

# 2026 CAA Candidacy Annual Progress Report TEMPLATE - Speech-Language Pathology

## General Information & Instructions

Reports submitted to the CAA are major sources of substantiating information about elements of an education program in relation to its compliance with the Standards for Accreditation of Graduate Education Programs in Audiology and Speech-Language Pathology. Programs 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 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.

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. It is the responsibility of the program director to submit completed reports to the CAA on or before the due date.

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

### 1. Entering Responses

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

4. Copy your now unformatted content from the text file and paste into the report.

## 2. Responding to Prior Concerns

1. You **must** respond to any non-compliance citations or areas for follow-up that were noted on the previous Accreditation Action Report. There is a text box at the start of each standard section to respond to prior concerns.
2. When providing supporting evidence to the CAA for Standards and any prior concerns, refer to the [Documentation Guidance](#) resource from the CAA website for possible sources of evidence to provide in your response.

## 3. Use of Distance Education Technologies

1. If (during the last reporting period) your program offered (or is currently offering) coursework via distance education *or* if your program has been approved for a permanent distance education modality, your program **must** address institutional policies regarding verification of student identity.
2. Standard 4.10 states the following:
  - **Standard 4.10: The program must adhere to its institutional policies and procedures to verify that a student who registers for a distance education course or program is the same student who participates in and completes the program and receives the academic credit.**
    - The program must document that the institutional policies regarding verification of a student's identity are followed and implemented and applied consistently.
    - The program must make clear that the identities of students enrolled in a distance education course or program are protected.
      - All programs who utilized distance education technologies, even if on a temporary basis, are required to answer the questions related to distance education.
3. The online report instrument is designed with conditional logic throughout so that if the response under the modalities section is "yes", additional questions related to distance education will appear for you to respond to.

## 4. Submitting Your Report

1. Before submitting:
  1. Review and verify all data reported is accurate and current.
  2. Ensure that all links to websites are accurate and are working.
2. **Only Program Directors may submit the report. To submit the report, you must click the submit button at the bottom of the instrument and confirm that you are submitting your annual report. You can verify that you have submitted your report by clicking the Instruments tab and reviewing the status of this report instrument.**
3. It is understood that any information submitted for the purposes of this evaluation shall be used to determine compliance with CAA Standards; furthermore, non-identifying program data may be analyzed and published in the aggregate in order to further the purpose of the CAA, which is to assure quality in preparation of students in audiology and speech-language pathology to serve the professions and the public.

## 5. Additional Resources

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

1. Requests for Submission Extension (Chapter XI.C)
2. Administrative Probation (Chapter XI.D)
3. Lapse of Accreditation (Chapter XI.E)

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

## Modalities

**If coursework is offered via distance learning (DE) or satellite campus, then any changes and updates in both residential and DE and/or satellite must be noted throughout the report with respect to all program offerings.**

**\*\*Your response to the following questions could enable additional questions to appear within this report. If you later alter your response to these questions, you risk losing information entered.\*\***

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

## Standard 1.1 Institutional Accreditation

**The sponsoring institution of higher education holds current institutional accreditation.**

*Requirement for Review:*

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

If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.

If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.

Discuss any changes and improvements regarding the status of the institution's institutional accreditation that have occurred in the last reporting period.

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

## Standard 1.2 Degree Granting Authority

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

### *Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding the status of the degree granting authority.**

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

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

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the**

program is now in compliance with this standard.

If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.

Discuss any changes and improvements regarding the program's mission, goals and objectives.

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

#### Standard 1.4 Evaluation of Mission and Goals

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

*Requirement for Review:*

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

If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding the evaluation of mission and goals.**

**Describe how the program will systematically evaluate its progress toward fulfilling its mission and goals.**

**Use the text box below to describe any additional clarifying information regarding the program's compliance with Standard 1.4.**

## **Standard 1.5 Program Strategic Plan**

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

*Requirement for Review:*

- The plan must be congruent with the mission and goals of the program and the sponsoring institution, have the support of the administration, and reflect the role of the program within its community.
- The plan identifies long-term goals, specific measurable objectives, strategies for attainment of the goals and objectives, and a schedule for analysis of the plan.
- The plan must include a mechanism for regular evaluation of the plan itself and of progress in meeting the plan's objectives.

- An executive summary of the strategic plan or the strategic plan must be shared with faculty, students, staff, alumni, and other interested parties.

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding the program's strategic plan.**

**Describe the process for updating and implementing the program's strategic plan.**

**Describe the methods that are used to assure the congruence of the strategic plan with the mission of the institution.**

**Describe how the strategic plan is evaluated and disseminated to faculty, students, alumni, and other interested parties. If the strategic plan, or an executive summary of the strategic plan, is shared on the program's website, provide the URL.**



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

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

#### Standard 1.6 Program Authority and Responsibility

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding the program's authority and responsibility.**

**If your program does not have independent departmental status, describe how the program will maintain authority and responsibility for the program within the structure or policies and procedures of the institution.**

**Describe the ways in which the faculty have access to higher levels of administration.**

**Use the text box below to describe any additional clarifying information regarding the program's compliance with Standard 1.6.**

#### **Standard 1.7 Program Director**

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding the individual responsible for the program.**

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

Name of Program Director:	
<input type="checkbox"/>	
Information about reporting changes can be found on the CAA website at <a href="https://caa.asha.org/reporting/reporting-changes/">https://caa.asha.org/reporting/reporting-changes/</a>	

**Provide the date that the Program Director was appointed:**

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

**If the Program Director is serving in an interim capacity, describe the program's specific plans for appointing a permanent program director.**

Use the text box below to describe any additional clarifying information regarding the program's compliance with Standard 1.7.

## Standard 1.8 Equitable Treatment

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

*Requirement for Review:*

- The institution and program must comply with all applicable federal, state, and local laws, regulations, and executive orders prohibiting discrimination, including laws that prohibit discrimination based on age, citizenship, disability, ethnicity, gender identity, genetic information, national origin, race, religion, sex, sexual orientation, and veteran status.
- The program must adhere to its institutional policies and procedures—including non-harassment policies, internal complaint procedures, and appropriate educational programs—to ensure that the program complies with all applicable nondiscrimination statutes and that all staff, faculty, and students are made aware of the policies and the conduct they prohibit.
- The program must maintain, as relevant, a record of internal and external complaints, charges, and litigation alleging violations of such policies and procedures and ensure that appropriate action has been taken.

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding equitable treatment.**

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

#### Standard 1.9 Public Information

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

*Requirement for Review:*

- The program must publish to the general public on its website the program's CAA accreditation status, in accordance with the language specified in the Public Notice of Accreditation Status in the CAA [Accreditation Handbook](#), as required under federal regulations. This must be displayed in a clearly visible and readily accessible location. Additional references to the program's accreditation status must be accurate but need not include all components of the accreditation statement.
- Websites, catalogs, advertisements, and other publications/electronic media must be accurate regarding standards and policies regarding recruiting and admission practices, academic offerings, matriculation expectations, academic calendars, grading policies and requirements, and fees and other charges.
- The program must make student outcome measures available to the general public by posting the results on the program's website via a clearly visible and readily accessible link.
- The program must make public the number of expected terms for program completion for full-time and part-time students.
- At a minimum, the following results of student outcome measures for the most recently completed 3 academic years must be provided:

- number and percentage of students completing the program within the program's published time frame for each of the 3 most recently completed academic years,
- number and percentage of program test-takers who pass the *Praxis*® Subject Assessment examination for each of the 3 most recently completed academic years (programs need report only the results once for test-takers who take the test more than one time in the reporting period),
- Student outcome measures must be labeled "Student Achievement Data" or "Student Outcome Data."
  - If both the audiology and the speech-language programs are accredited, separate data tables must be provided for each program.
  - If the program has a distance education component or a satellite campus, the student outcome data must be presented for each modality.

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

*Requirement for Review:*

- The program must publish to the general public on its website the program's CAA accreditation status, in accordance with the language specified in the Public Notice of Accreditation Status in the CAA [Accreditation Handbook](#), as required under federal regulations. This must be displayed in a clearly visible and readily accessible location. Additional references to the program's accreditation status must be accurate but need not include all components of the accreditation statement.
- Websites, catalogs, advertisements, and other publications/electronic media must be accurate regarding standards and policies regarding recruiting and admission practices, academic offerings, matriculation expectations, academic calendars, grading policies and requirements, and fees and other charges.
- The program must make student outcome measures available to the general public by posting the results on the program's website via a clearly visible and readily accessible link.
- The program must make public the number of expected terms for program completion for full-time and part-time students.
- At a minimum, the following results of student outcome measures for the most recently completed 3 academic years must be provided:
  - number and percentage of students completing the program within the program's published time frame for each of the 3 most recently completed academic years,
  - number and percentage of program test-takers who pass the *Praxis*® Subject Assessment examination for each of the 3 most recently completed academic years (programs need report only the results once for test-takers who take the test more than one time in the reporting period),
- Student outcome measures must be labeled "Student Achievement Data" or "Student Outcome Data."
  - If both the audiology and the speech-language programs are accredited, separate data tables must be provided for each program.

- If the program has a distance education component or a satellite campus, the student outcome data must be presented for each modality.

If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.

If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.

Discuss any changes and improvements regarding public information.

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

See chapter XII.C *Public Notice of Accreditation Status* within the [Accreditation Handbook](#) for guidance and examples of applicable accreditation statements.

Confirm that the program's current Accreditation Statement is written in accordance with the Accreditation Handbook, then provide the URL where this information can be found:

The CAA has developed guidance on [presenting student achievement data](#) and has created a checklist for programs to use related to Standard 1.9:

- Are the student outcome measures labeled as "Student Achievement Data" or "Student Outcome Data"?

- Are the outcome measures separated by professional area and modality (if applicable)?
- Do you have the number AND percentage for each of the required outcomes listed?
- Do the outcome measures reflect the last 3 mostly recently completed academic years?
- Are the specific academic years listed, so that timelines are clear in the outcome measures?
- Do you have written policies and procedures for updating the website content at least annually? Where do you keep that document kept for faculty/staff to reference? Does it specify when the program data will be updated?



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

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

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

Describe how information regarding the number of expected terms for program completion (full-time students, part-time students, different delivery modalities, etc.) is made available to the public and to students.

If this information is available on the program's website, include the specific URL.

When is public information about the program (websites, catalogs, advertisements, and other publications/electronic media) updated to ensure accuracy regarding standards and policies regarding recruiting and admission practices, academic offerings, matriculation expectations, academic calendars, grading policies and requirements, and fees and other charges?

What is the process for updating and maintaining the currency and accuracy of public information? (Select all that apply)

Who is responsible for ensuring that information about the program is readily available, current and accurate? (Select all that apply)



How is information about the program provided to the public? (Select all that apply)

Use the text box below to describe any additional clarifying information regarding the program's compliance with Standard 1.9.

Faculty Roster/Details and Courses Worksheet

Provide a full listing of individuals who are currently employed by the university and contribute to the graduate program for which you are seeking accreditation in the table below.

Visit the CAA website [Program Resources](#) webpage to download the [Faculty Roster Summary Worksheet](#). Once this worksheet is completed, upload it below.

No document provided

For each faculty member listed on the Faculty Roster Summary uploaded above, a [Faculty Data Collection Worksheet](#) must be downloaded from the CAA [Program Resources](#) webpage, completed in full, and uploaded to the table below. Each worksheet's file name must contain the first name and last name of the faculty member.

*For identification purposes, each Faculty Data Collection Worksheet should be saved using the following format:*

*LastName.FirstName.FacultyDataSLP*

*Example: Smith.John.FacultyDataSLP*

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

*"I confirm that a current Faculty Data Collection Worksheet for each faculty member that is currently employed by the university and contributes to the graduate program has been uploaded to the Standard 2.0 Faculty Data Worksheet Table. This listing matches the uploaded Faculty Roster Summary Worksheet."*

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No response provided

Visit the CAA website's [Program Resources](#) webpage to download the Standard 3.0 Courses Worksheet. Once this worksheet is completed, upload the document below.

***Note: Any faculty that are reported on the Courses Worksheet as a currently assigned instructor should appear above on the Standard 2.0 Faculty Data Worksheet Table and should be included in the Faculty Summary Roster Worksheet upload.***

No document provided

## Standard 2.1 Faculty Sufficiency - Overall Program

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

**2.1.1 allows students to acquire the knowledge and skills required in Standard 3,**

**2.1.2 allows students to acquire the scientific and research fundamentals of the discipline,**

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

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

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

*Requirement for Review:*

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

If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.

If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.

Discuss any changes and improvements regarding overall program faculty sufficiency.

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

Provide an update on the program's hiring plan for faculty and staff, faculty funding lines, and timelines for filling faculty positions.

Describe the methods that the program uses to ensure that the number of individuals in and the composition of the group that delivers the program of study are sufficient to allow students to:

Acquire the knowledge and skills in sufficient breadth and depth as required in Standard 3 and meet the expected student learning outcomes
Acquire the scientific and research fundamentals of the profession including evidence-based practice

<b>Meet the program's established learning goals and objectives</b>
<b>Meet other expectations set forth in the program's mission and goals</b>
<b>Complete the program within the published timeframe</b>

Provide the institution's definition of *full-time student* and *part-time student*.

What is the total number of students currently enrolled in the residential component of the CAA Candidate graduate education program?

Student Status	Current Report	Prior Report	Percent Change
Full-time			
Part-time			
Total			

Complete the table with the current total enrollment for undergraduate CSD degrees, as applicable.

Full-time Enrollment	Part-time Enrollment	Current Total Enrollment

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

**Use the text box below to describe any additional clarifying information regarding the program's compliance with Standard 2.1.**

## Standard 2.2 Faculty Sufficiency - Institutional Expectations

**The number, composition, and workload of all full-time faculty who have responsibility in the graduate program are sufficient to allow them to meet expectations with regard to teaching, research, and service of the sponsoring institution.**

### *Requirement for Review:*

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

If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.

If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.

Discuss any changes and improvements regarding faculty sufficiency related to institutional expectations.

Describe the methods that the program uses to ensure that faculty (including adjuncts) who have responsibility in the graduate program and who have obligations to provide teaching, research, and service as part of their workload:

Are accessible to students
Have sufficient time to advise students
Have sufficient time to pursue scholarly and creative activities, and to participate in faculty governance and other activities that are consistent with the expectations of the sponsoring institution.

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Describe the methods that the program uses to ensure that faculty (including adjuncts) who have responsibility in the graduate program and who have obligations to provide clinical education and service as part of their workload:

Are accessible to students
Have sufficient time to advise students
Have sufficient time to pursue scholarly and creative activities, and to participate in faculty governance and other activities that are consistent with the expectations of the sponsoring institution.

Describe the processes that the program uses to ensure that tenure-eligible faculty have the opportunity to meet the criteria for tenure of the sponsoring institution.

Describe the processes that the program uses to ensure that faculty eligible for promotion have the opportunity to meet the criteria for promotion of the sponsoring institution.

**Describe the processes that the program uses to ensure that faculty who are eligible for continuing their employment have the opportunity to meet the criteria for continued employment of the sponsoring institution.**

**Use the text box below to describe any additional clarifying information regarding the program's compliance with Standard 2.2.**

### **Standard 2.3 Faculty Qualifications**

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation**



to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.

Discuss any changes and improvements regarding faculty qualifications.

If the information provided in the Standard 2.0 Faculty Roster/Details and Standard 3.0B Courses sections does not demonstrate that the majority of academic content is taught by doctoral faculty who hold a PhD or EdD degree, provide rationale below.

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

*Academic content includes lectures or other pedagogical methods, laboratory experiences, and/or clinically related activities or experiences provided within the context of a credit-earning didactic course or research experience.*

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

#### Standard 2.4 Faculty Continuing Competence

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding faculty continuing competence.**

**Use the text box below to describe any additional clarifying information regarding the program's compliance with Standard 2.4.**

### Standard 3.1B Overall Curriculum

**An effective entry-level professional speech-language pathology program allows each student to acquire knowledge and skills in sufficient breadth and depth to function as an effective, well-educated, and competent clinical speech-language pathologist (i.e., one who can practice within the full scope of practice of speech-language pathology). The**

**education program is designed to afford each student with opportunities to meet the expectations of the program that are consistent with the program's mission and goals and that prepare each student for professional practice in speech-language pathology.**

*Requirement for Review:*

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

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.

Discuss any changes and improvements regarding overall curriculum sufficiency.

Identify state and national credentials the program is preparing its graduates for, as it relates to the program's purpose and goals. (Select all that apply)

How are credit hours offered at the institution?

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

Requirements	Number of Credits
Minimum required academic credits	
Minimum elective academic credits	
Minimum required practicum/clinical credits	
Minimum elective practicum/clinical credits	
Minimum required research credits (include dissertation if applicable)	
Minimum elective research credits (include dissertation if applicable)	
Indicate any other requirements below:	
Total:	

Provide the URL for the speech-language pathology graduate program official course descriptions/offerings.

**Describe the process for verifying the successful achievement of the minimum clinical experience required for each student in the speech-language pathology graduate program of study.**

**Describe how the professional practice competencies are infused throughout the curriculum.**

**Describe how the professional practice competencies are demonstrated, assessed, and measured, including interprofessional education and supervision.**

**Describe how the speech-language pathology program guides students to assess the effectiveness of their clinical services.**

**Does the program offer, or plan to offer, clinical education for undergraduates?**

**Download, complete, and save this [Knowledge and Skills chart](#) document, then upload the completed document to this question.**

No document provided

**Use the text box below to describe any additional clarifying information regarding the program's compliance with Standard 3.1B.**

## Standard 3.2B Curriculum Currency

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

### *Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding curriculum currency.**

**Describe the curriculum planning process used by the program.**

**Describe how the program uses literature and other guiding documents to facilitate curriculum planning.**

**Describe the pedagogical approaches that the program uses to deliver the curriculum.**

**Describe the mechanisms and schedule that the program uses to review and update the academic and clinical curriculum to reflect current knowledge, skills, technology, and scope of practice.**

**Use the text box below to describe any additional clarifying information regarding the program's compliance with Standard 3.2B.**

### **Standard 3.3B Sequence of Learning Experiences**

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding the sequence of learning.**

**Describe how the program organizes and sequences the courses and clinical experiences to allow integration across all elements of the curriculum.**

**Provide two (2) examples of sequential and integrated learning opportunities.**



**Describe how the organization, sequential nature, and opportunities for integration allow each student to meet the program's established learning goals and objectives.**

**If students were assigned to a clinical experience before or concurrent with appropriate coursework, how did the program evaluate the adequacy and effectiveness of the activities it used to ensure that the student was appropriately prepared for clinical experience?**

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

#### **Standard 3.4B Person- and Family-Centered Care**

**An effective speech-language pathology program is organized and delivered in such a manner that the tenets of person- and family-centered care are reflected in the program, consistent with recognized standards of ethical practice and in accordance with applicable state and federal laws.**

*Requirement for Review:*

- The program must provide evidence that the tenets of person- and family-centered care are taught in didactic courses.
- The program must provide evidence that the tenets of person- and family-centered care are modeled throughout the clinical practicum experiences.

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to**

**demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Describe any changes that have occurred in the last reporting period regarding person- and family-centered care.**

**Describe how the tenets of person- and family-centered care are taught in didactic courses.**

**Describe how the tenets of person- and family-centered care are modeled throughout clinical practicum experiences.**

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

#### **Standard 3.5B Scientific and Research Foundation**

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding scientific and research foundations in the program.**

**Describe the methods that the program uses to ensure that all students have opportunities to become knowledgeable consumers of research literature.**

**Describe the methods that the program uses to ensure that there are opportunities for each student to become knowledgeable about the fundamentals of evidence-based practice.**

**Describe methods that the program uses to ensure that there are opportunities for each student to apply the scientific bases and research principles to clinical populations in support of evidence-based practice.**

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

#### Standard 3.6B Clinical Settings/Populations

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

#### *Requirement for Review:*

- The program must demonstrate that it has mechanisms to develop comprehensive plans of clinical educational experiences so that each student has an opportunity to
  - experience the breadth and depth of clinical practice,
  - obtain experiences with diverse populations,

- obtain a variety of clinical experiences in different work settings,
- obtain experiences with appropriate equipment and resources,
- learn from experienced speech-language pathologists who will serve as effective clinical educators.

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding clinical settings and populations.**

**Describe the methods used to ensure that the plan of clinical education for each student includes the following:**

Experiences that represent the breadth and depth of audiology and clinical practice
Opportunities to work with individuals across the life span and the continuum of care
Opportunities to work with individuals from culturally and linguistically diverse backgrounds

Experiences with individuals who express various types of severities of changes in structure and function of the auditory and vestibular systems and related disorders
Opportunities to obtain experiences with appropriate equipment and resources
Exposure to the business aspects of the practice of audiology (e.g., reimbursement requirements, insurance and billing procedures, scheduling)

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

#### Standard 3.7B Clinical Education - Students

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

#### *Requirement for Review:*

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

If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.

If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.

Discuss any changes and improvements regarding student clinical education.

Provide the policies and procedures that describe how the manner and amount of supervision are determined, are adjusted to reflect the competence of each student, and allow each student to acquire the independence to enter independent professional practice.

Describe how clinical practicum will be offered and how supervision of practicum will be managed, including sequence, supervision, and coordination of placements with external facilities, diversity of client populations, and so forth.

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

## Standard 3.8B Clinical Education - Client Welfare

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

### *Requirement for Review:*

- The program must demonstrate that the supervision provided to each student is adjusted to ensure that the specific needs are met for each individual who is receiving services.
- The program must demonstrate that the procedures used in clinical education ensure that the welfare of each person being served by the student and clinical educator team is protected.
- The program must demonstrate that the services provided by the student and clinical educator team are in accordance with recognized standards of ethical practice and relevant federal and state regulations.
- The program must demonstrate that it provides the opportunity for students to understand and practice the principles of universal precautions to prevent the spread of infectious and contagious diseases.

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding client welfare.**



**Describe policies and procedures that the program uses to ensure that the amount of supervision provided to each student is adjusted so that the specific needs are met for each individual who is receiving services.**

**Describe how consultation between the student and the clinical educator occur in the planning and provision of services.**

**Describe policies and procedures that ensure that the welfare of each individual who is served is protected.**

**Provide policies and procedures describing how the care that is delivered by the student and clinical educator team is in accordance with recognized standards of ethical practice and relevant state and federal regulations.**

**Describe where the codes of ethics will be available in the relevant published materials provided by the program.**

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

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

#### **Standard 3.9B External Placements**

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding external placements.**

**Describe how written agreements or statements of intent to accept students are established and maintained, once agreements are established with all active external facilities in which students will be placed for clinical practicum experiences.**

**Describe policies regarding the role of students in the selection of externship sites and the placement of students in the sites.**

**Describe policies and procedures that the program uses to select and place students in external facilities.**

**Describe policies and procedures that demonstrate due diligence to ensure that each external facility has the clinical population and personnel to meet the educational needs of each student assigned to that site.**

**Describe the processes that the program uses to evaluate the effectiveness of the educational opportunities provided at each active site.**

**Describe the processes that the program uses to ensure monitoring of the clinical education in external facilities.**

**Describe the process that the program uses to verify that the educational objectives of each active site are met.**

**Describe the procedures that the program uses to ensure that written agreements between the external site and the program are signed before students are placed.**

**Use the text box below to describe any additional clarifying information regarding the program's compliance with Standard 3.9B.**

#### **Standard 3.10B Student Conduct**

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

*Requirement for Review:*

- The program must have written policies and procedures that describe program expectations of student behavior with regard to academic and clinical conduct.

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding student conduct.**

**Describe the program's policies and procedures that are pertinent to expectations of student academic and clinical integrity and conduct and how the program will ensure that students will know about these expectations.**

**Describe how the program ensures that students know the expectations regarding their application of the highest level of academic and clinical integrity during all aspects of their education (e.g. written policies and procedures that are pertinent to expectations of student academic and clinical conduct) and that these expectations are consistently applied.**

**Describe policies and procedures that the program uses to address violations of expectations regarding academic and clinical conduct.**

**Describe the process that the program uses to address violations of expectations regarding academic and clinical conduct.**

**Use the text box below to describe any additional clarifying information regarding the program's compliance with Standard 3.10B.**

#### **Standard 4.1 Student Admission Criteria**

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation**

to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.

Discuss any changes and improvements regarding admission criteria.

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

#### Standard 4.2 Student Adaptations

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.

Discuss any changes and improvements regarding student adaptations.

Describe how adaptations are made to accommodate individual differences in the distance education component.

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

#### Standard 4.3 Student Intervention

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

*Requirement for Review:*



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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding student intervention.**

**Describe the program's policies and procedures for identifying students who need intervention in order to meet program expectations for the acquisition of knowledge and skills in academic aspects of the curriculum.**

**Describe the program's policies and procedures for identifying students who need intervention in order to meet program expectations for the acquisition of knowledge and skills in clinical aspects of the curriculum.**

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

#### **Standard 4.4 Student Information**

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding student information.**

**How are students informed about program policies and procedures? (Select all that apply)**

**How are students informed about expectations regarding academic integrity and honesty? (Select all that apply)**

**How are students informed about degree requirements and requirements for professional credentialing? (Select all that apply)**

**How are students informed about ethical practice? (Select all that apply)**

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

#### Standard 4.5 Student Complaints

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

*Requirement for Review:*

- The program must provide information regarding the process and mechanism to file a complaint against the program within the sponsoring institution.
- The program must maintain a record of student complaints filed against the program within the sponsoring institution.
- The program must maintain a record of student complaints regarding any of the program's policies and procedures or regarding unlawful conduct and make these available to the CAA upon request.

- Students must be made aware of the process and mechanism, including contact information for the CAA, to file a complaint related to the program's compliance with standards for accreditation.

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding student complaints.**

**Describe how the program conveys to students the process and mechanism required to file a complaint against the program within the institution.**

**Describe how the program will inform students of the process and mechanism required to contact the CAA to file a complaint regarding the program's compliance with accreditation standards.**

**Describe how the program will review complaints to assess their impact on compliance with accreditation standards.**

**Describe how the program will protect the privacy of student information when handling student complaints.**

**Use the text box below to describe any additional clarifying information regarding the program's compliance with Standard 4.5.**

#### **Standard 4.6 Student Advising**

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding student advising.**

**Describe the mechanism that the program uses to document the timely and continuing advisement that pertains to students' academic and clinical progress.**

**Describe the process that the program uses to identify students who may not meet program requirements, including those related to language proficiency.**

**Describe the processes that the program uses to document concerns about a student's performance in meeting all program requirements and to ensure that those concerns are addressed with the student.**

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

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding student progress documentation.**

**Describe the process for development and maintenance of documentation of each student's records for the entire time of their matriculation in the program.**

**Describe the mechanisms that the program uses to ensure proper documentation and tracking of student progress toward meeting the academic, clinical, and other requirements for the degree.**

**Describe the mechanisms that the program uses to ensure proper documentation and tracking of student progress toward meeting requirements for the credentials that the program is preparing students for.**

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

#### **Standard 4.8 Availability of Student Records**

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to**



demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.

Discuss any changes and improvements regarding availability of student records.

Describe the processes that the program uses to provide access to student records that are requested by current students and by program graduates.

Describe the processes that the program uses to provide access to student records that are requested by those who attended the program but did not graduate.

Describe the institution's policy for retention of student records.

Describe the program's policy for retention of student records.

**Explain the rationale for any differences between the institutional policy and the program policy for retention of student records.**

**Use the text box below to describe any additional clarifying information regarding the program's compliance with Standard 4.8.**

#### **Standard 4.9 Student Support Services**

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding student support services.**

**Describe the mechanism by which students are informed about the full range of student support services available at the sponsoring institution.**

**Use the text box below to describe any additional clarifying information regarding the program's compliance with Standard 4.9.**

#### Standard 4.10 Verification of Student Identity

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

##### *Requirement for Review:*

- The program must document that the institutional policies regarding verification of a student's identity are followed and implemented and applied consistently.
- The program must make clear that the identities of students enrolled in a distance education course or program are protected.
- If there are fees associated with learning within a distance modality, the program must document how that information is provided to students.
- If the institution does not have specific policies, the program must develop and implement its own policies for this purpose.

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding verification of student identity for distance education.**

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

#### Standard 5.1 Assessment of Student Learning

**The program regularly assesses student learning.**

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding assessment of student learning.**

**Describe the processes that the program uses to assess acquisition of the expected knowledge and skills.**

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

## Standard 5.2 Program Assessment of Students

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

*Requirement for Review:*

- The program must develop an assessment plan that is used throughout the program for each student. The plan must include the purpose of the assessments and use a variety of assessment techniques, including both formative and summative methods.
- Assessments must be administered by multiple academic and clinical faculty members.
- The program must demonstrate how it uses its assessments to evaluate and enhance student progress and acquisition of knowledge and skills.
- The program must demonstrate that student assessment is applied consistently and systematically.
- For purposes of assessing compliance, the Praxis examination cannot be used to meet this standard as a form of summative assessment.

If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.

If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.

Discuss any changes and improvements regarding program assessment of students.

Describe the assessment plan that the program uses to assess performance of students, including the timelines for administering the elements of the assessment plan. The plan must include the purpose of the assessments and use a variety of assessment techniques, including both formative and summative methods.

Describe the processes the program uses to assess the extent to which students meet the learning goals that are developed to address the acquisition of knowledge and skills, attributes, and abilities, including professionalism and professional behaviors.

Describe the use of the assessment measures to evaluate and enhance student progress and acquisition of knowledge and skills, and how the assessment measures are applied consistently and systematically.

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

### Standard 5.3 Ongoing Program Assessment

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

Discuss any changes and improvements regarding ongoing program assessment.

Describe the benchmarks or threshold(s) that the program uses to evaluate program quality.

Describe the processes by which the program will engage in systematic self-study.

Describe the mechanisms that the program uses to evaluate each program component.

Describe how the program will use the results of the assessment processes to improve the program.

Indicate the evaluation mechanisms used by the program to assess the quality, currency, and effectiveness of the graduate program’s academic and clinical education.

Type of Program Assessment	Frequency
Advisory committee review	
Curriculum review committee	
Employer surveys	
Supervisor/preceptor evaluations	
Program annual reports	



Program staff/faculty meetings and retreats	
University reviews	
Community member surveys	
Surveys from individuals receiving services	
Other - Describe the type of assessment and frequency	

**Indicate the evaluation mechanisms used by students to assess the quality, currency, and effectiveness of the graduate program's academic and clinical education.**

Type of Student Assessment	Frequency
Course Evaluations	
Evaluations of clinical supervisors	
Evaluation of clinical sites	
Student advisory group reviews	
Student surveys	
Other - Describe the type of assessment and frequency	

**Indicate the procedures completed by graduates and/or alumni to assess the quality, currency, and effectiveness of the graduate program's academic and clinical education.**

Type of Graduate Assessment	Frequency
Alumni/graduate surveys	
Exit interviews	
Other - Describe the type of assessment and frequency	

**Describe how the program will analyze the results of these assessments to assess quality, currency, and effectiveness of the graduate program's academic and clinical education.**

**Describe the processes that the program uses to monitor the alignment between:**

(a) the stated mission, goals, and objectives and
(b) the measured student learning outcomes

**Describe the mechanisms used to measure student achievement of each professional practice competency.**

**Use the text box below to describe any additional clarifying information regarding the program’s compliance with Standard 5.3.**

**Standard 5.4 Ongoing Program Improvement**

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

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to**

demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.

Discuss any changes and improvements regarding ongoing program improvement.

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

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

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

#### Standard 5.5 Program Completion Rate

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding program completion rates.**

**Describe the mechanisms that the program uses to keep records of the number of students enrolled on the first census day of the program.**

Describe the processes that the program uses to compare each student's time to degree in light of the terms (consecutive or nonconsecutive) established by the program.

Describe the mechanism that the program uses to keep records of the numbers of students who continue to graduation, take an approved leave of absence, and leave the program for academic, clinical, personal, or other reasons.

Provide the published length of time (state in semester's/quarters) for students to complete the residential program of study. If there is a different expectation for part-time, full-time, or different tracks, please describe.

Download and complete the [Program Completion Rate Calculator worksheet](#) found on CAA [Program Resources](#) webpage, and then upload it as evidence in support of the data you have provided in this report.

If there are additional components of the program (distance education and/or satellite campus(es)), please complete the applicable tabs in the excel workbook with this data.

No document provided

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

Use the text box below to describe any additional clarifying information regarding the program's compliance with Standard 5.5.

#### Standard 5.6 Praxis Examination Pass Rate

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding *Praxis*® Examination pass rates.**

Describe the mechanisms that the program uses to determine the number of test-takers who take the *Praxis®* Subject Assessment exam each year.

Describe the mechanism that the program uses to determine how many individuals who took the *Praxis®* Subject Assessment exam each year passed the exam in that year.

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

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

**Note:** If the program does not yet have graduate Praxis pass rates to report or does not have a full three years of data to report, enter "0" in the applicable cells.

Period	Number of Test-takers Taking the Exam	Number of Test-takers Passed	Pass Rate
Recent Year			
1 Year Prior			
2 Years Prior			
3-year average percentage:			

3-year average Praxis pass rate percentage for all modalities:

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

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

#### **Standard 5.8 Program Improvement – Student Outcomes**

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding program improvement related to student outcomes.**



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

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

#### Standard 5.9 Evaluation of Faculty

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY**

button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.

Discuss any changes and improvements regarding evaluation of faculty.

Describe how students have opportunity to evaluate the academic and clinical faculty on an ongoing and regular basis.

Describe the processes, timelines, and safeguards of the evaluation procedures that the program has in place to ensure that processes for evaluation of faculty are fair.

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

#### Standard 5.10 Faculty Improvement

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding faculty improvement.**

**Describe the mechanisms that the program uses to assess how the faculty and staff evaluation processes result in continuous professional growth and development.**

**Describe the mechanisms that the program uses to determine whether continuous professional development facilitates delivery of a high-quality program.**

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

#### **Standard 5.11 Effective Leadership**

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding effective leadership.**

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

## Standard 6.1 Institutional Financial Support

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding institutional financial support.**

**Report the total budget for the accredited program. Enter "0" where none.**

Sources of Support	Prior Year Annual Budget (Amount in \$)	Current Year Annual Budget (Amount in \$)	% increase/decrease
Faculty/Staff Salaries			
Supplies & Expenses (non-capital/non-salary expenses)			
Capital Equipment			
Institutional Support Sub-Total			
Grants/contracts			
Clinic Fees			
Other Funding			
Non-Institutional Support Sub-Total			
Total Budget			
% of budget represented by non-institutional support			

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

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

**Describe the budgeting process for the program.**

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

**Identify any potential budget insufficiencies, and describe how these insufficiencies will affect the program in the near term and long term.**

**If there are insufficiencies in the budget, describe how the program will address the impact of these insufficiencies on the program.**

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

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

#### **Standard 6.2 Support for Faculty Continuing Competence**

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding support for faculty continuing competence.**

**Describe how the program provides sufficient support for the faculty and staff to maintain continuing competence.**

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



## Standard 6.3 Physical Facilities

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding physical facilities.**

**Describe the processes the program uses – and the results of those processes – to determine the facility's adequacy in delivering a high-quality program.**

**Describe the processes the program uses – and the results of those processes -- to determine the facility's adequacy in meeting contemporary standards of access and use.**

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

#### **Standard 6.4 Program Equipment and Materials**

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding program equipment and materials.**

**Describe the processes the program uses to evaluate the quantity, quality, currency, and accessibility of the program's materials and equipment to determine whether these processes are sufficient to meet the mission and goals of the program.**

**Describe the mechanisms that the program uses to determine whether the equipment is in good working order and, where appropriate, whether the equipment meets standards established by the American National Standards Institute (ANSI) or other standards-setting bodies.**

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

#### **Standard 6.5 Technical Infrastructure**

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

*Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding technical infrastructure.**

**Describe the processes that are used to evaluate the adequacy of the infrastructure to support the work of the program's students, faculty, and staff.**

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

## Standard 6.6 Clerical and Technical Staff Support

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

### *Requirement for Review:*

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

**If there were areas of concern or feedback regarding this standard noted in the previous CAA Accreditation Action Report (AAR), describe in detail the steps taken by the program to address the concern(s) and describe how the program is now in compliance with this standard.**

**If the Steps to Be Taken section of the previous AAR asked the program to provide specific evidence in order to demonstrate the expected level of compliance with this standard, the program may upload supporting documentation to the progress report instrument by navigating to the Instrument Summary Response screen, clicking the SUMMARY button, and then selecting DOCUMENTS from the dropdown menu. From there, click the Upload button to select the appropriate file(s) to upload.**

**Discuss any changes and improvements regarding clerical and technical staff support.**

**Describe the process the program uses to evaluate the adequacy of access to clerical and technical staff to support the work of the program's students, faculty, and staff.**

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

## Appendices

### APPENDIX A: ANTICIPATED CHANGES

Describe in detail any anticipated changes in the program for the upcoming reporting year. Examples of anticipated changes include but are not limited to significant building renovations; new degree track; faculty turnover; program closure/suspended admissions; etc. Include a discussion of the program's plans for implementation of and timeframe for the changes.

*Please note:* As of January 1, 2020, CAA's Policy on Substantive Changes does not permit candidacy programs to modify their program to add a satellite location, add distance education, or add a contractual arrangement with an entity that is not an institution of higher education during the candidacy term. Changes that require prior approval, e.g., offering 50% or more of the academic content via distanced education or at a satellite campus, may be requested at the time of applying for initial accreditation.

## Submission Attestation

Please check the box below confirming that you agree to the following attestation statement.

"To the best of my knowledge and belief, all information submitted in this report is accurate and complete as of the submission date."

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