee for academic and practitioner members or the CAA Nominating Committee for public members. Individuals may include past qualified candidates who applied for the same position in a recent recruitment, past CAA members, site visitors, and other individuals who may be deemed qualified for service. The ex officio may request assistance from the CAA Nominating Committee, CAA members, ASHA Board of Directors and the Accreditation staff in identifying potential candidates.

- Those individuals interested in serving will submit current curriculum vitae and complete an application, including a personal statement within 15 days or other time frame established.

- Once the application materials of those individuals interested in being considered for appointment have been provided, the ex officio for the CAA Nominating Committee will forward information to the CAA Nominating Committee. The Nominating Committee will review the qualifications of those individuals to confirm that all applicants meet the appointment criteria and that those recommended for appointment will satisfy the composition requirements as specified in this *Handbook*. The CAA Nominating Committee will prepare the final list of

name(s) it wishes to recommend for consideration; only one qualified person's name need be identified for the replacement slate.

- The Chair of the CAA Nominating Committee shall contact the recommended individuals within 1 week of the Committee's decision, to confirm willingness to serve if selected. The staff ex officio for the CAA Nominating Committee will contact all individuals not recommended to advise them of the results after the final names have been confirmed by the Committee Chair.

- The recommendations for academic and practitioner members, including a brief statement by each candidate, will be sent to the CAA Executive Committee for selection within 30 days of receipt. The CAA will forward the results to the Chair of the CAA Nominating Committee within 30 days.

- The candidates for public members, including a brief statement by the candidate, will be sent to the CAA Nominating Committee for selection within 30 days of receipt; the CAA Nominating Committee will complete its selection within 30 days. The CAA also will be informed of the selection for its information.

- The Chair of the CAA Nominating Committee will contact all candidates within 1 week of receipt of the decision(s) regarding the final outcome of the selection process by the CAA Executive Committee or the CAA Nominating Committee, as appropriate. Formal letters of appointment will be mailed from the Accreditation Office. Terms for selected individuals will begin in January of the following year, or earlier as warranted as a replacement appointment. After the candidates have received notification, the appointment results will be announced via appropriate publication vehicles.

G. Additional Responsibilities

The annual budget to support the CAA Nominating Committee's activities, including meeting expenses, application platform, and election services, is developed as a separate budget and submitted by the Chair in accordance with budget procedures and time lines identified by the ASHA Finance Unit.

The Chair of the CAA Nominating Committee also will furnish a report annually to the CAA related to the Committee's activities during the year.

VII. SITE VISITORS AND COMPLIANCE REVIEW COMMITTEE (ARRC)

Site Visitors

The site visit is an essential and unique step in the accreditation process. The site visit report supplies critical information about a program, verifying and supplementing information contained in the application materials and updating any information about the program since the program submitted its application to the CAA. The site visit enables members of the team to gain insight into relevant data within the context of the program that is often not conducive to a written description and that can be obtained only by direct observation. Because the site visit and report are very important and valued elements of the program evaluation process by the CAA, the Council has developed a plan for the selection, training, and evaluation of site visitors for the accreditation process, which elements are reflected in this *Handbook*.

A. General Principles

The CAA has identified the following underlying principles regarding the site visit process.

1. A small group of well-trained site visitors will serve as the pool from which site visit team members will be selected for individual visits.
2. Site visitors will serve a specified term (4 years) to provide a mechanism for new site visitors to rotate into the pool on a systematic basis.
3. Academics and practitioners will serve on each site visit team and share all responsibilities in the conduct of the site visit.
4. An effective site visitor evaluation process will be administered in order to provide useful and ongoing feedback to the site visitors and to the CAA.

B. Selection

Qualifications

The CAA has identified the following qualifications for **academic faculty** site visitors:

- earned doctoral degree in audiology, speech-language pathology, or a related discipline from an accredited institution;
- rank of associate professor or above or comparably experienced educator;
- faculty appointment in a CAA-accredited program (does not include programs holding candidacy status unless individual has held a previous faculty appointment at a CAA-accredited program);
- employed by a CAA-accredited program in the same professional area as the individual;
- demonstrated active involvement in the profession of audiology and/or speech-language pathology (e.g., membership in professional organizations, credentials, research record).

The CAA has identified the following qualifications for **clinical faculty** site visitors:

- earned graduate degree in audiology, speech-language pathology, or a related discipline from an accredited institution;
- clinical appointment in a CAA-accredited program (does not include programs holding candidacy status unless individual has held a previous faculty appointment at a CAA-accredited program);
- employed by a CAA-accredited program in the same professional area as the individual.
- valid licensure, if available, and nationally recognized credentials in audiology and/or speech-language pathology, as appropriate;
- principle responsibilities that include clinical education, such as student supervision or client services, teaching, administration (Note: Applicants whose primary employment function is as an on-campus clinical director or supervisor/preceptor for the purposes of student training meet this criterion).

The CAA has identified the following qualifications for **practitioner** site visitors:

- earned graduate degree in audiology, speech-language pathology, or a related discipline from an accredited institution;
- valid licensure, if available, and nationally recognized credentials in audiology and/or speech-language pathology, as appropriate;

- experience as a practitioner in the area that credentials are held for at least five (5) years;
- directly engaged in a significant manner in the practice of speech-language-hearing services (Note: Applicants whose primary employment function is as an on-campus clinical director or supervisor/preceptor for the purposes of student training do not meet this criterion).

Site Visitor Application Process

Individuals who meet qualifications and are interested in serving as site visitors must complete and submit an application to the Accreditation Office. All applicants will be required to furnish the following information:

- curriculum vitae for past 5 years;
- names of two (2) personal references who can attest to the applicant's qualifications to be a site visitor, including professional competency, interpersonal skills, and ability to critically analyze, verbalize, and record pertinent objective data;
- personal statement of the qualifications regarding experience in accreditation, clinical education, standards development, site visits, professional competence, university governance, etc.;
- statement of availability to conduct site visits;
- signature of applicant that signifies knowledge of and adherence to the conflict of interest statements as well as the Site Visitor Terms of Agreement, as described in this *Handbook*.

Criteria for Selection

The CAA maintains a trained pool of site visitors at all times from accredited programs (academic faculty and clinical faculty) and practice settings (practitioners) sufficient to support the accreditation review process and the number of programs. The criteria for selection of site visitors include, but are not limited to,

- published qualifications for service;
- professional experience;
- geographic location;
- gender, cultural, and ethnic background;
- work environment (i.e., type of facility).

When reviewing applications, the CAA considers these areas in its selection process in order to maintain balance in the site visitor pool.

Individuals are expected to be employed full-time at the time of the appointment. However, the CAA may make exceptions for applicants for the academic and clinical faculty positions, who may apply if they have retired within 3 years of the prospective appointment date for site visitor service. Current members of the CAA, the ASHA Board of Directors, the Council for Clinical Certification in Audiology and Speech-Language Pathology (CFCC), and Accreditation or ASHA National Office staff may not serve as site visitors. The CAA recognizes that, as new processes are developed, there may be need for certain waivers or exceptions to the above qualifications and criteria on an occasional and case-by-case basis in the best interests of the accreditation process.

CAA members who have completed their term on the Council may apply to serve as site visitors, provided they meet all qualifications for service. Site visitor training may be waived on a case-by-case basis for past CAA members.

Criteria for Reappointment

Continuation in the site visitor pool for the duration of the 4-year term and reappointment to a new term are contingent upon ongoing satisfactory performance of site visitor responsibilities, as outlined below. All active site visitors are eligible to be considered for reappointment at the end of each 4-year term. Those interested in continuing service for another term must submit an application at the time of the annual Call for Applications. The CAA will consider the following elements when reviewing an application from a current visitor, in addition to the above selection criteria:

- reasonable availability for conduct of visits,
- consistent good performance and evaluations,
- maintenance of qualifications (employment, rank, etc.),
- knowledge of the accreditation process and accreditation standards,
- sensitivity to issues regarding conflict of interest and the importance of impartial and objective judgment.

Individuals who retire from their professional positions while serving as CAA site visitors are eligible for reappointment for one additional term. The CAA recognizes that there may be need to consider exceptions to the above qualifications and criteria to support the integrity of the accreditation program and its processes.

The CAA evaluates the site visitor selection criteria and processes on an ongoing basis, making modifications as appropriate.

Notification of Decision

The CAA finalizes site visitor selection at its winter meeting for all site visitor applications for that coming year's training class; all applicants are notified of the selection results following the CAA meeting. Training workshop dates are indicated in the decision letters of those invited to the training workshop. Individuals who are unable to attend on the designated training dates will be required to re-apply to participate in a future training workshop. Individuals are not considered CAA site visitors until successful completion of all training activities (i.e., initial workshop and trainee site visit).

Maintaining Qualifications

To fulfill its obligations to ensure qualified members serve on site visit teams, the CAA must confirm that each site visitor continues to meet the qualifications for the site visitor category for which he/she was originally selected. As part of the Responsibilities of a Site Visitor, individuals who have been selected to be trained or are currently serving as site visitors must inform Accreditation staff of any changes in employment setting that may affect their ability to meet qualifications for service (i.e., move from a university academic position to a practice setting and vice versa). If a change in service qualifications, such as described above, occurs, the CAA will employ the following procedures.

- Individuals selected to serve as site visitors, but who have not yet been trained, will be asked to re-apply based on the new role in the next recruitment. The new application will be considered with the next cohort of applicants for available vacancies in that category.
- Individuals currently serving as site visitors will be required to submit a revised Site Visitor Application to assess whether those individuals meet the service category requirements and needs of the site visitor pool.
- Current site visitors who take a position in a non-accredited program would not meet qualifications for service as an academic or clinical faculty site visitor and would be removed from the site visitor pool and the term ended.

Individuals currently serving as site visitors who are assigned to an upcoming site visit at the time of their status/role change may be removed from that team if needed to ensure that the site visit team composition is not compromised and will be required to submit a revised application, if appropriate, as indicated above.

Members of the site visitor pool who retire from their professional positions during their term may continue active service as site visitors for that term and may be eligible for reappointment as noted in the Criteria for Reappointment section above.

Identification of Site Visit Chairs

The CAA will use the following criteria to identify individuals from the current site visit pool to serve as site visit chairs:

- is an academic faculty member of the site visitor pool,
- has completed a minimum of two site visits within a four-semester period as a full team member (i.e., trainee visits would not count toward the two-visit minimum),
- has received consistent, positive performance feedback and has received unreserved recommendations to serve as chair from members of the site visitor pool, as documented on performance assessments reviewed by the CAA,
- has demonstrated skills and functions as identified in the Responsibilities of the Site Visit Team section in this *Handbook*, including the Terms of Agreement.

The CAA recognizes that there may be a need to consider exceptions to the above qualifications and criteria, on a case-by-case basis, to support the integrity of the accreditation program and its processes.

C. Responsibilities of the Site Visit Team

Terms of Agreement

All site visitors, once selected, will:

- commit to a 4-year academic year term, beginning July 1;
- attend an initial 2-day training workshop, funded by and held at ASHA's National Office (Note: Individuals who do not attend an initial training workshop in the year of selection to the site visitor pool will be required to submit a new application for consideration for service);
- complete a trainee site visit within the first two semesters after receiving initial training;
- participate in annual site visitor training updates/professional development activities in a format to be determined by the CAA (e.g., at ASHA's Convention, through a webinar);
- demonstrate active involvement in the profession of audiology and/or speech-language pathology while continuing in the role of a site visitor;
- uphold fiduciary responsibilities to work toward the fulfillment of the CAA's mission and objectives
- be willing and prepared to serve as a representative of the CAA and uphold the highest ideals of accreditation, which include
    - thorough review of all accreditation application materials prior to the visit;
    - commitment to absolute confidentiality;
    - commitment to be present for the duration of the site visit, which requires approximately 3 days away from home and/or work to complete the site visit and related travel;
    - active participation as a team member in all related activities before, during, and after the visit;
    - ability to objectively collect, analyze, and communicate all data pertinent to the site visit process;
    - acceptance of responsibility for one's own behavior and actions;
    - conducting oneself in an ethical and professional manner at all times;
    - adherence to the CAA's confidentiality and conflict of interest policies;
    - maintenance of technical skills to effectively use a shared web portal to complete site visitor activities;
- be willing to accept assignments and travel to programs as scheduled, consistent with the conflict of interest policy;
- be available for two site visits per year;
- notify Accreditation staff of changes to professional position, including retirement, as this may affect qualifications for service;
- review and understand the roles and responsibilities of all site visitors and uphold these responsibilities to the best of their ability throughout the course of service as site visitors.

In addition, **academic faculty** site visitors will

- maintain a faculty appointment in a CAA accredited program,
- serve as a site visit chair, if requested.

In addition, **clinical faculty** site visitors will

- maintain a faculty appointment in a CAA accredited program.

In addition, **practitioner** site visitors will

- maintain direct engagement in a significant manner in the provision of speech-language-hearing services.

Responsibilities of All Site Visitors

Site visitors serve as representatives of the CAA and are expected to perform all responsibilities in an ethical, moral, timely, and professional manner. Site visitors are to uphold the following expectations:

- Uphold fiduciary responsibilities [PDF] to work toward the fulfillment of the group's mission and objectives:
  - Duty of care—diligence in carrying out duties
  - Duty of loyalty—obligated to act in the association's best interests and not use their authority to advance personal interests
  - Duty of fidelity to purpose—ensuring actions and decisions are consistent with stated mission and purpose of the association

- Respond to all CAA requests for information and dates of availability and make every effort to participate actively as a site visitor on a regular basis. Notify Accreditation staff of any contact information changes or changes affecting site visitor qualifications.

- Review thoroughly the current *CAA Accreditation Handbook* before the visit. The *Handbook* specifies the CAA standards, procedures, and policies against which the program is to be evaluated. Complete understanding of the standards is essential to the CAA evaluation process.

- Review thoroughly the program's application, the CAA's initial observations, the program's response to the initial observations, the program's and university's website(s), and all correspondence and other relevant documentation associated with the program review. The primary purpose of the site visit is to verify evidence of compliance with the standards. Therefore, information received should be checked for completeness. The director of the program will expect all site visitors to understand the major aspects of the program.

- Review the site visit agenda critically. The site visitors should discuss preliminary areas of concern so that the chair of the site visit team may request modifications to the agenda in advance of the site visit, if needed. The agenda should permit the site visitors to conduct a comprehensive evaluation of the program.

- Identify items in the application and supporting documentation that require clarification. Such items should be explored during the initial contact with the program director so that they can be verified during the visit.

- Be familiar with certification and licensure issues, as they apply to accreditation. Portions of the CAA accreditation standards relate to an evaluation of the adequacy of a program's preparation of graduate students to meet professional credentialing requirements, including nationally recognized certification(s), state licensure, and teacher certification. Tracking systems used by programs to monitor student progress typically incorporate these credentialing requirements.

- Be prompt and allow sufficient time to satisfy comfortably all commitments of the visit; avoid late arrivals and early departures. Arrange travel plans to
  - allow for a preliminary meeting with all members of the site visit team, preferably in the evening before the start of site visit. The team chair should allow sufficient time to define the roles of individual team members in terms of available time and tasks to be performed, areas of concern and strategies to investigate them, the agenda, and the writing of the final report.

- ensure that the program receives its full measure of time. All site visitors are expected to be present for the duration of the site visit, which usually requires 3 days away from home and/or work. A minimum of 2 full days is required to review the program. In some instances, more than 2 days may be necessary to accommodate the program's needs. Site visitors are encouraged to be flexible and creative in how they use their time onsite to avoid unnecessary extensions of the site visit beyond the usual 2 days. Teams may consider adjusting the start and end times of the visit to accommodate all team members' travel options (e.g., beginning the agenda on the day of arrival). If the only return flight on a given day would shorten the site visit, contact the Accreditation Office to request approval to remain an extra night.
- allow adequate time to prepare and deliver the site visitors' exit report and for any other report development tasks currently required by the CAA. Sufficient time should be allowed at the end of the site visit and prior to the exit report to confer with the program director to obtain clarification and additional information, as necessary.

- Prepare the site visit report using the CAA's current report template and in accordance with current CAA guidelines and time lines.
- Dress professionally while conducting the site visit.
- Exercise tact and care in everything said and done, both when soliciting information and when answering questions. Site visitors are invited guests of the institution and are expected to provide a professional service for which the facility has paid.
- Exhibit an attitude of encouragement. Words with negative connotations should be avoided, as should reprimands, lectures, and comparisons to one's own or other programs.
- Maintain confidentiality. All information gathered by the site visitors is confidential. Concerns related to the specific program must never be discussed with anyone except the CAA and Accreditation staff.
- Maintain a calm and confident demeanor while on-site.
- Be sensitive to feelings of anxiety or apprehension evidenced by others during the site visit review. Program directors will have arranged interviews with presidents, deans, academic and clinical faculty, staff, students, alumni, employers, clinical supervisors, and the public.
- Use extreme caution to avoid any situation that might be construed as affecting team integrity or objectivity in the site visit process.
- Do not suggest yourself as a consultant to or as temporary or permanent employee of the institution.
- Conduct the review in the context of the program's and institution's stated mission and goals; avoid biased comments or suggestions. The site visitor's role is to verify information in the application and documentation on site, not to serve as an advisor.
- Do not indicate whether or not the program being visited will be awarded any type of accreditation status. It is the responsibility of the CAA to make accreditation decisions.
- Complete and return to the CAA all required performance feedback information.
- Promptly purge all program review materials once notified that the CAA has made a final decision.

Responsibilities of the Site Visit Chair

In addition to the responsibilities listed for all members of the team, the site visit chair has unique responsibilities in facilitating the visit to the program, which include:

- communicating with the other team members regarding the:
  - agenda,
  - assignments,
  - establishment of a time for a preliminary meeting,
  - observations/concerns about the program.
- communicating with the program director regarding necessary changes in the agenda, access to program materials, and logistical considerations, including local hotel accommodations and ground transportation as appropriate.
- assuming a leadership role regarding
  - observation and reporting procedures,
  - roles and responsibilities,
  - general format of the visit,
  - explanation of the process for other team members and observers.
- submitting a completed site visit report developed in cooperation with the team members using the current template and within the allocated timeline. Current CAA procedures, format, and time lines for preparation of this report should be adhered to closely. The site visit report template is available electronically on the Accreditation Collaborate site for use by members of the site visit team in advance of the visit. Timely completion of the site visit report and its submission to the Accreditation Office are essential to ensure that the published time lines are met and that the program has sufficient time to review the report and respond to the CAA prior to the final accreditation decision. Failure to submit site visit reports promptly can cause delays in the CAA's final review and decision on the program.
- providing feedback to the trainee within 1 week of the visit to discuss the conduct of the visit as well as his/her performance.

D. Training

The CAA recognizes that there is a significant learning process in becoming sufficiently familiar with accreditation standards and site visit mechanisms to function independently as a site visitor. In recognition of this need for training, the CAA requires that newly appointed site visitors participate in a series of educational experiences designed to prepare them to serve as effective visitors. This entire training process is intended to be a positive experience that gives the novice sufficient hands-on experience and feedback to feel confident in his/her role.

The CAA trains a class of new site visitors annually; however, specific dates for the training are not established until the CAA's winter meeting. Training dates are indicated in the letters to those selected and invited to participate in training.

- Following invitation and acceptance to serve as a site visitor, new site visitors are provided access to materials pertinent to CAA site visitation, including the CAA *Accreditation Handbook.*
- New site visitors are required to attend a 2-day training workshop, typically held at the ASHA National Office. This session provides training on interpretation of the CAA Standards for Accreditation, logistics of the on-site review process, the interview process, appropriate site visit team dynamics and interview techniques, and preparation of the site visit report. All trainees are evaluated during the workshop to determine whether they have sufficiently demonstrated essential skills to serve as CAA site visitors, such as preparedness, communication skills, and understanding of content. If a trainee's skills are *not* found to match those required of a CAA site visitor, the individual will not be invited to serve as a site visitor and his/her name will not appear on the CAA's public site visitor roster. This decision by the CAA is not appealable.
- After the workshop, each new site visitor who receives a positive evaluation is scheduled as a trainee on his/her initial site visit. The chair of the site visit team should provide clarification and feedback to the trainee throughout the planning meetings and visit, as appropriate. At the end of the site visit, the site visit chair will provide a written evaluation of the trainee site visitor to the CAA.

If serious concerns are raised about aspects of the new site visitor's performance, the CAA may choose a variety of options to extend the training process.

- After the trainee visit and a positive evaluation from the team chair, the new site visitor will assume responsibility as a full member on future site visit teams.

Current site visitors selected to serve a new, consecutive 4-year term will not need to complete the initial training workshop after their first 4-year term unless such training is identified as part of a remediation plan. Current site visitors may complete two consecutive terms of service and then will be required to participate in the training workshop to begin their next term of service, (e.g., after two terms/8 years or service, after 4 terns/16 years of service, etc.), unless such training is identified as part of a remediation plan. Additional professional development is required in a format determined by the CAA.

E. Professional Development

Over time, changes may occur in the CAA's accreditation standards and their interpretation or in CAA processes. All site visitors are informed about all such changes. In addition, professional development sessions are offered at least annually at the ASHA Convention or through other mechanisms to clarify any changes for both site visitors and program directors.

Site visitors are expected to participate in professional development sessions conducted annually during their 4-year term.

In addition, the CAA is committed to providing site visitors with ongoing training and opportunities for self-assessment. Site visit team members can access the final copy of the site visit report, which has been reviewed by the CAA Chair and staff for grammar, consistency, and clarity before being sent to the program. This edited report is provided with any edits highlighted in an effort to provide feedback to the authors. In addition, the site visit team members will have access to the final CAA accreditation decision and rationale for the programs they visited on behalf of the CAA. This information should be kept confidential and not be divulged to any outside party.

F. Evaluation of Site Visitors

CAA site visitors make a significant contribution to the professions through their outstanding volunteer efforts to ensure the maintenance of high standards in the graduate education of future audiologists and speech-language pathologists. The CAA maintains confidential records on site visitor performance to assist site visitors in executing their responsibilities effectively and to ensure that the site visit portion of the accreditation process is conducted in an exemplary fashion. At the conclusion of the site visit, programs and site visit team members are expected to complete and submit evaluations of the visitors. The CAA reviews these evaluative records on a regular basis and provides feedback to site visitors.

Site visitor performance is evaluated based on the expectations set forth in this *Handbook* as defined in the Site Visitor Terms of Agreement, which include the responsibilities of all site visitors. These elements have been grouped into eight broad categories for purposes of evaluation that include:

- Knowledge and understanding of the CAA
- Knowledge of program materials
- Verbal communication skills
- Written communication skills
- Time management
- Organization
- Interpersonal skills
- Team performance

Written site visitor evaluations form part of the ongoing assessment process that the CAA conducts. The CAA makes available evaluation forms online via a secure survey site; all feedback is considered and follow-up action is taken as needed. Each of the following stakeholders has the opportunity to provide feedback about the site visit team members and administrative aspects of the visit.

- The program director completes an online Site Visitor Performance Feedback Survey to provide feedback on each individual member of the site visit team, including the site visit chair, and the accreditation staff's performance in handling the administrative details. In addition, a program director may contact the chair of the CAA Site Visit Committee at any time to discuss specific concerns regarding a site visit or team member.
- Site visit team members complete an online Site Visitor Performance Feedback Survey on the performance of each of his/her teammates, including any trainees, the site visit chair, and the accreditation staff's performance in handling the administrative details.
- The site visit chair provides direct feedback to the site visit trainee within 1 week of the visit to discuss the conduct of the visit as well as his/her performance. The chair also completes the Site Visit Performance Feedback Survey on each member of his/her team and the Accreditation staff's performance in handling the administrative details.
- The accreditation staff monitors administrative activities of site visit team members and provides feedback about individual site visitors related to timely and efficient scheduling and completion of pre- and post-visit tasks.

The CAA's Site Visit Recruitment, Selection, and Evaluation Committee reviews feedback on site visitor performance on an annual basis. The following elements are considered in determining successful performance of site visitors and continued participation in the site visitor program:

- attendance, participation, and performance during the initial site visitor training;
- successful completion of trainee site visit;
- participation in annual site visitor professional development sessions;
- performance feedback by the other members of the site visit team;
- performance feedback by the program visited;
- availability consistent with the CAA's expectations (roles and responsibilities);
- administrative focus points (e.g., timely submission of availability calendars at start of each semester, appropriate pre-visit planning, site visit report writing and contributions, or timely completion of roles and responsibilities);
- a change affecting eligibility to meet qualifications for service.

The CAA considers each site visitor's performance based on the above criteria. All site visitors receive an annual summary of all performance feedback received, including ratings and specific comments. If needed, follow-up action will be determined based on the severity of the adverse feedback, its impact on the accreditation program and the CAA brand, and whether remediation can occur. If the site visitor is not meeting the expectations as outlined in this *Handbook* as reflected in performance feedback, then one or more of the following corrective actions is selected, ranging in severity, as appropriate.

- A member of the CAA conducts a phone interview with the site visitor who receives any adverse performance feedback to share the feedback and solicit additional information/clarity from that site visitor about the situation. The report of the phone interview and resultant next steps and follow-up is documented and maintained in the site visitor's personnel file for further action as needed. Note: This step can occur simultaneously with the other corrective actions.
- The site visitor is assigned to a team with an experienced site visit chair to serve as a mentor for his/her next visit.
- Further assignment is temporarily put on hold until the individual has completed additional training and been evaluated on that participation.
- The site visitor is removed from the pool. The rationale for removal is documented. The CAA's decision is not appealable.

G. Site Visitor Expenses and Reimbursement

Site visitor expenses are reimbursed in accordance with ASHA's travel and reimbursement policies for

- initial training workshop,
- trainee site visit,
- site visits,
- special workshops (by invitation).

Expenses for attendance and participation at the annual site visitor professional development modules, typically held during the ASHA Convention, are not reimbursable under this policy. Honorarium is not provided for site visitors.

H. Candidacy Site Visitors

Eligibility and Selection

The Council developed a process for selection and training of a select corps of experienced site visitors to support the CAA's review process of applicant programs for candidacy status.

In addition to meeting the qualifications to serve as a CAA site visitor (outlined above), an individual selected to serve as a candidacy site visitor also must

- be a current member of the CAA site visitor pool.
- have a minimum of 2 years' experience as a CAA site visitor.
- have a positive evaluative record as a site visitor.
- possess skills to support a candidacy site visit (e.g., sensitivity/understanding of unique qualities of developing programs).

Academic faculty members must have chaired at least two regular accreditation visits.

Additional desirable skills/attributes include

- the ability to maintain schedule and responsiveness to time lines,
- developed organizational skills,
- the ability to facilitate a constructive review of a program,
- flexibility to shift expectations of review from verifying evidence of compliance—as would be the case in a standard visit to accredited programs—to a more developmental approach in reviewing an applicant program.

Individuals who have been identified as having met these conditions will be invited by the Site Visit Committee to serve as a candidacy site visitor. A new 4-year term as a CAA site visitor will be initiated for individuals who accept the invitation and complete the required training.

Training and Professional Development

All candidacy site visitors are required to complete training for candidacy site visits prior to assignment in this capacity. Candidacy site visitors are expected to participate in professional development sessions when offered.

Availability and Scheduling

All individuals are still part of the regular site visitor pool and participate in accreditation site visits. However, priority is given to scheduling and participation in candidacy site visits.

Evaluation

All candidacy site visitors are evaluated consistent with the CAA's procedures for the evaluation of site visitors and are provided feedback about their performance annually.

Compliance Review Committee (CRC)

The Compliance Review Committee (CRC) is a standing committee of the CAA. The CRC is charged with reviewing and evaluating annual reports submitted by programs that hold accreditation status to determine a program's continuing adherence to the requirements for review within the standards for accreditation. The review of annual progress reports submitted by programs in candidacy are not within the scope of the CRC's charge.

A. Composition

The CRC shall consist of no more than 15 members who reflect the active stakeholders in the accreditation process and the beneficiaries of quality education. These members are former CAA volunteers and should be engaged in educational and/or clinical processes that align with the mission and purposes of the accreditation process, as follows:

- No more than 80% of the committee shall be academic members from the faculty/staff of CAA-accredited graduate education programs at the time of appointment. [See below for additional qualifications, including individuals who have retired.]
- The remainder of the committee shall be clinical practitioner members who are primarily employed in non-academic settings. [See below for additional qualifications, including individuals who have retired.]
- One (1) of the members outlined above shall be appointed by the CAA as the Chair of the committee, The Chair will serve a two-year term.

The CAA recognizes that adjustments may be necessary to the composition to ensure an equitable distribution of the workload based on shifts in the volume of annual reports.

Qualifications

The CRC shall consist of members with the following qualifications:

- Committee members shall represent the professions of audiology and speech-language pathology.
- Committee members must be a former CAA member or a former CAA site visitor.
- Committee members must be credentialed in the same professional area to which they are appointed (e.g., CCC-A or CCC-SLP) and/or hold relevant state licensure to practice.
- Committee members may be currently employed or retired. If retired, the individual must have retired no more than seven (7) years prior to the appointment and must demonstrate continued professional development through the maintenance of appropriate credentials.

The CAA recognizes that adjustments may be necessary to the qualification criteria to ensure an equitable distribution of the workload based on shifts in the volume of annual reports.

Change in Qualifications

CRC members must notify the CAA within 30 days of any change in professional status that may affect their eligibility to serve, including employment or credential loss. The CAA will determine if a member may continue their term if they no longer meet the specific practitioner or academic criteria for which they were appointed. Failure to maintain the required professional credentials will result in immediate removal from the CRC.

B. Selection and Training

Nominations and Criteria for Selection

The CAA's Site Visitor Recruitment, Selection, and Evaluation Committee (SVRSE) will issue a call for volunteers and accept nominations for individuals to serve on the CRC. SVRSE will review nominations and past volunteer evaluations and appoint qualified members to ensure appropriate professional and

geographic representation. The CAA will also designate one member of the CRC to serve as the Chair of the committee.

Orientation and Training

Accreditation staff shall provide an orientation session for new committee members that focuses specifically on the evaluation of annual reports, interpretation of standards, and use of the CAA's reporting platform and related technologies. The CRC will also participate in annual calibration sessions to remain aligned with the CAA's current interpretation of the standards and operational policies and procedures.

C. Terms of Service

CRC members are appointed to 3-year staggered terms, beginning the first day of January following their appointments. Members may be eligible for reappointment to a second 3-year term and shall not serve more than two total terms.

Initial appointments to the CRC may be adjusted to allow for staggered rotation of the membership. The CAA has the authority to manage or adjust terms of service when warranted to balance member representation.

D. Responsibilities

The CRC is responsible for the thorough and consistent review of annual reports submitted by programs holding accreditation status (Accredited, Accredited with Monitoring, Accredited on Probation). Members are expected to uphold the fiduciary responsibilities of the CAA:

- Duty of care—diligence in carrying out duties
- Duty of loyalty—obligated to act in the association's best interests and not use their authority to advance personal interests
- Duty of fidelity to purpose—ensuring actions and decisions are consistent with stated mission and purpose of the association

This also includes the following responsibilities regarding annual report reviews:

- Read, review, and evaluate assigned annual reports, regardless of profession, within the requested time frame and make recommendations to the CAA about whether program has demonstrated compliance with standards for continuation of accredited status,
- Identify standards in which compliance could not be verified,
- Recommend reports to the full CAA as necessary with rationale regarding areas of potential noncompliance,
- Suggest comments or concerns to be included in the approval letter addressed in the next report,
- Maintain technical skills to effectively use web-based reporting platforms and technologies.

The CRC's role is to evaluate the evidence and make compliance recommendations to the full Council for final determination.

Conflicts of Interest

The CAA's conflict of interest policy applies to all members of the CRC. CRC members must recuse themselves from the review of any annual report where a potential or actual conflict of interest exists. This includes, but is not limited to, programs where the member was a former student, an employee, a site visitor during their most recent visit, or where the member has a close personal or professional relationship with program faculty. Responsibility for determining and avoiding such conflicts rests primarily with the individual.

Members of the CRC must maintain the confidentiality of all program review materials throughout and after their term of service. Upon appointment with the committee, members will review and sign a conflict of interest and confidentiality statement, subject to annual review and renewal.

E. Evaluation of the CRC

The performance of the CRC members will be regularly reviewed to assess their effectiveness in meeting both their individual responsibilities and the CAA's annual goals and objectives. CRC members will complete an individual self-assessment form to rate their performance annually and provide feedback on the CRC's operations.

Self-assessment activities are anonymous to receive candid feedback and ratings and identify areas that may require further training or clarification. The formal evaluation will take place annually, and performance feedback can be received at any time throughout the year. Assessment results are compiled, aggregated, and shared with the CRC Chair and the CAA Executive Committee.

Dismissal from the CRC

Any member of the CRC may be removed for not fulfilling the member responsibilities described above or for engaging in any conduct prejudicial to the best interests of the CAA in accordance with the following procedures:

Any CRC member or accreditation staff member may bring to the attention of the CRC and CAA Chairs any concerns related to an individual committee member's performance related to the identified roles and responsibilities.

After discussion with the member, the CRC Chair will make a recommendation to the Executive Committee of the CAA related to the members' continuation on the committee, giving due consideration to any extenuating circumstances.

The Executive Committee of the CAA has the discretion to make a decision regarding the members' continuation on the ARRC, based on the nature and extent of any negative impact on the Council or on its members.

Resignation from the CRC

A member of the CRC may resign from their position if they are unable to complete their assigned term. A replacement member with appropriate qualifications shall be appointed in accordance with the appropriate selection procedures.

VIII. ACCREDITATION STAFF

Accreditation staff are primarily responsible for the processes and procedures necessary for the CAA to perform its functions as outlined in this *Handboo*k, including but not limited to:

A. Staff Role in Support of the CAA

Duties include

- organization and implementation of the CAA's meetings during the year, as well as additional teleconference meetings as needed,
- assignment of CAA reviewers,
- final editing and distribution of Accreditation Action Reports (AAR) and decision letters,
- preparation and distribution of minutes of meetings,
- maintenance of records related to CAA decisions,
- managing the process for application and election of new Council members,
- conducting orientation of new CAA members,
- serving as contact persons, as appropriate, when individuals request contact with the CAA,
- representing the CAA at national meetings, when appropriate,
- developing materials and forms to be used in the accreditation process,
- publishing a web-based directory of accredited and candidate programs.

During CAA meetings, the role of staff is to

- provide some institutional memory,
- ensure compliance with the Standards for Accreditation,
- monitor and ensure consistency of decisions regarding compliance and appropriate citations,
- define the CAA's options for action.

Accreditation staff may not preempt actions of the CAA. An actual change of content, intent, date, or accreditation status included in the CAA's AARs must be approved by CAA members. General editorial changes in the AARs do not require CAA approval.

B. Staff Role in Support of the Accreditation Process

Accreditation staff are responsible for the following activities in support of the accreditation process:

- implementing policy decisions of the CAA,
- training site visitors, in collaboration with CAA members,
- maintaining records,
- preparing and submitting reports to ED and CHEA,
- communicating with external communities of interest,
- managing review and revision of the Standards for Accreditation,
- managing submission/distribution of reports submitted by programs,
- editing/distributing reports of site visits,
- implementing all assessment processes, including review of the results and corrective action when necessary,
- processing formal complaints,
- assigning site visit teams,
- managing the annual accreditation report process,
- managing the administrative probation process,
- developing and managing the Accreditation budget,
- serving as liaison to accrediting agencies or educational organizations, including disseminating information,
- managing development and analyses of performance evaluations (CAA, site visitors) and comprehensive assessments of the accreditation program.

C. Staff Role in Support of Programs

Accreditation staff are responsible for the following activities in support of education programs:

- providing consultation to programs about the accreditation process,
- providing clarification regarding the Standards for Accreditation and CAA expectations,
- organizing and facilitating application preparation workshops and educational modules.

D. Other Staff Activities

Accreditation staff are also responsible for other activities including, but not limited to,

- developing the annual budget for the Accreditation Office and the CAA, using the guidelines provided by the ASHA Finance Unit and the fee structure determined by the CAA,
- monthly monitoring of income and expenses based on information provided by the Finance Unit,
- responding to requests from ASHA for information (e.g., reports of meetings, year-end reports, budget variance reports),
- participating in ASHA activities as required.

Accreditation staff members shall not discuss matters, disclose, or use information specific to an institution or program of which they have knowledge by virtue of involvement in the accreditation process, except when officially participating in this capacity as outlined in this *Handbook*. Accreditation staff members shall not disclose to the CAA any information provided by programs in confidence outside the formal reporting mechanisms, unless the program has given its express consent for staff to do so.

IX. FINANCIAL SUPPORT OF ACCREDITATION

A. Budget Level and Sources

Accreditation activities of the CAA are fully supported by initial application, site visit, and annual fees assessed to academic programs and by a subsidy from the American Speech-Language-Hearing Association (ASHA). ASHA and the CAA recognize that the benefits of accreditation accrue to all members of the professions as well as to education programs, their students, and the public at large. Support of accreditation, therefore, is properly shared by accredited and candidate programs and ASHA as the national organization representing the professions.

Adequate levels of funding of the CAA over time may require adjustments of the fees assessed accredited programs and/or the amount of the subsidy provided by ASHA.

The total budget for the CAA includes the total personnel and nonpersonnel costs assigned to the operation of the Council, including the initial and annual fees contributed by applicant and accredited programs and the ASHA subsidy. As a general guideline in budget planning, it is assumed that fees assessed accredited programs should provide approximately 35% to 40% of the total CAA budget.

Members of the CAA and site visit teams receive no compensation, except for reimbursement of actual travel expenses related to discharge of their responsibilities. National Office personnel who support the accreditation process are included as part of the ASHA subsidy and are included in the total budget of the CAA. Every effort is made to follow prudent management practices to restrain costs while providing high quality services.

B. Budget Development and Planning

In keeping with its independent role in establishing accreditation standards, the CAA shall have major responsibility for developing and managing its operational budget. As recommended by the Ad Hoc Joint Committee on Academic Accreditation and approved by the ASHA Executive Board (1994), fiscal oversight shall be shared by the CAA and ASHA.

- The CAA shall develop a proposed annual budget, along with justification of budget elements that permit the effective conduct of its accreditation activities. The budget is subject to approval by the ASHA Board of Directors.

- Once the budget has been approved, the CAA shall be authorized to determine nonpersonnel expenditures within limits imposed by the budget, including the scheduling of meetings.

- The Chair of the CAA and the ASHA Board of Directors, through appropriate National Office personnel and the Vice President for Academic Affairs in Audiology and the Vice President for Academic Affairs in Speech-Language Pathology, shall monitor overall expenditures.

- Budget planning by the CAA should anticipate a 3- to 4-year horizon and should project necessary changes in accreditation fees and the amount of the ASHA subsidy required to sustain necessary accreditation activities.

- The annual budget to support the CAA Nominating Committee's activities, including meeting expenses and supporting election services, is developed as part of the overall budgeting process.

C. Accreditation Fees

The CAA maintains an established fee schedule to support the operations of the accreditation program for applicant, candidate, and accredited graduate education programs.

Structure of Accreditation Fees

All programs that hold an accreditation status with the CAA, including candidacy, are assessed an annual fee.

Applicant Programs

Developing programs that submit a Notice of Intent[3] to apply for candidacy status will be assessed a non-refundable Notice of Intent fee, payable at the time the notice is submitted. A nonrefundable application fee must be submitted with the program's application for candidacy status. The application fee affords the program participation in the application readiness (Level I) and submission (Level II) processes, as described in Chapter XVI Procedures for Achievement and Maintenance of Candidacy Status. Applications submitted without a fee will not be accepted for review. Applicant programs will be invoiced separately for the site visit fee at the time the candidacy site visit is confirmed (Level II).

Candidacy Programs

Annual fees for candidacy programs are established as a base annual fee. The CAA will invoice new programs an annual fee in the year in which candidacy is awarded. An annual fee is invoiced every year in which an annual progress report is submitted, assessed upon submission of the candidacy program's annual progress report. Programs that have been approved by the CAA to offer the program of study via multiple modes of delivery (i.e., residential, distance education, satellite location, contractual arrangement) will be assessed a fee for each additional modality.

The year in which a candidacy program submits an initial accreditation application, it will be invoiced for the initial accreditation application fee in lieu of the candidacy annual fee. An initial accreditation site visit fee will be invoiced separately once the site visit is scheduled, which is not a substitute for the application or annual fees. The program will be invoiced an annual fee in the year in which initial accreditation is awarded. Thereafter, annual fees will be assessed as noted below under Accredited Programs.

Accredited Programs

Annual fees for accredited programs include a base annual fee plus one fifth or one eighth of the re-accreditation site visit fee, prorated over the accreditation cycle, depending on a program's accreditation cycle. This structure allows the costs to be distributed evenly over the accreditation period, rather than adding site visit charges in the year of a re-accreditation review. The CAA invoices accredited programs for annual fees in late fall for the coming calendar year.

Institutions that have accredited programs in both professional areas may qualify for a discount rate. Programs that have been approved by the CAA to offer the program of study via multiple modes of delivery (i.e., residential, distance education, satellite location, contractual arrangement) will be assessed a fee for each additional modality.

Site Visit Fees

The site visit fee that is assessed programs covers the estimated expenses to include the travel, meals, and hotel costs for the team to conduct a site visit. If additional site visits are required outside the routine accreditation, re-accreditation, or candidacy reviews, programs will be assessed an additional fee in accordance with the current accreditation fee schedule. The site visit fee is invoiced separately for programs applying for candidate status or initial accreditation.

3 Notice of Intent fees will be assessed as of January 1, 2022.

Payment of Fees

Application fees must be submitted at the time of application (payable to ASHA). Invoices for candidacy and initial accreditation site visits are sent at the time the site visit has been confirmed and are payable upon receipt.

Once an accreditation status has been awarded to a program, maintenance of that accreditation status is contingent upon timely payment of annual fees. Annual fees are set on a calendar fiscal year and CAA-accredited and candidate programs are invoiced accordingly. Payment of annual fees is due upon receipt and no later than 30 days after the invoice date. Institutions that have accredited programs in audiology and in speech-language pathology with different accreditation cycles (e.g., 8 years and 5 years) will be charged the annual fee for the shorter cycle.

If a program fails to pay the annual accreditation fee by the due date (30 days after the date of the invoice), a second invoice will be sent to the program director and the institution's president or designee for payment within 30 days with reference to the administrative probation policy. If the fee is not received within that 30-day time period, a third invoice, including a late fee, will be sent to the program and the institution's president or designee with a cover letter indicating that the program is now on administrative probation and, if payment is not received within 30 days, the program's accreditation will be considered lapsed. If the accreditation fees are not paid at the end of the 30-day administrative probation period, the CAA will notify the program and the institution's president or designee that accreditation is now withdrawn; the CAA will provide the public and other stakeholders notice consistent with its public notice policies.

Programs that have not paid their annual fees by the final due date (90 days after invoice date) will not be eligible to submit a voting ballot for any academic or practitioner vacancies on the CAA during that year.

The CAA reserves the right to collect all outstanding fees in the event the program has not been billed as outlined during the applicant, candidacy, and accreditation processes.

Review of Fees

The CAA reviews its fee structure every 3 years along with the budget projections for the next 3- to 4-year period. The results of these reviews are used to determine whether the fees or the structure applied to fee collection should be modified to meet the CAA's negotiated baseline of 35%–40% of operational budget to be supported by accreditation fees.

Change in Fees

Annual accreditation fees should be increased only after the following conditions have been met.

a. Widespread input from accredited programs and key stakeholders has been received regarding projected CAA budgets and the amount of fee increases.
b. The CAA has given notice that it has recommended fee increases as part of its projected budget.
c. Sufficient notice of the fee change has been given to meet financial planning needs of both accredited and candidacy programs and ASHA.

PART 3 – POLICIES AND PROCEDURES

X. ELIGIBILITY AND PROGRAM DEVELOPMENT

A. Accreditation Classifications[4]

There are five status classifications for programs in the accreditation process that reflect the CAA's evaluation of the extent to which an education program complies with the Standards for Accreditation (Standards). Any program that holds the status of "Accredited" or "Accredited – On Probation" is considered to be an accredited program. New programs that have been awarded candidacy status are noted as "Accreditation Candidate." Also included are two applicant statuses for programs that have submitted an application for review by the CAA and do not currently hold an accreditation status.

- Accredited. Accreditation is awarded to a fully operational graduate education program that is in compliance with the Standards. The CAA awards *initial accreditation* for a maximum of 5 years, subject to annual review. The CAA awards *reaccreditation* for a maximum of 8 years, subject to annual review. A statement of concerns may accompany the letter awarding accreditation to assist the program in conducting self-evaluation prior to the first annual report. Renewal of accreditation is dependent upon payment of annual accreditation fees.

- Accredited – With Monitoring.[5] A program that is accredited with monitoring is judged to have standards-related deficiencies identified in the review that result in a noncompliance citation. Those deficiencies cited may not affect the program's capability to provide acceptable educational experiences for students and must be corrected within one year. If unresolved within one year, the CAA must give a second noncompliance citation, which will result in a probation decision.

- Accredited – On Probation. A program placed on probation is judged to be not in compliance with all Standards, as indicated by clear evidence of circumstances that jeopardize the capability of the program to provide acceptable educational experiences for the students. A program also may be placed on probation, because the program has not corrected deficiencies noted earlier by the CAA or as a result of a complaint investigation. Probation is an action taken by the CAA as a result of a review of an annual report, reaccreditation application, or complaint. A program is placed on probation for a period of 1 year, by the end of which time the program must file a probation report. However, if at any time during the year, the program is able to rectify the deficiencies noted and achieve compliance with the standards, the CAA will consider removing the probationary status when review of the probation report so warrants. If compliance with the Standards for Accreditation is not demonstrated within 1 year, accreditation will be withdrawn. Probation may be extended for 1 additional year only under extenuating circumstances. A probation decision cannot be appealed.

- Accreditation Candidate.[6] Candidacy status is awarded to a newly developed entry-level graduate degree program that meets all institutional and programmatic eligibility requirements, including that the program has no students currently enrolled and that it has been granted authorization through the governance process of the parent institution and the appropriate state authority to offer the graduate degree program(s) for which candidacy is sought. Candidacy status requires compliance with the Standards in a logical sequence over several years. This allows new programs to evolve over time and to secure the necessary resources to administer the program while being closely monitored by the CAA. Although compliance with all Standards is not required at the time of award of candidacy, the CAA's decision to award candidacy status is based on the program's submission of a comprehensive development plan (which is

[4] The CAA employed an Interim Accreditation status between October 2001 and September 2004 to designate a newly proposed entry-level doctoral program that was in transition from or added to a CAA-accredited master's-level graduate education program in the same professional area, as part of the CAA Policy on Substantive Changes in effect at the time. The CAA phased-out the Interim Accreditation status as of September 17, 2004.

[5] The CAA approved the Accredited – With Monitoring status at its February 2025 meeting to be implemented for decisions made on or after July 1, 2025.

[6] The candidacy program was initiated in 1991. Changes to the review and reporting models were implemented in January 2002, November 2007, January 2019, and April 2020.

presented in the form of the candidacy application) and the program's and institution's demonstrated commitment and ability to implement the program fully. Once candidacy is awarded, programs will be monitored for continued development and compliance with the Standards through submission of annual progress reports. Once determined to be in compliance with given Standards, programs must maintain compliance with those Standards throughout candidacy status. Candidacy status may be held for no longer than 5 years, subject to approval of the progress reports, at which time the program must meet all CAA Standards for Accreditation. Candidacy status cannot be renewed or extended.

- Accreditation Applicant. This designator is used to identify a graduate education program that has submitted an Application for Accreditation and is not eligible to participate in the candidacy program.

- Candidacy Applicant. This designator is used to identify a graduate education program that has submitted an Application for Candidacy and has met eligibility criteria to participate in the candidacy program.

B. Program Eligibility

For the applicant program to be eligible for an evaluation by the CAA, the institution(s) of higher education that house(s) the applicant program must meet the following criteria.

- The institution must offer a graduate degree program that is specifically designed to prepare students for entry into independent professional practice as an audiologist or as a speech-language pathologist. Typically, this goal is accomplished by offering an education program leading to a master's or clinical doctoral degree offered through a graduate or professional school.
- The parent institution(s) of the program and the appropriate state or other governing authority must have granted authorization to the program to offer the graduate degree program for which accreditation status is sought. The program must provide documented evidence with the application materials for initial accreditation or candidacy that these approvals have been received.
- The institution must hold institutional accreditation from one of the following six accrediting bodies:
  - Middle States Commission on Higher Education (MSCHE)
  - New England Commission on Higher Education (NECHE)
  - The Higher Learning Commission (HLC)
  - Northwest Commission on Colleges and Universities (NWCCU)
  - Southern Association of Colleges and Schools Commission on Colleges (SACSCOC)
  - Western Association of Schools and Colleges Senior College and University Commission (WSCUC)

An institution that holds a preaccreditation or candidacy status with an institutional accreditor does not meet the CAA's eligibility criteria. For programs with components located outside the region of the home campus, the program must verify to the CAA that all locations in which its academic components are housed, including official satellite campuses or consortium entities outside of the United States, are institutionally accredited.

Candidacy

Institutional Conditions for Candidacy Eligibility

In addition to the above criteria, to be eligible for candidacy (preaccreditation) review with the CAA, the institution(s) of higher education that house(s) the applicant program must meet the following criteria.

- The institution must conduct a comprehensive self-study that demonstrates how the program will meet each of the Standards for Accreditation, and the results of this analysis must be documented in the Application for Candidacy as its development plan.

- The parent institution of higher education and the appropriate state authority must have approved this plan and must verify the intent to implement it fully. Candidacy status is awarded to programs that voluntarily apply for this status and provide evidence of an achievable development plan and sustainable institutional and professional support.

Program Conditions for Candidacy Eligibility

- Candidacy is available to applicant programs that:
  - are newly developed degree programs, including stand-alone programs or those offered through a consortium, AND
  - have no students currently enrolled.

- A signed application must be submitted to the CAA at least 18 months in advance of the proposed student enrollment date. Programs should allow adequate time for the CAA's review and comment on the applicant program's development plan. Note that time frames outlined in this *Handbook* are *estimated* and are dependent on the program's ability to demonstrate readiness to offer the graduate program. Therefore, some programs will take longer than others to advance through the CAA's candidacy process.

- The program and the institution agree to not enroll students in the applicant program until candidacy status has been awarded by the CAA. The program will provide evidence upon submission of its candidacy application that it fully understands that failure to comply with this condition shall result in (a) termination of the candidacy review by the CAA without having made a final decision and (b) ineligibility as a candidate applicant. The program may retain its eligibility for CAA accreditation, but would be afforded opportunity to apply only for initial accreditation with the CAA.

  The CAA enacted this policy to protect students who are initiating their program of professional study in good faith that a program holds an accreditation status with the CAA, thereby ensuring students' eligibility for state and national professional credentials.

Nonaccredited programs that have graduate students currently enrolled are not eligible for candidacy, but may apply directly for initial accreditation with the CAA. The candidacy process is not available to CAA-accredited programs that are adding a new component or mode of education delivery to the program (e.g., distance education, satellite campus, etc.), as these may be considered substantive changes to an existing program. CAA's Policy on Substantive Changes describes that process and can be accessed in this *Handbook* or by sending an inquiry to accreditation@asha.org.

Consortium[7]

Graduate programs may consist of, or be located under, a single administrative entity (institution, school, department, agency, etc.) or may take the form of a consortium composed of multiple independently administered entities. For purposes of this policy, a *consortium* is defined as an arrangement between or among institutions of higher education. Each institution participating in the consortium is termed a *member entity*. A member entity of an accredited consortium program may not publicize itself as an independently accredited program unless it also has applied for and received separate accreditation status from the CAA.

All consortia are considered new programs and require accreditation separate from any other existing accredited programs. A newly developed consortium program must submit an Application for Candidacy, provided it meets all candidacy eligibility requirements (above). Consortium programs that do not meet candidacy eligibility requirements may consider submitting an Application for Accreditation, provided all program eligibility conditions are met.

[7] The CAA's policy on consortia was previously included in its Policy on Substantive Changes, but was created as a separate policy as of July 1, 2005.

- In order for candidacy status to be granted, the consortium program must receive approval by all member institutions, as well as state authorities.
- Evidence of all approvals from each member institution must be provided with the Application for Candidacy.
- The consortium program must designate one individual who is administratively responsible for the consortium program and who will serve as the program contact.
- All consortium member entities must be housed in institutions of higher education that hold institutional accreditation, consistent with eligibility conditions for institutions and the accreditation standards. For programs in countries outside the United States, the CAA will determine an alternative and equivalent external review process.
- Consortium member entities must have formally agreed, in writing (e.g., memorandum of agreement, contract), to pool resources to conduct the graduate consortium program.

C. Consultant Policy and Guidelines

As academic units undergo self-study or other internal reviews, they may wish to engage consultants for assistance with established academic programs or to explore the feasibility of, or develop, new programs.

The CAA has developed the following policies regarding consultants.

- Individuals who are currently serving on the CAA or on the ASHA Board of Directors, including ex officios, are not eligible to serve during their term of office as consultants to programs seeking or maintaining accreditation.
- Any individual who is used by a program as a consultant cannot be assigned as a site visitor for that program after an application for candidacy, accreditation or reaccreditation has been made.
- Arrangements for consultant fees and travel expenses are made strictly between the program and the consultant.
- Use of consultants **will not** guarantee accreditation approval, because decisions about accreditation are made only by the CAA.

The CAA does not maintain a list of consultants but has developed guidelines to assist programs in selecting a consultant. Programs interested in engaging a consultant are encouraged to contact the university planning or assessment office, colleagues at other graduate education programs, the Council of Academic Programs in Communications Sciences and Disorders (CAPCSD), or established higher education consulting groups or private consultants for recommendations or assistance.

An additional resource, *Guide for Starting an Academic Program in Communication Sciences and Disorders (CSD),* is available on the ASHA website. The guide was authored by volunteer faculty from diverse academic programs and the CAA whose collective knowledge and experiences in establishing CSD programs are presented.

XI. EXPECTATIONS OF PROGRAMS

A. Accreditation Fees

An application fee must accompany the application for initial accreditation or application for candidacy. A separate site visit fee also is charged for these initial reviews. There is no fee charged for subsequent site visits that are regularly scheduled for purposes of reaccreditation, except as noted in this *Handbook*. Information regarding the current fee schedule is available on the accreditation website and from the Accreditation Office.

Renewal of accreditation is dependent upon timely payment of annual accreditation fees. Failure to pay annual accreditation fees by the established due date may jeopardize the accreditation status of the program. Accredited programs that have not paid their annual fees by the final due date will not be eligible to submit a voting ballot for any academic or practitioner vacancies on the CAA during that year.

Please see the Financial Support section of this *Handbook* for more information about the structure and payment of accreditation fees.

B. Report Submission

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 [PDF]. 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.

Due Dates for Accreditation Applications, Annual Reports, Candidacy Progress Reports, or Substantive Change Plans:	**February 1**	**August 1**
Anniversary or Reporting Date:	November December January February March April	May June July August September October

An application for reaccreditation is due approximately 1 year prior to the end date of the current accreditation cycle. All annual reports and candidacy progress reports are due by the dates in the above table.

An application for initial accreditation is expected to be filed at least 1 year prior to the end date of the established candidacy cycle. Nonaccredited programs that wish to submit an application for initial accreditation should contact the Accreditation Office to provide a notice of intent and gain access to the secure, web-based platform to submit the application at least 5 months prior to the submission date (i.e., by September 1 for February 1 submission and by March 1 for August 1 submission).

Developing programs that wish to submit an application for candidacy must contact the Accreditation Office at least 2 years before the expected enrollment date to schedule a required consultation and gain access to the candidacy application and other forms. The CAA requires developing programs to provide supporting documentation in its notice to apply, **due at least 24 months before the expected**

enrollment date, and will be scheduled for an application submission date once those materials are received and reviewed. An application for candidacy is expected to be filed 18 months prior to the anticipated enrollment of students. The CAA has two submission dates for candidacy applications (January 1 or July 1) and limits the number of applications scheduled to be submitted for each submission date.

C. Requests for Submission Extension

When unplanned or extenuating circumstances arise that have an impact on the program's timely submission of CAA reports, programs must request an extension for the submission of an accreditation report (i.e., application, annual report, candidacy progress report) to avoid any delays or adverse action taken by the CAA.

Procedures:
A program seeking an extension must submit its request in writing to the Accreditation Office no sooner than 30 days before the due date of the report and prior to the due date. The extension request must include:

- a rationale for the request,
- a detailed description of the action taken and progress made to complete the report,
- an estimate of additional time needed (up to 45 days beyond the submission date).

The CAA Chair or designee will review the request for extension and approve or deny the request. Extensions will not be granted for longer than a total of 45 days from the original submission date.
Failure to submit a report by established due dates, including after the granting of an extension, will result in the program being placed on administrative probation. The CAA notifies the program director and the president of the institution or the president's designee that the program has been placed on administrative probation and that, if the report is not provided within 30 days of the report due date (e.g., by September 1 if the report was due August 1), the program's accreditation status will be considered lapsed (withdrawn).

D. Administrative Probation[8]

A program placed on administrative probation is judged to have not met its reporting and/or financial expectations to the CAA. *Administrative probation* is an action taken by the CAA as a result of failure, by established deadlines, to:

- complete and file any accreditation report (e.g., application, annual report, candidacy progress reports, probation reports), including all special requests for information or
- pay annual accreditation fees.

Procedures:
A program is placed on administrative probation for a period of 30 days, by which time the program must file the appropriate information or pay the appropriate fees. Failure to do so will result in the determination that the program allowed its accreditation status to lapse, and the program will no longer carry an accreditation status.

A program on administrative probation maintains its current public accreditation status (e.g., Accredited, Candidate, Accredited – On Probation), which relates to its ability to comply with the Standards for Accreditation. Programs that are placed on administrative probation are not listed publicly.

When administrative probation has been applied due to nonpayment of accreditation fees, the program will be required to submit an annual report on the original due date. Review and approval of the annual report does not affect the administrative probationary status imposed for nonpayment of fees.

[8] Administrative Probation was implemented January 1, 2012.

E. Lapse of Accreditation

An accreditation status is considered lapsed when a program has failed to meet its administrative responsibilities to maintain its accreditation status by established deadlines and after all protocols have been exhausted giving the program opportunity to complete its obligations. Programs are required, by CAA established due dates, to complete and file any required accreditation report (e.g., application, annual report, candidacy progress reports, probation reports) and to pay annual accreditation fees. Because the program is given both the opportunity to meet all obligations and a warning that its accreditation status may be withdrawn for failure to comply, the CAA's decision to withdraw accreditation or candidacy, as it considers the program to have allowed its accreditation to lapse demonstrated by its failure to act, is not subject to appeal.

Procedures:
Programs would be placed on administrative probation prior to the CAA taking this type of withdrawal action. The lapse start date would be 30 days after administrative probation has been applied.
Within 30 days of the lapse date, the CAA will inform the program of its action to withdraw the program's accreditation status, including the effective date of when the program is no longer included in the CAA's list of programs, modify the program's accreditation cycle to reflect the CAA's decision, and list the program on the Recent Accreditation Decisions webpage. Further, the CAA also will notify the U.S. Secretary of Education and other stakeholders of the withdrawal decision, consistent with the CAA's Public Notice of Accreditation Actions policy.

The graduate program retains the right to reapply for accreditation at a later time without prejudice.

F. Student Achievement Measures and Thresholds

The Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) requires accredited programs to report student achievement data on an annual basis, which are identified in the Standards for Accreditation of Graduate Education Programs in Audiology and Speech-Language Pathology [PDF]. To support assessment of a program's effectiveness and to comply with accreditation standards, the CAA has established specific thresholds for program performance in the three required student achievement measures, as follows:

- Program completion rate—At least 80% of students must have completed the program within the program's published time frame, as averaged over the 3 most recently completed academic years.
- Praxis examination pass rate—At least 80% of test-takers from the program, excluding individuals who graduated more than 3 years ago, who have sat for the Praxis examination must have passed the test, as averaged over the 3 most recently completed academic years.

The CAA will review and validate student achievement measures and related thresholds every 3 years, or earlier as needed, for continued currency, appropriateness, and effectiveness in evaluating a program's success. The CAA considers extensive research on current benchmarks in use by other accreditors, best practices in the areas of performance assessment and outcomes measurement, recommendations by the U.S. Department of Education, and national performance averages and trends when determining which achievement measures to require and when establishing related thresholds for those student achievement measures.

REPORTING CHANGES

All accredited and candidate programs are required to advise the CAA of changes that may affect its compliance with all Standards for Accreditation and accreditation status. Some types of changes do require prior approval by the CAA, while other types of changes simply require timely notification. Failure to advise the CAA or the Accreditation Office within the time lines may jeopardize the program's accreditation status.

G. Reporting Program Director Change

Programs must notify the CAA of program director changes as soon as possible, but no later than 30 days after the change, including temporary appointments and sabbaticals. Failure to notify the CAA Accreditation Office within the time lines may jeopardize the program's accreditation status.

Procedures:
The program must submit notification [DOCX] to the Accreditation Office indicating the name, title, and contact information of the new program director, along with the effective date of the appointment and whether the appointment is on an interim basis or permanent. The program must provide, with the notification, documentation about the new program director's qualifications and credentials, which will be reviewed to ensure the individual meets the requirements outlined in the standards [PDF]. The notice also must include the justification for the change. If the position is vacant, written notification should include the plan for filling the position.

Communication regarding the program's compliance with accreditation standards will be provided to the program once the review has been completed.

H. Reporting Administrative Structure Change

Programs must notify the CAA of changes in administrative structure which includes a move to another college or school or a shift from program to department level as soon as possible, but no later than 30 days after the change. Institutional administrative changes, such as a merger or other complex change, also must be reported to the CAA but will require more details as noted in a separate policy below. Failure to notify the CAA Accreditation Office within the time lines may jeopardize the program's accreditation status.

Procedures:
The program must submit notification [PDF] in writing to the CAA Accreditation Office that:

- identifies the effective date of the change;
- describes the effect on continued compliance with regard to program authority, access to higher administration, etc.;
- provides an updated organizational chart.

Further details about the change and its effect on the program's compliance with all Standards for Accreditation must be provided at the time of the next accreditation report (annual report or accreditation application). In particular, the subsequent report must address compliance with standards that relate to mission and goals, long-term planning, program director and effective leadership, public information, and financial resources.

I. Reporting Institutional Structure Change

The decision to change an institution's operational structure, including the merger of institutions of higher education, requires significant planning and coordination to ensure quality education continues to be provided. The program must notify the CAA no later than one year before a merger or other complex changes are to take effect to inform CAA of the nature and scope of the planned changes and to allow accreditation staff to provide information and guidance on reporting expectations. Programs should contact the Accreditation Office as soon as it is aware that preliminary approvals for an institutional structure change have been enacted.

Institutional structure changes, such as a merger of one or more institutions of higher education, are considered to be complex in nature and may affect accreditation standards for the CAA-accredited or candidate program(s) being offered. Failure to notify the CAA Accreditation Office within the time lines may jeopardize the program's accreditation status.

Procedures:
The program must contact the Accreditation Office as soon as it is aware of an official merger or other complex change(s) are to take place but no later than one year before the institutional changes are to go into effect. The program must submit notification [PDF] in writing to the CAA Accreditation Office that:

- identifies the effective date of the change;
- indicates the names and addresses of the universities involved in the merger, as appropriate, and specify if any name changes are expected as a result
- describes the continuity plan of the CAA-accredited or candidate program at each university
- indicates the status of the institutional accreditor's review and approval
- indicates the status of the degree granting authority(ies) review and approval

This notification information will be considered, and accreditation staff will work with the program to determine the appropriate reporting mechanism and timelines for review, based on the complexity of the institutional changes and effect on CAA program(s). Accreditation staff also will work with the program(s) to determine how best to preserve programmatic accreditation history, as appropriate.

<u>One Program</u>
In cases where only ***one*** institution offers a CAA-accredited or candidate program, the program will be expected to provide the following information to the CAA for its consideration on the program's continued compliance with accreditation standards:

- Provide an updated organizational chart
- Document the approval process by the institutional accreditor and the timeline for securing approval, as appropriate
- Document degree granting authority for the merged institution
- Furnish the mission and goals of the institution and outline effects on the program
- Document program authority and responsibility
- Confirm program director
- Document appropriate and sufficient resources
    - Institutional financial support
    - Physical facilities, if new or renovated location and space
    - Program equipment and materials
    - Technical infrastructure
    - Clerical and technical staff support
- Note any changes that would effect compliance with the remaining accreditation standards. Further details about the change and its effect on the program's compliance with all Standards for Accreditation must be provided at the time of the next accreditation report (annual report or accreditation application). In particular, the subsequent report must address compliance with standards that relate to long-term planning, effective leadership, public information, and financial resources.

<u>Multiple Programs</u>
In cases where ***multiple*** institutions offer a CAA-accredited or candidate program, the institutional representative/program must indicate if programs are to remain separate, if any programs will close, or if one or more programs will be merged into a single program, including whether any campuses will serve as primary or satellite locations in a new structure. The accreditation staff will work with the programs to determine the appropriate reporting mechanism and timelines, which may include:

- Maintenance of separately accredited programs: continuation of current reporting requirements and accreditation cycle. The program will be asked to address all of the elements noted above.

- Closure of one or more programs or locations: the program would be expected to follow the Program Closure procedures.
- Merging one or more programs to create a new, blended program: A blended program would require a full, comprehensive review by the CAA, including faculty, curriculum, student policies, and assessment in addition to the areas noted above as the CAA must consider the program's compliance with all accreditation standards. A new accreditation cycle may be determined upon that review. The program also may be considered with a different structure, such as existing campuses now functioning as satellite locations.

J. Reporting Program Closure

The decision to close an academic program requires specific plans for providing, in appropriate ways, for the students, the faculty, and the administrative and support staff and for the disposition of the program's assets and student records. Every effort should be devoted to informing each constituency as fully as possible about the conditions of the closing. It is critical that programs inform the CAA of these circumstances, given the effects of closure on the continuation and quality of the program.

Programs must notify the CAA when closure of an accredited program has been decided as soon as possible, but no later than 30 days after the final decision to close, including any component of the program, such as a distance education track or satellite location. Failure to notify the CAA Accreditation Office within the time lines may be reported to the appropriate institutional accreditor.

Procedures:
In the event that a decision is reached to close any component of the program, the program must submit notification in writing to the CAA Accreditation Office; notification must include:

- specific circumstances and details of the pending closure, including closure date, and copies of the official decision or notification to close the program or any of its components;
- a transition plan and timeline to ensure completion of the program by all current students that will ensure sufficient leadership, faculty, and other resources to provide the curriculum, practicum experiences, support services, and advising needed to fulfill the program's mission, meet its obligations to its students, and maintain all appropriate student records consistent with institutional policy;
- evidence that all current and prospective students have been informed of the program closure with a plan for assisting them in completing the program of study.

After reviewing the program's transition plan, the CAA will acknowledge the program's closure, modify the program's accreditation cycle to reflect the anticipated closure date, as warranted, and list the program on the Recent Accreditation Decisions webpage. Further, the CAA also will notify the U.S. Secretary of Education and other stakeholders of the closure, consistent with the CAA's Public Notice of Accreditation Actions policy.

Programs will be expected to continue to file reports to the CAA, annually or on an alternatively identified schedule, to ensure adherence to the program's transition plan and continued compliance with the Standards for Accreditation. Details about the transition and its effect on the program's compliance with all standards must be provided at the time of the next accreditation report. In particular, the report must address compliance with standards that relate to the program's mission and goals, director and leadership, public information, faculty, and financial resources.

K. Seeking Approval of Substantive Changes

When the CAA grants accreditation or candidacy status to an entry-level graduate education program, accreditation status applies only for the conditions that existed at the time of the CAA's action. The CAA recognizes that—in response to rapidly occurring changes in the educational environment, reduction in financial resources, and changes in the marketplace—academic programs are developing alternative models to deliver education in the most cost-effective way, while providing students with the skills necessary to succeed in an increasingly challenging environment. Minor changes within the program may take place prior to its next scheduled review, which are routinely reported in an annual report and approved by the CAA. The Council views these minor changes as part of a healthy educational process

and encourages programs to make them as part of their ongoing self-assessment and continuous improvement.

At times, however, more substantive changes occur in a program that may have a direct and significant impact on the program's ability to comply with the standards. Examples of substantive changes include those that allow 50% or more of instruction from the accredited program to be offered in a different geographic location or in a format significantly different from what currently is accredited.

Candidacy programs are not eligible to apply for approval of substantive changes as described in this policy during their candidacy term. An applicant program may include distance education, and so forth as part of its application for candidacy, but may not request approval of changes while the program holds candidacy status. Approval for substantive changes next may be sought when the program submits its application for initial accreditation.

To assess the continued quality of education being provided to students in CAA-accredited programs and the programs' continued compliance with the Standards for Accreditation, the CAA must review and approve substantive changes that occur between scheduled review periods. The CAA requires that, prior to the implementation of a proposed substantive change, the program submit written materials to the Council. The timing for submission of reports to the CAA is to ensure that standards are met before students begin the new program.

The following are categories of substantive changes in education delivery that are herein described:

- Distance Education
- Satellite Location
- Contractual Arrangement

The CAA will evaluate whether the proposed change affects the accredited program's ability to maintain compliance with the standards. Site visits will be conducted as necessary in accordance with CAA procedures to ensure that the program component is in compliance with accreditation standards. If multiple sites are developed, a sample will be selected for visitation. An additional fee may be assessed for the conduct of a site visit, depending on the timing and complexity of the visit.

Distance Education[9]

For purposes of accreditation review, a *distance education* (*DE*) program is defined as a formal educational process in which 50% or more of the required graduate academic credit hours, excluding practicum, may be accrued when the learner is separated from the instructor or instructors using one or more of the technologies listed below, and there is support for regular and substantive interaction between the students and the instructor or instructors. The interaction may be synchronous or asynchronous.

Programs must use interactive technologies in their distance education programs, which may include one or more of the following:

1. the Internet;
2. one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices;
3. audioconferencing;
4. other media used in a course in conjunction with any of the technologies listed in numbers 1–3.

The CAA expects that substantive interactions engage students in teaching, learning, and assessment, consistent with the content under discussion, and include at least two of the following:

1. Providing direct instruction;
2. Assessing or providing feedback on a student's coursework;
3. Providing information or responding to questions about the content of a course or competency;

9 Updated definition for distance education went into effect July 1, 2021.

4. Facilitating a group discussion regarding the content of a course or competency; or
5. Other instructional activities approved by the institution's or program's accrediting agency.

The program must ensure that the instructor(s) are providing the opportunity for substantive interactions with the student on a predictable and regular basis commensurate with the length of time and the amount of content in the course [or competency]. Further, the program must ensure that the student's academic engagement and success are being monitored and that the instructor(s) is responsible for promptly and proactively engaging with the student based on the monitoring, or upon request by the student.

If distance education is used as an additional delivery mode or as a separate track of an existing residential program, it must be evaluated as a component of the primary accredited program.

The CAA does not review correspondence education programs, which are defined by ED as primarily initiated by the student and typically self-paced.

Satellite Location

A *satellite location* of an accredited program is a foreign or domestic site that meets all of the following conditions.

1. A portion of the graduate program is offered on a site other than the primary program campus location.
2. Both the faculty and students are located on the site.
3. The primary accredited program has administrative responsibility, including financial, physical, and human resources;
4. 50% or more of the required academic credit hours, excluding practicum, may be completed at the satellite location.
5. The core curriculum offered allows students to meet the same professional degree and graduation requirements as that of the primary campus.
6. The graduate degree is granted by the institution of higher education that offers the degree in the primary accredited program.

Each satellite location must be evaluated as a component of the primary accredited program. Evidence of a memorandum of understanding must be provided at the time of application and maintained between the primary accredited program and the satellite location(s). Depending on its proximity to the primary program campus location, the satellite location may be included in the planned site visit or require the conduct of a separate site visit for accreditation purposes.

An independent program meets all eligibility conditions and meets all Standards for Accreditation without support from other entities. When a program is offered at a satellite location, there remain dependencies on the primary campus program for core functions, that include but are not limited to administrative policy and decision-making for the program, financial support, and degree granting authority.

Note: If a satellite location does not meet the conditions specified above (e.g., independence of the program at the satellite location), it must apply for separate accreditation.

Contractual Arrangement

A *contractual agreement* is between an institution of higher learning and another type of entity, such as a speech/language/hearing center or other business. Accreditation cannot be awarded to a non-degree-granting organization—only to a program within an institution of higher education. It is the program that is accredited, not the university or associated business. Therefore, a contractual arrangement must clearly show how the program to be accredited is under the auspices of a university program.

The contractual arrangement track must be evaluated as a component of the primary accredited program. Depending on its proximity to the university campus, the contracted partner location may be

included in the planned site visit or require the conduct of a separate site visit for accreditation purposes.

Note: These policies and procedures do not apply to contractual agreements for fourth-year externships for students in a clinical doctoral program.

Procedures:

Submission and Approval of Proposed Substantive Changes

Programs that seek approval of a proposed substantive change must:

- agree to not enroll students in the proposed additional modality until the substantive change has been approved by the CAA.
- submit a substantive change plan at least 12 months before the enrollment of students into the proposed program. Plans must be submitted by February 1 or August 1 for consideration by the CAA.
- file a Notice of Intent at least 5 months before planned submission date (i.e., by September 1 for February 1 submission or by March 1 for August 1 submission). These notification deadlines allow sufficient time for the program to be appropriately scheduled in the on-line reporting system and then be provided access to the system to complete questions to support its request for a substantive change. If the program fails to meet the notification deadline, it will be scheduled for the next report fielding.
- provide additional information if requested by the CAA during its review, including hosting a site visit if warranted.
- provide documentation that final approval by all appropriate university and state authorities has been secured. Materials may be submitted for CAA review prior to the final approval by the authorizing body, but the CAA will not approve the plan until all approvals are final.

During the review period, programs must convey current and accurate information about the inclusion of the modality as part of the accreditation status. Once a substantive change has been submitted to the CAA for review, the program must indicate that "approval is pending" of the modality if promoting or advertising the proposed modality, as outlined in the CAA's Public Notice of Accreditation Status policy. Programs must not suggest approval or accreditation of the proposed modality while a review is pending.

The CAA will make a final review of the substantive change materials and related correspondence and consider whether to approve the proposed changes at one of its face-to-face decision-making meetings during the year. Once approved, the program's accreditation status will indicate the additional modality (satellite location, distance education, or contractual arrangement) that is now part of the program's accreditation in the CAA's listing of programs. The Accreditation Office will work with programs to make one-time adjustments for the next reporting cycle, if needed, if substantive change reviews are conducted off-cycle from the program's normal reporting deadline.

Maintenance

Following approval of a new substantive change, the program must include information and data for that aspect of the program as part of its annual reports and in (re)accreditation applications. Programs also will be assessed annual fees for additional modalities of the program, as outlined in the current Accreditation Fee Schedule. Failure to provide required information or accreditation fees may jeopardize the accreditation status of the program.

A program planning to close an approved satellite location or a program offered through distance education or through a contractual arrangement must inform the CAA of this event, consistent with the CAA's policy on Program Closure Notification. The program should submit to the CAA its phase-out plans as indicated in the Program Closure Notification policy, which includes the number and status of the remaining students in the program and how they will be accommodated.

L. Decisions Rendered by Institutional Accreditation and State Agencies

When the CAA awards an accreditation status, it does so based on the expectation that the program will continue to comply with all accreditation standards over the term of accreditation. In accordance with Criteria for Recognition §602.28 [34 CFR 602.28], if the CAA learns that a program's sponsoring institution is the subject of an adverse action or has had its recognition status denied, revoked, or placed on probation by a recognized institutional accrediting agency, the CAA will promptly review the accreditation or candidacy status of that program to determine the appropriate action. Likewise, the CAA will promptly review the accreditation or candidacy status of a program when a state agency has suspended, revoked, or terminated the institution's legal authority to provide postsecondary education within the state.

Procedures:
When an institution receives an adverse accreditation decision from a recognized institutional or national accrediting agency, the program must notify and provide a response to the CAA within 60 days of the institutional accreditor's notification. The program's response must include the rationale provided for the adverse decision by the institutional accrediting agency and information about how this adverse decision potentially will affect the program's ability to maintain its compliance with accreditation standards.

If Accreditation staff learns that a program's sponsoring institution is the subject of an adverse action or is placed on probation or an equivalent status by an institutional accrediting agency during the course of an existing accreditation cycle, Accreditation staff will follow up through current monitoring mechanisms and require the program to respond within 60 days of notification from the CAA.

The CAA's Executive Committee will review this written notice to determine the appropriate follow-up action. In considering whether to grant initial accreditation or candidacy status to a program, the CAA will take into account actions by (a) recognized institutional accrediting agencies that have denied accreditation or preaccreditation to the institution offering the program, placed the institution on public probationary status, or revoked the accreditation or preaccreditation of the institution and (b) a state agency that has suspended, revoked, or terminated the institution's legal authority to provide postsecondary education.

Failure to notify the CAA or respond to a request for information may jeopardize the program's compliance with standards and its accreditation status.

The CAA may not award initial or continued accreditation or candidacy status to a program during any period in which the sponsoring institution is the subject of the following actions of another agency:

1. a pending or final action brought by a state agency to suspend, revoke, withdraw, or terminate the institution's legal authority to provide postsecondary education in the state;
2. a decision by a recognized agency to deny accreditation or preaccreditation;
3. a pending or final action brought by a recognized institutional accrediting agency to suspend, revoke, withdraw, or terminate the institution's accreditation or preaccreditation status; or
4. probation or an equivalent status imposed by a recognized agency.

The CAA may grant initial or continued accreditation or candidacy status to a program whose sponsoring institution is subject to the actions listed above only if it provides to the U.S. Secretary of Education, within 30 days of its action, a thorough and reasonable explanation, consistent with the standards, why the action of the other body does not preclude the CAA's grant of accreditation or candidacy.

The CAA will share with other appropriate recognized accrediting agencies and recognized state approval agencies information about the accreditation or candidacy status of any program subject to this type of review and any adverse actions the CAA has taken against an accredited or candidate program.

M. Enrollment Monitoring and Reporting

The CAA shall monitor the overall growth of all accredited and candidate programs on an annual basis. Programs are required to submit head-count enrollment data through their annual report or comprehensive application in response to Standard 2.1 – Faculty Sufficiency–Overall Program. In accordance with Criteria for Recognition §602.19(c), the CAA will conduct an additional formal review of any program experiencing a year-over-year enrollment increase of 50% or greater. At the discretion of the Council, cumulative growth patterns (e.g., consistent growth of 40% over multiple years) may also trigger a request for an additional formal review to ensure program resources remain sufficient.

XII. INFORMING THE PUBLIC

A. Public Disclosure and Confidentiality

The integrity of the accreditation process often requires that applicant programs submit confidential information. In instances in which an institution or program is inhibited in its ability to disclose such information or to conduct a meaningful self-study, the ability of the accrediting body to make sound judgments is compromised and the effectiveness of the accreditation process is diminished. At the same time, decisions of accrediting bodies are used by various government and private funding agencies, employers, regulatory bodies, and students as one basis for their decisions. In this regard, accrediting bodies serve as protectors of the public interest. The confidentiality needed to preserve the integrity of the accreditation process must be balanced against the needs of external constituencies for basic and essential information. In determining which documents should be subject to public disclosure, the CAA has adopted the principle that the primary consideration should be whether the information in question relates to compliance with established standards. The extent and timing of disclosure may also be important.

Certain information is not available for dissemination for legal reasons, such as the existence of a legal privilege (e.g., attorney-client privilege or physician-patient privilege) and will not be disclosed without the consent of all parties involved. However, the CAA will observe the following practices in disclosing information relative to accreditation:

Information subject to full disclosure by the CAA includes:

- information concerning the scope, eligibility criteria, standards, procedures, and the process by which accreditation decisions are reached;
- lists of programs that hold an accreditation status, including Accredited and Accredited – On Probation, or that hold candidacy status, including the professional area of accreditation, degree program, next review year, and any alternative modes of delivery that are included in the accreditation status;
- accreditation actions, consistent with the CAA's policy on Public Notice of Accreditation Actions, which include programs awarded an accreditation status that have had accreditation withdrawn or been placed on probation or programs that were denied an accreditation status and, therefore, are not accredited;
- a list of anticipated site visits during the current academic year;
- academic and professional qualifications of members of the Council and its administrative personnel.

Information available upon request from the CAA includes:

- annual reports summarizing the activities of the Council.

Information available only from the institution or program or from the CAA with consent of the individual responsible for the program of professional education includes:

- information supplied by the institution or program and/or the CAA in the course of the accrediting process, such as the program's self-study, the site visit report, the program's response to the site visit report, correspondence between the CAA and the institution relating to the accreditation process, or information related to investigated complaints that resulted in a change of accreditation status. (Accredited programs are encouraged to share this information with appropriate state agencies that have a legitimate claim for information beyond that available to the public at large.)

B. Public Notice of Accreditation Actions

The major purpose of accreditation is to identify those graduate education programs that meet and maintain standards for graduate entry-level professional preparation in audiology and speech-language pathology. Maintaining public trust in the professions' accreditation program and processes requires publication of the Council's actions relative to accreditation.

The accreditation status of graduate education programs that provide entry-level professional preparation in audiology and speech-language pathology is contained in a roster maintained by the Accreditation Office. In addition to the name, address, phone number, and accreditation status of each program, the roster includes the degree level for the program, the current period of accreditation, and the year of its next scheduled accreditation review. The roster also indicates if the accreditation status includes a distance education component or satellite campus(es). This list is shared biannually with other recognized agencies that accredit institutions housing accredited or candidate programs in audiology and/or speech-language pathology and is made available to the general public through publication on the CAA website.

The CAA will notify the program of its accreditation action no later than 30 days after it has been determined. For all final accreditation actions, the CAA will provide a notification to the Secretary of the United States Department of Education (ED) through the Database of Accredited Postsecondary Institutions and Programs (DAPIP) and provide written notification to the appropriate state licensing or authorizing agency and the appropriate accrediting agencies at the same time it notifies the program. Accreditation decisions will be made available to the public within 24 hours of notification to the program through posting on the CAA's website. Final accreditation actions include decisions to award or renew accreditation, award candidacy, place a program on probation, and withhold or withdraw accreditation or candidate status. The CAA also will notify the Secretary of the United States Department of Education (ED), the appropriate state licensing or authorizing agency, and the appropriate accrediting agencies at the same time it notifies the program of when it has initiated an adverse action (i.e. deny or withdraw an accreditation status), but the decision is not yet final. The CAA will include in its public notice of final and pending adverse accreditation actions the basis for the decisions, indicating the standards cited and compliance level along with the Accreditation Action Report. For programs placed on probation, the CAA will maintain the Accreditation Action Report in the public notice for the duration of the probationary period.

For programs that the CAA places on probation or has voted to withdraw or deny an accreditation status (initiated or final adverse action), the CAA requires the program to disclose such an action within seven business days of the receipt of the decision to all current and prospective students.

Program decisions for which the CAA took an adverse action (e.g., withheld or withdrew accreditation or candidate status) will be considered final 30 days after the opportunity for appeal has elapsed. These programs also are given the opportunity to provide comments regarding an adverse decision. Final decisions to place a program on probation or withhold or withdraw an accreditation status will be made available to the public within 24 hours of notification to the program through posting the information on the CAA's website.

Within 60 days after a final decision, the CAA will make available to ED, the state licensing or authorizing agency, appropriate accrediting agencies, and the public, a statement summarizing the reasons for withholding or withdrawing an accreditation status of a program and the comments, if any, that the affected program makes regarding the decision. This information will be published on the CAA website or may be requested in writing to the Chair, Council on Academic Accreditation in Audiology and Speech-Language Pathology, American Speech-Language-Hearing Association, 2200 Research Boulevard, #310, Rockville, Maryland 20850 (800-498-2071 or 301-296-5700). The CAA will include in its public notice of final adverse accreditation actions the basis for the decisions, including the standards cited and compliance level along with the Accreditation Action Report.

The CAA also notifies ED, the appropriate state licensing or authorizing agency, the appropriate accrediting agencies, and, upon request, the public if an accredited or candidate program decides (a) to withdraw voluntarily from accreditation or candidacy, within 10 business days of notification from the program that it is withdrawing voluntarily from accreditation or candidacy, or (b) lets its accreditation or candidacy lapse, within 10 business days of the date on which accreditation or candidacy lapses. The

CAA does not publish the names of programs that have their accreditation decisions deferred for clarification or additional information.

C. Public Notice of Accreditation Status

The Accreditation staff respond to inquiries by providing information about a program's current status with the CAA, including the professional area(s) and any alternative delivery modes that are part of its accreditation classification, as follows:

- accredited;
- accredited – with monitoring;
- accredited – on probation;
- accreditation candidate;
- accreditation applicant;
- candidacy applicant.

Information about a program's accreditation status history is available from the Accreditation Office, limited to whether a program was accredited or held candidacy status and the applicable professional area(s), degree level(s), dates and modalities.

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 (degree title and abbreviation) and the full name, address, and phone number of the accrediting agency: *Council on Academic Accreditation in Audiology and Speech-Language Pathology.* Programs that provide inaccurate or misleading information concerning their accreditation status jeopardize their accreditation status.

A program must publish on its website the applicable accreditation statement in its entirety as articulated in this policy[10]. The program must indicate the degree title and its abbreviation in the statement; for example, "The Master of Science (M.S.) education program"; "The Doctor of Audiology (Au.D.) education program", with the appropriate status statement. The program must indicate the delivery modalities included in the accreditation status: residential, distance education, satellite location, or contractual arrangement. Additional references to the program's accreditation status on the website must be accurate, but need not include all components of the accreditation statement. The following language is provided to programs to use in publicizing their CAA accreditation status (e.g., via catalogs, website, recruitment literature) to meet the intent of this policy.

- Programs in audiology and/or speech-language pathology that are **accredited** by the CAA:

  The [master's degree title + abbreviation education program in speech-language pathology {residential, distance education, satellite location, contractual arrangement} and/or the doctoral degree title + abbreviation education program in audiology {residential, distance education, satellite location, contractual arrangement}] at [name of parent institution of higher education] is accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association, 2200 Research Boulevard, #310, Rockville, MD 20850, 800-498-2071 or 301-296-5700.

- Accredited programs in audiology and/or speech-language pathology that are placed on **probation** by the CAA:

  The [master's degree title + abbreviation education program in speech-language pathology {residential, distance education, satellite location, contractual arrangement} and/or the doctoral degree title + abbreviation education program in audiology {residential, distance education, satellite location, contractual arrangement}] at [name of parent institution of higher education] has been placed on probation by the Council on Academic Accreditation in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association, 2200 Research Boulevard, #310, Rockville, MD 20850, 800-498-2071 or 301-296-5700. A program

[10] This requirement was implemented January 1, 2017.

on probation is not currently in full compliance with the accreditation standards. Programs on probation remain accredited but must demonstrate compliance with the standards within one year.

- Programs in audiology and/or speech-language pathology that are granted **candidacy** status by CAA:

  The [master's degree title + abbreviation education program in speech-language pathology {residential, distance education, satellite location, contractual arrangement} and/or the doctoral degree title + abbreviation education program in audiology {residential, distance education, satellite location, contractual arrangement}] at [name of parent institution of higher education] is a Candidate for Accreditation by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) of the American Speech-Language-Hearing Association, 2200 Research Boulevard, #310, Rockville, MD 20850, 800-498-2071 or 301-296-5700. Candidacy is a "preaccreditation" status with the CAA, awarded to developing or emerging programs for a maximum period of 5 years.

Programs that have submitted an application for candidacy are required to use the following language on their website or other promotional materials to ensure clear and accurate representation to the public and potential students:

> The [master's degree title + abbreviation education program in speech-language pathology {residential, distance education, satellite location, contractual arrangement} and/or the doctoral degree title + abbreviation education program in audiology {residential, distance education, satellite location, contractual arrangement}] at [name of parent institution of higher education] is an Applicant for Candidacy by the Council on Academic Accreditation in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association, 2200 Research Boulevard, #310, Rockville, MD 20850, 800-498-2071 or 301-296-5700.

Programs that have submitted an application for initial accreditation that already hold candidacy status must continue to use the candidacy status statement above until such time that the CAA acts on the program's accreditation application. Programs that do not hold candidacy status at the time of application are required to use the following language on their website or other promotional materials to ensure clear and accurate representation to the public and potential students:

> The [master's degree title + abbreviation education program in speech-language pathology {residential, distance education, satellite location, contractual arrangement} and/or the doctoral degree title + abbreviation education program in audiology {residential, distance education, satellite location, contractual arrangement}] at [name of parent institution of higher education] is an Applicant for Accreditation by the Council on Academic Accreditation in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association, 2200 Research Boulevard, #310, Rockville, MD 20850, 800-498-2071 or 301-296-5700.

Every statement regarding a program's accreditation status provided in any venue that provides information to the public regarding the program's accreditation status must be accurate and current. Programs must have a procedure for informing prospective and current students and the public of their accreditation status, including probation and candidacy status and any proposed modality. Programs that provide inaccurate or misleading information concerning their accreditation status, including candidacy, violate the Standards for Accreditation of Graduate Education Programs in Speech-Language Pathology and Audiology [PDF].

For programs that have filed a substantive change plan for a new modality for approval by the CAA, programs must convey current and accurate information about the inclusion of the modality as part of the accreditation status during the review period. Once a substantive change has been submitted to the CAA for review, the program must indicate that "approval is pending" of the modality if the proposed modality is included on the website, in promotions, or in advertising. Programs must not suggest approval or accreditation of the proposed modality while a review is pending. Once approved, the

program must reference all approved modalities, i.e., residential, distance education, satellite location, or contractual arrangement, in its accreditation status statement as noted above.

Programs on probation must publicize their probationary status where there is any mention of their accreditation status. Programs placed on probation must inform their students of such action and its implications for the students' future eligibility to obtain professional credentials, including the ASHA Certificate of Clinical Competence, state licensure, or teacher certification as appropriate. The CAA requires that the program provide documentation to the CAA within 30 days of receipt of the probation letter that information regarding its probationary status has been provided to students and to the public in a timely manner. Further, the notice must be published on the program's website and must include a link to the CAA's decision webpage that includes the Accreditation Action Report along with the CAA's contact information as indicated above. The program must maintain the link to the CAA's decision webpage for the duration of the probationary period. If a program chooses to disclose the rationale for the CAA's accreditation decision, it must do so in its entirety. Failure to provide accurate information about the program may jeopardize accreditation.

If an institution or program misrepresents or distorts any action by the CAA with respect to any aspect of the accreditation process, its accreditation status, the contents of the site visit report, or final CAA accreditation actions or decisions, the CAA will inform the chief executive officer of the institution and the program director that corrective action must be taken. If corrective action is not taken, the CAA will release a public statement that provides correct information and may invoke other sanctions as may be appropriate.

D. Use of CAA Logo by Programs

The CAA logo is the exclusive property of the CAA. However, the CAA allows accredited and candidate programs and their sponsoring institutions to use the logo in publications and displays—electronic or print—to highlight its current accreditation status. The use of the logo is governed by the following guidelines.

- The logo must be used in its entirety and not modified, except that it may be reduced or enlarged to suit the use, but the scale of elements should be retained.
- It may be reproduced in black and white.
- The logo may NOT be used by programs that have applied for, but not yet received, an accreditation status.
- If programs that are not accredited by or in candidacy with the CAA are included in the publication and/or display, then accompanying text must be included that clearly specifies which programs hold an accreditation status with the CAA. For example, the logo does not apply to undergraduate or non-entry-level doctoral programs in communication sciences and disorders.
- Use of the logo shall be subject at all times to revocation and withdrawal by the CAA when, in its sole judgment, the CAA determines that continued use of the logo would not serve the best interests of the CAA or the public.

Downloadable logo files are available on the CAA website, or programs may request an electronic copy of the appropriate logo by contacting accreditation@asha.org.

E. Public Comment

The CAA is a nationally recognized accrediting agency. As part of the CAA's recognition by the U.S. Department of Education (ED), the agency is required to develop a method for allowing public input about the accreditation process and about graduate education programs prior to final decision by the CAA. Accordingly, individuals who wish to provide input about a program seeking candidacy (preaccreditation) or initial CAA accreditation or about a CAA-accredited program seeking reaccreditation may do so in two ways: (1) submitting written comments prior to the accreditation site visit in accordance with the procedures specified below or (2) attending and providing comments at a public meeting during the program's scheduled site visit.

All comments provided must**:**

- relate to a program's compliance with the published Standards for Accreditation of Graduate Education Programs in Audiology and Speech-Language Pathology (Standards) in effect at the time comments are submitted, and
- identify the specific program seeking candidacy, initial accreditation, or reaccreditation with the CAA.

Comments not meeting these requirements will not be considered, and the individual or group commenting will be so notified.

Comments Submitted Prior to the Site Visit

The CAA publishes on its website the list of programs that have submitted applications for candidacy, initial accreditation, and reaccreditation during that calendar year for which the CAA is seeking public comment as part of its current accreditation review of the published programs. The listing will include the dates of the scheduled site visit for each program.

Individuals who wish to submit written testimony about any of the programs scheduled for a site visit must adhere to the following procedures.

- All comments about education programs are due in the Accreditation Office no later than 3 business days before the first day of the scheduled site visit. Comments received after this time will not be forwarded to the site visit team for consideration during the accreditation review.
- All written testimony—including comments faxed or submitted as e-mail attachments--must include the commenter's name, address and telephone contact information and the commenter's relationship to the program in order for Accreditation staff to verify the source of the testimony. All comments must be signed.

Comments should be submitted to:

Accreditation Public Comment
Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA)
American Speech-Language-Hearing Association
2200 Research Boulevard, #310
Rockville, MD 20850
accreditation@asha.org
Fax: 301-296-8570

Procedures for Handling Comments Received in Advance of the Site Visit:

- The Accreditation staff will acknowledge receipt of the individual's comments and confirm whether they were received within the approved timelines.
- The Accreditation staff will verify the source of the testimony to ensure that the commenter's name, address, telephone contact information, and the commenter's relationship to the program have been provided.
- If the conditions above are met, the Accreditation staff will forward the comments (including those submitted via fax or as an email attachment) to the chair of the site visit team at least 3 business days prior to the first day of the scheduled site visit.
- The site visit team will consider the written comments as they review the program's compliance with the Standards and will address them in the site visit report, if appropriate, as they relate to the appropriate Standards for Accreditation.

Comments Provided During the Site Visit

Both written and oral comments will be considered during any portion of the site visit, provided they meet the criteria specified above.

Public Meeting:

Programs scheduled for review also are responsible for soliciting public comment from students and consumers by holding a public meeting during the scheduled site visit. The program must widely publish an announcement regarding this meeting no later than 15 days prior to the site visit. The announcement should indicate that a copy of the Standards for Accreditation and/or the CAA's Policy on Public Comment may be obtained by contacting the Accreditation Office at ASHA, 2200 Research Boulevard, #310, Rockville, Maryland 20850, calling ASHA's Action Center at 1-800-498-2071, or accessing the documents online at https://caa.asha.org/.

Other Comments During the Site Visit:

If written comments are provided to a site visitor during the site visit, the commenter must include his/her name, address and telephone contact information and the commenter's relationship to the program in order to verify the source of the testimony, and must have signed the comments. As with all information obtained during the site visit, the site visit team members will consider the written comments as it relates to the accreditation standards, and will not reveal the identity of the person submitting the comments in the written site visit report or append the written comments to that report.

PLEASE NOTE: In addition to these opportunities for providing public comment regarding a program's accreditation status, the CAA has separate procedures for filing a formal complaint about a CAA-accredited program or one seeking a CAA accreditation status. Individuals who wish to file a formal complaint should contact the Accreditation Office to obtain a copy of the complaint procedures, or refer to the Procedures for Complaints Against Graduate Education Programs in this Handbook.

F. CAA Reporting and Communication with the Department of Education[11]

In accordance with Criteria for Recognition §602.27 [34 CFR 602.27], the CAA will submit the following information to the Department of Education:

- A list of accredited and preaccredited [Candidate] programs;
- An annual data summary of major accrediting activities during the previous year, if requested by the Secretary to carry out the Secretary's responsibilities related to this part;
- Any proposed change in policies, procedures, or standards that might alter the scope of recognition or compliance with the criteria for recognition;
- The name of any program it accredits that the CAA has reason to believe is failing to meet its title IV, HEA program responsibilities or is engaged in fraud or abuse, along with reasons for concern about the program
- At the Secretary's request, information that may bear upon an accredited or candidate program's sponsoring institution's compliance with its title IV, HEA program responsibilities, including the eligibility of the sponsoring institution or program to participate in title IV, HEA programs.

The CAA will conduct a case-by-case review of the circumstances surrounding information requested by the Department and consider the need for confidentiality. If the Department determines a compelling need for confidentiality, the CAA must consider communications confidential upon specific request of the Department.

11 Initial implementation of the CAA Reporting and Communication with the Department of Education policy effective September 1, 2025

XIII. COMPLAINTS

A. Complaints Against Graduate Education Programs

A complaint about any accredited program or program in candidacy status may be submitted by any individual(s).

Criteria for Complaints

Complaints about programs must meet all of the following criteria:

a. be against an accredited graduate education program or program in candidacy status in audiology or speech-language pathology;
b. relate to the Standards for Accreditation of Entry-Level Graduate Education Programs in Audiology and Speech-Language Pathology [PDF] in effect at the time that the conduct for the complaint occurred[12], including the relationship of the complaint to the accreditation standards;
c. be clearly described, including the specific nature of the charge and the data to support the charge;
d. be within the timelines specified below:
   - if the complaint is being filed by a graduate or former student, or a former faculty or staff member, the complaint must be filed within one year of separation* from the program, even if the conduct occurred more than 4 years prior to the date of filing the complaint;
   - if the complaint is being filed by a current student or faculty member, the complaint must be filed as soon as possible, but no longer than 4 years after the date the conduct occurred;
   - if the complaint is being filed by other complainants, the conduct must have occurred at least in part within 4 years prior to the date the complaint is filed.

**Note: For graduates, former students, or former faculty or staff filing a complaint, the date of separation should be the date on which the individual was no longer considered a student in or employee of the graduate program (i.e., graduation, resignation, official notice of withdrawal or termination), and after any institutional grievance or other review processes have been concluded.*

Complaints also must meet the following submission requirements:

a. include verification, if the complaint is from a student or faculty/instructional staff member, that the complainant exhausted all pertinent institutional grievance and review mechanisms before submitting a complaint to the CAA;
b. include the complainant's name, address, and telephone contact information and the complainant's relationship to the program in order for the Accreditation Office staff to verify the source of the information;
c. be submitted using the CAA's complaint form [DOC]
d. sign and submit a waiver of confidentiality with the complaint; Because it may be necessary to identify the complainant to the affected program or to other potential sources of relevant information, the complainant is required to sign a waiver of confidentiality as part of the complaint submission. Failure to provide a signed waiver of confidentiality will result in dismissal of the complaint;
e. must be complete at the time of submission, including the complaint, waiver, and all appendices; If a complainant submits an amended complaint, including providing additional appendices, it will void the original submission and initiate a new process and time line;
f. append documented evidence in support of the complaint, including as appropriate relevant policies/procedures, relevant correspondence (including email), timelines of referenced events, etc. Complainants should not enclose entire documents; only the specific pages should be included that present content germane to the complaint. Page numbers to these appendices should be referenced in the complaint. Materials may be returned to the complainant if not properly organized to support the complaint.
g. must submit all complaints and supporting evidence in English, consistent with the business

12 Copies of past Standards for Accreditation may be requested by contacting the Accreditation Office.

practices of the CAA;

h. be signed and submitted in writing via U.S. mail, overnight courier, hand delivery, or via e-mail to:

Chair, Council on Academic Accreditation in Audiology and Speech-Language Pathology
American Speech-Language-Hearing Association
2200 Research Boulevard, #310
Rockville, MD 20850

Or *accreditation@asha.org.*

The complainant's burden of proof is a preponderance, or greater weight, of the evidence. These procedures do not prevent the CAA from considering a complaint against an accredited or candidate program if the program is involved in litigation or other actions by a third party.

Procedures:

Determination of Jurisdiction

Within 15 days of receipt of the complaint, Accreditation Office staff will acknowledge receipt of the complaint and will forward a copy of the complaint, from which any information that would reveal the complainant's identity has been redacted, to the Executive Committee of the CAA. The original letter of complaint will be placed in an Accreditation Office file separate from the program's accreditation file.

The Executive Committee of the CAA will then consider and vote to determine whether the complaint meets the above criteria. An affirmative vote by two thirds of the voting members of the Executive Committee, exclusive of the Chair, is required to proceed with an investigation of a complaint.

If the Executive Committee of the CAA makes the determination that the complaint does not meet the above-listed criteria, the complainant will be informed within 30 days of the letter transmitting the complaint to the Executive Committee that the CAA will not investigate the complaint.

Investigation of Complaint

If the Executive Committee of the CAA determines that the complaint satisfies the above-listed criteria, the CAA will investigate the complaint. The CAA will base its review on the Standards for Accreditation in effect as of the date that the conduct which serves as the basis for the complaint occurred.

a. The Chair of the CAA will inform the complainant within 30 days of the letter transmitting the complaint to the Executive Committee that the Council will proceed with an investigation. The complainant will be given the opportunity to withdraw the complaint within 30 days of being notified. If the complainant does not wish to pursue the matter and withdraws the complaint, the investigation will be concluded. If the complainant does not wish to withdraw the complaint, the complainant will be advised to keep the initiation of an investigation confidential.

b. Within 15 days of the complainant confirming their wish to proceed with investigation or after the 30-day period for withdrawing the complaint has elapsed, the Chair of the CAA will notify the program director and the institution's president or president's designee by certified return receipt mail that a complaint has been registered against the program. The notification will include a copy of the complaint from which the name of the complainant has been redacted. The CAA will require the program to respond within 10 days of the letter forwarding the complaint as to whether or not it intends to provide complete responsive information and supporting documentation considered relevant to the complaint. The CAA may draw reasonable inferences from a program's failure to provide a response to the complaint. The program must respond to all of the specific elements identified in the complaint and describe how the program addressed the concerns with the complainant. The formal complaint response will be due 45 days from the date of the notification letter. The institution's president or president's designee may contribute to the response.

The program may request an extension to file its response if extenuating circumstances exist by making a formal request in writing to the Accreditation Office no later than the original due date. The extension request must include the rationale for the request, a detailed description of the progress made to develop its response, and an estimate of the additional time needed that may not extend beyond 45 additional days from the original due date. The CAA's Executive Committee will review the information in making its decision whether to grant an extension.

c. Within 15 days of receipt of the program's response to the complaint, the Chair of the CAA will forward the complaint and the program's response to the complaint to the CAA. The identity of the complainant will not be revealed to the members of the CAA or to recipients of requests for information, unless a majority of CAA members consider such disclosure necessary for the proper investigation of the complaint.

   If the majority of Council members conclude that individuals other than the complainant, the program director, and the institution's president or president's designee may have information relevant to the complaint, the Chair of the CAA will request such information. All conflict of interest policies and voting protocols regarding the CAA members' participation and voting on complaints also will apply to these complaint procedures.

d. After reviewing the complaint, the program's response to the complaint and other information requested by the CAA Chair as referenced above, the CAA will determine its course of action within 30 days. Such actions include, but are not limited to, the following:

   - dismiss the complaint,
   - recommend changes in the program to be implemented within a specified period of time (except for those areas that are solely within the purview of the institution),
   - continue the investigation through a focused site visit to the program,
   - place the program on probation,
   - withhold/withdraw accreditation.

e. If the CAA determines that a site visit is necessary, the program director and the institution's president or president's designee will be notified, and a date for the site visit will be scheduled expeditiously. The program is responsible for payment or reimbursement of reasonable expenses associated with the site visit. The site visit team is selected from the current roster of CAA site visitors and includes the required composition of all typical site visit teams. During the site visit, consideration is given only to those Standards with which the program is allegedly not in compliance.

   The site visit team will submit a written report to the CAA no later than 30 days following the site visit. As with all other site visits, only the observations of the site visitors will be reported; site visitors will not make accreditation recommendations. The CAA will forward the report to the program director and the institution's president or president's designee within 15 days of receiving the report from the site visit team. The program or institution shall be given 30 days from the date on which the report is postmarked to the program director and the president or president's designee to provide a written response to the Chair of the CAA. The purpose of the response is to comment on the accuracy of the site visit report and respond to it.

f. The CAA will review the complaint, the program's response to the complaint, and other information requested by the CAA Chair as referenced above, including the site visit report and the program's response to the report, and will take one of the following actions within 21 days of receipt of the program's response:

   - dismiss the complaint,
   - recommend modifications of the program to be implemented within a specified period of time (except for those areas that are solely within the purview of the institution),
   - place the program on probation,
   - withhold/withdraw accreditation.

g. If the CAA withholds or withdraws accreditation, the program director and the institution's president or president's designee will be informed within 15 days of the CAA decision that accreditation has been withheld or withdrawn. That notification will also include a statement describing the justification for the decision and shall inform the program of its option to request Further Consideration. *Further Consideration* is the mechanism whereby the program can present documentary evidence of compliance with the appropriate Standards and ask the CAA to reevaluate its decision to withhold/withdraw accreditation.

h. If the program does not exercise its Further Consideration option in a timely manner, the CAA's decision to withhold or withdraw accreditation will be final, and no further appeal may be taken. Once the decision is final, the program would no longer hold an accreditation status, including applicant, effective at the end of the academic term following the date of notification. If the program seeking initial accreditation does not hold an accreditation status, e.g., candidacy, the effective date of the decision is the date of the notification letter. If accreditation is withheld or withdrawn, the Chair of the CAA will notify the Secretary of the U.S. Department of Education at the same time that it notifies the program of the decision, consistent with the CAA's Public Notice of Accreditation Actions policy.

i. If the program chooses to request Further Consideration, the CAA must receive the request within 30 days from the date of the notification letter. With the request for Further Consideration, the program must submit additional written documentation to justify why accreditation should not be withheld or withdrawn. No hearing shall occur in connection with Further Consideration requests. The CAA will evaluate the request for Further Consideration and take one of the following actions within 30 days:

- recommend modifications of the program to be implemented within a specified period of time (except for those areas that are solely within the purview of the institution),
- place the program on probation,
- withhold/withdraw accreditation.

j. Within 15 days of its decision, the CAA will notify the program and the complainant of its decision.

k. If the CAA decision after Further Consideration is to withhold or withdraw accreditation, the program may appeal the decision in accord with the appeal procedures described herein.

Summary of Timelines

The following summarizes the time lines in the complaint process, beginning from the date a complaint is received.

- The complaint is acknowledged within 15 days of receipt and forwarded to the CAA Executive Committee.
- If the Executive Committee determines that the complaint does not meet criteria for complaints, the complainant is informed within 30 days that the CAA will not investigate.
- If the Executive Committee determines that the complaint meets criteria, the complainant is informed within 30 days of the determination that the CAA will proceed with investigation.
- The complainant is given 30 days to withdraw the complaint.
- Within 15 days of the complainant confirming their wish to proceed with investigation or after the 30-day period for withdrawing the complaint has elapsed, the complaint is sent to the program for a response, which must be submitted within 45 days. The program must indicate within 10 days of notification of the complaint whether it plans to file a response.
- Within 15 days of receipt of the program's response, the CAA Chair forwards the complaint and program response to the CAA for review.
- Within 30 days, the CAA determines a course of action.
- If the CAA determines that a site visit is necessary, the visit is scheduled and the site visit team submits a report to the CAA within 30 days of visit.
- Within 15 days, the site visit report is forwarded to the program for its response within 30 days.

- The CAA takes action within 21 days of the program's response.
- If the CAA withholds/withdraws accreditation, the program is notified within 15 days of the CAA's decision.
- The program has 30 days to request Further Consideration.
- If the program does not request Further Consideration, the decision is final and the CAA notifies the Secretary of U.S. Department of Education (ED); if program timely requests Further Consideration, the CAA takes action within 30 days.
- The CAA informs the program and the complainant within 15 days of the decision following Further Consideration.

B. Complaints Against the Council on Academic Accreditation

Complaints against the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) may be filed by any individual(s).

Criteria for Complaints

Complaints against the CAA must meet the following criteria:

- relate to the content or the application of the Standards for Accreditation of Entry-Level Graduate Education Programs in Audiology and Speech-Language Pathology [PDF], or the policies, procedures, and operations that were in use by the CAA at the time the conduct being complained about occurred;
- be clearly described, including the specific nature of the charge and the documentation to support the charge;
- must be filed within 1 year of the date the conduct being complained about occurred

Complaints also must meet the following submission requirements:

- include the complainant's name, address, and telephone contact information in order for the Accreditation Office staff to verify the source of the information;
- must be complete at the time of submission, including the complaint and all appendices;
- append documented evidence in support of the complaint, including as appropriate relevant policies/procedures, relevant correspondence (including email), timelines of referenced events, etc. Complainants should not enclose entire documents; only the specific pages should be included that present content germane to the complaint. Page numbers to these appendices should be referenced in the complaint. Materials may be returned to the complainant if not properly organized to support the complaint.
- submit all complaints and supporting evidence in English, consistent with the business practices of the CAA;
- be signed and submitted in writing via U.S. mail, overnight courier, hand delivery, or via e-mail to the following address:

Vice Presidents for Academic Affairs
American Speech-Language-Hearing Association
2200 Research Boulevard, #310
Rockville, MD 20850

Or governance@asha.org.

The complainant's burden of proof is a preponderance or greater weight of the evidence.

Procedures:

Determination of Jurisdiction

Within 15 calendar days of receipt of the complaint, Accreditation Office staff will acknowledge receipt of the complaint and will forward a copy of the complaint to the Vice Presidents. The original letter of complaint will be filed in the Accreditation Office. If either of the Vice Presidents for Academic Affairs

have a conflict of interest with the complainant, only one Vice President will implement the procedures in accordance what CAA's conflict of interest policy.

The Vice Presidents will determine whether the complaint meets the above criteria. If the Vice Presidents make the determination that the complaint does not meet the above-listed criteria, the complainant will be informed within 30 calendar days of transmitting the complaint to the Vice Presidents that the complaint will not be investigated.

Investigation of Complaint

If the Vice Presidents determine that the complaint meets the above-listed criteria, the complaint will be investigated as specified below. The investigation will be based on the policies and procedures in effect at the time of that the alleged conduct occurred, which serves as the basis for the complaint.

a. The Vice Presidents inform the complainant within 30 calendar days of the letter transmitting the complaint to the Vice Presidents that the investigation will proceed. Because it may be necessary to identify the complainant to the CAA, the Review Committee, or to other sources of relevant information, the complainant will be required to sign a waiver of confidentiality within 30 calendar days of the letter indicating that the complaint will be investigated. The complainant will be given the opportunity to withdraw the complaint during that time. If the complainant does not wish to pursue the matter or does not file the waiver within 30 calendar days, the process is concluded. If the complainant wishes to proceed, the complainant is asked to keep the initiation of an investigation confidential, pending the investigation and processing of the complaint.

   Within 15 calendar days of receipt of the waiver, or after the 30-day period for withdrawing the complaint has elapsed if the waiver was received with the complaint, the Vice Presidents will notify the CAA that a complaint has been registered against the council and that an investigation is in process. The notification will include a copy of the complaint from which the name of the complainant has been redacted. The CAA may request an unredacted copy within 15 calendar days of receipt if needed for its response. The CAA will be asked to provide complete responsive information and supporting documentation that it considers relevant to the complaint within 45 calendar days of the date of the notification letter.

   The CAA may request an extension to file its response if extenuating circumstances exist, but the time line will not be extended beyond 45 additional days from the original due date. The extension request must be submitted no later than the original due date and include the rationale for additional time requested, which will be considered by the Vice Presidents in making its decision whether to grant an extension.

b. The Vice Presidents shall appoint a Review Committee to review the complaint against the council within 30 calendar days of receipt of the complainant's waiver of confidentiality, or after 30 calendar days to withdraw the complaint has elapsed.

   The Review Committee shall consist of three members. To ensure that the committee is thoroughly familiar with accreditation standards and council policies and procedures, the Committee shall consist of two past members of the CAA who have served during the preceding 5 years, none of whom shall have any relationship to or conflict of interest with, the complainant. The third committee member shall be a public member who has served in that capacity on an ASHA board or committee, e.g. CAA, Council for Clinical Certification, Board of Ethics, within the past 5 years. Accreditation staff shall maintain a list of individuals who are qualified by prior service on the CAA to serve on ad hoc review committees. The list shall be updated on an annual basis and made available to the ASHA Vice Presidents for Academic Affairs as needed. All past CAA members of ad hoc review committees shall be selected from that list. Accreditation staff will identify public members from other ASHA boards and committees, to provide to the Vice Presidents if needed in assembling a review committee.

The Vice Presidents will contact each selected person to determine his/her willingness to serve on the Review Committee and shall designate one of them as chair. The Vice Presidents will provide to the Review Committee members materials to support the review of the complaint (i.e., CAA's Accreditation Handbook, including the conflict of interest policy, review process guidelines and materials, recommendation options, etc. Review Committee members are expected to sign a confidentiality agreement.

c. Within 15 calendar days of receipt of the CAA's response to the complaint, the Vice Presidents will forward the complaint and the CAA response to the complaint to the Review Committee.

d. The function of the Review Committee is to determine whether the CAA followed its policies, procedures, and operations as indicated in the *Accreditation Handbook*, including the content and consistent application of its Standards, relevant to the complaint based on its review of the complaint materials and CAA's response to the complaint. Within 60 calendar days from the date material related to the complaint is mailed to the Review Committee and after reviewing all relevant information, the Review Committee shall report to the Vice Presidents its recommendations. Such recommendations may include, but are not limited to:

   - dismissal of the complaint,
   - recommended changes in council policies and procedures to be implemented within a specified time period;
   - other recommended steps.

e. Within 15 calendar days receipt of the Review Committee's report, the ASHA Vice Presidents will disseminate the Review Committee's recommendations/report to the CAA and to the complainant.

f. A full discussion of the recommendations of the Review Committee shall be placed on the agenda for the next regularly scheduled meeting of the CAA for consideration of appropriate council action. In the event that more immediate action is required, the CAA may have a conference call for discussion and consideration of appropriate council action. The CAA shall make a final determination that is consistent with the Review Committee's recommendations and that is in accordance with the requirements for the CAA's external recognition. The CAA will inform the Vice Presidents of its decision/action plan within 15 calendar days of its final decision.

g. The Vice Presidents will notify the complainant of council action on the complaint within 15 calendar days of the council's decision in the matter. Decisions of the council relative to complaints may not be appealed.

Summary of Timelines

- The complaint is acknowledged and forwarded to the Vice Presidents within 15 calendar days of receipt.
- If the Vice Presidents determine that the complaint does not meet the criteria for complaints, the complainant is informed within 30 calendar days that the complaint will not be investigated.
- If the Vice Presidents determine that the complaint meets the criteria, the complainant is informed within 30 calendar days that the investigation will proceed.
- The complainant is given 30 calendar days to sign a waiver of confidentiality or withdraw the complaint.
- Within 15 calendar days of receipt of the waiver of confidentiality or after the 30-day period to withdraw the complaint has elapsed if the waiver is received with the complaint, the complaint is sent to the CAA for a response within 45 calendar days.
- Within 30 calendar days of receipt of the waiver of confidentiality, the Vice Presidents appoint

a Review Committee to review the complaint.
- Within 15 calendar days of receipt of the complaint, the CAA may request an unredacted copy of the complaint if needed for its response.
- Within 15 calendar days of receipt of the CAA's response, the Vice Presidents forward the complaint and the CAA response to the Review Committee.
- Within 60 calendar days, the Review Committee determines the recommended course of action and forwards its recommendations to the Vice Presidents.
- Within 15 calendar days of receipt of the report, the Vice Presidents disseminate the Review Committee's recommendations to the CAA and to the complainant.
- The CAA discusses the Review Committee recommendations at its next regularly scheduled meeting (or by conference call if immediate action is required) and takes appropriate action. The CAA informs the Vice Presidents of the action within 15 calendar days of its final decision.
- The Vice Presidents notify the complainant of the CAA action within 15 calendar days of the CAA's decision.

C. Investigation of Adverse Information

The CAA reserves the right to review information received outside of the complaint and public comment processes and to initiate an investigation related to a program's compliance with the Standards for Accreditation and CAA's policies and procedures. The CAA may only consider information that relates to a program accredited by or in candidacy with the CAA. Information may be considered adverse if it indicates possible non-compliance with CAA Standards for Accreditation and CAA's policies and procedures.

The CAA may identify compliance concerns about an accredited or candidate program between periods of scheduled reviews as a result of information received directly from, as an example, one or more of the entities listed below. The CAA would determine the credibility of the information following the initial review for jurisdiction by the CAA.

- institutional and/or specialized accrediting agencies
- state regulatory bodies
- licensure and professional certification boards
- U.S. Department of Education
- public media sources
- other sources

Procedures:

Determination of Jurisdiction

Within 15 days of receipt of the information, Accreditation Office staff will acknowledge receipt of the information if sent directly to the CAA, with the exception of public media sources, and will provide this information to the Executive Committee of the CAA. Accreditation staff will verify that the information relates to an accredited or candidate program.

Within 15 days of receiving the information from accreditation staff, the Executive Committee of the CAA will consider whether 1) the information is credible and actionable, and 2) relates to the program's compliance with the Standards for Accreditation or required policies and procedures. The Executive Committee then will vote to determine if the information warrants further investigation. An affirmative vote by two thirds of the voting members of the Executive Committee, exclusive of the Chair, is required to proceed with an investigation.

If the Executive Committee of the CAA makes the determination that the adverse information does not address any standards, policies or procedures that are under the CAA's purview, the CAA will not investigate. The CAA will not advise the program about the source or jurisdiction activities if no investigation is warranted.

The Accreditation Office will advise the source, if the information was submitted directly, of its decision whether to proceed with an investigation within 15 days from the Executive Committee's decision. The Executive Committee also may provide clarification on the role and function of the CAA if appropriate in the communications to the source.

Investigation of Adverse Information

If the Executive Committee of the CAA determines that an investigation should proceed, the CAA will base its review on the Standards for Accreditation, policies, and procedures in effect as of the date that the adverse information is received by CAA.

a. Within 15 days of the Executive Committee's decision to investigate, the Chair of the CAA will notify the program director and the institution's president or president's designee by certified return receipt mail/read receipt email that adverse information has been received against the program. The notification will include a copy of the adverse information and the source, and advisement from the Executive Committee as to the standards, policies, or procedures that must be addressed by the program.

b. The CAA will require the program to respond within 10 days of the letter forwarding the adverse information as to whether or not it intends to provide complete responsive information and supporting documentation considered relevant to address the adverse information. The CAA may draw reasonable inferences from a program's failure to provide a response to the adverse information. The program must respond to all of the specific elements identified in the adverse information and describe how the program addressed the concerns as they related to CAA's standards, policies or procedures. The formal response will be due 45 days from the date of the notification letter. The institution's president or president's designee may contribute to the response.

c. The program may request an extension to file its response if extenuating circumstances exist by making a formal request in writing to the Accreditation Office no later than the original due date. The extension request must include the rationale for the request, a detailed description of the progress made to develop its response, and an estimate of the additional time needed that may not extend beyond 45 additional days from the original due date. The CAA's Executive Committee will review the information in making its decision whether to grant an extension.

d. Within 15 days of receipt of the program's response to the adverse information, Accreditation Office staff will forward the adverse information, the CAA's letter outlining what the program was to address, and the program's response to the Executive Committee.

e. After reviewing the adverse information, the program's response to the adverse information and other information requested by the CAA, the Executive Committee will determine its course of action within 30 days. Such actions include, but are not limited to, one or more of the following:

    - dismiss the investigation, or
    - forward the investigation information to the full CAA for action.

f. The CAA will consider the information, the program's response, and other information requested by the CAA and will determine its course of action within 30 days. Such actions include, but are not limited to, one or more of the following:

    - dismiss the investigation,
    - recommend changes in the program to be implemented within a specified period of time (except for those areas that are solely within the purview of the institution),
    - continue the investigation through a focused site visit to the program,
    - place the program on probation, if applicable,
    - withhold/withdraw accreditation.

g. If the CAA determines that a focused site visit is necessary, the program director and the institution's president or president's designee will be notified, and a date for the focused site visit will be scheduled expeditiously. The program is responsible for payment or reimbursement of reasonable expenses associated with the site visit. The site visit team is selected from the current roster of CAA site visitors and includes the required composition of all typical site visit teams. During the site visit, consideration is given only to those standards, policies, or procedures with which the program is allegedly not in compliance.

   The site visit team will submit a written report to the CAA no later than 30 days following the site visit. As with all other site visits, only the observations of the site visitors will be reported; site visitors will not make accreditation recommendations. The CAA will forward the report to the program director and the institution's president or president's designee within 15 days of receiving the report from the site visit team. The program or institution shall be given 30 days from the date on which the report is postmarked to the program director and the president or president's designee to provide a written response to the Chair of the CAA. The purpose of the response is to comment on the accuracy of the site visit report and respond to it.

h. The CAA will review the adverse information, the program's response to the adverse information, and other information requested by the CAA Chair, including the focused site visit report and the program's response to the report, and will take one or more of the following actions within 15 days of receipt of the program's response:

   - dismiss the investigation,
   - recommend modifications of the program to be implemented within a specified period of time (except for those areas that are solely within the purview of the institution),
   - place the program on probation, if applicable
   - withhold/withdraw accreditation status.

   If the CAA withholds or withdraws accreditation status, the program director and the institution's president or president's designee will be informed within 30 days of the CAA decision that accreditation status has been withheld or withdrawn. That notification will also include a statement describing the justification for the decision and shall inform the program of its option to request Further Consideration. Further Consideration is the mechanism whereby the program can present documentary evidence of compliance with the appropriate Standards and ask the CAA to reevaluate its decision to withhold/withdraw accreditation status. See Chapter XVIII Further Consideration and Appeals Procedures.

PART 4 – STANDARDS

XIV. STANDARDS DEVELOPMENT AND IMPLEMENTATION

A. Purpose and Structure of Accreditation Standards

Standards are requirements that must be met by all applicant programs for accreditation. A set of principles provide continued guidance to the CAA about the purpose and general nature of the accreditation program and the standards. The purposes of accreditation standards are to:

- promote excellence in preparing students to enter the professions of audiology and speech-language pathology,
- protect and inform the public by recognizing programs that meet or exceed accreditation standards,
- stimulate improvement of programs' educational activities by means of self-study and evaluation.

The CAA's Standards for Accreditation [PDF] are limited to graduate education programs that provide preparation for entry into professional practice in audiology and/or speech-language pathology. Standards should:

- reflect a common educational foundation as well as the knowledge base specific to audiology and/or speech-language pathology;
- be primarily qualitative in nature and emphasize both process and outcomes;
- be flexible—encouraging experimentation, innovation, and capacity for change;
- recognize and stimulate institutional diversity—goals and curricula relevant to program strengths and experience should be encouraged;
- promote the integration of professional practice and research;
- promote the development of current and relevant knowledge, skills, and procedures required for effective clinical practice;
- make clear that applicants have the burden of proof in demonstrating how they meet accreditation standards;
- be written in terms of educational process and goals rather than incorporate specific requirements for individual credentials;
- focus on the program's ability to accommodate changes in the scope and nature of professional practice.

Interpretative guidelines are developed and reviewed by the CAA to ensure consistency with the intent of the Standard and are included with the published standards as Requirements for Review. They supplement the standards by providing interpretations or explanations of the standard.

The CAA also provides a separate companion resource to the Standards--Documentation Guidance--that provides directions or suggestions on how compliance with the Standards can be documented.

B. Development and Review of Standards

Procedural Principles

- The primary responsibility for developing and establishing accreditation standards related to professional preparation for a specific profession should lie with persons representing that professional constituency.
- Communication and coordination among ASHA credentialing programs are essential in developing and establishing academic accreditation standards.
- The procedures by which academic accreditation standards are developed and established should be structurally and functionally independent of practitioner certification.

Procedures for Developing and Establishing Standards

To ensure that all relevant constituencies are fully informed of and have the opportunity to comment on proposed standards or revisions of standards for educational accreditation, the CAA follows the procedures described below.

- The Council may make use of ad hoc committees in the development of new standards and the periodic review of existing standards.
- The committees shall consist of Council members, but may include others.
- For development, establishment, or revision of standards specific to professional preparation in audiology, the committees shall include primarily audiologists and/or hearing scientists.
- For development, establishment, or revision of standards specific to professional preparation in speech-language pathology, the committees shall include primarily speech-language pathologists and/or speech-language scientists.
- For development, establishment, or revision of standards related to both professions, the committees shall be composed of representatives from both areas.
- The full Council shall consider and act upon the recommendations of the committees charged to consider the matter.
- Adoption of a new or modified standard shall follow the CAA's voting protocols. In addition, for standards specific to one of the two professions, the Council members representing that professional area and the public member will vote consistent with the established voting protocols.

Periodic and Systematic Review of Standards

The Council will conduct a formal, comprehensive review of the Accreditation Standards every 5 to 8 years. This formal review may or may not result in revisions of the standards. In addition, the CAA may conduct interim or focused reviews of standards before the formal comprehensive review is due. When revisions are identified through either a comprehensive or an interim review, the CAA will initiate action within 12 months to make the changes and complete that process within the following 2-year period. The CAA will follow the process outlined below.

Widespread Peer Review of Standards

- Proposed revisions to standards or requirements for review shall be published in appropriate ASHA publications and on the website with a request for comments by a specified date. Typically, the peer review comment period is between 30 and 60 days.

- The CAA will conduct a widespread peer review by distributing proposed revisions to all of its stakeholders for comment through its normal distribution methods. A full list of identified stakeholders [PDF] is appended to this Handbook. Academic program directors will be asked to communicate proposed standards to appropriate university administrators in their respective institutions.

- The Council may hold open forums at appropriate professional meetings to review the proposed standards and obtain stakeholder comment.

- The CAA will review all comments submitted on the proposed standards and will make modifications as determined appropriate. Depending on the extent of the further revisions, the document may be sent out again for widespread peer review, following the process described above.

- When all comments have been considered and the CAA has approved the final language for the document, the approved standard(s) shall be distributed to all academic programs and published in multiple venues with the effective date prominently noted. At least 6 months must elapse between the date of the CAA publication and the effective date of the new standard(s). In the event of extenuating circumstances and/ or in response to external compliance

requirements, the CAA may identify a timeline shorter than 6 months between the publication and the effective date of the new standard(s). The CAA will communicate any revised timelines to the identified stakeholders and work with programs to ensure compliance.

Ongoing Review of Standards

In an effort to maintain calibration on accreditation standards and to identify any standard that needs clarification or revision, the CAA employs the following activities:

- Annually, the CAA will review feedback from site visitor surveys regarding the clarity of the standards and any identified problem areas. The site visitors will be asked to evaluate the usefulness of the standards and their validity as indicators of quality during annual training activities.

- Time should be set aside at each CAA meeting to discuss the standards, and comments should be recorded in the minutes of the meeting. The discussion may include feedback from site visitors and program directors, as well as the Council members' own interpretations or concerns regarding the standards, so that the contributions of all members can be accurately adjusted.

- Participants in site visitor training should have an opportunity to comment on the standards through the standards review module during the training.

PART 5 – CAA REVIEW PROCESSES, DECISIONS, AND SITE VISITS

XV. OVERVIEW OF APPLICATION REVIEW PROCESSES

A. Overview

A program consents to observe and to adhere to the requirements and procedures of the CAA by submission of an application signed by the institution of higher education's president or designee requesting review and consideration for CAA accreditation. Please refer to the appropriate report sections in this *Handbook* for specific review process details and time lines. The steps in the CAA application review processes are shown in Figures 2 and 3.

All accreditation review materials, including the application and related correspondence, must be provided in English. Site visits will be conducted in English and the information collected must be reported to the CAA in English. Securing and providing the needed services of an interpreter, transliterator, or translator during the site visit or for the translation of documents will be the program's responsibility and at its expense. Any translated documents must be available within the expected review timelines. The CAA requires that contracted individuals be from outside of the program being reviewed and strongly recommend that they are certified interpreters.

The CAA Chair or members of the CAA are available at any time during the accreditation process to provide ongoing guidance to programs; the CAA staff is also available to provide consultation. The CAA and staff members may be contacted through the ASHA National Office at: Council on Academic Accreditation in Audiology and Speech-Language Pathology, 2200 Research Boulevard, #310, Rockville, MD 20850 (1-800-498-2071 or 301-296-5700) or by e-mail at accreditation@asha.org. Additional information and documents are available on the CAA's website.

Additionally, CAA and/or staff may engage in consultative conferences with programs during critical stages of the accreditation process. The consultative conference provides an opportunity to clarify the CAA's expectations, policies and procedures, or findings and to discuss the program's plans. Although a staff consultation is required for developing programs seeking candidacy, consultative conferences are designed for programs that may be in jeopardy and the CAA has documented its concerns of the program's capability to provide acceptable educational experiences for the students or are subject to adverse action by the CAA. The CAA will require candidacy programs that it has deemed to be in jeopardy to participate in a consultative conference. The CAA strongly recommends that accredited programs the CAA has deemed to be in jeopardy, including those placed on probation, participate in a consultative conference. The CAA will notify programs at the time of the decision about the options for a consultative conference with a timeline to schedule and complete the conference, which will be conducted at a mutually agreeable time to be determined by the CAA.

To ensure confidentiality and objectivity, individual members of the Accreditation staff, the CAA, and the site visit team are enjoined from responding to requests from the program for information about the accreditation review. Procedural questions regarding the conduct and report of the site visit should be directed to the Chair of the CAA.

The application review processes consist of the following steps:

- Application
- Peer Review
- Site Visit
- Final Evaluation and Decision
- Appeal of Accreditation Decisions

The institution may withdraw its application without prejudice at any time before final action by the CAA. A program also may withdraw from any accreditation status at any time. The program retains the right to reapply at a later time without prejudice. In addition, the CAA has the authority to delete a program from the list of accredited programs when the CAA concludes that the program is no longer in existence

or that its accreditation status has lapsed. In such instances, the CAA will notify the program of the pending action.

Accreditation Fees

A nonrefundable application fee must be submitted with a program's application for candidacy status or application for initial accreditation. Applications submitted without a fee will not be accepted for review. Information regarding the current fee schedule is available on the website and from the Accreditation Office.

Religious Mission Exemption Declaration

The CAA requires programs that are housed in institutions that may qualify for exemption from any federal antidiscrimination requirements (such as those contained in Title IX) based on the institution's religious tenets to provide documentation of any exemption requests the institution has made to the U.S. Department of Education (USDE). Specifically, such programs must provide all documents they provided to the USDE and all documents relating to the response they received from the USDE so that the CAA can determine whether the program qualifies for an exemption from the non-discrimination policy requirements set forth in the CAA's accreditation standards. If a program believes that it is entitled to an exemption from a non-discrimination policy requirement in the CAA accreditation standards but has not yet submitted a request for an exemption to the USDE, then the program must submit a written statement detailing why it believes it should be exempt from the antidiscrimination requirement based on the religious tenets of the institution. All exemption requests will be assessed by the CAA on a case-by-case basis in accordance with applicable law.

B. Discontinued Accreditation Review

Programs that apply for an accreditation status with the CAA must comply with all reporting and financial deadlines to allow the CAA to fully administer the review and decision processes for the application. This expectation also extends to programs that are designated as "applicants" and do not currently hold an accreditation status with the CAA. The CAA will discontinue an accreditation review for applicant programs when an applicant program is judged to have not met CAA reporting and/or financial expectations. Such an action is taken by the CAA as a result of a program's failure, by established deadlines, to:

- complete and file any required accreditation application materials (e.g., resubmission of candidacy application, submission of initial application for accreditation after conveying its notification of intent, including all special requests for information),
- pay site visit fees.

Application Materials

The CAA will not initiate a review of an application for candidacy or initial accreditation without the submission of the application fee. This policy on the discontinuation of an accreditation review assumes an application fee was paid.

A program that wishes to submit an application for initial accreditation also must officially notify the Accreditation Office no later than 5 months before the submission date (i.e., by September 1 for February 1 submission or by March 1 for August 1 submission). These notification deadlines allow sufficient time for the applicant program to be scheduled in the on-line reporting system and then be provided access to the system to complete its application for initial accreditation. If the program fails to meet the notification deadline, it will be scheduled for the next application fielding. If the program fails to meet the identified submission deadline and fails to request an extension in advance of that deadline, the program will be rescheduled for the next fielding. Data entered as part of the application for initial accreditation will be retained in the application data system. Failure to meet the submission deadline for the second scheduling will result in the discontinuation of the intent to submit, and the program will be required to submit a new notice of intent and application fee.

A program that wishes to submit an application for candidacy must officially contact the Accreditation Office at least two years in advance of anticipated student enrollment to schedule a consultation and gain access to the candidacy application and other forms. The CAA requires developing programs to provide a Notice of Intent at least 24 months before anticipate student enrollment with supporting documentation. After the notice has been reviewed, the program will be scheduled for an available submission date. An application for candidacy is expected to be filed 18 months prior to the anticipated enrollment of students. The CAA has two submission dates for candidacy applications and limits the number of applications scheduled to be submitted for each submission date. There are specified time frames outlined in this *Handbook*, during which materials must be provided in order for the review to continue. Failure to meet designated deadlines will result in the discontinuation of the candidacy review, and the program will be required to submit a new application and application fee.

Site Visit Fees

When the review for an application for initial accreditation or candidacy has been discontinued due to nonpayment of site visit fees, the CAA will defer any final review and action on the application until the fee is paid, but no longer than 90 days after the invoice date. If the program fails to pay delinquent fees by that time, the CAA will consider the review ended, and the program must submit a new application and application fee.

XVI. PROCEDURES FOR ACHIEVEMENT AND MAINTENANCE OF CANDIDACY STATUS

A. Introduction and Background

In 1991, the Council on Professional Standards in Speech-Language Pathology and Audiology established the status of Candidate for Accreditation for emerging education programs in audiology and in speech-language pathology through the former Educational Standards Board (ESB). This status became necessary because, effective January 1, 1994, an individual's eligibility for ASHA's Certificates of Clinical Competence (CCC) was linked to graduation from an accredited program. The status of Candidacy for Accreditation allowed students enrolled in newly established education programs to be eligible to apply for the CCC upon graduation without penalizing the first class of students graduating from those programs. In 2000, the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) revised the candidacy process for new programs seeking accreditation into a "stepwise" model. This model expected new programs to come into compliance with the Standards for Accreditation in a logical sequence while being closely monitored by the CAA. Programs could evolve over time and secure necessary resources to administer a quality program.

In 2007, the CAA implemented modifications to its stepwise model for the candidacy program and revised its materials to be consistent with compliance expectations of the 2008 Standards for Accreditation. Key features of the revised model include:

- limiting eligibility for the candidacy process to new graduate education programs that agree to not enroll students until candidacy is awarded by the CAA,
- requiring a consultative review to determine a new program's readiness prior to submission of the official application,
- the conduct of an on-campus site visit as part of the CAA's decision-making processes.

In 2017, the CAA updated its application and reporting materials to be consistent with the 2017 Standards for Accreditation and completed a comprehensive review of its candidacy review processes. As a result of that review, in 2018 the CAA sustained the stepwise model but voted to remove the option for a second readiness (consultative) review for applicant programs and the related decision options. Further, the CAA revised its candidacy compliance continuum and rubric definitions, changing the terminology from "implemented" to "initiated" to better reflect and clarify its compliance expectations for developing programs.

In 2020, the CAA implemented a new process for a developing program to provide supporting documentation with its Notice of Intent and then for the CAA to schedule when the program may file its candidacy application based on available slots. This process includes:

- participation in a mandatory consultation session with accreditation staff at least two years before the anticipated student enrollment;
- submission of a Notice of Intent with supporting documentation at least 24 months before the anticipated enrollment date
- limiting the number of applications per submission date to four (4);
- assignment of the program's submission date by the CAA; once the 4-program cap is reached, programs will be assigned to next available submission date and planned student admission must be delayed accordingly.

In 2025, the CAA revised existing policies to expand the limit on the number of applications per submission date from four (4) to five (5) in order to open a slot reserved for developing clinical doctoral programs in audiology.

Candidacy is available only to applicant programs that:

- are newly developed graduate degree programs, including stand-alone programs or those offered through a consortium, AND
- have no students currently enrolled.

See more information in the Eligibility section of this *Handbook*.

Further, in accordance with Criterion for Recognition §602.23 [34 CFR 602.23(f)(2)], the U.S. Secretary of Education considers all credits and degrees earned and issued by a program holding candidacy status with the CAA to being from an accredited program since the CAA is a recognized accrediting agency.

Candidacy Fees

A nonrefundable notice of intent fee[13] must be submitted with the program's Notice of Intent. Payment is required before the program can be scheduled to submit its candidacy application.

A nonrefundable application fee must be submitted with the program's application for candidacy status. The application fee affords the program participation in the application readiness (Level I) and submission (Level II) processes, as described below and within the specified time periods. Applications submitted without a fee will not be accepted for review.

Programs will be invoiced separately for the site visit fee at the time the candidacy site visit is confirmed (Level II).

Once candidacy has been awarded, programs must submit an annual fee. Continuation of candidacy is dependent upon timely payment of annual fees. Information regarding the current fee schedule is available on the website and from the Accreditation Office.

B. Application for Candidacy

Developing programs that seek candidacy status with the CAA must contact the Accreditation Office to schedule a required consultation as soon as possible in the program's planning and not later than two years before the graduate students are expected to enroll. The program is expected to file its Notice of Intent 24 months in advance of anticipated student enrollment and the Application for Candidacy is submitted 18 months before students may enroll into the graduate program. The required forms are only accessible by contacting the Accreditation Office.

Notice of Intent and Scheduling

A developing program that seeks candidacy status with the CAA must contact the Accreditation Office to gain access to the Notice of Intent and the Application for Candidacy forms. The program must complete the Notice of Intent and provide all requested data and supporting documentation for consideration by the CAA no later than 24 months before the anticipated enrollment date of graduate students[14]. Based on the review of the documentation and the available slots, the CAA will assign the program to an available submission date. The CAA has two submission dates for candidacy applications (January 1 or July 1) and limits to four (4) the number of applications scheduled for each submission date. After the 4-program cap is reached, an additional fifth (5) slot will be made available for clinical doctoral programs in audiology. If there are no doctoral programs in audiology that seek candidacy status to take the fifth slot, the submission date cap will remain limited to four (4) programs. After a submission date cap is reached, programs will be subject to the next available submission date and planned student admission must be delayed accordingly.

Review Steps

Accreditation staff will conduct an administrative review of the Notice of Intent to determine completeness and will contact the program for additional information, as appropriate. Staff may return to the program for resubmission of those notices that are incomplete or completed inappropriately.

The Candidacy Committee will review the program's Notice of Intent and supporting documentation, consistent the CAA's Policy on Conflict of Interest. If a conflict is present, an alternate Council member will be identified as a reviewer for the notice. The program will be notified if questions arise from this review,

13 Notice of Intent fee is required as of January 1, 2022.
14 Programs that do not submit the accompanying Notice of Intent fee will not be scheduled.

The Accreditation Office will notify the program when the review is completed and the program is scheduled, approximately 30 days after the Notice of Intent is submitted.

Submitting an Application for Candidacy

Once scheduled, a program seeking candidacy must submit a formal Application for Candidacy to the CAA, signed by the program and institution's representatives, no less than 18 months in advance of the student enrollment date. This is the minimum required time to guarantee the CAA's comprehensive review and comment on the applicant program's development plan and appropriate due process to the program prior to student enrollment. As noted above, the CAA has two submission dates for candidacy applications (January 1 or July 1), and it limits the number of candidacy applications to be scheduled for each submission date. After the 4-program cap is reached, programs will be subject to the next available submission date and planned student admission must be delayed accordingly.

Please note that time frames outlined in this *Handbook* represent typical review milestones and are dependent on the program's ability to demonstrate readiness to offer the graduate program. Therefore, some programs will take longer than others to advance through the CAA's candidacy process.

All application materials, supporting documents, and subsequent communications from the program should be forwarded to: Chair, Council on Academic Accreditation, American Speech-Language-Hearing Association, 2200 Research Boulevard, #310, Rockville, MD 20850; accreditation@asha.org. Candidacy forms may be obtained from the Accreditation Office.

Programs Submitting Application for Both Audiology and Speech-Language Pathology - Programs seeking candidacy for both eligible audiology and speech-language pathology graduate programs are required to provide separate responses related to each program of study for all questions as presented throughout the Notice of Intent and Application for Candidacy. Materials received without proper completion of required sections will be returned to the program as incomplete.

Distance Education and Satellite Locations—Programs offering academic components through a satellite location or via distance education that meet the CAA's definition for consideration as a separate mode of delivery will be evaluated in light of their context relevant to the respective residential programs, the mission and goals of the program, and availability of resources for the program. Responses provided in the application should demonstrate that all standards are met for all modalities and/or sites. All contributing sites at which academic instruction is provided will be reviewed.

The CAA developed and implemented a policy and related procedures for substantive changes, which may occur in existing CAA-accredited programs and have a direct and significant impact on the program's ability to comply with accreditation standards. However, candidacy programs are not eligible to request approval of a substantive change during its candidacy cycle. Candidacy programs can request substantive change approval as part its application for initial accreditation. Please refer to the CAA's substantive change policy and procedures for full definitions and descriptions for distance education, satellite location, and contractual arrangements, which are the modalities covered under the CAA's policy.

Basis for Review

The CAA will apply the Standards for Accreditation as the basis of review of eligible graduate education programs when reviewing its Application for Candidacy. The CAA is responsible for evaluating the adequacy of an applicant program's efforts to satisfy each requirement.

Although compliance with all standards is not required at the time of award of candidacy, the CAA's decision to award candidacy status is based on the program's submission of a comprehensive development plan (which is presented in the form of the candidacy application) and the program's and institution's demonstrated commitment and ability to implement the program fully. The steps and activities in the program's development plan should be achievable and sustainable consistent with the CAA's expectations for development. The application must describe for each accreditation standard

the program's

- anticipated plan for development of the program and its current status in that development,
- schedule for implementation of various aspects of the program,
- evidence of progress made towards compliance with all accreditation standards.

Candidacy status may be awarded to a newly developed entry-level graduate degree program that meets all institutional and programmatic eligibility requirements, including that the program has no students currently enrolled and that it has been granted authorization through the governance process of the parent institution and the appropriate state authority to offer the graduate degree program(s) for which candidacy is sought.

The CAA established a Standards Compliance Continuum for developing programs, detailing the expected developmental milestones against which the program will be evaluated related to its progress through the candidacy review. The CAA defines the compliance expectations in the continuum as follows:

- Planned (P)- Compliance with the standard is **planned**; a comprehensive development plan, timelines, and adequate support for continued development are evident and sustainable.
- Initiated (I) - The plan is **initiated**; review requirements of the standard are in progress and adequate and sustained support for development is evident.
- Maintained (M) – Review requirements of the standard have been met, compliance, compliance demonstrated and **maintained**; program improvement is initiated. Adequate and sustained support for development is evident.

The CAA will consider the mission and goals of the new program and how the development plan demonstrates consistency with the stated mission, including religious mission. Once candidacy has been awarded, programs will be monitored for sustained levels of compliance achieved and continued development and progress toward full compliance with the accreditation standards through submission of annual progress reports.

The CAA's candidacy model and its compliance expectations were designed to be consistent with the expectations of the institution of higher education in the development of a new graduate degree program. Key program components, such as curriculum, personnel, and budget, are subject to planning and approval processes at the institutional and state levels. Programs may be able to use the supporting documentation developed for institutional and state approval processes to address and/or supplement the reporting requirements in the CAA's application process.

The CAA's review model includes the following review steps and processes, which are fully described in this *Handbook*:

- Level I: Readiness Review (Consultative)
- Level II: Official Application, Candidacy Site Visit, and Candidacy Decision
- Level III: Program Improvement/Maintenance (Annual Progress Reports)

Final decisions awarding candidacy status (Level II) will occur only during the CAA's decision-making meetings.

Level I: Readiness Review (Consultative)

The CAA designed the stepwise candidacy model to include the conduct of a readiness review by the Council of a completed candidacy application. Level I consists of the verification of all eligibility conditions and a consultative review of the program's development plan to determine the program's readiness to submit an official application for CAA review and conduct of a site visit leading to a candidacy decision.

As indicated in the Eligibility section in this *Handbook*, the institution and program must have conducted an initial self-evaluation that forms the basis for documenting its development and standards compliance plan. This analysis should identify the extent to which CAA accreditation standards are met at the time of application and how all standards will be met by the end of the candidacy cycle. The

parent institution of higher education and the appropriate state authority must have approved the program's development plan and must verify the intent to implement it fully in that the plan is achievable and sustainable to support the program. The CAA expects that most standards will be met and that the program will have implemented its development plan by the time students matriculate in the graduate program.
A description and appropriate documentation about the program's compliance level for each of the Standards for Accreditation of Graduate Education Programs in Audiology and Speech-Language Pathology must be submitted as the central component of the candidacy application, in accordance with the guidelines below. The program must consider the CAA's expectations for the program's demonstration of appropriate planning, implementation of its plan (compliance with standards), and maintenance of standards compliance and, as appropriate, program improvement as outlined in the Standards Compliance Continuum.

The CAA will pre-review the complete application document and appendices, verify whether all eligibility conditions have been met, provide substantive feedback related to compliance with the accreditation standards where appropriate, and advise the program on its readiness to proceed with submitting the official application into the formal candidacy application and review process. This preliminary consultative review process affords the program an opportunity to consider the Council's feedback, edit the application document, and potentially strengthen the candidacy application before submitting the official application for a formal Council review and decision.

Criteria to Determine Readiness:

- ☑ The applicant program and sponsoring institution of higher education meet all eligibility requirements for candidacy status
- ☑ The application is complete, including all signatures, appendices, requested attachments, and fees.
- ☑ The submitted application adequately addresses timely and achievable compliance with each and all of the accreditation standards according to the compliance continuum matrix.
- ☑ Documented evidence is presented to support compliance with the accreditation standards consistent with readiness expectations on the Standards Compliance Continuum.

Review Steps

Accreditation staff will conduct an administrative review of the application to determine completeness and will contact the program for additional information, as appropriate. Staff may return to the program for resubmission of those applications that are incomplete, completed inappropriately, do not include or meet all eligibility documentation, or do not include the application fee.

The review of the candidacy application will be assigned to members of the CAA consistent with review protocols and the CAA's Policy on Conflict of Interest. If a conflict is present, an alternate Council member will be identified as a primary reviewer for the application. The CAA will document concerns or observations from its consideration of the application, which documentation will be forwarded to the program, including a statement about eligibility status. These comments will provide the program with feedback about areas for program improvement and/or compliance with standards and must be addressed in the program's response in subsequent reports.

Readiness Recommendation from CAA

Based on the review of the application materials, the CAA will notify the program director and the president of the institution, or the president's designee, in writing as to the results of its readiness assessment of the program:

- ❑ READINESS ASSESSED WITH INVITATION TO CONSIDER AS OFFICIAL APPLICATION (Accelerated Review): The applicant program and sponsoring institution met all eligibility requirements and provided a comprehensive compliance development plan and documentation sufficient to support submission of its application with adequate support for continued development consistent with the next level of review (Level II: Application). Consultative review determined that the Readiness Application may be submitted as the

Official Candidacy Application at this time.

- ❑ READINESS ASSESSED – SUBMISSION OF OFFICIAL APPLICATION REQUESTED: The applicant program and sponsoring institution met all eligibility requirements. The program provided a comprehensive compliance development plan for which the CAA is seeking additional information to document sufficient to support at the expected compliance at this stage and adequate support for continued development. The program must respond to feedback by incorporating information or modifications into its application before candidacy review can continue (See Level II: Official Application.) The program is required to submit its official application within 5 months of notice from the CAA. Failure to submit within 5 months will result in the file being closed.

Programs can withdraw their application at any time without prejudice. An applicant program may submit a new signed candidacy application without prejudice, along with a new application fee, should it wish to initiate the candidacy review process in the future, provided it is able to meet all eligibility conditions.

Level II: Official Application, Site Visit, and Decision

Submission of Official Application

After notification that the CAA deemed the applicant program ready to proceed in the candidacy application process, the program should consider the Council's feedback from the consultative readiness review of the program's preliminary submission and incorporate new information or data, as appropriate. The program must submit its official application within 5 months of the readiness notification. *Note: If the CAA accepted the preliminary submission as the official application (i.e., accelerated review), the program may proceed directly to the site visit phase.*

Review Steps

Accreditation staff will conduct a preliminary administrative review of the application to determine completeness and will contact the program for additional information, as appropriate. Staff may return to the program for resubmission of those applications that are incomplete or completed inappropriately. The program must integrate any clarifying or new information within the candidacy application when resubmitting the application; this information will not be accepted as an addendum to the application. *Note*: *Candidacy applications that contain clarifying or new information as addenda will be returned to the program and may delay the review process and the program's potential to meet planned milestone event*s.

After consideration of any potential conflicts of interest, the official application will be reviewed by the CAA and feedback provided to the program prior to the time of the candidacy site visit. The program will have the opportunity to respond to the CAA's initial observations in advance of the candidacy site visit. After review of the CAA's initial observations, a program may withdraw the application or elect to proceed with scheduling the candidacy site visit. Within 30 days from the date of the letter of initial observations, the program director should notify the CAA of the decision to either proceed with a candidacy site visit or withdraw the program's application.

The program's name will be included in the Public Comment section of the CAA's website as an official applicant for candidacy. Written comment will be invited in accord with the CAA's Policy on Public Comment. All public comments will be processed as described in this policy.

Candidacy Site Visit

As part of the candidacy decision process, the CAA will conduct a candidacy site visit to the program. The purposes of the candidacy site visit are to:

- verify the accuracy of information provided in the application and resolve questions/concerns that arose from review of the application,
- directly observe program resources and space on campus and interact with program leadership,

- document that compliance with accreditation standards was verified, consistent with the CAA's expectations to award candidacy,
- facilitate the CAA's decision making for new programs by providing a written report of the visit.

The program is invoiced for the site visit fee at the time the candidacy site visit is confirmed.

Candidacy Application Decision Options
All materials related to the candidacy review, including the application, the CAA's initial observations, the candidacy site visit report, the program's responses to the initial observations and the candidacy site visit report are reviewed by the CAA. The full CAA will consider the candidacy applicant program's file and render a decision at its next formal decision-making meeting. The CAA bases its accreditation decisions on the published standards and its determination of the program's expected compliance with the standards. The CAA does not use as a negative factor an institution's religious mission-based policies, decisions, and practices for faculty, curriculum, facilities, equipment and supplies, and student support services provided that the program's curriculum include all core components as outlined in the Standards for Accreditation.

The CAA will provide written notification to the program director and the president of the institution, or the president's designee, of its decision, from among the following possible actions:

- ❑ AWARD CANDIDACY – The CAA determined that the program was in sufficient compliance with the Standards for Accreditation, as outlined in the Standards Compliance Continuum. The program will be awarded a candidacy cycle, listed as an Accreditation Candidate, and included in all official lists of candidate programs by the CAA. Award of candidacy allows the program to allow students to matriculate in the graduate program as it continues to document compliance with accreditation standards for the duration of the candidacy accreditation cycle.

- ❑ WITHHOLD CANDIDACY – The CAA determined that the program was not in compliance or had not made sufficient progress towards compliance to meet expected developments as outlined in its application and as required in the Standards Compliance Continuum. A decision to withhold candidacy status of an applicant program is appealable. Once the decision is final, the program would no longer hold an accreditation status, including applicant, effective as of the date of the notification letter.

The CAA also may choose to **defer** making a final decision on candidacy only when there is insufficient information upon which to base a decision. The CAA will specify a date by which additional information must be submitted and when the decision will be made. Deferral permits a program to provide essential clarifying information or evidence of progress regarding possible noncompliance with the standards at the request of the Council. The CAA may also, at its discretion, conduct a focused site visit to further investigate a particular issue to determine whether the program is in compliance with specific standards. The CAA will indicate to the program the explicit reasons that such a visit is necessary. The CAA reviewers will consider the additional materials received from the program, either from responding to the deferral or focused site visit, and conduct a final vote with the decision options above.

The CAA prepares a letter for each program communicating its final decision, which identifies any areas of concern along with a written rationale and relevant guidance to support the Council's findings based on the Standards Compliance Continuum. The CAA's final decision is transmitted in writing to the program director and to the president of the institution, or the president's designee, within 30 days of the decision, and the CAA's action will be published consistent with its policy on Public Notice of Accreditation Actions.

Program Designation

A program meeting the requirements for candidacy shall be designated as an Accreditation Candidate.

Candidacy Term

Candidacy may be held for no longer than 5 years. The term commences on the first day of the month in which the CAA's decision is rendered. CAA's decisions are not retroactive to any previous accreditation review processes for which the program was denied a status or any prior date in the current review process leading to the award of candidacy. Candidacy cannot be renewed or extended.

C. Conditions to Maintain Candidacy Status

Level III: Annual Candidacy Progress Reports

Once candidacy status has been awarded, programs are required to file Annual Progress Reports to demonstrate continued and progressive compliance with standards, including providing appropriate supporting documentation, in accordance with the Standards Compliance Continuum (Level III: Program Improvement/Maintenance) over the last reporting year. The candidacy progress report form must be completed, signed, and submitted by the annual reporting deadline, consistent with the program's candidacy anniversary date (i.e., by February 1 or by August 1).

Candidacy Progress Report Due Date:	**February 1**	**August 1**
Anniversary or Reporting Date:	November December January February March April	May June July August September October

The Standards Compliance Continuum outlines expected developmental levels for a program submitting its first, second, and third progress reports and on which the CAA will render its decision to continue a program in candidacy. A program holding candidacy status must report (a) any changes in satisfying the requirements for candidacy and (b) its progress toward meeting all CAA standards. The program is expected to report on each standard in each progress report.

The CAA requires annual progress report submissions in order to ensure that the candidate program has sufficient time to proceed in its development toward compliance with all accreditation standards and to submit its initial application for accreditation during the candidacy cycle. This provision allows programs to continue to develop as students matriculate in the graduate program and allows the program to offer a full rotation of classes and to implement its assessment strategies to support its self-study that will serve as the basis of its Application for Initial Accreditation to the CAA. The timing of the submission will allow review and decision on the Application for Initial Accreditation while the program still holds a preaccreditation status with the CAA.

- Clinical Doctoral Programs in Audiology - Clinical doctoral programs in audiology must submit three (3) annual progress reports to the CAA before filing an application for initial accreditation. If the candidate program intends to pursue initial accreditation with the CAA, it must submit a completed application for accreditation no later than the timing of its fourth annual candidacy progress report. A program may submit its application for initial accreditation at the next regularly scheduled application submission date (i.e., February or August, consistent with the program's candidacy anniversary date) after the third annual progress report has been submitted).
- Master's Programs in Speech-Language Pathology - Master's programs in speech-language pathology must submit at least two (2), but no more than three (3), annual progress reports to the CAA before filing an initial application for accreditation. If the candidate program intends to pursue initial accreditation with the CAA, it must submit a completed application for accreditation no later than the timing of its fourth annual candidacy progress report. Master's programs in speech-language pathology may submit an application for initial accreditation in lieu of a third annual progress report. Programs may submit the application for initial

accreditation at the next regularly scheduled application submission date (i.e., February or August, consistent with the program's candidacy anniversary date) after the third annual progress report has been submitted.

Review Steps for Annual Candidacy Progress Reports

Accreditation staff will conduct an administrative review of all progress reports for completeness and will contact the program for additional information, as appropriate. Staff may return to the program for resubmission of those progress reports that are incomplete or completed inappropriately.

The CAA will review the progress report and document any concerns or observations, which are forwarded to the program. These comments will provide the program with feedback about areas for program improvement and/or compliance with standards and must be addressed in the program's response in subsequent reports.

Annual Progress Report Decision Options

The CAA will provide written notification to the program's director and the president of the institution, or the president's designee, of the results of its review, which will indicate one of the following actions:

- ❑ APPROVE: The Accreditation Candidate provided a complete and comprehensive progress report with documentation sufficient to support its continued compliance with identified standards, as well as evidence of adequate support for continued development and progress toward expected compliance with standards at this stage. The program must respond to feedback resulting from the Council's review by addressing elements in its next report to the CAA. The program maintains its status as an Accreditation Candidate and is directed to submit the next annual progress report or an initial Application for Accreditation, if it has satisfactorily completed all requisite progress reports.

- ❑ DO NOT APPROVE (WITHDRAW CANDIDACY): The Accreditation Candidate has not made sufficient progress towards expected compliance with accreditation standards and did not satisfy all of the criteria listed for this level of review and/or did not submit sufficient documentation to support expected compliance at this stage and support for continued development. A decision by the CAA to not approve a program's annual progress report will result in withdrawal of candidacy status from the program. A decision to withdraw candidacy status from a program is subject to appeal, and the program is advised of its option to seek further consideration of the CAA's decision. Once the decision is final, the program would no longer hold candidacy status, effective at the end of the next academic term following the date of notification.

The CAA may choose to **defer** making a final decision on approving a progress report only when there is insufficient information upon which to base a decision; thus, the decision is deferred until a later time specified by the CAA. Deferral permits a program to provide essential clarifying information or evidence of progress regarding possible noncompliance with the standards. The CAA will notify the program when a decision is being deferred and may request that a program submit additional information or materials by a specified date for consideration by the Council in making a final decision on the progress report. The CAA may also, at its discretion, conduct a focused site visit to further investigate a particular issue to determine whether the program is in compliance with specific standards. The CAA will indicate to the program the explicit reasons that such a visit is necessary. CAA reviewers will consider the additional materials received from the program, either from responding to the deferral or focused site visit, and conduct a final vote with the decision options above.

In the event of a withdrawal decision and upon notification, the program is required to submit a transition report in accordance with the CAA's policy on Transition Reports, due 30 days from the notice of the decision being made final, e.g., after opportunity for appeal.

The CAA will notify programs at the time of the decision about the options for a consultative conference with a timeline to schedule and complete the conference, which will be conducted at a mutually agreeable time to be determined by the CAA. The consultative conference provides an opportunity to

clarify the CAA's expectations, policies and procedures, or findings and to discuss the program's plans. Although a staff consultation is required for developing programs seeking candidacy, consultative conferences are designed for programs that may be in jeopardy and the CAA has documented its concerns of the program's capability to provide acceptable educational experiences for the students or are subject to adverse action by the CAA. The CAA will require candidacy programs that it has deemed to be in jeopardy to participate in a consultative conference.

Timelines

The time lines for the review process are as follows: initial review of annual reports by Accreditation Office staff should be completed within 4 weeks of the report due date; CAA reviewers should complete the review of the Annual Candidacy Progress Report within 1 month of receipt; additional information requested from the program should be submitted within 30 days of the request. Other special reviews may be indicated by the Chair.

XVII. PROCEDURES FOR ACHIEVEMENT AND MAINTENANCE OF AN ACCREDITED STATUS

A. Initial and Reaccreditation Applications

Programs that hold candidacy status may submit an application for initial accreditation before the end of the candidacy cycle, consistent with the time lines identified in the Candidacy section of this *Handbook*. Programs that do not meet the eligibility requirements for candidacy may apply directly for initial accreditation.

Notice of Intent – A program that does not currently hold an accreditation status, such as candidacy, that wishes to submit an application for initial accreditation must officially notify the Accreditation Office no later than 5 months before submission date (i.e., by September 1 for February 1 submission or by March 1 for August 1 submission). These notification deadlines allow sufficient time for the applicant program to be scheduled in the on-line reporting system and then be provided access to the system to complete its application for initial accreditation. If the program fails to meet the notification deadline, it will be scheduled for the next report fielding.

A program seeking reaccreditation must submit a formal application to the CAA approximately 1 year prior to the end date of the current accreditation cycle. Programs in a 5-year accreditation period must file an application for reaccreditation in lieu of the fourth annual report. Programs accredited for 8 years must file an application for reaccreditation in lieu of the seventh annual report. Programs are expected to file accreditation applications by February 1 or by August 1; due dates are assigned based on programs' anniversary dates of accreditation.

When unplanned circumstances arise that impact the program's timely submission of CAA reports, programs must request an extension for the submission of an accreditation report (i.e., application) in accordance with CAA procedures. For programs with an accreditation status (Candidate, Accredited) that have not submitted an application for (re)accreditation by the due date and have not requested an extension, the CAA will notify the program director and the president of the institution or the president's designee that the program has been placed on administrative probation. If the CAA does not receive the application within 30 days of the date of notification, the accreditation status is considered lapsed (withdrawn).

The format and procedures for reaccreditation are the same as those for initial accreditation. The program retains its current status (Accredited, Candidate or is identified as an Applicant if no current accreditation status exists), while the (re)accreditation application is being reviewed. Normally, the review can be completed within the year before the current accreditation status cycle expires. New accreditation cycles will be established when approved by the CAA and will begin on the first day of the month of the CAA's decision or on the date of expiration of the prior accreditation status cycle, as appropriate. An initial accreditation cycle would begin on the date of expiration of the candidacy cycle in most cases; a new accreditation cycle would begin on the date of expiration of the previous accreditation cycle. For candidacy programs that achieve initial accreditation in advance of the end date of the existing candidacy cycle, a new accreditation cycle commences on the first day of the month in which the CAA's decision is rendered. CAA's decisions are not retroactive to any previous accreditation review processes for which the program was denied a status or any prior date in the current review process leading to the award of accreditation.

The president of the institution or the president's designee must sign the application for accreditation or reaccreditation.

Application Fees

A nonrefundable application fee must be submitted with the program's application for initial accreditation. Applications submitted without a fee will not be accepted for review. Programs will be invoiced separately for the site visit fee at the time the initial accreditation site visit is confirmed.

Fees for programs seeking reaccreditation are incorporated into annual fees, so no additional fees are assessed at the time of the application or site visit.

Once accreditation has been awarded, programs must submit an annual fee. Continuation of accreditation is dependent upon timely payment of annual fees. Information regarding the current fee schedule is available on the website and from the Accreditation Office.

Initial Evaluation of Application

The purpose of the initial review is to determine potential problems with compliance with the Standards for Accreditation or identify areas that need further clarification or discussion in advance or at the time of the site visit. Accreditation staff will conduct a preliminary review of all applications for completeness and will contact the programs for additional information as appropriate. Staff has the authority to request corrected information from the program for applications that are completed inappropriately or that are incomplete.

CAA members who conduct the initial review of the application will list specific questions or concerns related to the Standards for Accreditation [PDF] that will be shared with the program and the site visit team. The CAA will consider the mission and goals of the program and how the program's responses in the application demonstrate consistency with the stated mission, including religious mission. The CAA makes every effort to assist programs to meet the standards. By identifying problem areas early in the accreditation review process, the CAA enables the applicant program to take steps to correct deficiencies and thereby avoid the expense of a site visit that does not lead to (re)accreditation. Sharing the CAA's initial observations with the site visit team may assist the team to focus on potential problem areas.

Program Response

Observations that the CAA noted in its initial review are communicated in writing to the program. After reviewing the comments, the program director, in consultation with the faculty, decides whether to proceed with the accreditation review and site visit or to withdraw the application. This decision should be based on the program's own evaluation of its ability to demonstrate compliance with the standards by the time the site visit is conducted. Within 30 days from the date of the letter of initial observations, the program director should notify the CAA Chair of the decision to withdraw the program's application.

The program should be prepared to discuss the application materials and all initial observations with the site visit team at the time of the site visit. All programs proceeding with the site visit should submit a written response to the CAA's initial observations at least 30 days before the site visit. Additional information, such as an updated faculty summary, also may be submitted at this time. These materials will be forwarded to the site visit team, the Council Chair, and reviewers, and a copy will be placed in the master file at the Accreditation Unit with the application for future reference.

Site Visit and Site Visit Report

The CAA, in consultation with the program director, determines the length of the site visit and the size of the site visit team. Typically, site visits are conducted over 2 days, but a program may require more time for the review—or a larger team—if it is located on more than one campus or delivered via multiple modes; also, a site visit may be conducted as a joint visit with another accrediting group or agency. Accreditation staff will schedule the site visit once dates have been received from the program. Details about team composition, scheduling, agenda development, and related issues can be found in this *Handbook.*

Site visits are conducted by teams who are responsible for a broad review of the program and for verifying evidence of compliance with the Standards for Accreditation. The team will provide an oral exit report to the program at the close of the site visit and develop a written report of their observations that will be sent after the site visit to the program and the institution's president (or designee), each of whom may provide a response to the report.

Within 30 days of receiving the site visit report, the program director should provide to the CAA Chair a written response that comments on the accuracy of the information contained in the site visit report, any changes in the program since the site visit, and planned changes. The site visit report is confidential and, therefore, is provided by the CAA only to the program, the site visit team, and CAA members.

CAA Final Review of and Action on Initial and Reaccreditation Applications

All materials related to the accreditation review, including the application, the CAA's initial observations, the site visit report, the program's responses to the initial observations and the site visit report, and any final comments by the site visit team, if appropriate, are reviewed by the CAA when making its final decision. The CAA bases its accreditation decisions on the published standards and its determination of the program's expected compliance with the standards. The CAA does not use as a negative factor an institution's religious mission-based policies, decisions, and practices for faculty, curriculum, facilities, equipment and supplies, and student support services provided that the program's curriculum include all core components as outlined in the Standards for Accreditation. To avoid any actual or implied conflict of interest, the CAA follows procedures as outlined in this *Handbook.*

Final accreditation decisions will be made during the CAA's winter and summer face-to-face meetings. In order to afford a program the opportunity for a full and complete review by the CAA, all materials must be received in the Accreditation Office no later than thirty (30) days prior to the first day of a CAA's face-to-face meeting to be considered during that meeting. If materials are received after this date, it will be at the discretion of the CAA whether to review the program during the meeting; the CAA has the discretion to complete the review without the program's response to the site visit report.

On occasion, the CAA may determine that there is insufficient time to allow for a full Council discussion and decision *during* the meeting, and it will conduct a conference call immediately following, but no later than within 30 days of the last day of the face-to-face meeting to finalize a program's accreditation review.

CAA members consider each program area of study separately when casting their votes (i.e., master's program in speech-language pathology or clinical doctoral program in audiology). CAA reviewers may make different decisions about each program under review at the same institution. CAA members will vote on program accreditation decisions consistent with voting protocols outlined in this *Handbook* and consistent with the conflict of interest policy.

Application Decision Options
Upon completion of its review, the CAA will take one of the following accreditation actions:

- ❑ **AWARD ACCREDITATION**
  Initial accreditation is awarded for 5 years to programs that are judged to be in compliance with the Standards for Accreditation, subject to annual review by the CAA. Reaccreditation is awarded for 8 years, subject to annual review by the CAA. A statement of concerns may accompany the letter awarding accreditation to assist the program in conducting self-evaluation before the first annual report. Continuation of accreditation is dependent upon approval of an annual report and timely payment of annual accreditation fees.

- ❑ **AWARD/CONTINUE ACCREDITATION WITH MONITORING**
  A program that is accredited with monitoring is judged to have standards-related deficiencies identified in the review that result in a noncompliance citation. Those deficiencies cited may not affect the program's capability to provide acceptable educational experiences for students and must be corrected within one year. If unresolved within one year, the CAA must give a second noncompliance citation, which will result in a probation decision.

- ❑ **PLACE PROGRAM ON PROBATION**
  An accredited program is placed on probation when it is judged to be not in compliance with the Standards for Accreditation and when there is clear evidence of circumstances that jeopardize the capability of the program to provide acceptable educational experiences for the students. A program also may be placed on probation because the program has not corrected deficiencies noted earlier by the CAA. This decision option is not available when the CAA considers initial accreditation applications, either for a program in candidacy or an applicant; this option is available only for actions on currently accredited programs. A probation decision is not subject to appeal.

A program placed on probation must demonstrate compliance with the standards within 1 year. A program on probation is considered to be an accredited program. Because programs on probation continue to be accredited, a new accreditation cycle will be awarded. The probationary status remains in effect until the CAA makes a decision, based on the probation report, to continue accreditation, withdraw accreditation, or to extend probation for up to 1 year. See the Probation Report section in this chapter for the reporting obligations and decision options of probation reports.

- ❑ **WITHHOLD OR WITHDRAW ACCREDITATION**
  The CAA withholds accreditation or withdraws reaccreditation from a program when it judges that the program is not in compliance with all Standards for Accreditation.

  Before accreditation is withdrawn from a currently accredited program, a program is placed on probation and given the opportunity to come into compliance with all standards in accordance with the probation procedures, except where extenuating circumstances exist that would warrant withdrawal of accreditation status from a program without first placing the program on probation. A program whose accreditation is withheld or withdrawn has the opportunity to request a further consideration of the decision by the CAA and subsequently to appeal the decision.

  Once the decision is final, the program would no longer hold any accreditation status, including applicant, effective at the end of the next academic term following the date of notification of the final adverse action. If the program seeking initial accreditation does not hold an accreditation status, e.g., candidacy, the effective date of the decision is the date of the notification letter. The program may apply to the CAA for an accreditation status in future without prejudice if the decision to withhold or withdraw the accreditation is upheld. If a program fails to maintain their initial accreditation status once awarded, they are not eligible to return to Candidacy status.

The CAA may **defer** making a final accreditation decision when there is insufficient information upon which to base a decision; thus, the decision is deferred until a later time specified by the Council (e.g., 30 days). Deferral permits a program to provide essential clarifying information regarding possible noncompliance with the standards. The CAA will notify the program when a decision is being deferred and request that a program submit additional information or materials by a specified date for consideration by the members of the Council in making a final accreditation decision.

The CAA may also, at its discretion, conduct a focused site visit to further investigate a particular issue to determine whether the program is in compliance with specific standards. The CAA will indicate to the program the explicit reasons that such a visit is necessary. Such visits may be conducted by members of the site visitor pool or by members of the CAA. These site visitors will write a report to be considered by the full Council at its next regularly scheduled meeting. A program's accreditation status remains unchanged during a period of deferral.

The CAA reviewers will review the additional materials received from the program, either from responding to the deferral or the focused site visit, and conduct a final vote from the options above.

As an accrediting agency recognized by the U.S. Secretary of Education, the CAA must comply with Criterion §602.20 [34 CFR 602.20]. This criterion requires that if an accrediting agency's review of a program indicates that the program is not in compliance with any standard, the CAA must provide a written timeline to the program to come into compliance that is reasonable, as determined by the CAA, based on the nature of the finding, the stated mission, and educational objectives of the program. The timeline may include intermediate checkpoints on the way to full compliance and must not exceed three years for programs, regardless of professional area[15]. The CAA may place a program on probation or withdraw accreditation from a program prior to this time when there is clear evidence of circumstances that jeopardize the capability of the program to provide acceptable educational experiences for the students, as noted above. However, if the review of a second consecutive report reveals that

15 The policy and procedures will be in effect January 1, 2021 for the maximum time allowed of three years for a program to document compliance with standards.

noncompliance issues continue for the same cited Requirement(s) for Review under a standard, the program will be placed on probation or accreditation withdrawn.

The CAA prepares an Accreditation Action Report (AAR) for each program communicating its final decision, which identifies any areas of noncompliance or areas for follow-up along with a written rationale and relevant guidance to support the Council's findings differentiating between the types of findings. The CAA also can provide commendations to the program and includes a section on the success of the program in meeting the CAA's expected student outcomes (i.e., program completion rate and Praxis Exam pass rate).

The CAA's final decision is transmitted in writing to the program director and to the university president or designee within 30 days of the decision. The CAA will publish its action consistent with its policy on Public Notice of Accreditation Actions.

In the event of a withdrawal decision and upon notification, the program is required to submit a transition report in accordance with the CAA's policy on Transition Reports, due 30 days from the notice of the decision being made final, e.g., after opportunity for appeal.

The CAA will notify programs at the time of the decision about the options for a consultative conference with a timeline to schedule and complete the conference, which will be conducted at a mutually agreeable time to be determined by the CAA. Consultative conferences are designed for programs that may be in jeopardy and the CAA has documented its concerns of the program's capability to provide acceptable educational experiences for the students or are subject to adverse action by the CAA. The consultative conference provides an opportunity to clarify the CAA's expectations, policies and procedures, or findings and to discuss the program's plans. The CAA strongly recommends that accredited programs the CAA has deemed to be in jeopardy, including those placed on probation, participate in a consultative conference.

Timelines

All final accreditation decisions will be made at the time of the CAA's scheduled winter and summer meetings, unless otherwise required by process. Other special reviews are scheduled as indicated by the Chair. Most program reviews will take approximately 12 to 15 months from the date of the application being submitted to the rendering of an accreditation decision.

- Staff conduct initial review and process materials—within 30 days of submission due date.
- Initial observations are made by the Council—within 30 days of staff review and processing.
- The program submits its response to initial observations—30 days before site visit.
- The site visit report is sent to the program–within 45 days after the site visit.
- The program submits its response to the site visit report—30 days after receipt.
- The final decision is communicated to the program—30 days after the Council's decision.

B. Annual Reports to Maintain Accredited Status

Once accreditation has been awarded, programs are required to submit an annual report to document continued compliance with standards and to maintain accreditation status. Programs due to submit an annual report will follow the same submission schedule as that required of programs submitting applications. Programs are expected to file annual reports by February 1 or by August 1; due dates are assigned based on the programs' anniversary dates of accreditation.

Programs in the initial 5-year accreditation period must file an application for reaccreditation in lieu of the fourth annual report. Programs with an 8-year accreditation period must file an application for reaccreditation in lieu of the seventh annual report.

When extenuating circumstances arise that impact the program's timely submission of a CAA annual report, the program director must request an extension in accordance with the CAA's procedures.

For programs that have not submitted an annual report by the due date and have not requested an extension, the CAA will notify the program director and the president of the institution or the president's designee that the program has been placed on administrative probation. If the CAA does not receive the application within 30 days of the date of notification, the accreditation status is considered lapsed (withdrawn).

Initial Review

Annual reports are reviewed to determine whether a program appears to remain in compliance with the standards. Accreditation staff will conduct an administrative review of all annual reports for completeness, including a response to any areas of concern from the previous decision letter (e.g., accreditation, annual report, substantive change approval), and will contact the program for additional information as appropriate. Staff has the authority to return to the program for correction of those reports that are completed inappropriately or that are incomplete.

CAA Final Review of and Action on Annual Reports

CAA members consider each program area of study separately when casting a vote (i.e., master's program in speech-language pathology or clinical doctoral program in audiology). CAA reviewers may make different decisions about each program under review at the same institution. CAA members will vote on program accreditation decisions consistent with voting protocols outlined in this *Handbook* and consistent with the conflict of interest policy.

All materials related to the annual report review—including the annual report, the program's responses to any prior concerns, and any additional information submitted by the program—are considered in making a decision.

Upon completion of its review, the CAA will take one of the following accreditation actions:

- ❑ approve for continued accreditation;
- ❑ approve for continued accreditation with monitoring;
- ❑ place the program on probation;
- ❑ withdraw accreditation.

The CAA will recommend continuing accreditation with monitoring for standards-related deficiencies identified in the review that may not affect the program's capability to provide acceptable educational experiences for students and must be corrected within one year. If unresolved within one year, the CAA must give a second noncompliance citation, which will result in a probation decision.

If additional information is required at this stage to determine continued compliance with standards, the CAA may **defer** the decision to request additional information from the program. Deferral permits a program to provide essential clarifying information regarding possible noncompliance with the standards. The CAA will notify the program when a decision is being deferred and request that a program submit additional information or materials by a specified date for consideration by the members of the Council in making a final decision. If the CAA does not believe that the additional information resolves concerns, the CAA may recommend to place the program on probation or to withdraw accreditation.

Any recommendations to place a program on probation or to withdraw accreditation are referred to the Executive Committee for its review. The Executive Committee will review the recommendation and ensure that review procedures have been followed. If needed, the Executive Committee will solicit staff input that may be material to the case and incorporate that information into the record of review. After a review of the complete record, if the Executive Committee judges that deficiencies may be such that a decision to place the program on probation or to withdraw accreditation may result, the annual report will be forwarded to the remaining eligible voting Council members for a decision at its next face-to-face meeting.

The CAA may also, at its discretion, conduct a focused site visit to further investigate a particular issue to determine whether the program is in compliance with specific standards. The CAA will indicate to the

program the explicit reasons that such a visit is necessary. Focused site visits will be conducted by members of the site visitor pool. If a focused site visit is conducted, the CAA's decision will be deferred until the next regularly scheduled meeting following the conduct of the site visit and reporting. The site visit team will write a report to be considered by the full Council, for which the program will be afforded opportunity to respond before the Council's action. A program's accreditation status remains unchanged during a period of conducting a focused site visit. If the annual report decision was deferred or a focused site visit was conducted, the CAA members will review the additional materials received from the program and conduct a final vote at its next regularly scheduled meeting.

Before accreditation is withdrawn, a program is placed on probation and given the opportunity to come into compliance with all standards in accordance with the probation procedures, except where extenuating circumstances exist that would warrant withdrawal of accreditation status from a program, without first placing the program on probation. A program whose accreditation is withheld or withdrawn has the opportunity to request further consideration of the decision by the CAA and subsequently to appeal the decision. Once the decision is final, the program would no longer hold an accreditation status effective at the end of the next academic term following the date of notification. In the event of a withdrawal decision and upon notification, the program is required to submit a transition plan in accordance with the CAA's policy on Transition Reports, due 30 days from the notice of the decision being made final, e.g., after opportunity for appeal. The program may apply to the CAA for an accreditation status in the future without prejudice, if the decision to withhold or withdraw the accreditation is upheld.

As an accrediting agency recognized by the U.S. Secretary of Education, the CAA must comply with Criterion §602.20 [34 CFR 602.20]. This criterion requires that if an accrediting agency's review of a program indicates that the program is not in compliance with any standard, the CAA must provide a written timeline to the program to come into compliance that is reasonable, as determined by the CAA, based on the nature of the finding, the stated mission, and educational objectives of the program. The timeline may include intermediate checkpoints on the way to full compliance and must not exceed three years for programs, regardless of professional area[16]. The CAA may place a program on probation or withdraw accreditation from a program prior to this time when there is clear evidence of circumstances that jeopardize the capability of the program to provide acceptable educational experiences for the students, as noted above. However, if the review of a second consecutive report reveals that noncompliance issues continue for the same cited Requirement(s) for Review under a standard, the program will be placed on probation or accreditation withdrawn.

The CAA prepares an Accreditation Action Report (AAR) for each program, communicating its final decision, which identifies any areas of noncompliance or areas for follow-up along with a written rationale and relevant guidance to support the Council's findings differentiating between the types of findings. The program is expected to respond to the issues identified at the time of the next (annual) report. The AAR also includes a section on the success of the program in meeting the CAA's expected student outcomes (i.e., program completion rate and Praxis exam pass rate).

The CAA's final decision is transmitted in writing to the program director and to the university president or designee within 30 days of the decision. The CAA will publish its action consistent with its policy on Public Notice of Accreditation Actions.

The CAA will notify programs at the time of the decision about the options for a consultative conference with a timeline to schedule and complete the conference, which will be conducted at a mutually agreeable time to be determined by the CAA. Consultative conferences are designed for programs whose accreditation status may be in jeopardy and the CAA has documented its concerns of the program's capability to provide acceptable educational experiences for the students or are subject to adverse action by the CAA. The consultative conference provides an opportunity to clarify the CAA's expectations, policies and procedures, or findings and to discuss the program's plans. The CAA strongly recommends that accredited programs the CAA has deemed to be in jeopardy, including those placed on probation, participate in a consultative conference.

16 The policy and procedures will be in effect January 1, 2021 for the maximum time allowed of three years for a program to document compliance with standards.

Timelines

Typically, annual report decisions are completed outside of the CAA's decision-making meetings and will follow the estimated time lines below. Most reviews will take approximately 5 months from the date the annual report is submitted to be completed. However, if the review included a deferral or focused site visit or warranted a more intensive review, the time to final decision on the annual report will be extended.

- Staff conduct initial review and process materials—within 60 days of the submission date.
- CAA members conduct a review—within 60 days of staff review and processing.
- The final decision is communicated to the program—within 30 days after the Council's review and decision.
- Final decision to withdraw accreditation becomes effective at the end of the next academic term following the date of notification; the letter would specify the exact date.

C. Probation Reports

After the CAA has placed a program on probation for noncompliance with accreditation standards, the program must demonstrate compliance by submitting a probation report no later than 4 weeks prior to the CAA's face-to-face meeting in which the report is expected to be reviewed. The program must address all concerns noted by the CAA in the probation Accreditation Action Report (AAR) in its probation report and provide relevant documentation as appropriate. All components of the probation report, i.e., narrative and appendices, must be included when the report is submitted to the CAA.

As programs are typically placed on probation for a period of 1 year, the report would be due approximately 11 months from the date of the meeting in which the probation decision was made by the CAA. However, if, at any time during the year, the program is able to rectify the deficiencies noted and achieve compliance with the standards, it may submit its probation report. Filing a probation report prior to the end of the one-year period signals to the CAA that the program has rectified the noted deficiencies and deems itself in compliance with all standards to warrant removal of probation.

The probationary status remains in effect until the CAA makes a decision about the program's accreditation based on review of the probation report. A probation decision cannot be appealed. In the event that a program is placed on probation in the year in which its reaccreditation application is expected to be submitted, the CAA will consider the probation report at the next face-to-face meeting after it is submitted.

Requests for extensions of the submission date of a probation report are not covered under the CAA's policy, but will be considered on a case-by-case basis.

Initial Review

Accreditation staff will conduct a preliminary review of the probation report for completeness, including response to the areas of concern from the decision letter and AAR, and will contact the program for additional information as appropriate. Staff has the authority to return to the program for resubmission of those reports that are completed inappropriately or that are incomplete.

CAA Final Review of and Action on Probation Reports

Action on probation reports will be made during the CAA's face-to-face meetings. The reviewers consider each program area of study separately when casting a vote (i.e., master's program in speech-language pathology or clinical doctoral program in audiology), if multiple programs from the same institution are on probation. CAA reviewers may make different decisions about each program under review. CAA members will vote on program accreditation decisions consistent with voting protocols outlined in this *Handbook* and consistent with the conflict of interest policy.

The Accredited – On Probation status remains in effect until the CAA makes a decision to remove the probation status and continue the accreditation for the program or withdraw the accredited status. The voting options for the CAA when reviewing a program's first probation report are to:

- ❑ remove probation status and continue accreditation,
- ❑ extend probation status for up to 1 additional year, if applicable,
- ❑ withdraw the program's accreditation.

For programs that choose to file a probation report earlier than the assigned due date for which extenuating circumstances have been identified, the CAA can extend the program's probation status only up to the original 1-year reporting deadline.

If compliance with the accreditation standards has not been demonstrated within 1 year, accreditation will be withdrawn. Probation may be extended for 1 additional year only under extenuating circumstances. Probationary status may not exceed 2 years, unless the CAA extends this status for good cause as noted below.

If a program's Accredited-On Probation status is continued, the voting options for the CAA when a reviewing a program's second and any subsequent probation reports are to:

- ❑ remove probation status and continue accreditation,
- ❑ grant a good cause extension,
- ❑ withdraw the program's accreditation,

If a program fails to come into compliance with the standards after 2 years of probation, accreditation will be withdrawn or the CAA may grant a **good cause** extension for the program to come into compliance when all of the following conditions are met:

- The program demonstrates clear evidence of substantial progress in addressing areas of noncompliance during the probationary period.
- The program provides rationale for an extension and a plan that evidences an understanding of the program deficiencies, readiness, and capacity/resources to remedy deficiencies by the end period of any extension granted.
- The program's plan to address the deficiencies is determined by the CAA to be achievable for the program to demonstrate compliance with the accreditation standards by the end of the extension period.

For the CAA to consider granting an extension for good cause, the program must provide all information outlined above in the probation report. If the CAA determines that a good cause extension is warranted, it will identify a reasonable timeline for the program to address the areas of noncompliance with standards and to provide a good cause report to the CAA for its consideration and decision on the program's accreditation status.

The CAA also can choose to **defer** making a final decision on accreditation when there is insufficient information upon which to base a decision; thus, the decision is deferred until a later time specified by the Council. Deferral permits a program to provide essential clarifying information. The CAA may also, at its discretion, conduct a focused site visit to further investigate a particular issue to determine whether the program is in compliance with specific standards. The CAA will indicate to the program the explicit reasons that such a visit is necessary. If the probation report decision was deferred or a focused site visit conducted, the CAA members will review the additional materials received from the program and conduct a final vote at its next regularly scheduled meeting using the decision options listed above.

A program whose accreditation is withheld or withdrawn has the opportunity to request further consideration of the decision by the CAA and subsequently to appeal the decision. Once the decision is final, the program would no longer hold any accreditation status, including applicant, effective at the end of the next academic term following the date of notification. The program may apply to the CAA for an accreditation status in the future without prejudice, if the decision to withhold or withdraw the

accreditation is upheld. The CAA requires a program that has had its accreditation status withdrawn to submit a transition report 30 days from the notice of the decision being made final, e.g., after opportunity for appeal.

The CAA prepares an Accreditation Action Report (AAR) for each program communicating its final decision, which identifies any areas of noncompliance or areas for follow-up, along with a written rationale and relevant guidance to support the Council's findings differentiating between the types of findings. The CAA also includes a section on the success of the program in meeting the CAA's expected student outcomes (i.e., program completion rate and Praxis exam pass rate), as relevant in response to the probation report. Consideration of the probation report does not preclude citation of CAA concerns to which the program is asked to respond at the time of the next accreditation report (e.g., annual report).

The CAA's final decision is transmitted in writing to the program director and to the university president or designee within 30 days of the decision and will be published consistent with CAA's policy on Public Notice of Accreditation Actions.

Timelines

Final review of and decision on probation reports will occur at the CAA's decision-making meetings and will follow the estimated time lines below. However, if the review included deferrals or warranted a more intensive review, the time to make the final decision on the probation report will be extended.

- Staff conduct an initial review of probation reports—within 2 weeks of receipt.
- CAA members conduct a review—completed at the face-to-face meeting.
- The final decision is communicated to the program—within 30 days after the Council's review and decision.

Additional information requested from a program should be submitted within 30 days of the request. Other reviews are scheduled as indicated by the Chair.

D. Substantive Change Plans in Accredited Programs

The CAA must review and approve substantive changes that are proposed between scheduled comprehensive reviews to assess the continued quality of education being provided to students in CAA-accredited and candidate programs and the programs' continued compliance with the Standards for Accreditation. The CAA requires that, at least 12 months *prior* to the implementation of a proposed substantive change, the program submit written materials to the CAA describing the proposed change(s) in accordance with the CAA's substantive change policy and procedures.

The CAA will evaluate whether the proposed change affects the accredited program's ability to maintain compliance with the accreditation standards. Substantive changes described in an accreditation application or annual (progress) report will be reviewed as part of the established CAA review procedures. Site visits will be conducted if necessary in accordance with CAA procedures to ensure that the program component is in compliance with CAA standards. If multiple sites are affected, a sample will be selected for visitation. An additional fee will be assessed for site visits exceeding the typical site visit length or team size or conducted outside of an accreditation application review.

Note: Programs that wish to pursue accreditation of a ***consortium*** *must submit an Application for Candidacy or Application for Initial Accreditation, as appropriate, for review by the CAA. Please refer to the appropriate section of this* Handbook *for more information.*

Initial Review

Accreditation staff will conduct a preliminary review of the substantive change plan for completeness and will contact the program for additional information as appropriate. Staff has the authority to return plans that are submitted in an incorrect format or that are significantly incomplete.

Materials may be submitted for CAA review prior to the final approval by all appropriate university and state authorities. However, the CAA will not approve the proposed change until the program has received final approval from these authorizing body(ies). Review of substantive change plans will be initiated as the plans are submitted, including a decision on whether or not the proposed plan warrants the conduct of a site visit before a final accreditation decision is made if submitted outside of the full accreditation application review.

CAA Final Review of and Action on Substantive Change Plans

Final actions on all substantive change plans will be placed on the CAA agenda at a face-to-face meeting, unless deferred until an alternative time.

In addition to its review of the substantive change plans, the Council will consider the impact of the plans on the accredited program. The CAA will take separate actions on the proposed change and the accreditation status of the established program. After reviewing a substantive change plan, the CAA may:

- approve the plan for substantive change or
- deny/withhold approval of the plan for substantive change.

The CAA will take actions on the established program consistent with the decision options available for the type of report appropriate for such a change plan. (See the Candidacy Annual Progress Reports, Application, or Annual Reports review sections in this *Handbook*). Once the substantive change plan has been approved, the new modality will be included in the program's entry in the CAA's list of accredited and candidate programs. The program will be assessed an annual fee for the additional modality.

If additional information is required at this stage to determine continued compliance with the standards, the CAA may **defer** a decision on the substantive change plan to request additional information from the program. Deferral permits a program to provide essential clarifying information regarding possible noncompliance with the standards. The CAA will notify the program when a decision is being deferred and request that a program submit additional information or materials by a specified date for consideration by the members of the Council in making a final decision. The CAA also may choose to defer a decision on a related annual (progress) report or accreditation application if warranted.

The CAA may also, at its discretion, conduct a focused site visit to further investigate a particular issue to determine whether the program is in compliance with specific standards. The CAA will indicate to the program the explicit reasons that such a visit is necessary. If a focused site visit is conducted, the CAA's decision will be deferred until the next regularly scheduled meeting following the conduct of the site visit and reporting. The site visit team will write a report to be considered by the full Council, for which the program will be afforded the opportunity to respond before the Council's action. A program's accreditation status remains unchanged during a period of deferral or during the conduct of a focused site visit (i.e., will not include the proposed program until approved by the CAA). If the decision was deferred or a focused site visit was conducted, the CAA members will review the additional materials received from the program and conduct a final vote at its next regularly scheduled meeting.

A decision to deny approval of the substantive change can be made final only after the program has been offered the opportunity to request further consideration by the CAA and subsequently to appeal the decision. Once the decision is final, the effective date is the date of the notification letter.

The CAA prepares an Accreditation Action Report (AAR) communicating its final decision, which identifies any areas of noncompliance or areas for follow-up along with a written rationale and relevant guidance to support the Council's findings differentiating between the types of findings. Consideration

of the substantive change plan does not preclude citation of CAA concerns to which the program is asked to respond at the time of the next accreditation report (e.g., annual report). The CAA's final decision is transmitted in writing to the program director and to the university president or designee within 30 days of the decision and will be published consistent with CAA's policy on Public Notice of Accreditation Actions. As multiple decisions are being made (i.e., substantive change plan along with either an annual report or accreditation decision), the results of all decisions are included in the letter to the program at the end of the Council's review.

The time line for review and decision will be consistent with the type of report with which the substantive change plan was filed.

XVIII. FURTHER CONSIDERATION AND APPEAL PROCEDURES

A. Decisions Subject to Further Consideration and Appeal

Only the following decisions of the CAA are subject to further consideration and appeal in accord with the procedures specified below:

- to withhold candidacy from an education program that currently does not hold any accreditation status,
- to withhold accreditation from an education program not currently accredited,
- to withdraw candidacy from an education program that currently holds candidate status,
- to withdraw accreditation from an education program that currently is accredited,
- to withhold approval of the plan for substantive change.

B. Further Consideration

When the CAA votes to withdraw or withhold an accreditation status from a program or denies approval of a substantive change plan, notification also includes justification for the decision and informs the program of its opportunity to request a Further Consideration review of the decision by the CAA and subsequently to appeal the decision. Further consideration is the mechanism whereby the program can present written documentary evidence of compliance with the specified standards. By exercising this prerogative, the program asks the CAA to reevaluate the adverse decision.

If the program chooses to request a further consideration review, it must submit written documentation to justify why candidacy or accreditation should not be withheld or withdrawn or the why the substantive change plan should be approved within 30 days from the date of notification. If the program does not exercise its further consideration option, the CAA's decision to withhold or withdraw accreditation is final and cannot be appealed.

At its next regularly scheduled face-to-face meeting, the CAA will review the program's further consideration request and documentation and render a decision consistent with the review process through which the accreditation or candidacy status had been withheld or withdrawn (e.g., award accreditation or candidacy, withhold or withdraw accreditation or candidacy, approve or deny substantive change, or place the program on probation if the program is currently accredited). The CAA Chair will then notify the program's director and the institution's president or designee within 30 days of its decision by means of a certified, return-receipt requested letter and also via a read-receipt requested email. Notice of withholding or withdrawing a program's accreditation or candidacy status must include a statement justifying the decision.

Upon review of the further consideration, if the CAA again votes to withdraw or withhold accreditation or candidacy or deny approval of a substantive change plan, the program may file an appeal consistent with the procedures outlined below.

Further Consideration – Financial

If the decision to withhold or withdraw an accreditation status was based solely upon a program's failure to meet a standard pertaining to finances, the program may on one occasion seek review by the CAA of significant financial information that was unavailable to the program prior to the decision to withhold or withdraw the accreditation status and that bears materially on the financial deficiencies identified by the CAA. The new financial information submitted by the program must meet the criteria of significance and materiality for consideration by the CAA prior to the time the decision to withhold or withdraw an accreditation status becomes final. Any determination made by the CAA with respect to the new financial information described above is not separately appealable by the program.

C. Appeals

The CAA's accreditation process provides an option for a program that has had an adverse action rendered by the CAA to request further consideration and appeal the decision to deny or withdraw

its accreditation status. If an appeal is filed, the program's adverse action is subject to review by a separate appeal panel and the decision rendered must be consistent with this appeals process.

A program may appeal only on the grounds that (a) the CAA decision was arbitrary, capricious, or not supported by substantial evidence available in the record when the CAA took action (which means by the end of the further consideration hearing), (b) the CAA did not properly apply the Standards for Accreditation, or (c) the procedures used to reach the decision were contrary to accreditation policies and procedures. The appellant program's burden of proof is a preponderance or greater weight of the evidence.

CAA decisions may be appealed only if the program has first exercised its option to undergo further consideration of that decision by the CAA and that review has been completed in accord with the procedures specified in Chapter XVIII.B. Further Consideration in this *Handbook*.

Appeals are considered by an ad hoc Appeal Panel appointed by the ASHA Vice Presidents for Academic Affairs in Audiology and Speech-Language Pathology, none of the members of which shall be current members of the CAA or members of the CAA when the further consideration hearing was held.

Filing an Appeal

Within 60 days of the date of the Council's certified, return-receipt requested letter and email reporting the Council's decision, the program shall submit its appeal via U.S. mail or overnight courier to the following address:

Vice Presidents for Academic Affairs
American Speech-Language-Hearing Association
2200 Research Boulevard, #MS 225
Rockville, MD 20850

with an electronic copy to be emailed to the Chair of the CAA at this email address: accreditation@asha.org.

The appeal must include a full written explanation of the grounds for appeal. The explanation must not introduce any new evidentiary material not included in the record before the CAA at the closing of the further consideration hearing.

Scope and Basis for Appeal

An appeal of a CAA decision shall be based entirely on the Council's record. All written material that the CAA considered in reaching its decision constitutes the record, in accord with the relevant review procedures outlined in this *Handbook*. A program's appeal shall not introduce evidentiary matters not included in the record before the CAA at the end of the further consideration hearing. Any such new evidence will be redacted from the submission before it is presented to the appeal panel and will not be reviewed or considered as part of the program's appeal. Review of an appeal must be based on the Standards for Accreditation in effect at the time of the accreditation decision.

The CAA shall provide complete copies of the full record to the ad hoc appeal panel and to the program within 7 days of the appointment of the appeal panel, as described below. The Chair of the CAA must also submit a written Response to the Appeal within 30 days of receipt of the appeal. This statement shall not introduce evidentiary matters not included in the record before the Council.

Appointment of an Appeal Panel

The ad hoc appeal panel must consist of one academic member, one practitioner member, and one public member. For an appeal involving a program in only one profession (e.g., either audiology or speech-language pathology), two of the three panel members shall represent that profession. For an

appeal involving programs in both professions, the panel shall include one representative from each profession.

Accreditation staff shall maintain a list of at least 20 persons who are qualified by prior service on the CAA to serve on ad hoc appeal panels. The list shall be updated on an annual basis and made available to the ASHA Vice Presidents for Academic Affairs as needed. Academic and practitioner members of ad hoc appeal panels shall be selected from that list. The public member shall be selected from that list, if possible. However in the event that past CAA public members are unable to serve, individuals who have accreditation experience as a public member for another accrediting agency may be deemed eligible to serve as a public member on an ad hoc appeal panel. In such cases, Accreditation staff will assist in identifying potential candidates for consideration for appointment. Individuals who serve as a public member on the panel must meet the CAA's definition of public member.

To consider a specific appeal, the ASHA Vice Presidents for Academic Affairs, either in audiology or speech-language pathology, depending on the professional area of the appellant program, shall identify at least six persons as potential members of an ad hoc appeal panel, none of whom shall have a conflict of interest with the program or have participated in the accreditation process that led to the decision being appealed. The vice president will contact each person to determine his/her willingness to serve on an appeal panel. If the Vice President for Academic Affairs has a conflict of interest with the program, the ASHA President will designate another vice president to make the selections for the appeal panel.

After it has been determined that these persons are willing to serve, the Vice President for Academic Affairs will transmit the names to the program and to the CAA Chair, either of whom may challenge within 7 days of receipt any of the potential panelists for just cause (e.g., conflict of interest, bias). After considering such challenges, the Vice Presidents for Academic Affairs shall appoint three members of the appeal panel and shall designate one of them as chair. Members will be appointed based on their current function (i.e., academic, practitioner), which may be different from their respective roles during their previous term of CAA service, to ensure appropriate composition on the panel.

The Vice Presidents for Academic Affairs will inform the program and the Chair of the panel appointments. Appointment of the panel shall be completed within 30 days of the receipt of the program's appeal. Once the Vice Presidents for Academic Affairs appoint the appeal panel, they will be excused from further responsibilities in this process.

Appeal panel members will be provided materials to support the review and resolution of the appeal, including a copy of the full record, the CAA's Standards for Accreditation, *Accreditation Handbook* (including the further consideration and appeal procedures, conflict of interest policy, review process guidelines and materials, decision options, etc.), and will participate in a training session to review the panel members' roles and responsibilities. Appeal panel members will be expected to sign a confidentiality agreement and conflict of interest form.
A member of the accreditation staff will be appointed by the Chief Accreditation Officer as staff liaison to all parties involved in the appeal process. All questions shall be directed to the staff liaison. The staff liaison will be responsible for organizing the appeal documentation and disseminating the documentation via secure file sharing to all parties. This person may also act as the resource officer for all parties.

Appeal panel members will be required to complete training given by the accreditation staff liaison and ASHA's legal counsel. The training will provide an overview of the appeals process, timelines, and expectations.

Appeal Hearing

The appeal panel chair shall schedule a hearing on the appeal to occur within 60 days of the appointment of the appeal panel and shall notify the program and the Chair of the CAA of the time and place thereof. Each shall have the right to appear in person or by a designated representative and to present a statement or argument. The appeal hearing may also be conducted via live virtual platform.

The program shall be entitled to be represented by counsel of their choosing and at their own expense at the hearing. ASHA's legal counsel may be present to advise the panel concerning the conduct of the hearing. Separate legal counsel for the CAA Chair may be present to advise the representatives of the CAA. The CAA Chair shall be entitled to the assistance of the Chief Accreditation Officer or another designated accreditation staff representative who is most familiar with the case. That person will be present at the hearing and, at the panel's discretion, may be called to provide information and, in this case, shall be subject to questioning like any other presenter.

Individuals who may be present during the hearing include the program's designated representative(s), the program's legal counsel (if applicable), the appeal panel members, ASHA legal counsel (if applicable), the Chair of the CAA and designated staff representative for the CAA, CAA's legal counsel (if applicable), and the designated staff liaison.

Following introductory remarks by the panel chair, the program shall be heard first, then the CAA. Finally, the program shall be afforded the opportunity for rebuttal. Program representatives shall not be permitted to direct questions to the CAA representatives, and the CAA representatives shall not be permitted to direct questions to the program representatives. Information provided by the program representatives and the CAA representatives at the appeal hearing must only be related to the contents of the official record. New information will not be permitted or considered as part of the appeal panel's decision. (See Script for Appeal Hearings [PDF].)

After the hearing, the panel shall meet in closed session, with only the panel's legal advisor and assigned staff member present, to consider its decision, which shall be by majority vote of the panel.

Alternatively, the program may inform the panel chair in writing that it chooses to have the appeal considered on the basis of written documents only, without a hearing. If this option is chosen, the panel will hold a meeting within 60 days of the appointment of the appeal panel to consider the written record and reach a decision. Only the panel's legal advisor and the ASHA staff liaison assigned to maintain a record of the panel's decision may be present during this process; no additional persons may be present.

Panel Decision and Report

The function of the panel shall be to review the record and to determine whether the CAA followed required procedures, properly applied the standards, and based its decision on evidence that was in the record before it when it made its decision following the further consideration hearing. The panel shall not consider information presented during the hearing that was not a part of the record as part of its decision. The panel shall determine whether there was sufficient probative evidence before the CAA to justify its decision. The panel has decision-making authority for accreditation decisions, limited to actions considered under this appeal policy. The CAA shall accept the authority of the panel in making an accreditation decision under these appeal procedures and shall implement the decision fully consistent with the appeal panel's decisions or instructions.

For the CAA decision being appealed, the panel may:

• affirm the CAA decision,
• amend the CAA decision, or
• remand the case to the CAA for reconsideration in light of the panel's findings regarding procedural violations or substantive errors in the Council's decision. If the panel decides to remand the case, it must clearly identify in its decision the specific issues for review, clarification, and/or decision by the CAA.

The written report of the panel will state its decision and the basis for it. The panel will transmit its report in writing within 15 days of the appeal hearing to the program, the CAA, and the ASHA Vice Presidents for Academic Affairs. The final decision shall be available consistent with the CAA's policy on Public Notice of Accreditation Actions. If the panel upholds the decision of the Council, that decision becomes final as of the date of the letter informing the program of the panel's decision and is not subject to appeal. For programs that hold an accreditation status (i.e., accredited, accredited-on probation, or candidate), the program will no longer hold any accreditation status, including applicant, effective at the end of the

next academic term following the date of notification. For programs that do not hold an accreditation status, the program will no longer hold applicant status, and the decision will be effective as of the date of notification.

If the panel affirms the CAA decision, the decision becomes final as of the date of the letter informing the program of the panel's decision and is not subject to appeal, consistent with the timelines noted above for programs holding an accreditation status or for programs holding an applicant status.

When a decision is amended by the panel, that decision becomes final as of the date of the letter informing the program of the panel's decision and is not subject to appeal, consistent with the timelines noted above for programs holding an accreditation status or for programs holding an applicant status. To amend is to make a change by adding, subtracting, or substituting language in the original decision of the CAA. The panel's decision must be consistent with the decision options available to the CAA, as outlined in this *Handbook*. The final decision shall be made available consistent with the CAA's policy on Public Notice of Accreditation Actions.

When a decision is remanded, the appeals panel must explain the basis for a decision that differs from that of the CAA's original action. The CAA shall reconsider its previous decision no later than its next regularly scheduled meeting, giving due consideration to the findings and recommendations of the panel, and act in a manner consistent with the appeals panel's decisions or instruction. The results will be transmitted to the program and the Vice Presidents for Academic Affairs within 30 days of the reconsidered decision. Reconsidered decisions are final, and no further appeals are available. The final decision shall be made available consistent with the CAA's policy on Public Notice of Accreditation Actions. The program may apply to the CAA for an accreditation status in the future without prejudice.

D. Arbitration

If a program elects to dispute an adverse final decision of the CAA or an appeal panel (e.g., the final denial, withdrawal, or termination of accreditation) or if the CAA elects to dispute a final decision of the appeal panel beyond the appeals process described above, any such dispute shall be resolved through arbitration prior to any other legal action. The CAA has adopted the initial and non-binding arbitration program through the Council on Higher Education Accreditation (CHEA). Note: Neither the non-binding arbitration program through CHEA, nor the arbitration panel, are decision-making bodies within the CAA.

If either party exercises this prerogative, the process must be initiated within 20 business days of the final decision on appeal, in accordance with Section II Policies and Procedures of the CHEA Arbitration Program. All parties are expected to comply with all policies and procedures identified in the CHEA Arbitration Program.

This arbitration requirement applies to all adverse actions, as that term is defined in 34 C.F.R. § 602.3, including the denial, withdrawal, suspension, revocation, or termination of accreditation or preaccreditation, or any comparable accrediting action an agency may take against an institution or program.

Timelines

The following summarizes the timelines in the appeal process, beginning from the date an appealable decision is transmitted to a program from the CAA after further consideration review.

- The program submits an appeal within 60 days of the CAA decision letter.
- The CAA Chair submits a Response to the Appeal further explaining the CAA's decisions within 30 days of receipt of the appeal.
- The appeal panel is appointed within 30 days of receipt of appeal.
- Within 7 days following the appointment of the panel, the staff liaison forwards a copy of the record before the CAA, the appeal documentation, and the CAA's Response to the Appeal to the appeal panel and to the program.
- An appeal hearing occurs within 60 days of the appointment of the appeal panel.

- The appeal panel transmits its final decision and its basis within 15 days of the hearing or appeal panel meeting.
- If the decision is remanded, the CAA considers its previous decision no later than its next regularly scheduled meeting and transmits the results of reconsideration to the program within 30 days of that meeting.
- If either party disputes the final decision on appeal, the party must initiate the arbitration process within 20 business days of the final decision on appeal.

Costs of Appeals

All costs incurred by the program in connection with the appeal and arbitration, including, but not limited to, travel and lodging of the program's representatives and other expenses shall be the program's sole responsibility. All costs associated with the reasonable travel and meals incurred by members of the appeal panel shall be divided equally between the program and the CAA. Any additional costs incurred by the CAA (e.g., legal counsel) shall be the CAA's sole responsibility. Administrative costs of the appeals process itself (e.g., ASHA legal counsel for the appeal panel, staffing, meeting facilities) will be assumed by ASHA.

E. Transition Reports

When the CAA withdraws an accreditation status from a program, and that decision is made final, the effective date of that decision is at the end of the academic term following the next date of notification. Programs must inform CAA as the accreditor, via a transition report, of the time lines, activities, and resources that the program and sponsoring institution of higher education will provide to ensure fair and equitable treatment of all currently enrolled students. The program must ensure that quality education will be continued through the duration of the operational program and to provide students with reasonable opportunities to complete their education prior to the date that the accreditation status is withdrawn.

Procedures:
In the event that CAA decides to withdraw a program's accreditation status, the program must file its transition report 30 days from the notification date of the CAA's final decision to withdraw the program's accreditation status. The program must submit to the CAA Accreditation Office a transition report that includes:

- a plan and time line to ensure sufficient leadership, faculty, and other resources to provide the curriculum, practicum experiences, support services, and advising needed to support current students' completion of the program in accordance with the program's mission, meet its obligations to its students, and maintain all appropriate student records consistent with institutional policy;
- evidence that all current and prospective students have been informed of the withdrawal of the program's accreditation status, its effective date, and a plan for assisting them in completing the program of study.

The CAA may request additional documentation to support the transition report. Failure to submit the required transition report by the due date may result in the immediate termination of the program's accreditation status with the CAA and may be reported to the appropriate institutional accreditor.

XIX. SITE VISIT PLANNING AND CONDUCT

A. Candidacy Site Visit

Purposes of the Candidacy Site Visit

The purposes of the candidacy site visit are to:

- verify the accuracy of information provided in the application and resolve questions/concerns that arose from review of the application,
- directly observe program resources and space on campus and interact with program leadership,
- document that compliance with accreditation standards was verified, consistent with CAA's expectations to award candidacy,
- facilitate the CAA's decision making for new programs by providing a written report of the visit.

The CAA employs its Standards Compliance Continuum to outline the expectations for the program's progress towards compliance with all Standards for Accreditation over time. Evidence of comprehensive and achievable planning must be addressed in the candidacy application in order for the program to progress in its review. Although a program is not expected to be in compliance with all standards, the candidacy site visit and subsequent report will document the program's progress in its development, which the Council will consider when making its final decision about whether to award candidacy.

Scheduling the Site Visit

The candidacy site visit is typically scheduled to occur within one semester from the date of official application as part of the Council's review and decision on the program's application. The length of the visit is 1½ to 2 days, depending on the complexity of the applicant program. The candidacy site visit must be completed within 1 year of the date of the CAA's acceptance of the official candidacy application. Requests for any postponement must be submitted in writing to the CAA for its consideration.

The program must provide three sets of possible dates for the visit, during which the program director and key administrators would be available to meet with the candidacy site visit team. When proposing the visit dates, programs must consider elapsed time for a public comment period, the submission of the program's response to the CAA's initial observations, and development of an agenda in consultation with the team.

Multiple-Site Programs

Applications for programs offering academic components in more than one location will be evaluated using the same procedures as those for other programs and should demonstrate that all standards are met at each site. All locations at which academic instruction is provided will be reviewed during site visits and visited where practical. Site visit teams will be charged with the responsibility of reviewing and describing in particular those program aspects that are affected because of the multiple sites.

Programs considering establishing multiple site components should seek guidance from the CAA in advance of such actions and follow the guidelines provided in the CAA Policy on Substantive Changes.

If additional days or site visitors are required because of the additional locations, the program will be assessed additional site visit fees.

Hybrid Site Visits

A hybrid site visit may be conducted when one or some of site visit team members are not on the physical campus of the university due to extreme or extenuating circumstances, and when other reasonable options to conduct a fully in-person site visit have been exhausted. The CAA will render its decision on the program's accreditation status based on the report of the hybrid site visit.
The site visitors who are present in-person must tour the program's physical facilities, review sample student files, collect and verify sources of evidence not already provided by the program, if applicable,

and review materials requested by the CAA or relevant to any issues identified in the program's initial observations letter.

Cancellations

Occasionally, special circumstances make it necessary to cancel or postpone a site visit. In such instances, the Accreditation Office will reschedule the site visit in consultation with the program director within one semester. If a member of a site visit team cancels more than 45 days prior to the visit, Accreditation Office staff will make every effort to replace the team member or offer to reschedule the date of the visit with the program.

If a member of the site visit team cancels within 45 days of the site visit, Accreditation Office staff will notify the program director and discuss rescheduling options, which include:

- reschedule no later than one semester with original team,
- continue as scheduled but replace team member,
- continue as scheduled with only two members for a single professional area visit or three members for a dual professional area visit, provided the team includes one practitioner and one academic member.

The CAA and Accreditation staff have final authority on when a site visit will occur, when all options under the cancellation policy are exhausted. This decision is in consultation with the program, and to ensure that CAA complies with its own site visit policies and procedures.

Candidacy Site Visit Team Composition

For a program that applies for candidacy in a single professional area, either audiology or speech-language pathology, the site visit team shall consist of three members who represent the same professional area in which candidacy is sought—two members who are employed in academic institutions and one practitioner member. For a program that applies for accreditation in both audiology and speech-language pathology in the same review cycle, one site visit will be conducted. The site visit team for a dual program visit shall consist of four people: two members who are employed in academic institutions one from each professional area) and two practitioners (one from each professional area). To the extent possible, individuals from the same academic institution will not be placed on the same site visit team.

The Accreditation staff will designate an academic faculty site visitor as the candidacy site visit team chair, regardless of whether the visit will be conducted for one or both professional area programs. On occasion, an individual may accompany the visit team as a trainee or observer.

Appointment of the Candidacy Site Visit Team

After the official application has been acknowledged, the Accreditation staff will forward to the applicant program a list of candidacy site visitors and request that the program identify any persons with whom the program has a conflict of interest.

In order to avoid even the appearance of a conflict of interest, an individual may not serve as a site visitor to a given program if he/she:

- lives in the state in which the program is located or in close geographic proximity to the program,
- has been a member of the faculty/instructional staff of the program,
- was a student in the program,
- served as a consultant or as a site visitor to the program during the last accreditation review,
- is a faculty member whose program received a site visit within the past 5 years by a faculty member of the program currently being evaluated.

Although Accreditation staff attempt to monitor these criteria, responsibility for determining any possible conflicts of interest, actual or implied, lies with both the program and the site visitor. Site visitors must consider the degree to which they are able to make objective observations, reports, and recommendations. A person who for any reason cannot be objective (e.g., because of personal

friendship with a member of the instructional staff of the program under review, future employment considerations, or biases toward the program) must not serve as a site visitor to that particular program.

Upon receipt of the program-reviewed list of potential visitors and available dates, the CAA will assign a team and notify the program director.

Travel Arrangements and Expenses

After a site visit has been scheduled, the Accreditation staff sends site visitors detailed information regarding travel arrangements and expenses. Site visitors are responsible for making their own travel arrangements with ASHA's official travel agency. Site visitors are encouraged to finalize travel arrangements, in coordination with the team, at least 1 month prior to the visit. The program director is responsible for making and confirming hotel reservations for the site visitors. Before the visit, the program director and site visitors should be in communication regarding arrival and departure times. During the site visit, team members are responsible for their own expenses, including hotel costs; they are subsequently reimbursed consistent with ASHA's travel policy. Site visitors should not accept meals from or provide meals to employees of the institution being visited.

Preparation for the Candidacy Site Visit

Before the site visit, each site visitor should access and review all relevant documents submitted by the program and/or prepared by the CAA. In preparation for the site visit, each team member is expected to be **thoroughly** familiar with

- the current *CAA Accreditation Handbook,*
- the Standards for Accreditation,
- the program's official application,
- the CAA's observations provided after initial review of the application and the program's response to these observations and any updates on significant program changes (including a substantive change plan if appropriate),
- written public comments received prior to the site visit.

At least 30 days prior to the time the candidacy site visit is conducted, the program must submit a response to any CAA initial observations that are identified as requiring a response prior to the candidacy site visit. Additional information also may be submitted at this time. These materials will be forwarded to the candidacy site visit team, the Council chair, and reviewers. A copy will be placed in the master file at the Accreditation Office as part of the program record. The program should be prepared to discuss all initial observations with the candidacy site visit team at the time of the site visit.

All accreditation review materials, including the application and related correspondence, must be provided in English. Site visits will be conducted in English and the information collected must be reported to the CAA in English. Securing and providing the needed services of an interpreter, transliterator, or translator during the site visit or for the translation of documents will be the program's responsibility and at its expense. Any translated documents must be available within the expected review timelines. The CAA requires that contracted individuals be from outside of the program being reviewed and strongly recommend that they are certified interpreters. The program should advise the site visit team if the services of an interpreter, transliterator, or translator will be used during the site visit.

The program is required to provide key documents to the site visit team at least 30 days in advance in an electronic format. Programs may choose to upload files to a flash drive and mail them to the site visitors, may provide URLs for materials that can be accessed on the program's website, or grant temporary access to an internal site (e.g., a department or faculty intranet site), or establish a unique website to which site visit team members have access. The program may use a combination of these options to meet this requirement. The program must advise the site visit team chair if this requirement presents any hardship. A list of documents is provided on the CAA website.

The program also is expected to post an announcement of a public meeting (usually attended by clients, family, etc.) at least 15 days in advance of the site visit. Evidence of the posting should be provided to the site visitors at the time of the visit as noted below.

Public Comment/Public Meeting

The CAA provides the opportunity for public comment regarding the program that will receive a site visit, as fully described in the CAA's Policy and Procedures on Public Comment. The CAA publishes on its website the list of programs that have submitted an application for candidacy, initial accreditation, or reaccreditation during that calendar year for which CAA is seeking public comment as part of its current accreditation review of the published programs. The listing will include the date of the scheduled site visit for each program.

In addition, the program director must ensure that the candidacy site visit is announced to the public in a timely manner so that clients, community professionals, individuals external to the program and department, and the general public have the opportunity to address the candidacy site visit team. The program has the discretion to determine its community of interest and to advertise the public meeting through appropriate campus, local, or regional mechanisms. The program must widely publish an announcement regarding this meeting no later than fifteen (15) days prior to the site visit.

Individuals who wish to provide input about a program seeking candidacy (preaccreditation), initial CAA accreditation, or about a CAA-accredited program seeking reaccreditation may do so in one of two ways:

- by submitting written comments prior to the accreditation site visit in accordance with the procedures specified in the public comment policy—all comments about education programs are due in the Accreditation Unit at least three (3) business days before the first day of the scheduled site visit—
- by providing comments during the program's scheduled site visit.

All comments provided must:

- relate to a program's compliance with the current published Standards for Accreditation of Graduate Education Programs in Audiology and Speech-Language Pathology [PDF],
- identify the specific program seeking candidacy, initial accreditation, or reaccreditation with the CAA.

A full description of the procedures for submitting comments is available in this *Handbook*. Both written and oral comments will be considered during any portion of the site visit, provided they meet the criteria specified in the policy.

Site Visit Agenda and Time Allocation

The agenda typically will include opportunities for the team to:

- discuss with the program director and any instructional or clinical staff the academic and clinical aspects of the program;
- confer with the institution's administrators concerning their attitudes toward and plans for the program;
- inspect the program's physical facilities (classrooms, labs, clinical space);
- review course materials, syllabi, forms, etc.;
- facilitate the public meeting scheduled by the program director at which instructional staff, administration, students, and the general public may comment on the program or institution.

The program is expected to prepare a draft agenda and provide it to the chair of the candidacy site visit team at least 30 days before the scheduled visit. The suggested times for arranging the agenda are from 8:00 a.m. to 5:00 p.m. on both days, although the second day may end prior to that time depending on the complexity of the program and visit. An hour should be scheduled for lunch; there should be two 15-minute breaks each day. The team and the program director should identify exact start and end

times to allow for sufficient time to complete interviews, provide the exit report on the last day, and facilitate departure times of the team members. Evenings before and during the site visit are typically considered working time for the site visit team, and all members are expected to participate.

Interviews with central administration are best deferred until a time during the visit after the site visit team has had the opportunity to complete interviews and review materials. This arrangement will allow the team members to ask more focused questions when meeting with administrators. The team may divide activities and responsibilities for interviews and record reviews and other duties equitably when possible. All team members should be scheduled to interview members of the central administration (e.g., the dean, provost, and/or president).

Acting on behalf of the site visit team, the chair may request changes in the agenda before the team's arrival or request that relevant materials be made available, but should make such requests in a timely fashion. Candidacy site visitors should carefully review the agenda before the site visit so that, when necessary, the schedule can be adjusted to allow sufficient time for the critical initial interview and exit report and for all activities necessary for data gathering. Generally, the agenda should have sufficient flexibility to allow for changes that may seem essential during the conduct of the site visit.

To optimize the time on campus, the CAA recommends certain activities be conducted by the site visit team at the following points in the visit. The program and the site visit chair should collaborate on the agenda to ensure all aspects are covered when appropriate and in the most appropriate sequence. Activities should not be scheduled during the evenings, so that site visitors may have time to confer and prepare for the next day.

First Day of the Visit:

- Conduct entrance the interview with the program director and others as appropriate.
- Take a short tour of program facilities,
- Meet with the department chair if he/she is not the program director.
- Meet with the dean(s) and provost.
- Meet with academic and clinical faculty and staff, if applicable.
- Meet with undergraduate students, if applicable.
- Meet with departmental support staff.
- Review course materials and other source data.
- Facilitate a public meeting.

Evening of First Day:

- Review data gathered during the day.
- Organize the report format.
- Review initial observations generated by the CAA.

Second Day of the Visit:

- Meet with the institution's president or designee.
- Conduct a follow-up meeting with the program director or other faculty/ staff.
- Phone/meet with off-campus supervisors of practicum sites.
- Conduct additional record or resource review, if necessary.
- Prepare an exit report.
- Conduct an exit report session with the program director and others she/he may wish to invite.

A sample candidacy site visit agenda [PDF] is available to use as a resource.

Conducting the Candidacy Site Visit

Candidacy site visitors should maintain an open and objective attitude and should avoid expressing their personal philosophies about graduate education. Candidacy site visitors also must avoid comparing the applicant program with their own programs.

Internal matters of concern to a program may arise in the course of interviews. The site visitors should consider only matters that may influence the ability of the program to comply with the accreditation standards and to fully implement its development plan. If internal program problems are raised, the site visitors must avoid being drawn into mediation. They should record and report to the CAA only factual information and refrain from drawing conclusions or recommending solutions to issues not related to compliance with the standards.

Although much of the candidacy site visit time is taken up with interviews with key persons associated with the new graduate program, considerable data can and must be gathered through direct observation of facilities and/or from review of relevant records and printed or electronic documents. Some suggestions for gathering information about the program's progress towards compliance with each accreditation standard are provided in the Documentation Guidance [PDF] table. Keep in mind that compliance with all standards is not required at the time of award of candidacy, so some aspects of the program may not yet be implemented, but most—if not all—should have been planned or developed by the time of the candidacy site visit.

Preliminary Meeting of the Site Visit Team
The site visitors are expected to hold a planning session the evening before the site visit. If additional changes in the agenda are required, they can be arranged with the program director at the beginning of the site visit.

The site visitors should use this evening to:

- discuss the agenda,
- outline the responsibilities and assignments of each site visitor,
- review targeted areas of the program's application,
- identify areas needing more thorough review,
- review the names of the administrators and faculty listed in the program's application,
- arrange to confer with one another periodically throughout the visit.

Conducting Candidacy Interviews

All interviews and meetings have certain common purposes and should be guided by basic principles of timeliness, confidentiality, and efficient information gathering. All candidacy site visit interviews are conducted with one or more of the following purposes in mind.

- Verify information contained in the application;
- Clarify information contained in the application;
- Obtain information not included in the application;
- Clarify information that may be discrepant.

The candidacy site visit team should ensure interviews are scheduled with the following representatives from the institution and/or applicant program, as applicable:

- program director,
- department chair (if different from program director),
- director of clinical services,
- all academic and clinical faculty,
- dean of the college,
- dean of the graduate school,
- provost/president,
- administrative staff,
- undergraduate students,
- off-site supervisors.

Suggested questions and topics [PDF] for each of these interview groups have been developed and can be found in this *Handbook* to support data gathering during the candidacy site visit. Planning the Interviews
When the site visitors meet on the eve of the site visit, the team should develop strategies for carrying

out interviews in the most efficient and diplomatic manner. The site visit team is encouraged to generate specific questions for each interview, and plans should be made to repeat some questions in several interviews for reliability and to triangulate the data gathered. A set of Suggested Questions/Topics in Data Gathering During a Candidacy Site Visit [PDF] is available in this *Handbook* to assist site visitors and program representatives in preparing for the visit.

Because the team knows in advance whom it will interview, it can set goals for each interview. For example, when interviewing the dean or president, the site visit team should determine if the program has autonomy for professional decisions, whether the program has adequate financial resources, and if there are ready channels of communication. When interviewing instructional staff, the site visit team should explore such areas as faculty workload, input to curricular planning, accessibility of the program director, and continuing education policy. An interview with office administrative staff might confirm information about such matters as clinic operations and maintenance of records.

Thoughtful preparation will give site visitors the orientation they need to conduct each interview effectively. A review of the Documentation Guidance [PDF] for each standard can assist the site visit team in prioritizing the goals for each interview.

A statement about the importance of confidentiality during interviews with faculty and other individuals should be professed in the initial interview and reasserted in all subsequent meetings. Candidacy site visitors must be able to meet with individuals without the program director. Individuals being interviewed should be free to speak candidly.

Content of Interviews
Candidacy site visitors should briefly make introductions, make a statement about the importance of confidentiality during interviews, answer any questions the interviewee(s) may have, and proceed with their own questioning. The manner of questioning should direct the interviewee to provide information pertinent to the site visit and to the CAA. Site visitors should ask open-ended questions whenever possible.

Recording the Interviews
Note-taking is an integral part of the interview process and is crucial to ensuring an accurate report. Site visitors will record the name and position of each person interviewed together with their comments. Discrepancies in reports on specific issues should be recorded and, if possible, resolved before the end of the site visit. Visitors may wish to keep personal notes for reference after the visit. The site visit team will be asked to comment, as appropriate, on the program's response to the site visit report.

Closing Interviews
Do not extend the interview beyond meaningful data gathering. Site visitors should keep on schedule to the point of accomplishing the expected mission. Site visitors should courteously excuse themselves and proceed to the next item or individual on the agenda.

Required Meetings and Activities

Candidacy site visitors should be aware that certain interviews and meetings are particularly crucial in defining the roles of the team and the purpose of the candidacy site visit. These interviews, which are discussed in greater detail below, include:

- an initial interview with the program director,
- an orientation meeting with faculty and staff, if included in the agenda,
- a public meeting,
- an exit report.

Initial Interview With the Program Director
This initial interview is crucial in establishing the proper professional relationship and tone for the candidacy site visit. Site visitors should explain the purpose of the site visit and their role as CAA candidacy site visitors. A site visitor's role is not that of personal evaluator; it is to collect information related to the accreditation standards. Site visitors should clarify that they are not present to give advice,

to judge, or to make decisions about whether the program is awarded candidacy. Site visitors should indicate that they will provide an exit report to indicate their findings related to the program's progress towards compliance with the CAA's accreditation standards and that a full written report of the candidacy site visit will be provided to the program director and the university's president, or designee, within 6 weeks after the site visit.

Next, candidacy site visitors should review selected portions of the application with the program director. Site visitors should indicate areas that will need additional information or more specificity. In addition, site visitors should indicate that more than one interview with faculty members or other interviewees may be necessary to clarify the program operation and plans.

Orientation Meeting With Faculty and Staff

Faculty and staff should be oriented to the purpose of the visit, either by attending the candidacy site visitors' initial interview with the program director or in a separate orientation meeting. The program director is encouraged to invite all faculty members (or as many as possible) to this orientation. The site visit chair, who conducts this orientation, will review the purpose of the site visit and the roles of the candidacy site visitors, again emphasizing that the team's purpose is not to give advice, to judge, or to make decisions about accreditation. The site visit chair will review the final agenda for the candidacy site visit, answer questions, and announce that the exit report will be held at the end of the visit.

Public Meeting

The CAA provides the opportunity for any member of the public to provide comment about the applicant program. Comments must be provided in accordance with the CAA's Policy on Public Comment. This includes an opportunity for the members of the public to meet with the candidacy site visit team during their visit to campus. For new programs, attendees may include undergraduate students, faculty from other programs on campus, and individuals from the campus or surrounding community. For additional information, please review the Public Comment/Pubic Meeting under Preparing for the Visit, above.

Review of Resource Materials

Resource materials are a critical source to support a program's development and progress towards compliance with all accreditation standards and necessary preparation for graduate students to enroll. The following list of materials should be made available to the candidacy site visit team before or during the visit:

- department/program/graduate student/clinical handbooks,
- course syllabi/curriculum sequence and offerings,
- graduate catalog, if available,
- assessment plan/activities for student learning outcomes and program goals and objectives,
- student files (forms) for academic and clinical assessment and monitoring of progress through the program,
- line items budget,
- faculty vitae,
- faculty/instructional staff table,
- faculty/program administrator's evaluation procedures and policies,
- tenure statement and policies,
- off-campus clinical agreements/contracts,
- program's technology support,
- calibration contracts for all equipment,
- library resources and holdings,
- organizational chart.

The program is required to provide key documents to the site visit team at least 30 days in advance in an electronic format. See Preparation for the Site Visit, above.

Physical Facilities Tour

A tour of the physical facilities must be included on the agenda. The candidacy site visit team should have access to the following during the tour:

- overall office, classroom, clinical space re: handicapped accessibility, adequacy, and size;
- staff support space;
- clinical space and materials;
- research and clinical equipment;
- space for students' academic and clinical files;
- library facilities and accessibility.

Exit Report

At the close of the site visit, the candidacy site visit team meets with the program director and any faculty, staff, or university personnel the program director may invite. The Exit Report does not need to be of any particular duration, but must reflect the findings of the site visit team and must be consistent with what will be found in the final written report. It may be appropriate in some instances to recognize that the work of fact gathering is completed prior to the exit report and programs are not to refute or debate the merit of any findings being communicated. However, programs are given ample opportunity to respond to the findings of the site visit team after receipt of the written report.

The primary objective of this session is to provide an oral report of the findings of the site visit team related to the program's compliance with the accreditation standards, as outlined in the Standards Compliance Continuum. The site visitors should include (a) recognition of any standards for which the program's evidence of compliance could not be verified or (b) how the program's development exceeded the CAA's expected level of compliance. Such information will be noted in the site visit report. However, the team must not express any opinion about accreditation decisions.

The site visit team will complete an Accreditation Standards Inventory-Candidacy [PDF] prior to the exit report for the program being reviewed (i.e., master's in speech-language pathology or clinical doctorate in audiology). This form indicates the team's observations and ability to verify the program's expected compliance with standards. All site visit team members must sign the Accreditation Standards Inventory-Candidacy, which is then appended to the written candidacy site visit report.

The program director is reminded that the CAA welcomes suggestions for the improvement of the accreditation process and is urged to complete the Site Visitor Performance Feedback Survey as soon as possible after the site visit, preferably within 30 days. Feedback provided by programs about the site visitors is considered separately from the review of applications and does not influence the decision made about the program's accreditation status. In addition, the team will review the next steps and anticipated time lines for completing the CAA's review, including when the program can expect to receive the written report and the program's opportunity to respond.

The candidacy site visit team will make every effort to leave the following impressions.

- The site visitors were professional, friendly, well-prepared peers who thoroughly reviewed the program to confirm the information given in the application.
- The site visitors were methodical, maintained their schedule, and caused minimal interruption in the program's regular activities.
- The site visitors were impartial observers who were not abrupt, accusative, or argumentative and who did not give personal advice about or offer criticism of the program.

Following the candidacy site visit, a site visitor may not discuss, either orally or in writing, the site visit with individuals (including representatives of the program) outside of (a) Accreditation Office staff who work with the CAA, (b) the Chair of the CAA (or designated Council member), or (c) members of that site visit team. Questions about the candidacy site visit should be directed to the Chair of the CAA.

Problems During the Site Visit

On rare occasions, site visitors encounter special problems that limit or prevent them from completing the site visit in the required manner. In all such cases, the site visit chair should discontinue the site visit and should call the Chair of the CAA immediately to describe the problem and to have a course of action authorized. If the Chair of the CAA is unavailable, the site visit chair should contact another CAA member designated to act on behalf of the Chair in such matters. The CAA contact information is

provided to the program director and the team before the site visit.

Evaluation of Site Visitor Performance

At the conclusion of the site visit, programs and site visit team members are expected to complete and submit evaluations of the candidacy site visitors, as referenced above and in this *Handbook*.

B. Accreditation Site Visit

Purposes of the Site Visit

The site visit is one of several mechanisms used by the CAA to determine compliance with the Standards for Accreditation. A site visit serves to

- verify the accuracy of information provided in the application for initial or continued accreditation and resolve any questions or concerns that resulted from review of the application,
- directly observe program resources and physical facilities on campus and interact with program leadership,
- document evidence of compliance with accreditation standards,
- facilitate the CAA's decision making for program accreditation by providing a written report of the visit.

Scheduling the Site Visit

The program director determines the availability of faculty, staff, and administrators and then submits three sets of dates for the site visit to the Accreditation staff when the application is submitted. Site visits typically last 2 full days but may be extended to accommodate program needs. Accreditation staff schedule the visit for site visitors and the program.

The site visit is typically scheduled to occur no later than one semester following the date the application was submitted. Programs submitting an application in February will be scheduled for a fall site visit and programs submitting an application in August will be scheduled for a spring site visit.

Multiple Site Programs

Applications for programs offering academic components in more than one location will be evaluated using the same procedures used for other programs and should demonstrate that all standards are met at each site. All locations at which academic instruction is provided will be reviewed during site visits and visited where practical. Site visit teams will be charged with the responsibility of reviewing and describing in particular those program aspects that are affected because of the multiple sites.

Programs that are considering establishing multiple site components to their programs should seek guidance from the CAA in advance of such actions and follow the guidelines provided in the CAA's Policy on Substantive Changes.

If additional days or site visitors are required because of the additional locations, the program will be assessed additional site visit fees.

Hybrid Site Visits

A hybrid site visit may be conducted when one or some of site visit team members are not on the physical campus of the university due to extreme or extenuating circumstances, and when other reasonable options to conduct a fully in-person site visit have been exhausted. The CAA will render its decision on the program's accreditation status based on the report of the hybrid site visit.

The site visitors who are present in-person must tour the program's physical facilities, review sample student files, collect and verify sources of evidence not already provided by the program, if applicable, and review materials requested by the CAA or relevant to any issues identified in the program's initial observations letter.

Cancellations

Occasionally, special circumstances make it necessary to cancel or postpone a site visit. In such instances, the Accreditation Office will reschedule the site visit in consultation with the program director within one semester. If a member of a site visit team cancels more than 45 days prior to the visit, Accreditation Office staff will make every effort to replace the team member or offer to reschedule the date of the visit with the program.

If a member of the site visit team cancels within 45 days of the site visit, Accreditation Office staff will notify the program director and discuss rescheduling options, which include:

- Reschedule no later than one semester with original team.
- Continue as scheduled but replace a team member.
- Continue as scheduled with only two members for a single professional area visit, three members for a dual professional area visit provided the team includes one practitioner and one academic member.

The CAA and Accreditation staff have final authority on when a site visit will occur, when all options under the cancellation policy are exhausted. This decision is in consultation with the program, and to ensure that CAA complies with its own site visit policies and procedures.

Team Composition

For a program that applies for accreditation in a single professional area, either audiology or speech-language pathology, the site visit team shall consist of three members who represent the same professional area in which accreditation is sought—two members who are employed in academic institutions and one practitioner member. For a program that applies for accreditation in both audiology and in speech-language pathology in the same review cycle, one site visit will be conducted. The site visit team for a dual program visit shall consist of four people: two members who are employed in academic institutions one from each professional area) and two practitioners (one from each professional area). To the extent possible, individuals from the same academic institution will not be placed on the same site visit team.

The Accreditation staff will designate an academic faculty site visitor as the site visit team chair, regardless of whether the visit will be conducted for one or both professional area programs. On occasion, an individual may accompany the visit team as a trainee or observer.

Appointment of the Site Visit Team

The Accreditation Office provides the program with the list of potential site visitors to allow the program to identify any names that may present a conflict of interest. The program returns the modified list to the Accreditation Office before scheduling of the visit can begin.

In order to avoid even the appearance of a conflict of interest, an individual may not serve as a site visitor to a given program if he/she

- lives in the state in which the program is located or in close geographic proximity to the program,
- has been a member of the faculty/instructional staff of the program,
- was a student in the program,
- served as a consultant or as a site visitor to the program during the last accreditation review,
- is a faculty member whose program received a site visit within the past 5 years by a faculty member of the program currently being evaluated.

Although Accreditation staff attempt to monitor these criteria, responsibility for determining any possible conflicts of interest, actual or implied, lies with both the program and the site visitor. Site visitors must consider the degree to which they are able to make objective observations, reports, and recommendations. A person who for any reason cannot be objective (e.g., because of personal friendship with a member of the instructional staff of the program under review, future employment considerations, or biases toward the program) must not serve as a site visitor to that particular program.

Travel Arrangements and Expenses

After a site visit has been scheduled, the Accreditation Office sends site visitors detailed information regarding travel arrangements and expenses. Site visitors are responsible for making their own travel arrangements with ASHA's official travel agency. Site visitors are encouraged to finalize travel arrangements, in coordination with the team, at 1 month prior to the visit. The program director is responsible for making and confirming hotel reservations for the site visitors. Before the visit, the program director and site visitors should be in communication regarding arrival and departure times. During the site visit, team members are responsible for their own expenses, including hotel costs; they are subsequently reimbursed consistent with ASHA's travel policy. Site visitors should not accept meals from or provide meals to instructional staff of the institution being visited.

Preparation for the Site Visit

Before the site visit, each site visitor should access and review all relevant documents submitted by the program and/or prepared by the CAA. In preparation for the site visit, each team member is expected to be **thoroughly** familiar with

- the current *CAA Accreditation Handbook,*
- the Standards for Accreditation,
- the application prepared by the program under review,
- the CAA's observations provided after initial review of the application and the program's response to these concerns and/or any updates on significant program changes (including a substantive change plan if appropriate),
- public comments received prior to the site visit.

The program director must forward to the site visit team and to the Accreditation Office a response to the CAA's initial observations and a tentative agenda for the site visit team at least 30 days before the site visit. The program also is expected to post an announcement of a public meeting (usually attended by clients, family, etc.) at least 15 days in advance of the site visit. Evidence of the posting should be provided to the site visitors at the time of the visit.

The program is required to provide key documents to the site visit team at least 30 days in advance in an electronic format. Programs may choose to upload files to a flash drive and mail them to the site visitors, may provide URLs for materials that can be accessed on the program's website, or grant temporary access to an internal site, such as a department or faculty intranet site, or establish a unique website to which site visit team members have access; the program may use a combination of these options to meet this requirement. The program must advise the site visit team chair if this requirement presents any hardship. A list of documents is provided on the CAA website.

Coordinating Site Visits With Other Entities

The CAA supports the coordination of site visits at educational institutions. Among the reasons for coordinated evaluations are shared faculty, shared facilities, and integrated curricula, as well as the time and expense involved in preparing for a visit. However, site visits to programs applying for initial accreditation or candidacy status will be conducted separately and distinct from other CAA-accredited programs on campus. Once accreditation has been awarded to a candidate program and a review cycle has been established, the CAA will make every effort to synchronize schedules to coordinate site visits to all entry-level graduate programs in audiology or speech-language pathology at the same institution. If an institution offers more than one entry-level graduate education program (e.g., in different professions [speech-language pathology or audiology], satellite locations, distance education, or consortium programs), the CAA will evaluate all programs during a single site visit whenever possible. The CAA will follow its policies and procedures for conducting reviews pertaining to alternative models of education delivery as applicable.

If an institution has both a CAA-accredited graduate education program and program accredited by another accrediting or credentialing agency the CAA will coordinate the review activities, conduct a concurrent visit to both programs whenever possible, and attempt to synchronize the review cycles, depending on the program's preference. The CAA and other site visitors will be given descriptive

information on the corresponding accreditation program in order to increase understanding of both processes. In order to facilitate communication and to avoid potential areas of conflict during concurrent site visits by the CAA and other credentialing agencies, both the CAA site visitors and the other on-site reviewers will coordinate the development of the site visit agenda with each other and the program. A pre-visit planning conference call with both teams of visitors is recommended, at the discretion of the visitors. The site visit teams will then meet together on-site to share information and materials and to review areas of overlap or concerns to be addressed by one or more team members. The site visit team will have open, ongoing communication and sharing of information among all members throughout the visit. In addition, the teams will meet together prior to the exit report to prepare the reports and ensure consistency in the CAA's and other representatives' presentation styles and summaries.

Public Comment/Public Meeting

The CAA provides the opportunity for public comment regarding the program to be visited. Any comments received in advance of the site visit are provided to the site visit team for review and consideration during the site visit.

In addition, the program director must ensure that the site visit is announced to the public in a timely manner so that clients, community professionals, individuals external to the program and department, and the general public have the opportunity to address the site visit team. The program has the discretion to determine its community of interest and to advertise the public meeting through appropriate campus, local, or regional mechanisms. The program must widely publish an announcement regarding this meeting no later than fifteen (15) days prior to the site visit.

Individuals who wish to provide input about a program seeking candidacy (preaccreditation), initial CAA accreditation, or about a CAA-accredited program seeking reaccreditation may do so in two ways:

- by submitting written comments prior to the accreditation site visit in accordance with the procedures specified in the Policy on Public Comment; all comments about education programs are due to the Accreditation Office at least 3 business days before the first day of the scheduled site visit, or
- by providing comments to the site visit team during the program's scheduled site visit.

All comments provided must:

- relate to a program's compliance with the current published Standards for Accreditation of Graduate Education Programs in Audiology and Speech-Language Pathology (Standards), and
- identify the specific program seeking candidacy, initial accreditation, or reaccreditation with the CAA.

A full description of the procedures for submitting comments is available in this *Handbook*. Both written and oral comments will be considered during any portion of the site visit, provided they meet the criteria specified in the policy.

Site Visit Agenda and Time Allocation

The agenda typically will include opportunities for the team to perform the following duties.

- Discuss with the program director and any instructional or clinical staff the academic and clinical aspects of the program. Confer with the institution's administrators concerning their attitudes toward and plans for the program.
- Inspect the program's physical facilities.
- Review course materials, syllabi, etc.
- Review materials and records of the clinical aspects of the program, which does not violate client confidentiality.
- Review records of students' academic and clinical experiences.
- Visit off-campus clinical practicum sites, if practical.
- Interview off-campus practicum supervisors.
- Interview students.
- Interview alumni of the program, if practical.
- Facilitate the public meeting scheduled by the program director at which instructional staff, administration, students, and the general public may comment on the program or institution.

Interviews with central administration are best deferred until the second day of the visit. After a full day of on-site interviews, observations, and review of materials, the site visit team members will be able to ask more focused questions when meeting with administrators.

Acting on behalf of the site visit team, the chair may request changes in the agenda before the team's arrival or request relevant materials be made available, but should make such requests in a timely fashion. Generally, the agenda should have sufficient flexibility to allow for changes that may seem essential during the conduct of the site visit. Time should be allowed for appropriate breaks.

First Day of the Visit:
- Conduct entrance interview with the program director and others as appropriate.
- Take a short tour of program facilities.
- Meet with academic and clinical faculty and staff.
- Meet with a representative sample of graduate and undergraduate students.
- Meet with program graduates by phone or in person.
- Review files of a representative sample of at least 10 student folders in each area in which accreditation is sought for the past 2–3 years (Client folders may be reviewed provided that no identifying information is available and the procedure for review is consistent with patient privacy policies).
- Review course materials.
- Facilitate a public meeting.

Evening:
- Review data gathered during the day.
- Organize the report format.
- Review initial observations generated by the CAA.

Second Day of the Visit:
- Meet with institution's president or designee.
- Meet with the dean(s), provost.
- Observe treatment and diagnostics.
- Continue with faculty and staff interviews.
- Phone/meet with off-campus supervisors or visit off-campus practicum sites.
- Meet with the department chair, if different from the program director.
- Conduct additional record review, if necessary.
- Prepare an exit report.
- Conduct the exit report with program director and others she/he may wish to invite.

Time Allocation

The suggested times for arranging the agenda are from 8:00 a.m. to 5:00 p.m. on each day of the visit. Evenings before and during the site visit are typically considered working time for the site visit team, and all members are expected to participate. An hour should be built in for lunch; there should be two 15-minute breaks each day.

The team and the program director should identify exact start and end times to allow sufficient time to complete interviews, provide the exit report on the last day, and facilitate departure times of the team members. If the complexity of the program being reviewed necessitates a third day, the program director and team members should negotiate appropriate times to accomplish all elements of the visit. However, teams and programs may adjust these times to better accommodate team transportation schedules and location(s) to be visited. For example, the visit could be designed to begin midday on the first day (day of team arrival), be conducted for a full day on the second day, and conclude by midday of the third day (day of team departure).

The team is expected to divide activities and responsibilities for interviews, record reviews, and perform other duties equitably. Many visits are structured to allow the team members to cover simultaneously multiple aspects of the site visit. For example, as one team member is reviewing student files, another may be contacting external supervisors by phone, while another is meeting with alumni or faculty.

Suggested Time Allotments	**Source of Information**
6 hours	**Interviews:** Administrators, program director, clinical director, faculty, current and former students, administrative staff, clinical supervisors (on site and off site), clients, parents, the public
4 hours	**Review Documents:** Personnel manual, student handbooks, clinic handbook, faculty vitae, job descriptions, course syllabi, clinical practicum schedule sheets, minutes from staff and in-service training meetings, clinic logs, student files, websites, budget, etc.
2 hours	**Examine Physical Facilities & Resources** (on site and off site): Classrooms, clinics, labs, offices, equipment, materials, instruments, etc.
3 hours	**Record Data and Notes for Accreditation Report**
½ - 2 hours	**Conduct Exit Report Session**
17 hours	**TOTAL**

Sample agendas have been developed for 3- and 4-member site visit teams to use as a resource.

Conducting the Accreditation Site Visit

Site visitors should attempt, as far as possible, to follow the established schedule. The schedule should allow adequate time for consultation among the site visitors and should permit extending the time for particular segments of the review as needed. Site visitors should avoid scheduling late arrival and early departure times. Site visitors will coordinate with Accreditation staff if there is a need to request an additional night's stay to accommodate the full expectation of the site visit. Ample time should be available for team consultations, mentoring of new site visitors, and adhering to the site visit agenda.

Time allocations must be balanced to take into account the needs of the team and the desires of the program. The program should be given sufficient opportunity to highlight its strengths, but the team must spend time on all aspects of the program to meet the objectives of the site visit review.

Generally, programs emphasize strengths and minimize limitations. For the program, identifying limitations may not be the most critical issue. However, the process of recognizing program limitations and developing constructive strategies to overcome those limitations is an important aspect of a program's own assessment and development. The site visitors' report indicating the program's plan and potential for overcoming its limitations is an important consideration for the CAA. Throughout the site visit, team members should encourage all persons who are interviewed to converse freely about the program and to reflect on all aspects of the program's functioning, including its strengths, limitations, and plans to address limitations.

Not all programs comply with each of the standards in the same manner. Some standards are very specific, allowing little flexibility in the approaches that may be used for compliance, whereas others

are less specific, permitting greater variation in acceptable approaches. The site visitors should explore and record in detail alternative approaches, their philosophical bases, and the observed results. Further, alternative approaches should be described thoroughly in the site visit report.

Site visitors are expected to maintain an open and objective attitude and must avoid expressing their personal philosophies about graduate education.

Internal matters of concern to a program may arise in the course of interviews. The site visitors should consider only matters that may influence compliance with the standards. If internal program problems are raised, the site visitors must avoid being drawn into mediation. They are expected to record and report to the CAA only factual information and refrain from drawing conclusions or recommending solutions to issues not related to compliance with standards.

Preliminary Meeting of the Site Visit Team

The site visitors are expected to hold a planning session the evening before the site visit. If additional changes in the agenda are required, they can be arranged with the program director at the beginning of the site visit.

The site visitors should use this evening to:

- discuss the agenda,
- outline the responsibilities and assignments of each site visitor,
- review targeted areas of the program's application,
- identify areas needing more thorough review, including
- reviewing the names of the faculty and administrators listed in the program's application,
- arranging to confer with one another periodically throughout the visit.

To optimize the time on campus, the CAA recommends certain activities be conducted by the site visit teams at the following points in the visit. The program and the site visit chair should collaborate on the agenda to ensure all aspects are covered when appropriate and in the most appropriate sequence. Activities should not be scheduled during the evenings so that site visitors may have time to confer and prepare for the next day.

Sources of Data

Although much of the site visit time is taken up with interviews with key persons associated with the graduate program, considerable data can and must be gathered through direct observation of facilities and/or from review of relevant records and printed or electronic documents. Some suggestions for gathering information about the program's compliance with each Standard for Accreditation have been compiled in Documentation Guidance [PDF]. Programs are required to give the site visit team electronic access to key documents at least 1 month prior to the visit.

Conducting Interviews

All interviews and meetings have certain common purposes and should be guided by basic principles of timeliness, confidentiality, and efficient information gathering. All site visit interviews are conducted with one or more of the following purposes in mind:

- Verify information contained in the application.
- Clarify information contained in the application.
- Obtain information not included in the application.
- Clarify information that may be discrepant.

Site visitors should carefully review the agenda before the site visit so that, when necessary, the schedule can be adjusted to allow sufficient time for the critical initial interview and exit report and for all individual or group sessions necessary for data gathering. Changes in the agenda during the site visit should be avoided if at all possible.

It is essential to stay on schedule and to move in and out of interviews with courtesy and efficiency. Interviews outside the department with such people as university presidents, deans, and former

students should be conducted as efficiently as possible. Administrators have very tight schedules and may not be completely knowledgeable about the CAA and the site visitors' role.

Site visitors should conduct all interviews agreed on in advance with the program director. The more individuals the site visit team interviews, the more data they can collect. All faculty should be interviewed either individually or, if necessary, in small groups. In large programs, there may not be time for an individual interview with every faculty member. A small-group meeting without the program director may be a more efficient way to gather the pertinent information from each person. Off-campus individuals who have an ongoing direct relationship with the program may be interviewed in person or by telephone.

A statement about the importance of confidentiality during interviews with faculty and other individuals should be professed in the initial interview and reasserted in all subsequent meetings. Site visitors must be able to meet with individuals without the program director. Individuals being interviewed should be free to speak candidly.

Planning the Interviews

When the site visitors meet on the eve of the site visit, the team should develop strategies for carrying out interviews in the most efficient, diplomatic, and professional manner. The site visit team is encouraged to generate specific questions for each interview, and plans should be made to repeat some questions in several interviews for reliability and to triangulate the data gathered.

Because the team knows in advance whom it will interview, it can set goals for each interview. For example, when interviewing the dean or president, the site visit team should determine if the program has autonomy for professional decisions, whether the program has adequate financial resources, and if there are ready channels of communication. When interviewing instructional staff, the site visit team should explore such areas as faculty workload, input to curricular planning, accessibility of the program director, and continuing education policy. An interview with office administrative staff might confirm information about such matters as clinic operations and maintenance of records.

Thoughtful preparation will give site visitors the orientation they need to conduct each interview effectively. A review of the Documentation Guidance [PDF] for each standard and the suggested questions/topics for interviews [PDF] will assist the site visit team in prioritizing the goals for each interview.

As part of the planning of the visit, the site visit team members should discuss what each member's role would be in facilitating interviews. Team members may conduct interviews independently in order to collect a greater amount of data and to pursue further information in their professional areas (audiology or speech-language pathology). The team may determine that certain interviews (e.g., groups of students and alumni or clinical supervisors) may be better managed with all team members present.

All site visitors should be present for the initial interview and exit report with the program director and any other persons invited to these sessions. All team members also should be present for meetings with central administrators, such as the provost or president.

Content of Interviews

Site visitors should briefly make introductions, make a statement about the importance of confidentiality during interviews, answer any questions the interviewee(s) may have, and proceed with their own questioning. The manner of questioning should direct the interviewee to provide information pertinent to the site visit and to the CAA as it relates to verifying evidence toward compliance with accreditation standards. Site visitors should ask open-ended questions whenever possible. CAA developed some suggested questions or topics [PDF] for each type of interviewee to use as a resource.

Site visitors should be particularly alert to common problem areas as they relate to the accreditation standards, specifically the most frequently cited standards from past years, such as

- insufficient or inaccurate public information about accreditation status;

- inadequate number of faculty to support the entry-level graduate program (e.g., interference from undergraduate and/or research PhD program[s] or too many graduate students for the program resources);
- lack of confidentiality/accessibility of student and client records;
- inadequate information in student files concerning academic or clinical education progresses;
- inadequate documentation concerning program self-analysis or effects that such data have on program development;
- inadequate budget support for continuing education activities;
- inadequate physical facilities—specifically, physical accessibility for persons with physical disabilities;
- limited equipment availability, maintenance, and calibration.

Recording the Interviews

Note-taking is an integral part of the interview process and is crucial to ensuring an accurate report. Site visitors will record the name and position of each person interviewed together with their comments. Discrepancies in reports on specific issues should be recorded and, to the extent possible, resolved before the end of the site visit. Visitors may keep personal notes for reference after the visit in order to inform the final site visit report; but these notes will be destroyed once the accreditation decision has been finalized. The site visit team may be asked to comment, as appropriate, on the program's response to the site visit report.

Closing Interviews

The interview should not be extended beyond meaningful data gathering. Try to keep on schedule. As soon as the mission is accomplished, site visitors should excuse themselves and proceed to the next item or individual on the agenda.

Required Meetings and Activities

Initial Interview with Program Director

This initial interview is crucial in establishing the proper professional relationship and tone for the site visit. Site visitors should explain the purpose of the site visit and their roles as CAA site visitors. The primary purpose of the visit is to verify the information given in the program's application. A site visitor's role is not that of personal evaluator; it is to collect information related to the CAA standards. Site visitors should clarify that their role and purpose is not to give advice, to judge, or to make decisions about whether the program will be awarded accreditation. Site visitors should indicate that there will be an exit report session to indicate their findings related to the program's compliance with the CAA's accreditation standards and that a full written report of the site visit will be mailed to the program director and the university's president, or designee, within 6 weeks after the site visit.

Next, site visitors should review selected portions of the application with the program director. Site visitors should indicate areas that will need additional information or more specificity. In addition, site visitors should indicate that follow-up interviews with faculty members, typically the program director or clinic director, may be necessary to clarify the program operations.

Orientation Meeting With Faculty and Staff

Faculty and staff should be oriented to the purpose of the visit, either by attending the site visitors' initial interview with the program director or in a separate orientation meeting. The program director should be encouraged to invite the entire faculty (or as many as possible) to this orientation. The site visit chair, who conducts this orientation, should review the purpose of the site visit and the roles of the site visitors, again emphasizing that the site visitors are not there to give advice, to judge, or to make decisions about accreditation. The site visit chair should review the final agenda for the site visit, answer questions, and announce the exit report session to be held at the end of the visit.

Review of Resource Materials

Resource materials are a critical source to support a program's development and progress toward compliance with all accreditation standards and necessary preparation for graduate students to enroll. The following list of materials should be made available to the candidacy site visit team before or during the visit:

- department/program/graduate student/clinical/ handbooks,
- course syllabi/curriculum sequence and offerings,
- graduate catalog, if available,
- assessment plan/activities for student learning outcomes and program goals and objectives,
- student files (forms) for academic and clinical assessment and monitoring of progress through the program,
- line items budget,
- faculty vitae,
- faculty/instructional staff table,
- faculty/program administrator/s evaluation procedures and policies,
- tenure statement and policies,
- off-campus clinical agreements/contracts,
- program's technology support,
- calibration contracts for all equipment,
- library resources and holdings,
- organizational chart.

The program is required to provide key documents to the site visit team at least 30 days in advance in an electronic format. See Preparation for the Site Visit, above.

Physical Facilities Tour

A tour of the physical facilities must be included on the agenda. The candidacy site visit team should have access to the following during the tour:

- overall office, classroom, clinical space regarding handicapped accessibility, adequacy, and size;
- staff support space;
- clinical space and materials;
- research and clinical equipment;
- space for student's academic and clinical files;
- library facilities and accessibility.

Exit Report

At the close of the site visit, the site visit team meets with the program director and any faculty, staff, or university personnel the program director may invite. The Exit Report does not need to be of any particular duration, but must reflect the findings of the site visit team and must be consistent with what will be found in the final written report. It may be appropriate to recognize that the work of fact gathering is completed prior to the exit report and the session for providing this report is not the appropriate opportunity for programs to refute or debate the merit of any findings being communicated. However, programs are given ample opportunity to respond to the findings of the site visit team after receipt of the written report.

The primary objective of this session is to provide an oral summary report of the findings of the site visit team as they relate to the program's evidence of compliance with the accreditation standards. This should include recognition of any standards for which the program's evidence for compliance was identified as being a particular strength or limitation to the delivery of the program. The site visitors should review their findings in terms of evidence found to support compliance as they will be noted in the site visit report and as they relate to the standards. However, site visitors must not express summary opinions of compliance or noncompliance with individual standards or for final accreditation decisions.

The site visit team should complete an Accreditation Standards Inventory prior to the exit report for each program being reviewed (i.e., master's in speech-language pathology and clinical doctorate in audiology). This form summarizes the team's ability to observe evidence to support verification of the program's compliance with standards. For each standard, site visitors are asked to select one of the following:

- Evidence Verified,
- Evidence Not Verified.

In instances when both professional programs are being visited at the same time, there are times when compliance with a particular standard can be verified for one program but not another, so the Council requires that these areas be completed separately to better illustrate the findings. All site visit team members, including the trainee, must sign the Accreditation Standards Inventory [PDF], which is then appended to the written report.

The program director should be reminded that the CAA welcomes suggestions for the improvement of the accreditation process. The program director is urged to complete the Site Visitor Performance Feedback Survey as soon as possible after the site visit, preferably within 30 days. Feedback provided by programs about the site visitors is considered separately from the review of applications and does not influence the decision made about the program's accreditation status. In addition, the team will review the steps and anticipated time lines for completing the CAA's review, including when the program can expect to receive the written report and the program's opportunity to respond.

The site visit team will make every effort to leave the following impressions.

- The site visitors were professional, friendly, well-prepared peers who thoroughly reviewed the program to confirm the information given in the application.
- The site visitors were methodical, maintained their schedule, and caused minimal interruption in the program's regular activities.
- The site visitors were impartial observers who were not abrupt, accusative, or argumentative and who did not give personal advice about or offer criticism of the program.

As a reminder, following the site visit, a site visitor may not discuss, either orally or in writing, the site visit with individuals (including representatives of the program) outside of (a) Accreditation Office staff who work with the CAA, (b) the Chair of the CAA (or designated Council member), or (c) members of that site visit team. Questions about the site visit should be directed to the Chair of the CAA.

Problems During the Site Visit

On rare occasions, site visitors may encounter special problems that limit or prevent them from completing the site visit in the required manner. For example, the site visitors may be refused random access to student records. In all such cases, the site visit chair will discontinue the site visit and consult the Chair of the CAA immediately to describe the problem and to have a course of action authorized. If the Chair of the CAA is unavailable, the site visit chair will contact another CAA member designated to act on behalf of the Chair in such matters. CAA contact information is provided to the team before the site visit.

Evaluation of Site Visitor Performance

At the conclusion of the site visit, programs and site visit team members are expected to complete and submit evaluations of the visitors, as referenced above and in this *Handbook*.

C. Focused Site Visit

The CAA may conduct a focused site visit to further investigate a particular issue to determine whether the program is in compliance with specific standards before making a final decision related to a review of an application, annual report, or complaint investigation, including the review of a probation report or substantive change plan. The CAA will indicate to the program the explicit reasons that such a visit is necessary. A program's accreditation status (e.g., applicant, candidate, accredited, accredited-on probation) remains unchanged during this period until a final decision has been rendered by the CAA.

A focused site visit may be conducted by members of the site visitor pool or by members of the CAA and will be expeditiously scheduled. The length of the site visit will be commensurate with the nature of the concerns, but typically will be scheduled for 1 day. A team chair will be identified and will work with the program director to develop an agenda based on the CAA's letter of concerns. The CAA does not publish public notice of focused site visits. However, the CAA may direct a program to schedule a public meeting during the focused site visit if warranted and require the program to notify interested

parties if applicable.

The site visit team will write a report to be considered by the full Council for the standards identified for additional review. The team may note in its report, based on their observations during the focused site visit, any concerns about the program's compliance with other accreditation standards. The program will be afforded an opportunity to respond to the focused site visit report before the Council's final action, consistent with the type of review. CAA members will review the additional materials from the site visit team and the program and conduct a final vote at the Council's next regularly scheduled meeting.

XX. SITE VISIT REPORT

A. Candidacy Site Visit Report

Purposes of the Candidacy Site Visit Report

- For the candidacy site visitors, the report provides a means of documenting findings and of recording comments and factual data.
- For the CAA, the candidacy site visit report documents the verification of application materials and addresses the CAA's initial observations noted from its review of the candidacy application, so that a decision regarding candidacy status can be reached.
- For the program, the candidacy site visit report provides a summary of the findings of the site visit team relative to each Standard for Accreditation, as well as noted strengths and limitations. A copy of the report is also sent to the president of the institution or designee.

Writing the Candidacy Site Visit Report

It is suggested that the site visitors prepare a rough draft of the candidacy site visit report in the evening and at unscheduled times during the site visit. Ordinarily, the site visit chair facilitates the writing of the candidacy site visit report. However, the report may be written in separate parts by members of the site visit team and then combined, or it may be drafted entirely by one member of the team. In all cases, the report must be edited by the team and approved and signed by each site visitor before it is submitted to the CAA. A candidacy site visit report template [PDF] is available electronically. Site visitors are required to use a site visit review worksheet to evaluate and document their findings during the site visit and to support writing the site visit report.

Because a program applying for candidacy status must document its progress towards meeting the expected level of compliance for all standards, it is essential that the candidacy site visit report include statements addressing each component of each standard. The candidacy site visit report must follow the outline given in the Format of the Report below. The report must clearly differentiate between conclusions based on factual evidence and conclusions based on impressions. Although site visitors may be asked their opinions on how to remedy a problem or to suggest improvements, it is inappropriate to include opinion in the candidacy site visit report.

The candidacy site visit report supplements and validates the information given in the application and other information provided in advance of and/or at the time of the site visit, such as any updates on filling open faculty lines.

Candidacy site visit reports are sent to the institution's president, or president's designee, and to the program director, substantially as written by the candidacy site visitors. Although a written copy of the report is not left with the program at the close of the site visit, it is imperative that the report is accurate, complete, carefully written. In addition to the behavior of the candidacy site visit team, the candidacy site visit report is the tangible product on which the program and the institution will judge the quality of the evaluation process.

Format of the Report

The candidacy site visit report template [PDF] must be used by the site visit team in writing its report and is available as part of this *Handbook*. The report should indicate how and if the site visitors could verify evidence of a program's expected compliance with each standard. The report should also address each of the initial observations raised by the CAA.

The CAA has indicated the expected level of compliance within the report template consistent with the expectations listed in the column, "CAA's award of candidacy" on the Standards Compliance Continuum. The team must consider these conditions when indicating whether the program's progress and achievement for each standard could be verified. The CAA employs the following key to represent the expected level of compliance with each standard at each stage of review:

- Planned (P) - Compliance with the standard is **planned**; a comprehensive development plan, timelines, and adequate support for continued development are evident and sustainable.
- Initiated (I) - The plan is **initiated**; review requirements of the standard are in progress and adequate and sustained support for development is evident.
- Maintained (M) – Review requirements of the standard have been met, compliance, compliance demonstrated and **maintained**; program improvement is initiated. Adequate and sustained support for development is evident.

The format for the report follows.

Introduction
This section should include a description of the institution and local environment, including multiple campuses or distance technologies, as part of the review and provide a summary of the individuals interviewed by the team, including the titles of administrators and faculty, as well as a demographic description of the group interviews. Student and client names should not be included in the site visit report or its appendices to protect their confidentiality; rather, demographic summary data should be provided. If an observer accompanies the team, the individual's name and affiliation should be recorded in this section of the report.

I. Site Visit Team Observations
- *Administrative Structure and Governance (Standards 1.1 - 1.9)*
- *Faculty (Standards 2.1–2.4)*
- *Curriculum [Academic and Clinical Education]*
  - *in Audiology (Standards 3.1A–3.10A)*
  - *in Speech-Language Pathology (Standards 3.1B–3.10B)*
- *Students (Standards 4.1–4.10)*
- *Assessment (Standards 5.1–5.11)*
- *Program Resources (Standards 6.1–6.6)*

II. Verification of Public Comment/Public Meeting Announcement

Appendices
- *Accreditation Standards Inventory – Candidacy*
- *Site Visit Agenda*
- *Public Meeting Announcement*

For site visits that include review of programs in both professional areas, the report should include observations for Curriculum in Audiology (3.0A) and Curriculum in Speech-Language Pathology (3.0B), presented as separate sections.

The Accreditation Standards Inventory – Candidacy [PDF] must be completed and signed by each site visitor and attached to the candidacy site visitor report.

Materials that are collected by the site visitors during the course of the visit should be submitted as appendices to the report. Examples include the final agenda, public meeting announcement, student or clinical tracking form samples, and curriculum vitae of a new faculty member.

Submitting and Processing the Candidacy Site Visit Report

All members of the site visit team will contribute to drafting the report. The candidacy site visit report must follow the established format and be submitted to the Accreditation Office staff no later than 30 calendar days after the visit. Delays in the preparation of the report will be avoided to ensure sufficient time and due process for the program to provide its response and the CAA to inform the program of its final accreditation decision. The candidacy site visit report becomes a part of the documentary file for the program, and the CAA cannot act on a program's candidacy application until it has received the candidacy site visit report.

The accreditation staff and CAA Chair will conduct a review of the report before forwarding it to the program within 10 business days of receiving it from the site visit team. The report will be submitted to the program director, with a copy to the institution's president or president's designee, for the program's response.

The program's written response to the candidacy site visit report must be sent to the Accreditation Office within 30 days of the date on which the report was submitted to the program director. The program director's comments concerning the candidacy site visit report may be sent to the site visit team for any further response. The site visit report is confidential and, therefore, is provided by the CAA only to the program, the site visit team, and the CAA members. The CAA may contact the site visitors for clarification in the report as the Council is considering the site visit report in its decision-making process and at other times, as needed.

B. Accreditation Site Visit Report

Purposes of the Accreditation Site Visit Report

- For the site visitors, the report provides a means of documenting findings and of recording comments and factual data.
- For the CAA, the site visit report documents the verification of application materials and addresses CAA's initial observations noted from its initial review of the application, so that a decision regarding accreditation can be reached.
- For the program, the site visit report provides a summary of the findings of the site visit team relative to each Standard for Accreditation, as well as noted strengths and limitations. A copy of the report is also sent to the president of the institution or designee.

Writing the Site Visit Report

It is suggested that the site visitors prepare a rough draft of the site visit report in the evening and at unscheduled times during the site visit. Ordinarily, the site visit chair facilitates the writing of the site visit report. However, the report may be written in separate parts by members of the site visit team and then combined, or it may be drafted entirely by one member of the team. In all cases, the report must be edited by the team and approved and signed by each site visitor before it is submitted to the CAA. A site visit report template [PDF] is available electronically. Site visitors are required to use a site visit review worksheet to assist with the evaluation and documentation of their findings during the site visit and to support writing the site visit report.

Because a program must meet all standards in a documented and acceptable way, it is essential that the site visit report include statements addressing each standard. The site visit report must follow the outline in Format of the Report below. The report must clearly differentiate between conclusions based on factual evidence and conclusions based on impressions. The CAA's final decision as to whether a program is in violation of a standard is based, in part, on documentation provided by the site visit team. Accreditation decisions are solely the responsibility of the CAA. Although site visitors may be asked their opinions on how to remedy a problem or to suggest improvements, it is inappropriate to include opinion in the site visit report.

The site visit report should supplement and validate the information given in the application and other information provided in advance of and/or at the time of the site visit, such as a substantive change plan.

Site visit reports are sent to the institution's president, or president's designee, and to the program director, substantially as written by the site visitors. Although a written copy of the report is not left with the program at the close of the site visit, it is imperative that the report be accurate, complete, carefully written, and adequately proofread. In addition to the behavior of the site visit team, the site visit report is the tangible product on which the program and the institution will judge the quality of the evaluation process.

Format of the Report

The site visit report template [PDF] must be used by the site visit team in writing its report and is available as part of this *Handbook*. The report should indicate how and if the site visitors observed evidence to support verification of a program's compliance with each standard. If a plan to make substantive changes (i.e., for a distance education component or satellite location) was submitted for the CAA's approval as part of the application, the team is expected to integrate its findings related to that program as part of the report. The site visit report should address each of the initial observations raised by the CAA.

The format for the report follows.

Introduction
This section should include a description of the institution and local environment, including multiple campuses or distance technologies, as part of the review and provide a summary of the individuals interviewed by the team, including the titles of administrators and faculty, as well as a demographic description of the group interviews. Student and client names should not be included in the site visit report or its appendices to protect their confidentiality; rather, demographic summary data should be provided. If an observer accompanies the team, the individual's name and affiliation should be recorded in this section of the report.

I. Site Visit Team Observations

- *Administrative Structure and Governance (Standards 1.1–1.9)*
- *Faculty (Standards 2.1–2.4)*
- *Curriculum [Academic and Clinical Education]*
  - *in Audiology (Standards 3.1A–3.10A)*
  - *in Speech-Language Pathology (Standards 3.1B–3.10B)*
- *Students (Standards 4.1–4.10)*
- *Assessment (Standards 5.1–5.11)*
- *Program Resources (Standards 6.1–6.6)*

II. Verification of Public Comment/Public Meeting Announcement

Appendices

- *Accreditation Standards Inventory*
- *Site Visit Agenda*
- *Public Meeting Announcement*

For site visits that include review of programs in both professional areas, the report should include observations for Curriculum in Audiology (3.0A) and Curriculum in Speech-Language Pathology (3.0B), presented as separate sections.

The Accreditation Standards Inventory [PDF] must be completed and signed by each site visitor and attached to the site visitor report. The site visit team also must file its site visit review worksheet for internal reference.

Materials that are collected by the site visitors during the course of the visit should be submitted as appendices to the report. Examples include the agenda, public meeting announcement, revised student or clinical tracking forms, and curriculum vitae of a new faculty member.

Submitting and Processing the Site Visit Report

All members of the site visit team will contribute to drafting the report. The site visit report must follow the established format and be submitted to the Accreditation Office no later than 30 calendar days after the visit. The site visit chair must forward to the Accreditation Office the signed cover sheet, signed Accreditation Standards Inventory, and any additional appendices that could not be posted electronically. Delays in the preparation of the report must be avoided to ensure sufficient time and due process for the program to provide its response and to inform the final accreditation decision. The site visit report becomes a part of the documentary file for the program's accreditation and the CAA cannot act on a program's accreditation application until it has received the site visit report.

The Accreditation Staff and CAA Chair will conduct a review of the report before forwarding it to the program within 10 business days of receiving it from the site visit team. The report will be submitted to the program director, with a copy to the institution's president or president's designee, for the program's response.

The program's written response to the site visit report must be sent to the Accreditation Office within 30 days of the date on which the report was submitted to the program director. The program director's comments concerning the site visit report may be sent to the site visit team for any further response. The site visit report is confidential and, therefore, is provided by the CAA only to the program, the site visit team, and to the CAA members. The CAA may contact the site visitors for clarification in the report as the Council is considering the site visit report in its decision-making process and at other times, as needed.

The CAA has sole authority to make official accreditation decisions for a program and identify any official areas of noncompliance or areas that need improvement. The citations in an accreditation decision letter may reflect findings different than those reported by the site visit team.