### Program Demographics

This page contains the information that the CAA currently has about your program. **All fields on this page are read-only.**

To update your program's address, phone number, fax, website, and email click here. If you have updated any information, you will need to click Data Refresh in the menu bar at the top of this page and select "Program Information" in order to display the updates here.

For help while completing this report, contact caareports@asha.org

<table>
<thead>
<tr>
<th>Institution Name:</th>
<th>Utah State University</th>
</tr>
</thead>
</table>
| Address:                | Utah State University  
                         College of Ed & Human Services  
                         Dept of Comm Dsdrs & Deaf Ed  
                         1000 Old Main Hill  
                         Logan, UT 84322-1000 |
<p>| Phone Number:           | (435)797-2613                                               |
| Fax Number:             | (844)308-5856                                               |
| Program Website:        | <a href="http://www.comd.usu.edu">http://www.comd.usu.edu</a>                                     |
| Professional Area:      | Speech Language Pathology                                   |
| Degree Designator:      | MS                                                          |
| Second Degree Designator| MA                                                          |
| Consortium              | No                                                          |
| Satellite Campus        | No                                                          |
| Distance Education      | Yes, &gt;=50 hrs                                               |</p>
<table>
<thead>
<tr>
<th><strong>Contractual Arrangement</strong></th>
<th><strong>No</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current Accreditation Cycle Dates:</strong></td>
<td><strong>07/01/2016-06/30/2024</strong></td>
</tr>
</tbody>
</table>
Institution Description and Authorization

Academic institution type

Public

Academic institution size

>20,000 students

Basic Carnegie classification of institution

R2: Doctoral Universities – Higher research activity
Modalities

**Your response to the following question will enable additional questions within this report regarding the modalities. If you later alter your response to these questions, you risk losing information entered.

Are graduate courses for the entry-level graduate program available through distance education?
Yes, 50% or more of the academic credit hours

Are you reporting this level of course offerings to the Distance Education modality to the CAA for the first time?
no

Is this graduate program or a component of the program offered through a satellite or branch campus?
No
Standard 1.1 Regional Accreditation

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

There were no citations regarding Regional Accreditation listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program’s Regional Accreditation.

None have occurred.

Name of Regional Accreditor

NWCCU

Provide the URL from your Regional Accreditor’s website that specifically shows your institution’s accreditation information. You will need to navigate to your institution’s page and then provide the URL here (see Help content for links to directories):

http://www.nwccu.org/member-institutions/directory/ then click on USU. Alternatively, go to http://www.usu.edu/aaa/ and click on NWCCU Accreditation Letter 2015.

Is the program currently undergoing review by the regional accreditor?

No

Please describe any additional clarifying information you wish to provide regarding the program’s compliance with Standard 1.1

None
Standard 1.2 Degree Granting Authority

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

There were no citations regarding Degree Granting Authority listed in the last Accreditation Action Report.

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

None have occurred.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.2.

None.
Standard 1.3 Mission, Goals and Objectives

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

There were no citations regarding Mission, Goals and Objectives listed in the last Accreditation Action Report

Please describe any changes that have occurred in the last reporting period regarding the program's Mission, Goals and Objectives. None have occurred

Provide the mission and goals of the program. If the program is part of a consortium, provide the mission statement and goals for each entity within the consortium.

The Speech-Language Pathology master’s program prepares students to evaluate and treat speech, language, cognition, literacy, and swallowing disorders for individuals across the lifespan through academic, research, and clinical experiences. The Ph.D. and non-clinical master’s degrees prepare students for research, teaching, and scholarship in basic and applied aspects of speech-language pathology.

Describe how the program will use the mission and goals statements to guide decision making to prepare students for entry into professional practice in audiology or speech-language pathology

Determine the scope, sequence, and effectiveness of coursework, clinical education, and related experiences to prepare students for entry-level professional competence through gathering, evaluating, and acting on objective data from students and other stakeholders about each program component.

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

<table>
<thead>
<tr>
<th>State Licensure</th>
<th>Teaching Credentials</th>
</tr>
</thead>
<tbody>
<tr>
<td>Certificate of Clinical Competence (CCC), Utah State</td>
<td></td>
</tr>
<tr>
<td>Specify States, Specify</td>
<td></td>
</tr>
<tr>
<td>UTAH, SLP</td>
<td></td>
</tr>
</tbody>
</table>

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.3

None
Standard 1.4 Evaluation of Mission and Goals

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

There were no citations regarding the Evaluation of Mission and Goals listed in the last Accreditation Action Report

Please describe any changes that have occurred in the last reporting period regarding the program's Evaluation of Mission and Goals.

None have occurred

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

The program evaluates progress towards fulfilling the mission and goals by evaluating patterns and themes across data on student performance in courses, clinic, and capstone experiences, and other feedback from students, faculty, externship supervisors, and other stakeholders. Discussions and decisions occur at monthly faculty meetings, the annual faculty retreat, and subgroup meetings of relevant personnel.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.4

None
Standard 1.5 Program Strategic Plan

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

There were no citations regarding the Strategic Plan listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Strategic Plan.

None have occurred.

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

To meet the land grant mission of Utah State University, the Emma Eccles Jones College of Education & Human Services, and the Department of Communicative Disorders & Deaf Education plans to implement the following 5-year strategic plan to address: national reputation, growth, and program quality.

SPEECH-LANGUAGE PATHOLOGY

1. Goal: Increase up to 200 applicants, through recruiting efforts targeting universities in the nation.
   Outcome measure: Percentage student application increase based on annual application data analysis

2. Goal: Increase faculty and student presentations and publications.
   Outcome measure: Count of presentations and publications

3. Goal: Increase/Maintain total grant dollars from internal and external sources.
   Outcome measure: Grant dollar annual total

4. Goal: Increase/Maintain percentage of students funded.
   Outcome measure: Percentage of students receiving financial support

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

The strategic plan was developed by mandate, and with guidance provided from the research and graduate school office (RGS) at Utah State University.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.5.

None.
Standard 1.6 Program Authority and Responsibility

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

There were no citations regarding Program Authority and Responsibility listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the Program's Authority and Responsibility.

None have occurred.

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.

Program has independent departmental status.

Where is the program housed administratively (e.g., College of Education, School of Medicine)?

Education

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

Faculty have access to higher levels of administration through various means: two faculty members are part of faculty senate, the department head meets monthly with the dean of the college and has phone and email access to the provost office, and a college department head is part of an executive group that meets monthly with the provost.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.6.

None.
Standard 1.7 Program Director

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

There were no citations regarding the Program Director listed in the last Accreditation Action Report.

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

None have occurred.

The name of the program director is displayed based on information currently on file with the CAA. If this information is incorrect, please submit a Change in Program Director Form to accreditation@asha.org. Once reviewed by staff, the information displayed here will be updated.

Dr. Teresa Ukrainetz

Date appointed:

1/1/2017

Is the program director new since submission of the last CAA report?

no

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

This Program Director has a permanent appointment.

Describe how the individual responsible for the program effectively leads and administers the program. Include examples of contributions made by this individual to support your explanation.

Leads and takes minutes for monthly SLP faculty meetings, meets regularly with the Department Head, assigns courses to instructors, determines course schedules with the graduate coordinator and the distance coordinator, oversees management of struggling students, updates student academic progress in CALIPSO, facilitates programmatic changes, and is the main author of the SLP program's CAA annual report. Examples this past year include leading on revision of policy and procedure statements, restructuring the first summer semester, and standardizing externship lengths.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.7

None
Standard 1.8 Equitable Treatment

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

There were no citations regarding Equitable Treatment listed in the last Accreditation Action Report

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

None have occurred

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.8

None
Standard 1.9 Public Information

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

There were no citations regarding Public Information listed in the last Accreditation Action Report.

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

None have occurred.

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.

Please provide the URL where this information can be found:

https://comdde.usu.edu/assessment/student-achievement-data

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

https://comdde.usu.edu/assessment/student-achievement-data

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

https://comdde.usu.edu/assessment/student-achievement-data

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

https://comdde.usu.edu/assessment/student-achievement-data

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

No Response Provided

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

The website indicates it is a two-year program consists of 55-58 credit hours across six semesters of full-time study beginning with a summer semester. https://comdde.usu.edu/programs/graduate/slp

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.9

None
Standard 2.0 Faculty

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

To add or remove faculty from this list click here.

If you have added or removed faculty from the list using the link above, you will need to click Data Refresh in the menu bar at the top of this page and select "Faculty Information" in order to display the updates here.

You will then be able to provide details about each newly added faculty member. You must provide details for all faculty members. A checkmark will appear next to the faculty member's name when the entry has been completed.

At the bottom of each faculty page, you will see two saving option. 1) Save and Close and 2) Close - Remember to Save Later. Save and Close will save that faculty page immediately, but the save function can be slow. If you are working on more than one record, then Close - Remember to Save Later will allow you make edits to multiple faculty records and then save them all at once. The system will time out if you have not saved in approximately 30 minutes, so be sure to save often.
<table>
<thead>
<tr>
<th>Faculty Name</th>
<th>CCC Status</th>
<th>Employment Status to the University</th>
<th>Academic Rank</th>
<th>Role</th>
<th>Highest Degree</th>
<th>Classroom Teaching Contribution</th>
<th>Other Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deborah Amundson</td>
<td>CCC-SLP</td>
<td>Full-Time 12mo.</td>
<td>Other</td>
<td>Clinical Supervisor</td>
<td>Master's</td>
<td>0.0000</td>
<td>Supervision</td>
</tr>
<tr>
<td>Jill R Andrus</td>
<td>CCC-SLP</td>
<td>Full-Time 9mo.</td>
<td>Other</td>
<td>Clinical Supervisor</td>
<td>Master's</td>
<td>0.0000</td>
<td>Supervision</td>
</tr>
<tr>
<td>Chad S Bingham</td>
<td>CCC-SLP</td>
<td>Full-Time 9mo.</td>
<td>Lecturer</td>
<td>Instructional Faculty</td>
<td>Master's</td>
<td>0.1600</td>
<td>Administration</td>
</tr>
<tr>
<td>Stephanie A Borrie</td>
<td>None</td>
<td>Full-Time 9mo.</td>
<td>Assistant Professor</td>
<td>Instructional Faculty</td>
<td>Research Doctorate (e.g. PhD, EdD, etc)</td>
<td>0.1200</td>
<td>Research</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ronald B Gillam</td>
<td>CCC-SLP</td>
<td>Full-Time 9mo.</td>
<td>Full Professor</td>
<td>Instructional Faculty</td>
<td>Research Doctorate (e.g. PhD, EdD, etc)</td>
<td>0.1200</td>
<td>Research</td>
</tr>
<tr>
<td>Sandra L Gillam</td>
<td>CCC-SLP</td>
<td>Full-Time 9mo.</td>
<td>Full Professor</td>
<td>Instructional Faculty</td>
<td>Research Doctorate (e.g. PhD, EdD, etc)</td>
<td>0.2400</td>
<td>Research</td>
</tr>
<tr>
<td>Jamie E Mecham</td>
<td>CCC-SLP</td>
<td>Full-Time 9mo.</td>
<td>Other</td>
<td>Clinical Supervisor</td>
<td>Master's</td>
<td>0.0000</td>
<td>Supervision, Administration</td>
</tr>
<tr>
<td>Lisa Milman</td>
<td>CCC-SLP</td>
<td>Full-Time 9mo.</td>
<td>Assistant Professor</td>
<td>Instructional Faculty</td>
<td>Research Doctorate (e.g. PhD, EdD, etc)</td>
<td>0.1600</td>
<td>Research</td>
</tr>
<tr>
<td>Teresa Ukrainetz</td>
<td>None</td>
<td>Full-Time 9mo.</td>
<td>Full Professor</td>
<td>Instructional Faculty, Program Director, Other</td>
<td>Research Doctorate (e.g. PhD, EdD, etc)</td>
<td>0.1200</td>
<td>Research, Administration</td>
</tr>
<tr>
<td>Kristin M Mosman</td>
<td>CCC-SLP</td>
<td>Full-Time 9mo.</td>
<td>Other</td>
<td>Clinic Director</td>
<td>Master's</td>
<td>0.0000</td>
<td>Supervision, Administration</td>
</tr>
<tr>
<td>Kendra L Schofield</td>
<td>CCC-SLP</td>
<td>Part-Time</td>
<td>Instructor</td>
<td>Clinical Supervisor</td>
<td>Master's</td>
<td>0.0000</td>
<td>Supervision</td>
</tr>
<tr>
<td>Stephanie M Knollhoff</td>
<td>CCC-SLP</td>
<td>Full-Time 9mo.</td>
<td>Assistant Professor</td>
<td>Instructional Faculty</td>
<td>Research Doctorate (e.g. PhD, EdD, etc)</td>
<td>0.4800</td>
<td>Research</td>
</tr>
<tr>
<td>Emilee Packer</td>
<td>CCC-SLP</td>
<td>Full-Time 9mo.</td>
<td>Other</td>
<td>Clinical Supervisor</td>
<td>Master's</td>
<td>0.0000</td>
<td>Supervision</td>
</tr>
<tr>
<td>Karen Filimoehala</td>
<td>CCC-SLP</td>
<td>Full-Time 9mo.</td>
<td>Instructor</td>
<td>Clinical Supervisor</td>
<td>Master's</td>
<td>0.0000</td>
<td>Supervision</td>
</tr>
<tr>
<td>Leslie Sparkuhl</td>
<td>CCC-SLP</td>
<td>Full-Time 9mo.</td>
<td>Other</td>
<td>Clinical Supervisor</td>
<td>Master's</td>
<td>0.0000</td>
<td>Supervision</td>
</tr>
</tbody>
</table>

Summary of Faculty Contribution
<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of full-time 9 month faculty</td>
<td>13</td>
</tr>
<tr>
<td>Number of full-time 12 month faculty</td>
<td>1</td>
</tr>
<tr>
<td>Number of part-time faculty</td>
<td>1</td>
</tr>
<tr>
<td>Number of adjunct faculty</td>
<td>0</td>
</tr>
<tr>
<td>Number of faculty with “other” employment status</td>
<td>0</td>
</tr>
<tr>
<td>Number providing supervision</td>
<td>8</td>
</tr>
<tr>
<td>Number providing research</td>
<td>6</td>
</tr>
<tr>
<td>Number providing advising</td>
<td>0</td>
</tr>
<tr>
<td>Number providing administration</td>
<td>4</td>
</tr>
<tr>
<td>Total % workload classroom teaching</td>
<td>1.40</td>
</tr>
</tbody>
</table>
Standard 2.1 Faculty Sufficiency – Overall Program

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

There were no citations regarding Overall Program Faculty Sufficiency listed in the last Accreditation Action Report.

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

None have occurred.

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

Full-time: registered for 9 graduate credits

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

No.

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

<table>
<thead>
<tr>
<th>Student Status</th>
<th>Current Report</th>
<th>Prior Report</th>
<th>Percent Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time</td>
<td>35</td>
<td>34</td>
<td>2.9412</td>
</tr>
<tr>
<td>Part-time</td>
<td>0</td>
<td>0</td>
<td>0.0000</td>
</tr>
<tr>
<td>Total</td>
<td>35</td>
<td>34</td>
<td>2.9412</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Student Status</th>
<th>Current Report</th>
<th>Prior Report</th>
<th>Percent Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time</td>
<td>11</td>
<td>12</td>
<td>-8.3333</td>
</tr>
<tr>
<td>Part-time</td>
<td>0</td>
<td>0</td>
<td>0.0000</td>
</tr>
<tr>
<td>Totals</td>
<td>11</td>
<td>12</td>
<td>-8.3333</td>
</tr>
</tbody>
</table>

Percentage change of enrollment across all modalities (if applicable)

<table>
<thead>
<tr>
<th></th>
<th>% Change Full-time</th>
<th>% Change Part-time</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0.0000</td>
<td>0.0000</td>
</tr>
</tbody>
</table>

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

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

Enrollment did not increase by 50% or more in the last year.
Do you offer an undergraduate program in the field of Communication Sciences and Disorders?

yes

Complete the table with your total enrollment for Undergraduate CSD degrees.

<table>
<thead>
<tr>
<th>Undergraduate Degree (e.g. BA, BS, etc)</th>
<th>Current total enrollment</th>
<th>Full-time Enrollment</th>
<th>Part-time Enrollment</th>
</tr>
</thead>
<tbody>
<tr>
<td>CDDE</td>
<td>400</td>
<td>230</td>
<td>170</td>
</tr>
</tbody>
</table>

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

yes

List all other graduate programs offered in your department, in addition to the one you are currently reporting on:

<table>
<thead>
<tr>
<th>Degree program</th>
<th>Current Total Enrollment</th>
<th>Full-time enrollment</th>
<th>Part-time Enrollment</th>
</tr>
</thead>
<tbody>
<tr>
<td>AuD</td>
<td>25</td>
<td>25</td>
<td>0</td>
</tr>
<tr>
<td>Deaf Education MED</td>
<td>12</td>
<td>12</td>
<td>0</td>
</tr>
</tbody>
</table>

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

Department head and division chairs review nature and distribution of instructor credentials, specialty areas, and teaching strengths and preferences. These are matched to course assignments. Student level, group composition (e.g., campus and DE combination), and course sequence are reviewed for effectiveness, with input from faculty.

Acquire the scientific and research fundamentals of the profession including evidence-based practice

Doctoral faculty teach most of the graduate level academic curriculum. Academic and clinical faculty meet to discuss implementation of evidence-based practice. Evidence-based practice is a learning objective across academic and clinic courses.

Meet the program’s established learning goals and objectives

The program’s learning goals and objectives are aligned with the knowledge and skills required in Standard 3. Department head and division chairs review instructor, student, clinical supervisor, and other faculty feedback on meeting the goals and objectives each year.

Meet other expectations set forth in the program’s mission and goals

The department head sets role statements and facilitates provision of space, financial, and time resources for doctoral faculty to meet their specified research contributions and for all faculty to meet their specified service contributions.

Complete the program within the published timeframe

Courses are offered on a regular and predictable basis. Workload is set and monitored to be heavy but manageable. Students are discouraged from taking on paid work or other non-programmatic activities of more than 10 hours per week. The academic advisor puts struggling students in contact with support personnel and resources that will help with life circumstances

Please describe any additional clarifying information you wish to provide regarding the program’s compliance with Standard 2.1

None
Standard 2.2 Faculty Sufficiency – Institutional Expectations

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

There were no citations regarding Institutional Expectations for Faculty Sufficiency listed in the last Accreditation Action Report

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

None have occurred

What is the institution’s formula for assigning faculty workload.

The general formula for assigning faculty workload is: for a 50% research role statement, faculty teach 12 credit hours per year. As the research allotment drops, teaching credit hours are increased or decreased. For faculty who only teach, the course workload is 24 credit hours per year.

Describe any exceptions to the institution’s policy for assigning faculty workload that are currently being employed. Provide the rationale for making this exception.

Course workloads may vary further with resources and specific situations. Typically, new faculty receive a one-course release in their first year. Faculty may buy out a course with grant funds, depending on the grant and department instructional resources.

Some administrative duties are classified as teaching within role statements, such as those of the SLP Program Director (also SLP Division Chair). For this position, the administrative work is considered equal to one academic course.

Please describe any additional clarifying information you wish to provide regarding the program’s compliance with Standard 2.2

None
Standard 2.3 Faculty Qualifications

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

There were no citations regarding Faculty Qualifications listed in the last Accreditation Action Report

Describe any changes that have occurred in the last reporting period regarding faculty qualifications.

None have occurred

If the information provided in the Faculty Details (Section 2.0) does not demonstrate that the majority of academic content is taught by doctoral faculty who hold a PhD or EdD degree, provide rationale. NOTE: 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.

Majority of academic content is taught by doctoral faculty who hold a PhD or EdD degree

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 2.3.

None
Standard 2.4 Faculty Continuing Competence

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

There were no citations regarding Faculty Continuing Competence listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Faculty Continuing Competence.

None have occurred.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 2.4.

None.
### Standard 3.0 - Courses

**Instruction:** Provide details for all courses (academic and clinical) in the curriculum by completing the table below.

1. Add a row in the table for each course in the curriculum.
2. Indicate the instructors currently assigned to teach each course for the program of study.
3. In the Requirement column, indicate how the course is offered and if it is for Graduate students only or a combined Undergraduate and Graduate course.
4. If the course is offered via Distance Education, check the box in the DE column.

<table>
<thead>
<tr>
<th>Course Title and Number/Section</th>
<th>Instructors</th>
<th>Terms offered in the last 2 years</th>
<th>Requirement</th>
<th>Type</th>
<th># of credits</th>
<th>DE</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMD 6030 Disorders of Fluency/Stuttering</td>
<td>Ron Gillam</td>
<td>Term 1, 2</td>
<td>Required-Grad</td>
<td>Academic</td>
<td>3</td>
<td>☐</td>
</tr>
<tr>
<td>COMD 6150 Phonological Assessments &amp; Intervention</td>
<td>Sandra Gillam</td>
<td>Term 1</td>
<td>Required-Grad</td>
<td>Academic</td>
<td>3</td>
<td>☐</td>
</tr>
<tr>
<td>COMD 6100 Advanced Clinical Practicum in Speech-Language Pathology</td>
<td>Debbie Amundson, Jill Andrus, Debbi Evans, Jamie Mecham, Kristin Mosman, Ammon Preston, Leigh Stott, Emilee Packer</td>
<td>Terms 1, 2, 3, 5</td>
<td>Required-Grad</td>
<td>Clinical</td>
<td>VAR</td>
<td>☐</td>
</tr>
<tr>
<td>COMD 6020 Language Assessment &amp; Intervention for School-Age Children &amp; Adolescents</td>
<td>Sandra Gillam</td>
<td>Term 2</td>
<td>Required-Grad</td>
<td>Academic</td>
<td>3</td>
<td>☑</td>
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<tr>
<td>COMD 6130 Neural Bases of Communication and Motor Speech Disorders</td>
<td>Lisa Milman, Stephanie Borrie</td>
<td>Term 2</td>
<td>Required-Grad</td>
<td>Academic</td>
<td>4</td>
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<tr>
<td>COMD 6200 Internship in the Public Schools (Outreach)</td>
<td>Jill Andrus</td>
<td>Term 2, 3, 5, 6</td>
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<tr>
<td>COMD 6230 Introduction to Research in Communicative Disorder</td>
<td>Teresa Ukrainetz</td>
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<tr>
<td>COMD 6120 Adult Language Disorders</td>
<td>Lisa Milman</td>
<td>Term 3</td>
<td>Required-Grad</td>
<td>Academic</td>
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<tr>
<td>COMD 6140 Dysphagia</td>
<td>Lisa Milman</td>
<td>Term 3</td>
<td>Required-Grad</td>
<td>Academic</td>
<td>3</td>
<td>☑</td>
</tr>
</tbody>
</table>
### Please describe any additional clarifying information you wish to provide regarding the program's courses.

None
Standard 3.1 Overall Curriculum

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

There were no citations regarding Overall Curriculum listed in the last Accreditation Action Report

Please describe any changes that have occurred in the last reporting period regarding the program's Overall Curriculum.

None have occurred

How are credit hours offered at the institution?

Semester

Provide the URL for the current graduate program course descriptions.

http://catalog.usu.edu/search_advanced.php?cur_cat_oid=12&search_database=Search&search_db=Search&cpage=1&ecpage=6&ppage=1&spage=1&tpage=1&location=33&filter%5Bkeyword%5D=COMD

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

<table>
<thead>
<tr>
<th>Requirements</th>
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<tr>
<td>Minimum required academic credits</td>
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</tr>
<tr>
<td>Minimum elective academic credits</td>
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</tr>
<tr>
<td>Minimum required practicum/clinical credits</td>
<td>27</td>
</tr>
<tr>
<td>Minimum elective practicum/clinical credits</td>
<td>0</td>
</tr>
<tr>
<td>Minimum required research credits (include dissertation if applicable)</td>
<td>0</td>
</tr>
<tr>
<td>Minimum elective research credits (include dissertation if applicable)</td>
<td>0</td>
</tr>
</tbody>
</table>

Indicate any other requirements below

No Response Provided

Total 58

Describe how the courses offered by distance education are equivalent to those that are offered in the residential program, including number of credits, availability, sequence, etc.

The DE academic curriculum is the same as the campus curriculum in credits, availability, and sequence. The DE students take the courses in the first summer on campus with the rest of the students. The DE students take subsequent academic courses simultaneously with the campus students through interactive broadcast internet technology. The instructors use the internet learning management system called Canvas to support instruction for all students.

Please download the Knowledge and Skills chart, complete it, and then upload it to this question.
Describe how the professional practice competencies are infused throughout the curriculum.

Academic course instructors demonstrate and discuss as they pertain in general and to specific case studies. They expect to see relevant competencies on assignment and exam responses. Clinical supervisors demonstrate, elicit, guide, and evaluate demonstration of these competencies in hypothetical scenarios in clinic class and within service preparation, execution, and evaluation for actual clients. (professional practice competencies = accountability, integrity, communication skills, and clinical reasoning, evidence-based practice, concern for individual served, cultural competence, professional duty, collaborative practice)

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

We use a Professionalism Rubric to teach, monitor, assess, and measure professionalism skills, including, but not limited to those competencies mentioned. The students are given feedback multiple times a semester using this rubric and more informally in their weekly supervisor meetings. Our students are prepared to practice with patients/clients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. Students participate in learning opportunities, including direct clinical experiences, that insure are sufficient in breadth and depth to ensure the students attain these practice focused outcomes and integrates the delineated knowledge and skills into their professional practice. Clinical learning is focused on developing and refining the knowledge and skills necessary to manage care as part of an interprofessional team. We also provide simulation experiences that augment clinical learning and are complementary to direct care opportunities essential to their professional practice. In addition, the multiple externship experiences provide opportunities for building clinical reasoning, management, and evaluation skills. We have several assignments in clinic that require interprofessional practice, and they also get those experiences at their externships sites to an even greater degree.

Describe how contemporary professional issues (such as reimbursement and credentialing regulations) are presented in the curriculum.

During required weekly clinic meetings and in COMD 6050 Professional Practice. In clinic, the students are responsible for coding and billing appropriately in our EMR system, and it is monitored and approved by the clinical supervisor.

Does the program offer clinical education for undergraduates?

Yes

Provide the following information regarding clinical education for undergraduates:

- Average number of undergraduate students enrolled in clinical practicum: 13
- Average number of clock hours earned per undergraduate student per academic term: 18
- Average number of academic terms (semester/quarters) undergraduates are enrolled in clinical practicum: 1

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.1

Some UG courses changed in Knowledge and Skills chart due to a revision of UG curriculum
Standard 3.2 Curriculum Currency

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

There were no citations regarding Curriculum Currency listed in the last Accreditation Action Report

Please describe any changes that have occurred in the last reporting period regarding the program's Curriculum Currency.

None have occurred

Describe the pedagogical approaches that the program will use to deliver the curriculum.

Combination of didactic instruction, student discussion and activities, guided clinical experiences, computer-based virtual clinical experiences. Delivered via combination of face-face, broadcast, and online modalities.

Describe the curriculum planning process used by the program.

At least annual review of student performance, instructional resources, expectations in the field, and specific ASHA/CAA expectations. Conducted via SLP faculty meetings, sub-faculty committee meetings, heads meetings (Dept Head with SLP, Audiology, and Deaf Ed Chairs), email communication, and sharing documents through USU Box. Plus individual instructors maintain currency and effectiveness of their own courses through regular examination of course coverage and student performance, compared against instructor knowledge of pedagogy and expertise areas.

How did the program use literature and other guiding documents to facilitate curriculum planning?

ASHA documents and others are used to help make curriculum decisions. An example of using literature to guide curriculum planning is using ASHA (2015) Final Report: Role of Undergraduate Education in Comm Sc & Dis to help decide about neurological bases of communication being offered at the graduate or undergraduate level, and whether undergraduates should be broadly prepared versus being more narrowly clinically prepared prior to entering graduate school. Another example is using the CFCC Standard IV-B to determine the scope of undergraduate courses and how to set up regional accreditation assessment data reporting.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.2

None
Standard 3.3 Sequence of Learning Experiences

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

There were no citations regarding the Sequence of Learning Experiences listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Sequence of Learning Experiences.

None have occurred.

Provide a typical academic program, showing the sequence of courses and clinical experiences.

Course Sequence

<table>
<thead>
<tr>
<th>SEMESTER 1</th>
<th>COURSE</th>
<th>COURSE TITLE</th>
<th>CREDITS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>COMD 6250</td>
<td>Birth to Five Language Intervention</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>COMD 6150</td>
<td>Phonological Assessments &amp; Intervention</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>COMD 6100</td>
<td>Advanced Clinical Practicum in Speech-Language Pathology</td>
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</table>

<table>
<thead>
<tr>
<th>SEMESTER 2</th>
<th>COURSE</th>
<th>COURSE TITLE</th>
<th>CREDITS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>COMD 6020</td>
<td>Language Assessment &amp; Intervention for School-Age Children &amp; Adolescents</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>COMD 6130</td>
<td>Acquired Motor Speech Disorders</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>COMD 6230</td>
<td>Introduction to Research in Communicative Disorders</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>COMD 6100</td>
<td>Advanced Clinical Practicum in Speech-Language Pathology (Campus)</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>COMD 6200</td>
<td>Internship in the Public Schools (Outreach)</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>COMD 6900</td>
<td>Neural Bases of Communication</td>
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<table>
<thead>
<tr>
<th>SEMESTER 3</th>
<th>COURSE</th>
<th>COURSE TITLE</th>
<th>CREDITS</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>COMD 6120</td>
<td>Adult Language Disorders</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>COMD 6140</td>
<td>Dysphagia</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>COMD 6100</td>
<td>Advanced Clinical Practicum in Speech-Language Pathology (Campus)</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>COMD 6200</td>
<td>Internship in the Public Schools (Outreach)</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>COMD 6220</td>
<td>Severe Communication Impairments</td>
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</table>

<table>
<thead>
<tr>
<th>SEMESTER 4</th>
<th>COURSE</th>
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<th>CREDITS</th>
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<td></td>
<td>COMD 6300</td>
<td>Externship in Speech-Language Pathology (Campus)²</td>
<td>3</td>
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<tr>
<td></td>
<td>COMD 6300</td>
<td>Externship in Speech-Language Pathology (Outreach)</td>
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<thead>
<tr>
<th>SEMESTER 5</th>
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</tr>
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<tbody>
<tr>
<td></td>
<td>COMD 6050</td>
<td>Professional Practice in Speech Language Pathology</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>COMD 6030</td>
<td>Disorders of Fluency/Stuttering</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>COMD 6810</td>
<td>Voice and Resonance Disorders</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>COMD 6200</td>
<td>Internship in the Public Schools: Speech-Language Pathology (Campus)</td>
<td>3</td>
</tr>
<tr>
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<td>COMD 6200</td>
<td>Internship in the Public Schools: Speech-Language Pathology (Outreach)</td>
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<tr>
<td></td>
<td>COMD 6100</td>
<td>Advanced Clinical Practicum in Speech-Language Pathology (Campus)²</td>
<td>1</td>
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<tr>
<td>Semester</td>
<td>Course</td>
<td>Course Title</td>
<td>Credits</td>
</tr>
<tr>
<td>----------</td>
<td>--------</td>
<td>--------------</td>
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</tr>
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<td>6</td>
<td>COMD 6200</td>
<td>Internship in the Public Schools: Speech-Language Pathology (Outreach)</td>
<td>4</td>
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<td></td>
<td>COMD 6930</td>
<td>Comprehensive Examination in Speech-Language Pathology</td>
<td>1</td>
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</table>

- a) variable arrangements, equivalent to minimum 4 wks full-time
- b) Optional clinical experience, may occur in Summer 4
- c) Healthcare setting, 10-12 wks full-time
- d) Or Plan B thesis project (COMD 6970, 2 credits)

Provide a typical academic program, showing the sequence of courses and clinical experiences for the distance education component.

**Course Sequence**

**Semester 1**

<table>
<thead>
<tr>
<th>Course</th>
<th>Course Title</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMD 6250</td>
<td>Birth to Five Language Intervention</td>
<td>3</td>
</tr>
<tr>
<td>COMD 6150</td>
<td>Phonological Assessments &amp; Intervention</td>
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<tr>
<td>COMD 6100</td>
<td>Advanced Clinical Practicum in Speech-Language Pathology</td>
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**Semester 2**

<table>
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<tr>
<th>Course</th>
<th>Course Title</th>
<th>Credits</th>
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<tbody>
<tr>
<td>COMD 6020</td>
<td>Language Assessment &amp; Intervention for School-Age Children &amp; Adolescents</td>
<td>3</td>
</tr>
<tr>
<td>COMD 6130</td>
<td>Acquired Motor Speech Disorders</td>
<td>3</td>
</tr>
<tr>
<td>COMD 6230</td>
<td>Introduction to Research in Communicative Disorders</td>
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<tr>
<td>COMD 6100</td>
<td>Advanced Clinical Practicum in Speech-Language Pathology (Campus)</td>
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</tr>
<tr>
<td>COMD 6200</td>
<td>Internship in the Public Schools (Outreach)</td>
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<tr>
<td>COMD 6900</td>
<td>Neural Bases of Communication</td>
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**Semester 3**

<table>
<thead>
<tr>
<th>Course</th>
<th>Course Title</th>
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<tbody>
<tr>
<td>COMD 6120</td>
<td>Adult Language Disorders</td>
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</tr>
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<td>COMD 6140</td>
<td>Dysphagia</td>
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**Semester 4**

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<tr>
<td>COMD 6300</td>
<td>Externship in Speech-Language Pathology (Campus)</td>
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<td>COMD 6300</td>
<td>Externship in Speech-Language Pathology (Outreach)</td>
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**Semester 5**

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<td>COMD 6050</td>
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<tr>
<td>COMD 6030</td>
<td>Disorders of Fluency/Stuttering</td>
<td>3</td>
</tr>
<tr>
<td>COMD 6810</td>
<td>Voice and Resonance Disorders</td>
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<td>COMD 6200</td>
<td>Internship in the Public Schools: Speech-Language Pathology (Campus)</td>
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### SEMESTER 1

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### SEMESTER 6

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<td>COMD 6200</td>
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<tr>
<td>COMD 6300</td>
<td>Externship in Speech-Language Pathology (Campus)</td>
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<tr>
<td>COMD 6930</td>
<td>Comprehensive Examination in Speech-Language Pathology</td>
<td>1</td>
</tr>
</tbody>
</table>

**Notes:**

- a variable arrangements, equivalent to minimum 4 wks full-time
- b Optional clinical experience, may occur in Summer 4
- c Healthcare setting, 10-12 wks full-time
- d Or Plan B thesis project (COMD 6970, 2 credits)

---

**Describe any differences in the expected sequence of courses and clinical experiences that result from different tracks.**

MA has the Comprehensive Exam in the final semester. MS has a thesis or master's project throughout the program.

Students participating in the Listening and Spoken Language (LSL) emphasis also take the following:

**YEAR 1**
- Summer: LSL seminar, LSL clinical practicum
- Fall: Strategies for Listening and Spoken Language, LSL Seminar, LSL practicum
- Spring: LSL Seminar, LSL practicum

**YEAR 2**
- Fall: LSL practicum
- Spring: LSL practicum

**For the distance education component describe any differences in the expected sequence of courses and clinical experiences that result from different tracks.**

Same course sequence, credit hours, and average clinical clock hours.

Distance students gain more of their first year clinical experiences in their school settings than in the university clinic. DE students take their full-time healthcare externship in the second summer while most campus students take it in the second spring.

**Describe the method(s) used to organize, sequence, and provide opportunities for integration across all elements of the content.**

Students enter the graduate program with basic human communication and foundational courses. Graduate coursework is sequenced to provide students with knowledge of disorders, assessment, and intervention prior to or concurrent with clinical experiences. Students take clinic and course concurrently to integrate knowledge with practice. Initial clients are chosen for students that reflect their prior or concurrent coursework. Clinical supervisors provide maximal support for challenging clients.

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

**Example One:**

In the first summer, students take or have completed Phonological Intervention, Fluency Disorders, and Birth-5 Language disorders.

Summer clinic clients have speech sound, fluency, or preschool language disorders.

**Example Two:**

School-age Language Disorders occurs in the first fall semester, when DE students are concurrently on placement in school districts.
Describe how the organization, sequential nature, and opportunities for integration allow each student to meet the program's established learning goals and objectives.

The organization of the program facilitates students' ability to meet the program's established goals and objectives. Coursework is strategically sequenced to best support early and then later clinical experiences. Clinical instructors scaffold skill development and implementation in sheltered practicum experiences before students move out into externships. Integration of academic and clinical knowledge and skills is woven throughout coursework and clinical experiences to develop competencies and networks of critical concepts.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.3

None
Standard 3.4 Diversity Reflected in the Curriculum

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

There were no citations regarding Diversity Reflected in the Curriculum listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Diversity Reflected in the Curriculum.

None have occurred.

Describe how and where issues of diversity will be addressed across the curriculum.

Diversity is addressed across the curriculum. For example, COMD 6020 addresses bilingual considerations for school-age language assessment, and COMD 6150 addresses phonological patterns for English language learners.

Describe how students obtain clinical experience with diverse populations.

Students obtain clinical experience with diverse populations through their clinical practicum placements (i.e., on campus, school, and medical externship). Students also have multiple opportunities to participate in service activities in the community (e.g., Special Olympics, literacy events).

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.4.

None.
Standard 3.6 Clinical Settings/Populations

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

There were no citations regarding Clinical Settings/Populations listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program’s Clinical Settings/Populations.

None have occurred.

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 speech-language pathology clinical practice

Our goal is to ensure that students have clinical experiences across the lifespan and across the nine major areas of communicative and swallowing disorders. We strive to provide excellent experiences both on and off campus in a variety of settings. They are given experiences in the following skills: prevention and pre-referral, screening, assessment/evaluation, consultation, diagnosis, treatment, intervention, management, counseling, collaboration, documentation, and referral. Students complete three off-campus externships in pediatric, school, and medical settings in addition to the (up to) 6-7 hours a week of clients they have in the on-campus clinic each of the 4 semesters they are on campus. We provide services in our clinic to individuals across the lifespan and continuum of care, across all disability areas in our scope of practice, with a variety of culturally and linguistically diverse populations, and across a variety of severity levels. Simulated cases are also used to supplement the students’ experience and enhance the breadth or their experiences. Careful effort is made to ensure that each student gets a variety of clinical experiences.

Opportunities to work with individuals across the life span and the continuum of care

Our goal is to ensure that students have clinical experiences across the lifespan and across the nine major areas of communicative and swallowing disorders. We strive to provide excellent experiences both on and off campus in a variety of settings. They are given experiences in the following skills: prevention and pre-referral, screening, assessment/evaluation, consultation, diagnosis, treatment, intervention, management, counseling, collaboration, documentation, and referral. They complete three off-campus externships in pediatric, school, and medical settings in addition to the 6-7 hours a week of clients they have in the on-campus clinic each of the 4 semesters they are on campus. We provide services in our clinic to individuals across the lifespan, across all disability areas in our scope of practice, with a variety of culturally and linguistically diverse populations, and across a variety of severity levels.

Opportunities to work with individuals from culturally and linguistically diverse backgrounds

We provide services in our clinic to individuals across the lifespan, across all disability areas in our scope of practice, with a variety of culturally and linguistically diverse populations, and across a variety of severity levels. They also get additional experiences to work with culturally and linguistically diverse populations in their off-campus externship placements.

Experiences with individuals who express various types of severities of changes in structure and function of speech and swallowing mechanisms

Our goal is to ensure that students have clinical experiences across the lifespan and across the nine major areas of communicative and swallowing disorders. We strive to provide excellent experiences both on and off campus in a variety of settings. They are given experiences in the following skills: prevention and pre-referral, screening, assessment/evaluation, consultation, diagnosis, treatment, intervention, management, counseling, collaboration, documentation, and referral. They complete three off-campus externships in pediatric, school, and medical settings in addition to the (up to) 6-7 hours a week of clients they have in the on-campus clinic each of the 4 semesters they are on campus. We provide services in our clinic to individuals across the lifespan, across all disability areas in our scope of practice, with a variety of culturally and linguistically diverse populations, and across a variety of severity levels.

Experiences with individuals who express various types of severities of changes in structure and function of speech and swallowing mechanisms

Our goal is to ensure that students have clinical experiences across the lifespan and across the nine major areas of communicative and swallowing disorders. We strive to provide excellent experiences both on and off campus in a variety of settings. They are given experiences in the following skills: prevention and pre-referral, screening, assessment/evaluation, consultation, diagnosis, treatment, intervention, management, counseling, collaboration, documentation, and referral. They complete three off-campus externships in pediatric, school, and medical settings in addition to the (up to) 6-7 hours a week of clients they have in the on-campus clinic each of the 4 semesters they are on campus. We provide services in our clinic to individuals across the lifespan, across all disability areas in our scope of practice, with a variety of culturally and linguistically diverse populations, and across a variety of severity levels.

Exposure to the business aspects of the practice of speech-language pathology and swallowing (e.g., reimbursement requirements, insurance and billing procedures, scheduling)

Our students use an EMR (electronic medical records) system where they not only complete documentation about their clients’ performance and progress but they are also billing, supplying FCMS, ICD-10 codes, CPT codes and meeting reimbursement requirements for Medicare and Medicaid. Their clients are typically scheduled for the entire semester at a time, but they are familiar with how this process is completed and are responsible for scheduling make-up sessions for missed or cancelled sessions.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.6

None
Standard 3.5 Scientific and Research Foundation

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

There were no citations regarding the Scientific and Research Foundations listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Scientific and Research Foundations.

None have occurred.

How does the curriculum reflect the scientific basis of the professions and include research methodology and exposure to research literature? (Select all that apply)

- Attend research conferences
- Complete research project or dissertation
- Incorporate evidence-based practice into the clinic
- Other research project(s)
- Participate in faculty research
- Require research course

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

Students take a required research methods course in which they learn about evidence-based practice and answer a clinical question by reviewing the research literature. Clinic requires students to locate and analyze a research study relevant to each of their clients. In clinic class, students are guided on finding and interpreting research evidence relative to actual or fictional case studies. Clinic also requires students to conduct a more in-depth analysis of two research articles related to one of their clients. Some students or conduct theses or serve as research assistants in faculty labs, which often have regular lab meetings in which research literature is discussed. Opportunities to discuss research literature are also embedded throughout the graduate coursework.

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.

With guidance from their clinic supervisors, students must integrate their knowledge of research (obtained as described in the prior question), theirs and their supervisors' clinical expertise, and their clients' preferences and values to make clinical decisions. In academic coursework, instructors explain and elicit decisions about clinical cases using the EBP framework. In the final comprehensive exam, students must demonstrate their knowledge of EBP by applying it to case studies.

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.

Clinic requires students to locate and analyze a research study relevant to each of their clients. In clinic class, students are guided on finding and interpreting research evidence relative to actual or fictional case studies. Clinic also requires students to conduct a more in-depth analysis of two research articles related to one of their clients. Opportunities to discuss applying research literature to clinical populations are also embedded throughout the graduate coursework.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.5.

None.
Standard 3.7 Clinical Education - Students

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

There were no citations regarding Clinical Education - Students listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Clinical Education - Students.

None have occurred.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.7.

None.
Standard 3.8 Clinical Education - Client Welfare

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

There were no citations regarding Clinical Education – Client Welfare listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Clinical Education - Client Welfare

None have occurred

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.8.

None
Standard 3.9 External Placements

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

There were no citations regarding External Placements listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program’s External Placements.

None have occurred.

Describe how valid agreements (written or electronic) 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.

The clinical education coordinator contacts sites about student externships after meeting with the students and learning of their desired sites, locations and types of externships. Sometimes externship sites do interviews or require resumes or personal statements. The students are informed of available sites, and the particular requirements of that site. Once the student has been accepted at an externship site (typically by email to the externship coordinator), the externship coordinator obtains an affiliation agreement. Some sites use their own, and some accept ours. We have a pre-approved contract that has already been approved by all pertinent institutional parties up to and including the university’s legal counsel. If the externship site requires the use of their own contract, we send it through the Document Review process for all the required signatures. This process is lengthy and thorough, and takes about 2 months to complete. The coordinator obtains a Certificate of Insurance and sends that as well as the fully executable contract, prior to the start of the externship.

Describe policies regarding: (a) the role of students in the selection of externship sites, and (b) the placement of students in the sites.

Sites are selected for each student based on the student’s needs (areas they need hours in, and where she or he will be living during the externship) and his or her specific setting preferences. Students must achieve the following across their site placements:

1. Achieved competency in Core Skills and had each of those skills signed off by two different clinical supervisors
2. Complete a part-time externship of 8 weeks, typically 3 days a week in an off-campus site
3. Complete a part-time (12-15 contact hours a week) school externship, also off-campus
4. Complete a full-time 10-week medical externship which must be mostly working with adults

The students have some say in that they can request specific sites and locations, which the clinical education coordinator tries to accommodate. Sometimes sites are requested that only accept students from that state or certain programs, or the area may be saturated with other programs; for those sites, student requests may not be accommodated. We have many sites that expect our students year after year and we maintain current contracts (renewable every year unless either party wants to change something).

Most of our contracts are signed for 5 year terms. These contracts state the requirements the program has of externship sites and supervisors, and also the site’s requirements of us and our students. These requirements are made clear to the students well before the start of their externships, so they have time to complete them.

DE students are accepted into the program under a State of UT Board of Education grant. DE students are employed in schools as SLTs (Speech-Language Technicians). After one summer clinic on campus, the DE students engage in four semesters of full-time practica in their school districts, moving among preschool, elementary, and secondary settings. There are school clinical supervisors at every site and there is one university clinical assistant professor dedicated to the DE program. The USU DE clinical faculty member follows students weekly to check on the students. The DE students also do the same full-time 10-week medical externship as the campus students, with the choice of site subject to the same factors as for campus students.
Describe policies and procedures the program uses to select and place students in external facilities

Sites are selected for each student based on the student’s needs (areas they need hours in, and where she or he will be living during the externship) and his or her specific setting preferences. Students must achieve the following across their site placements:

1. Achieved competency in Core Skills and had each of those skills signed off by two different clinical supervisors
2. Complete a part-time externship of 8 weeks, typically 3 days a week in an off-campus site
3. Complete a part-time (12-15 contact hours a week) school externship, also off-campus
4. Complete a full-time 10-week medical externship which must be mostly working with adults

The students have some say in that they can request specific sites and locations, which the clinical education coordinator tries to accommodate. Sometimes sites are requested that only accept students from that state or certain programs, or the area may be saturated with other programs; for those sites, student requests may not be accommodated. We have many sites that expect our students year after year and we maintain current contracts (renewable every year unless either party wants to change something).

Most of our contracts are signed for 5 year terms. These contracts state the requirements the program has of externship sites and supervisors, and also the site’s requirements of us and our students. These requirements are made clear to the students well before the start of their externships, so they have time to complete them.

DE students are accepted into the program under a State of UT Board of Education grant. DE students are employed in schools as SLTs (Speech-Language Technicians). After one summer clinic on campus, the DE students engage in four semesters of full-time practica in their school districts, moving among preschool, elementary, and secondary settings. There are school clinical supervisors at every site and there is one university clinical assistant professor dedicated to the DE program. The USU DE clinical faculty member follows students weekly to check on the students. The DE students also do the same full-time 10-week medical externship as the campus students, with the choice of site subject to the same factors as for campus students.

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.

The clinical education coordinator has extensive phone and email contact with the facilities and the supervisory SLPs to be sure that each site has a good fit as far as population, personnel, and student’s areas of interest. Sometimes, the clinical education coordinator visits local sites. The DE clinical faculty member spends extensive time with the DE students by remote video communication or at their sites around the site.

Describe the procedures that the program uses to ensure that valid agreements (written or electronic) between the external site and the program are signed before students are placed.

This is an absolute requirement. The clinical education coordinator is diligent in making this happen. No student can start an externship unless the agreement, the insurance, and the site’s student requirements are all in place. There is a college and university required process in place.

Please describe any additional clarifying information you wish to provide regarding the program’s compliance with Standard 3.9

None
Standard 3.10 Student Conduct

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

There were no citations regarding Student Conduct listed in the last Accreditation Action Report

Please describe any changes that have occurred in the last reporting period regarding the program's Student Conduct.

None have occurred

Describe policies and procedures that are pertinent to expectations of student academic and clinical conduct.

The SLP program follows university code for student academic conduct (https://studentconduct.usu.edu/). Policies and procedures for clinic conduct are provided in the clinic handbook. The handbook is updated annually and students are given access at orientation. In addition, all students in clinic are instructed in the areas of ethics, professionalism, HIPAA, FERPA, and appropriate counseling and are also graded on their performance and compliance in these areas. If they have not met these requirements, they do not go out to external sites for externships until they have. Some of the Core Clinical Skills that they have to have signed off prior to their first externship include the areas of professionalism, code of conduct, and ASHA's Code of Ethics. The Externship Coordinator also meets with them again just prior to their externships to discuss these issues as well.

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

Expectations for academic conduct are provided at orientation, and are included in course syllabi. Expectations for clinical integrity are provided at orientation, in practicum course syllabi, in the clinic handbook, and in the Clinic class meetings. The expectations are applied throughout the program.

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.

Expectations for academic conduct are provided at orientation, and are included in course syllabi. Expectations for clinical integrity are provided at orientation, in practicum course syllabi, in the clinic handbook, and in the Clinic class meetings. The expectations are applied throughout the program.

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

The SLP program follows university code for student academic conduct (https://studentconduct.usu.edu/). Policies and procedures for clinic conduct are provided in the clinic handbook. The handbook is updated annually and students are given access at orientation

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.10.

None
Standard 4.1 Student Admission Criteria

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

There were no citations regarding Admission Criteria listed in the last Accreditation Action Report

Please describe any changes that have occurred in the last reporting period regarding the program's admission criteria.

None have occurred

Please provide any additional clarifying information regarding the program's compliance with Standard 4.1

None
Standard 4.2 Student Adaptations

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

There were no citations regarding Student Adaptations listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding Student Adaptations.

None have occurred.

Provide an example documenting the fact that the program's curriculum demonstrates respect for and understanding of cultural, linguistic, and individual diversity.

COMD 6020, on school age language intervention, addresses how to determine differences versus disorders in clients.

Provide an example documenting the fact that the program's policies and procedures demonstrate respect for and understanding of cultural, linguistic, and individual diversity (e.g., admission, internal/external clinical placement and student retention policies/procedures, proficiency in English).

A document is posted at the clinic reception desk titled "Equitable Treatment of Students, Faculty, Staff, and Clinic Patrons" that specifics respect for everyone regardless of differences.

Provide the program's policy regarding the processes used to determine the need for and the provision of accommodations for students with reported disabilities.

Instructors are contacted by the University Disability Resource Center if the student has initiated an accommodation request. Reasonable accommodations are then made. Students who are struggling in the program possibly due to unrecognized disabilities are encouraged to explore the disability center resources.

Please provide any additional clarifying information regarding the program's compliance with Standard 4.2.

None.
Standard 4.3 Student Intervention

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

There were no citations regarding Student Interventions listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding Student Information.

None have occurred

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 all aspects (academic and clinical) of the curriculum:

Academic aspects of the program

Assessment and meeting of competency standards are conducted within courses. Struggling students are identified and discussed at monthly faculty meetings. Remediation and intervention plans are set up with the graduate advisor, the instructor of concern, and the division chair. Students are made aware of the University Disability Resource Center for formal accommodations.

Clinical aspects of the program

Assessment and remediation are conducted within clinic. Struggling students are identified and discussed at monthly faculty meetings. Remediation and intervention plans are set up with the graduate advisor, the instructor of concern, and the clinic director. Students are made aware of the University Disability Resource Center for formal accommodations.

Describe the process used to ensure guidelines for remediation are documented, are provided to students, and implemented consistently.

Course objectives and procedures for demonstrating competence are listed on the department website at http://comd.usu.edu/programs/policies, under Academics. Students review the policy at the beginning of the program. Each syllabus lists the requisite knowledge and skill objectives, and the assignments on which they will be demonstrated. If a within-course competency action is not successful, the program director or clinic coordinator leads on setting a formal remediation plan. Students can access their progress through the program via CALIPS0 and communications from the program director or clinic coordinator.

Please provide any additional clarifying information regarding the program’s compliance with Standard 4.3.

None
Standard 4.4 Student Information

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

There were no citations regarding Student Information listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Student Information.

None have occurred.

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

- Academic Advising
- Coursework
- Student orientation meetings
- Student handbooks
- Website

Provide URL

http://comd.usu.edu/programs/policies

Please provide any additional clarifying information regarding the program's compliance with Standard 4.4.

None.
Standard 4.5 Student Complaints

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

There were no citations regarding Student Complaints listed in the last Accreditation Action Report.

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

None have occurred

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

The COMDDE website, under Academics --> Policies --> COMD, explains the process and gives a link to appropriate university resources. Students who feel they have been unfairly treated in academic matters should first discuss the matter with the instructor. For unresolved issues, students are encouraged to meet with the academic advisor, clinic director, division chair, or department head. If the issue cannot be resolved, or for matters of discrimination or harassment, students may file a grievance though procedures and timelines specified in https://studentconduct.usu.edu/studentcode. For matters of grievances pertaining to student conduct, see Article V. For academic integrity, see Article VI. For discrimination and harassment, see Article VII.

Please provide any additional clarifying information regarding the program's compliance with Standard 4.5

None
Standard 4.6 Student Advising

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

There were no citations regarding Student Advising listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding Student Advising.

None have occurred.

Please provide any additional clarifying information regarding the program's compliance with Standard 4.6.

None.
Standard 4.7 Student Progress Documentation

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

There were no citations regarding Student Progress Documentation listed in the last Accreditation Action Report

Please describe any changes that have occurred in the last reporting period regarding the documentation of student progress.

None have occurred

Describe how the program develops and maintains documents of each student’s records for the entire time of his or her matriculation in the program in the distance education component.

Upon admission, a student file is created electronically through the Graduate School to track all university-related progress. Students can access their degree progress electronically through Banner. Department progress through the academic and clinic program is tracked through CALIPSO, which students can access remotely.

Please provide any additional clarifying information regarding the program’s compliance with Standard 4.7

None
Standard 4.8 Availability of Student Records

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

There were no citations regarding Availability of Student Records listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Availability of Student Records.

None have occurred.

Describe how documentation of student progress toward the completion of graduate degree and professional credentialing requirements is readily available to students in the distance education component.

Upon admission, a student file is created electronically through the Graduate School to track all university-related progress. Students can access their degree progress electronically through Banner. Department progress through the academic and clinic program is tracked through CALIPSO, which students can access remotely.

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

The department complies with university policy regarding student and alumni access.

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.

The department complies with university policy regarding student and alumni access. All requests for academic records goes through the registrar's office: www.usu.edu/registrar/contact

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

The institution defers to the accrediting body requirements.

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

We maintain student records for seven years.

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

There is no difference other than the program specifying seven years.

Please provide any additional clarifying information regarding the program's compliance with Standard 4.8.

None.
Standard 4.9 Student Support Services

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

There were no citations regarding Student Support Services listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Student Support Services.

None have occurred.

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

We include links to student services in the welcome email and in the orientation materials.

Please provide any additional clarifying information regarding the program's compliance with Standard 4.9.

None.
Standard 4.10 Verification of Student Identity

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

There were no citations regarding Verification of Student Identity listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Verification of Student Identity.

None have occurred.

Please provide any additional clarifying information regarding the program's compliance with Standard 4.10.

None.
Standard 5.1 Assessment of Student Learning

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

There were no citations regarding Assessment of Student Learning listed in the last Accreditation Action Report

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

None have occurred

Please provide any additional clarifying information regarding the program's compliance with Standard 5.1

None
Standard 5.2 Program Assessment of Students

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

There were no citations regarding Program Assessment of Students listed in the last Accreditation Action Report.

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

None have occurred

Describe the assessment plan that the program will use to assess performance of students, including the timelines for administering the elements of the assessment plan.

Students must pass every academic and clinic course in prescribed timeline of the program, culminating in a comprehensive exam or thesis defense. Timelines can be adjusted slightly for students who are repeating a course or clinic assignment, or have obtained disability service accommodations.

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

Students are assessed within their courses and clinical practicum. Competencies, including professionalism and professional behaviors, are tracked in CALIPSO each semester.

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

Assessment measures for academic courses are applied within each course for all students in the course. The Program Director updates CALIPSO on the academic knowledge and skills performance for each course completed each semester. Clinical assessment measures are completed within CALIPSO. In addition to feedback at the time of each clinic session, students receive mid-semester and end of semester clinical evaluation feedback.

Please provide any additional clarifying information regarding the program's compliance with Standard 5.2.

None
Standard 5.3 Ongoing Program Assessment

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

There were no citations regarding Program Assessment listed in the last Accreditation Action Report

Please describe any changes that have occurred in the last reporting period regarding the program's Ongoing Program Assessment.

None have occurred

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

The program uses feedback from stakeholders to evaluate program quality, including annual student, clinical supervisor, employer, and client surveys, along with degree completion and praxis data. Students also complete course evaluations for academic courses and clinic. Pre-tenure faculty receive peer teaching evaluations.

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

The SLP faculty have an annual retreat and monthly faculty meetings during the academic year. At the meetings we review and discuss program data, identify areas that need to be addressed, and develop an action plan to address and monitor needs.

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

The faculty use results of the assessments, outcome data, and feedback to improve the program using an ongoing program improvement approach.

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

(a) the stated mission, goals, and objectives and

Review and discussion at annual faculty SLP Division retreat

(b) the measured student learning outcomes

Review of data and discussion at annual faculty retreat, and monthly faculty meetings, as needed

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

Student achievement of professional practice competencies are measured within courses and clinical placements. Competencies are tracked in CALIPSO.

Please provide any additional clarifying information regarding the program's compliance with Standard 5.3

None
Standard 5.4 Ongoing Program Improvement

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

There were no citations regarding the Ongoing Program Improvement listed in the last Accreditation Action Report

Please describe any changes that have occurred in the last reporting period regarding the program's Ongoing Program Improvement.

None have occurred

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

At the beginning of any curriculum review/change process, faculty first review mission, goals and objectives to remain aligned.

Please provide any additional clarifying information regarding the program's compliance with Standard 5.4

None
Standard 5.5 Program Completion Rate

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

There were no citations regarding Program Completion Rates listed in the last Accreditation Action Report

Please describe any changes that have occurred in the last reporting period regarding the program's Program Completion Rate

None have occurred

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

The graduate advisor checks that the accepted students have enrolled in the first two courses of the program and that all show up for orientation and classes.

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.

Student progress is tracked through CALIPSO and through University Registrar checks by the graduate advisor. Any struggling students or students in peril of late or non-completion are discussed at monthly SLP division faculty meetings.

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.

The SLP Division maintains records through CALIPSO that the graduate advisor, clinical coordinator, program director, department head, and other relevant personal can access.

Provide the published length of time (stated in semesters/quarters) for students to complete the residential program of study.

<table>
<thead>
<tr>
<th>Enrollment Type</th>
<th>Time to Degree (Semesters/Quarters)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time with CSD undergraduate major</td>
<td>6</td>
</tr>
<tr>
<td>Full-time without CSD undergraduate major</td>
<td>NA</td>
</tr>
<tr>
<td>Part-time with CSD undergraduate major</td>
<td>NA</td>
</tr>
<tr>
<td>Part-time without CSD undergraduate major</td>
<td>NA</td>
</tr>
</tbody>
</table>

Provide the published length of time (stated in semesters/quarters) for students to complete the distance education component.

<table>
<thead>
<tr>
<th>Enrollment Type</th>
<th>Time to Degree (Semesters/Quarters)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time with CSD undergraduate major</td>
<td>6</td>
</tr>
<tr>
<td>Full-time without CSD undergraduate major</td>
<td>NA</td>
</tr>
<tr>
<td>Part-time with CSD undergraduate major</td>
<td>NA</td>
</tr>
<tr>
<td>Part-time without CSD undergraduate major</td>
<td>NA</td>
</tr>
</tbody>
</table>

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

Program-Completion-Rate-Calculator-Worksheet-3.xlsx

Provide the program completion rate for graduation cohorts in the residential program for the most recently completed academic years
Provide the program completion rate for graduation cohorts in the distance education component for the most recently completed academic years (based on enrollment data).

<table>
<thead>
<tr>
<th>Period</th>
<th>Number completing on time</th>
<th>Number completing later than on-time</th>
<th>Number not completing</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recent Year</td>
<td>18</td>
<td>0</td>
<td>0</td>
<td>18</td>
</tr>
<tr>
<td>1 Year Prior</td>
<td>16</td>
<td>0</td>
<td>1</td>
<td>17</td>
</tr>
<tr>
<td>2 Years Prior</td>
<td>19</td>
<td>0</td>
<td>0</td>
<td>19</td>
</tr>
<tr>
<td>3 Year Average</td>
<td></td>
<td></td>
<td></td>
<td>98.1481</td>
</tr>
</tbody>
</table>

3 year average program completion rate average for all modalities

97.2603

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

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

3-year average completion rate was above 80%

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 5.5.

None
Standard 5.6 Praxis Examination Pass Rate

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

There were no citations regarding Praxis Pass Rates listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Praxis Examination Pass Rate.

None have occurred.

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

We require all SLP students, campus and DE, to take the Praxis before we will send a letter of completion for graduation. Students upload the scores to the Canvas checklist so we can check them there and if needed, get confirmatory or missing information directly from ETS.

Describe the mechanism that the program uses to collect and monitor Praxis examination pass rate data for graduates from the distance education component.

We require all SLP students, campus and DE, to take the Praxis before we will send a letter of completion for graduation. Students upload the scores to the Canvas checklist so we can check them there and if needed, get confirmatory or missing information directly from ETS.

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

The graduate advisor calculates the pass rate each year from the department data. The graduate advisor notifies the Program Director of anyone failing the Praxis, which is an exceedingly rare occurrence.

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

<table>
<thead>
<tr>
<th>Period</th>
<th>Number of Test-takers Taking the Exam</th>
<th>Number of Test-takers Passed</th>
<th>Pass Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recent Year</td>
<td>18</td>
<td>18</td>
<td></td>
</tr>
<tr>
<td>1 Year Prior</td>
<td>16</td>
<td>16</td>
<td></td>
</tr>
<tr>
<td>2 Years Prior</td>
<td>19</td>
<td>19</td>
<td></td>
</tr>
<tr>
<td>3-year average</td>
<td></td>
<td></td>
<td>100.0000</td>
</tr>
</tbody>
</table>

For the distance education component, provide the number of test-takers who took and passed the Praxis examination for the three most recently completed years. Results must be reported only once for test-takers who took the exam multiple times in the same reporting period. Exclude individuals who graduated more than 3 years ago.

<table>
<thead>
<tr>
<th>Period</th>
<th>Number of Test-takers Taking the Exam</th>
<th>Number of Test-takers that Passed</th>
<th>Pass Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recent Year</td>
<td>6</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>1 Year Prior</td>
<td>6</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>2 Years Prior</td>
<td>6</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>3-year Average</td>
<td></td>
<td></td>
<td>100.0000</td>
</tr>
</tbody>
</table>
3 year Praxis pass rate average for all modalities:
100.0000

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.

3-year average praxis pass rate was above 80%

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 5.6.

None
Standard 5.7 Employment Rate

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

There were no citations regarding Employment Rates listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Employment Rate.

None have occurred.

Describe the mechanism that the program uses to determine the number of individuals who are employed in the CSD professions within 1 year of graduation.

Continuing contact information is obtained from each graduate. The graduate advisor contacts the alumni to determine their employment or other current life activities.

Describe the mechanism that the program uses to determine the number of individuals who are pursuing further education in the CSD professions.

Continuing contact information is obtained from each graduate. The graduate advisor contacts the alumni to determine their employment or other current life activities.

Provide the number of graduates in your residential program that are employed in the profession or pursuing further education in the profession within 1 year of graduation. Starting with students that graduated at least 1 year ago, provide 3 years worth of data.

<table>
<thead>
<tr>
<th>Academic Year</th>
<th>Number of Graduates Employed</th>
<th>Number of graduates not employed</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Year Prior</td>
<td>16</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>2 Year Prior</td>
<td>18</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>3 Years Prior</td>
<td>19</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>3-Year Average</td>
<td></td>
<td>100.0000</td>
<td></td>
</tr>
</tbody>
</table>

Provide the number of graduates from your distance education component that are employed in the profession or pursuing further education in the profession within 1 year of graduation. Starting with students that graduated at least 1 year ago, provide 3 years worth of data.

<table>
<thead>
<tr>
<th>Academic Year</th>
<th>Number of graduates employed</th>
<th>Number of graduates not employed</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Year Prior</td>
<td>6</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>2 Years Prior</td>
<td>6</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>3 years Prior</td>
<td>5</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>3-year average</td>
<td></td>
<td>100.0000</td>
<td></td>
</tr>
</tbody>
</table>

3 year Employment rate average for all modalities

100.0000
Provide an explanation and a plan that will be used for improvement if the program's 3-year average for employment does not meet or exceed the CAA's established (80%) threshold. Include a timeline for implementing and assessing these steps.

3-year average employment rate was above 80%

Please provide any additional clarifying information regarding the program's compliance with Standard 5.7.

None
Standard 5.8 Program Improvement – Student Outcomes

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

There were no citations regarding Program Improvement – Student Outcomes listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Program Improvement – Student Outcomes.

None have occurred.

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

The SLP division tracks graduation rate, Praxis exam pass rate, and employment after graduation. The faculty reviews and discusses data at the annual retreat. Annual review of the data allows us to have the opportunity for timely quality improvement, such as addressing communication to facilitate informing students and obtaining accurate data.

Please provide any additional clarifying information regarding the program's compliance with Standard 5.8.

None.
Standard 5.9 Evaluation of Faculty

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

There were no citations regarding Evaluation of Faculty listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Evaluation of Faculty.

None have occurred.

Please provide any additional clarifying information regarding the program's compliance with Standard 5.9.

None.
Standard 5.10 Faculty Improvement

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

There were no citations regarding Faculty Improvement listed in the last Accreditation Action Report

Please describe any changes that have occurred in the last reporting period regarding the program's Faculty Improvement

None have occurred

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

Travel support for continuing education is approved by the department head with faculty providing rationale for attending and it is addressed as part of the annual review. Faculty are given information about and encouraged to attend continuing education opportunities within the institution. For example, the department hosts a Summer Institute for which 5 day-long SLP speakers are brought in each year. Faculty can attend this event at no cost.

Please provide any additional clarifying information regarding the program's compliance with Standard 5.10.

None
Standard 5.11 Effective Leadership

Please describe any changes that have occurred in the last reporting period regarding the program's Effective Leadership

None have occurred

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

There were no citations regarding Effective Leadership listed in the last Accreditation Action Report

Please provide any additional clarifying information regarding the program's compliance with Standard 5.11.

None
Standard 6.1 Institutional Financial Support

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

There were no citations regarding Institutional Financial Support listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Institutional Financial Support.

None have occurred.

Describe the budgeting process for the program.

The department has core stable funding from the state and supplementary funds from other sources. Most of the funding supports faculty/staff salaries. Some ongoing expenses, such as the CAA accreditation fee, student learning tracking software, and client record tracking software, are funded by the College. The department head determines where discretionary funding is allocated based on need and priority on an ongoing basis.

Report the total budget for the accredited program. Enter “0” where none and do not use a comma (e.g. use 10540 and NOT 10,540).

<table>
<thead>
<tr>
<th>Sources of Support</th>
<th>Prior Year (Amount in $)</th>
<th>Current Year (Amount in $)</th>
<th>% increase/decrease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty/Staff Salaries</td>
<td>2231896.0000</td>
<td>2298853.0000</td>
<td>3.0000</td>
</tr>
<tr>
<td>Supplies &amp; Expenses (non-capital/non-salary expenses)</td>
<td>85000.0000</td>
<td>76372.0000</td>
<td>-10.1506</td>
</tr>
<tr>
<td>Capital Equipment</td>
<td>37021.0000</td>
<td>16786.0000</td>
<td>-54.6582</td>
</tr>
<tr>
<td>Institutional Support Sub-Total</td>
<td>2353917.0000</td>
<td>2392011.0000</td>
<td>1.6183</td>
</tr>
<tr>
<td>Grants/contracts</td>
<td>740131.0000</td>
<td>899116.0000</td>
<td>21.4807</td>
</tr>
<tr>
<td>Clinic Fees</td>
<td>76399.0000</td>
<td>77295.0000</td>
<td>1.1728</td>
</tr>
<tr>
<td>Other Funding</td>
<td>0.0000</td>
<td>0.0000</td>
<td>0.0000</td>
</tr>
<tr>
<td>Non-Institutional Support Sub-Total</td>
<td>816530.0000</td>
<td>976411.0000</td>
<td>19.5805</td>
</tr>
<tr>
<td>Total Budget</td>
<td>3170447.0000</td>
<td>3368422.0000</td>
<td>6.2444</td>
</tr>
<tr>
<td>% of budget represented by non-institutional support</td>
<td>25.7544</td>
<td>28.9872</td>
<td>12.5524</td>
</tr>
</tbody>
</table>

If you included funding in the “Other Funding” line in the table above, please describe the source(s).

N/A

For variances in any budget category that differ from the previous academic year by 10% or more, explain the reasons and the impact of any differences.

Less need for capital equipment purchases this year.

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

The department head collects information from administrative faculty and financial staff concerning needs and resources. The department head makes budgetary decisions in the best interests of the entire program.
Describe potential budget insufficiencies or anticipated changes to financial resources that may impact program capacity in the near and long term. Discuss steps that will be taken by the program to ensure sufficient financial resources to achieve the program's mission and goals.

No financial resource changes or insufficiencies are anticipated.

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.

Not Applicable

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.1.

None.
Standard 6.2 Support for Faculty Continuing Competence

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

There were no citations regarding Support for Faculty Continuing Competence listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Support for Faculty Continuing Competence.

None have occurred.

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

Faculty are provided annual travel funds and sufficient work flexibility to attend one or more national or regional conferences. Advising and administrative support staff attend continuing education opportunities on campus. All faculty and staff have internet and university library access for online continuing education courses and independent reading.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.2.

None.
Standard 6.3 Physical Facilities

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

There were no citations regarding Physical Facilities listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Physical Facilities.

None have occurred.

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

The department head and business manager monitor physical facility adequacy.

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.

The department head and business manager monitor physical facility adequacy and have adjustments or repairs made, as needed. Faculty, staff, and students are encouraged to report concerns and issues, which are dealt with promptly.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.3.

None.
Standard 6.4 Program Equipment and Materials

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

There were no citations regarding Program Equipment listed in the last Accreditation Action Report

Please describe any changes that have occurred in the last reporting period regarding the program’s equipment, educational and clinical materials

None have occurred

Please describe any additional clarifying information you wish to provide regarding the program’s compliance with Standard 6.4.

None
Standard 6.5 Technical Infrastructure

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

There were no citations regarding Technical Infrastructure and Resources listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program’s Technical Infrastructure.

None have occurred.

Describe the processes that will be used to evaluate the adequacy of the infrastructure to support the work of the program’s students, faculty, and staff.

A yearly meeting is held with University Facilities Department to review building function and plan for needs that need to be addressed. The department head has access to the Dean to request support for any needed changes to the infrastructure.

Describe how access to the infrastructure will allow the program to meet its mission and goals.

All university structure decisions take into account student and community access. For example, the new Center for Clinical Excellence has dedicated underground parking for clients accessing speech and hearing services.

Please describe any additional clarifying information you wish to provide regarding the program’s compliance with Standard 6.5.

None.
Standard 6.6 Clerical and Technical Staff Support

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

There were no citations regarding clerical and technical staff support listed in the last Accreditation Action Report.

Please describe any changes that have occurred in the last reporting period regarding the program's Clerical and Technical Staff Support.

None have occurred.

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.

The department head and business manage monitor and review staff resources. They allocate and adjust support as needed. Faculty and staff can report gaps and overlaps in resources. There is adequate clerical and technical staff to cover needs.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.6.

None.

Unreferenced Documents

| CAA SLP-Knowledge-Skills-Curriculum 2019.doc |
| Program-Completion-Rate-Calculator-Worksheet-3.xlsx |