2020 CAA Annual Report - Audiology

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](mailto: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 |
| Phone Number:          | (435)797-2613         |
| Fax Number             | (844)308-5856        |
| Program Website        | http://www.comd.usu.edu |
| Professional Area      | Audiology            |
| Degree Designator      | AuD (clinical entry level) |
| Second Degree Designator | No Response Provided |
| Consortium             | No                   |
| Satellite Campus       | No                   |
| Distance Education     | No                   |
| Contractual Arrangement | No                  |
| Current Accreditation Cycle Dates: | 07/01/2016-06/30/2024 |
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?
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/

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.

To prepare doctor of audiology students to evaluate and treat hearing and balance disorders through education, research and clinical experiences for individuals throughout the lifespan.

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.

The program uses the mission and goals to guide decision making in preparing students for entry into professional practice in audiology by using objective measures to gather 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.

Certificate of Clinical Competence (CCC)

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 systematically gathering data, monitoring and discussing program data at monthly faculty meetings and the annual faculty retreat.

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 (2016-2021) to address: national reputation, growth, and program quality.

AUDIODY

1. Goal: Increase the number of applicants for the AuD program annually, through recruiting efforts targeting universities in the western United States.
   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 total grant dollars from internal and external sources.
   Outcome measure: Grant dollar annual total

4. Goal: Maintain or increase 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, 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. Sarah Yoho Leopold

Date appointed:

2/1/2019

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.

The program director coordinates the systematic collection of program data, presents data for review and discussion, at monthly faculty meetings and at the annual retreat, to facilitate ongoing program improvement. Faculty input is regularly solicited, modifications are made to the program based on data. For example, following review and discussion in this past academic year changes were implemented to update clinic policies.

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/programs/graduate/audiology

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

http://comd.usu.edu/assessment/student-achievement-data

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

http://comd.usu.edu/assessment/student-achievement-data

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

http://comd.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 four years, 11 semesters (http://comdde.usu.edu/programs/graduate/audiology)

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.

### Detail Summary

<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>Heather Jensen</td>
<td>CCC-A</td>
<td>Full-Time 9mo.</td>
<td>Other</td>
<td>Instructional Faculty</td>
<td>Clinical Doctorate</td>
<td>0.2200</td>
<td>N/A</td>
</tr>
<tr>
<td>Karen G Munoz</td>
<td>CCC-A</td>
<td>Full-Time 12mo.</td>
<td>Full</td>
<td>Department Chair, Instructional Faculty</td>
<td>Research Doctorate (e.g. PhD, EdD, etc)</td>
<td>0.1000</td>
<td>Research, Administration</td>
</tr>
<tr>
<td>Cache L Pitt</td>
<td>CCC-A</td>
<td>Full-Time 12mo.</td>
<td>Other</td>
<td>Clinic Director, Clinical Supervisor, Instructional Faculty</td>
<td>Clinical Doctorate</td>
<td>0.1000</td>
<td>Supervision, Administration</td>
</tr>
<tr>
<td>Tiffany D Shelton</td>
<td>CCC-A</td>
<td>Part-Time</td>
<td>Instructor</td>
<td>Clinical Supervisor</td>
<td>Clinical Doctorate</td>
<td>0.0000</td>
<td>Supervision</td>
</tr>
<tr>
<td>Brittan A Barker</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>0.3200</td>
<td>Research</td>
</tr>
<tr>
<td>Sarah Yoho Leopold</td>
<td>None</td>
<td>Full-Time 9mo.</td>
<td>Assistant Professor</td>
<td>Instructional Faculty, Program Director</td>
<td>Research Doctorate (e.g. PhD, EdD, etc)</td>
<td>0.2300</td>
<td>Research, Administration</td>
</tr>
<tr>
<td>Kali L Markle</td>
<td>CCC-A</td>
<td>Full-Time 12mo.</td>
<td>Assistant Professor</td>
<td>Clinical Supervisor, Instructional Faculty</td>
<td>Clinical Doctorate</td>
<td>0.1300</td>
<td>Supervision</td>
</tr>
<tr>
<td>Naveen K Nagaraj</td>
<td>CCC-A</td>
<td>Full-Time 9mo.</td>
<td>Assistant Professor</td>
<td>Instructional Faculty</td>
<td>Research Doctorate (e.g. PhD, EdD, etc)</td>
<td>0.3400</td>
<td>Research</td>
</tr>
<tr>
<td>Matthew D Bell</td>
<td>CCC-A</td>
<td>Full-Time 12mo.</td>
<td>Assistant Professor</td>
<td>Clinical Supervisor</td>
<td>Clinical Doctorate</td>
<td>0.1300</td>
<td>Supervision</td>
</tr>
</tbody>
</table>

### Summary of Faculty Contribution

- Number of full-time 9 month faculty: 4
- Number of full-time 12 month faculty: 4
- Number of part-time faculty: 1
- Number of adjunct faculty: 0
- Number of faculty with “other” employment status: 0
- Number providing supervision: 4
- Number providing research: 4
- Number providing advising: 0
- Number providing administration: 3
- Total % workload classroom teaching: 1.57
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?

Yes

Indicate faculty changes that have occurred since your last report to the CAA.

<table>
<thead>
<tr>
<th>Faculty Name</th>
<th>Status</th>
<th>Courses taught/assigned</th>
<th>Effective date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jeffery Larsen</td>
<td>Left the program</td>
<td>7320; 7420; 7410</td>
<td>5/1/2019</td>
</tr>
<tr>
<td>Naveen Nagaraj</td>
<td>New and replaced former faculty member</td>
<td>7320; 7420; 7410; 7340</td>
<td>8/1/2019</td>
</tr>
<tr>
<td>Mathew Bell</td>
<td>New and replaced former faculty member</td>
<td>7410; 7530</td>
<td>8/1/2019</td>
</tr>
<tr>
<td>Amy Porter</td>
<td>Left the program</td>
<td>7530</td>
<td>5/8/2020</td>
</tr>
</tbody>
</table>

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>25</td>
<td>25</td>
<td>0.0000</td>
</tr>
<tr>
<td>Part-time</td>
<td>0</td>
<td>0</td>
<td>0.0000</td>
</tr>
<tr>
<td>Total</td>
<td>25</td>
<td>25</td>
<td>0.0000</td>
</tr>
</tbody>
</table>

Percentage change of enrollment across all modalities (if applicable)

% Change Full-time 0.0000
% Change Part-time 0.0000

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>BA/BS</td>
<td>410</td>
<td>272</td>
<td>138</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>SLP MA/MS</td>
<td>51</td>
<td>51</td>
<td>0</td>
</tr>
<tr>
<td>Deaf Ed MEd</td>
<td>20</td>
<td>20</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, and sequence of courses are reviewed for effectiveness, with input from faculty.

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

Research faculty mentor students in a clinical research project during the first two years of the program. Academic and clinical faculty meet to discuss implementation of evidence-based practice. Evidence-based practice is a learning objective across academic and clinical courses.

Meet the program’s established learning goals and objectives

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, and course sequence of courses are reviewed for effectiveness, with input from faculty.

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 faculty to meet their specified research and teaching 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. Students complete their required research project during the first two years. 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.

Formula for assigning faculty workload is determined by the Department Head. In COMD faculty with a 50% evaluative weight research excellence role statement teach 12 credits, and faculty with a 50% evaluative weight teaching excellence role statement teach 18 credits.

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

New faculty are given a one-course release in their first year. Faculty may buy out one course with grant funds, depending on department instructional resources.

Some administrative duties are classified as teaching within role statements, such as those of this AUD Program Chair (also Department Head). The same applies to the AUD Clinic Director, with their administrative workload varying with department demands and resources.

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 current 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.

<table>
<thead>
<tr>
<th>Course Title and Number/Section</th>
<th>Instructors</th>
<th>Terms offered in the last 4 years</th>
<th>Requirement</th>
<th>Type</th>
<th># of credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advanced Audiology COMD 7380</td>
<td>Brittan Barker</td>
<td>Fall 2019, Fall 2018, Fall 2017, Fall 2016</td>
<td>Required-Grad</td>
<td>Academic</td>
<td>3</td>
</tr>
<tr>
<td>Pediatric Audiology COMD 7340</td>
<td>Kali Markle</td>
<td>Fall 2019, Fall 2018, Fall 2017, Fall 2016</td>
<td>Required-Grad</td>
<td>Academic</td>
<td>3</td>
</tr>
<tr>
<td>Balance COMD 7530</td>
<td>Matt Bell</td>
<td>Fall 2019, Fall 2018, Fall 2017, Fall 2016</td>
<td>Required-Grad</td>
<td>Academic</td>
<td>3</td>
</tr>
<tr>
<td>Counseling in Communicative Disorder I COMD 7450</td>
<td>Brittan Barker</td>
<td>Spring 2020, Summer 2018, Summer 2017, Summer 2016</td>
<td>Required-Grad</td>
<td>Academic</td>
<td>1</td>
</tr>
<tr>
<td>Counseling in Communicative Disorder II COMD 7470</td>
<td>Karen Munoz</td>
<td>Fall 2019, Fall 2018, Fall 2017, Fall 2016</td>
<td>Required-Grad</td>
<td>Academic</td>
<td>2</td>
</tr>
<tr>
<td>Amplification II COMD 7420</td>
<td>Naveen Nagaraj, Kali Markle</td>
<td>Spring 2020, Spring 2019, Spring 2018, Spring 2017</td>
<td>Required-Grad</td>
<td>Academic</td>
<td>3</td>
</tr>
<tr>
<td>Medical Aspects COMD 7490</td>
<td>Sarah Leopold</td>
<td>Spring 2019, Spring 2017, Spring 2016, Spring 2015</td>
<td>Required-Grad</td>
<td>Academic</td>
<td>3</td>
</tr>
<tr>
<td>Course</td>
<td>Instructor</td>
<td>Term(s)</td>
<td>Credit Level</td>
<td>Academic Level</td>
<td></td>
</tr>
<tr>
<td>---------------------------------------------------</td>
<td>------------------</td>
<td>---------------------------</td>
<td>--------------</td>
<td>----------------</td>
<td></td>
</tr>
<tr>
<td>Psychoacoustics &amp; Instrumentation COMD 7310</td>
<td>Sarah Leopold</td>
<td>Spring 2020, Spring 2018, Spring 2017, Spring 2016</td>
<td>Required</td>
<td>Grad Academic  3</td>
<td></td>
</tr>
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</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.

https://catalog.usu.edu/content.php?filter%5B27%5D=COMD&filter%5B29%5D=&filter%5Bcourse_type%5D=-1&filter%5Bkeyword%5D=&filter%5B32%5D=1&filter%5Bcpage%5D=1&cur_cat_oid=12&expand=&navoid=3068&search_database=Filter#acalog_template..

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.

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<th>Requirements</th>
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<tr>
<td>Total</td>
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</table>

Please download the Knowledge and Skills chart, complete it, and then upload it to this question.

2020 AUD-Knowledge-and-Skills-within-the-Curriculum.docx

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

Professional practice competencies are infused throughout the curriculum in a variety of ways. We address these competencies in multiple courses, we utilize case-based scenarios for discussion, we provide demonstration and discussion in clinic, as well as feedback to students about their performance as needed.
Describe how the professional practice competencies are demonstrated, assessed, and measured, including inter-professional education and supervision.

Professional practice competencies are demonstrated through example, and in discussions about case-based scenarios. For example, during the first year students attend an interprofessional seminar, as part of their clinic practicum, with students in speech-language pathology, psychology, marriage and family counseling, nursing, and students in the applied behavior analysis program. Additionally, in the pediatric and cochlear implant clinic, students have opportunities for interprofessional experiences with our on site Sound Beginnings program, an early education program for children birth to six years of age who are deaf or hard of hearing. Students and supervisors routinely work with speech-language pathologists and deaf educators in the delivery of services. Student competencies are assessed as part of their practicum assignment each semester, and in the preliminary exam, a simulated case-based experience with parents of children or adults who are deaf or hard of hearing.

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

Contemporary professional issues are presented in the curriculum through the weekly mandatory clinic meeting. All of the audiology students (first through third year) attend this one-hour meeting.

Does the program offer clinical education for undergraduates?

No

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

None
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 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 audiology 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 other evidence-based practice guidelines are used to help make curriculum decisions. For example we used the ICF model to review and update coursework throughout our program to infuse and reinforce patient-centered care.

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.

Counseling in Communicative Disorders I was moved from the summer following the first year to the Spring of the first year. This change was made to support earlier integration of person-centered care into the curriculum.

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

YEAR 1
Fall: Applied research methods, Amplification I, Advanced Audiology, Introduction to Clinical Practice, Clinic Meeting
Spring: Amplification I, Medical aspects, Applied statistical methods, Introduction to clinical practice, Clinic meeting
Summer: Electrophysiology, Introduction to cochlear implants, Intermediate clinical practicum

YEAR 2
Fall: Pediatric audiology, balance, Counseling in communicative disorders II, Intermediate clinical practicum, clinic meeting
Spring: Psychoacoustics and Instrumentation, Noise and hearing conservation, Intermediate clinical practicum, clinic meeting, preliminary exam
Summer: Intermediate clinical practicum

YEAR 3
Fall: Clinical research project product, Elective course, advanced clinical practicum, clinic meeting
Spring: Aural rehabilitation, Practice management, Advanced clinical practicum, clinic meeting, comprehensive exam
Summer: Clinical externship

YEAR 4
Fall: Clinical externship, externship seminar
Spring: Clinical externship, externship seminar

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

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

YEAR 1
Summer: LSL seminar, LSL clinical practicum

YEAR 2
Fall: Strategies for Listening and Spoken Language, LSL Seminar, LSL practicum
Spring: LSL Seminar, LSL practicum
Summer: Multiple disabilities, LSL practicum

YEAR 3
Fall: LSL practicum
Spring: LSL practicum

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

Coursework is sequenced to provide students with foundational knowledge prior to or concurrent with clinical experiences. Students begin their clinical practicum the first semester in the program to integrate knowledge with practice, in a controlled and sequential process.
Provide two (2) examples of the sequential and integrated learning opportunities

Example One:

Students are introduced to person-centered care in Advanced Audiology Fall year 1, Counseling I in Spring year 1, then counseling II in Fall year 2. During this time, the students are receiving mentorship in the clinic for counseling skill development.

Example Two:

Students take Amplification I and Amplification II during the first year in the program. In clinic they practice skills that correlate with what they are learning in class, the sequence of teaching is managed in collaboration with the course and clinical instructors.

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 and, within each component, scaffolded to help students gain confidence and competence in skill development and implementation of skills in practicum placements. Integration of knowledge and skills is weaved throughout their coursework and clinical experiences to reinforce learning. Bridging of concepts and learning opportunities provides students with multiple ways to learn skills, connect critical concepts, and to practice and learn in a mentored environment.

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.

Issues of diversity are addressed in multiple courses, discussed in clinic, and addressed in the required clinic meeting that all students attend.

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, external, and fourth year). Students also have the multiple opportunities to participate in service activities in the community (e.g., Special Olympics, Hispanic health fair).

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

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 literature reviews within courses, Complete research project or dissertation, Grand rounds, Incorporate evidence-based practice into the clinic, 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 learn how to become knowledgeable consumers of research literature through multiple mechanisms in the program. They do article critiques in courses, engage in a required clinical research project with a faculty mentor, and discuss research related to evidence-based practice in the clinic. Students also take a required research course their first semester that includes foundational concepts related to review of literature.

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

All students complete a required clinical research project with a faculty mentor during the first two years of the program. Principles of evidence-based practice are also discussed in courses, during the weekly clinic meeting, during grand rounds, and in the clinic.

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.

The clinic has developed extensive evidence-based clinic protocols, available to the students in a shared Box folder, to review as they prepare for clinic assignments. Students provide their rationales for their decisions in the clinical preparation process. Students apply evidence-based procedures during each appointment.

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

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 audiology and clinical practice

Students are rotated through assignments in our on campus clinic the first two years, that includes pediatric through geriatric patients for hearing assessments, hearing aids, cochlear implants, balance, and newborn hearing screening. Students then are assigned to off campus placements to gain additional experiences.

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

Our on campus clinic serves individuals across the life span and the continuum of care. Off campus placements provides students with experiences in other settings, including medical, educational, and private practice.

Opportunities to work with individuals from culturally and linguistically diverse backgrounds

Students work with families from culturally and linguistically diverse backgrounds in our clinic, in off campus settings, and in service activities (e.g., health fairs, humanitarian mission).

Experiences with individuals who express various types and severities of changes in structure and function of the auditory and vestibular systems and related disorders

Students are exposed a wide range of disorders during their clinical practicum assignments on and off campus. Our clinic provides diagnostic, hearing aid, cochlear implant, and balance services. Off campus students have medical placements that provide exposure to a variety of medically related disorders.

Opportunities to obtain experiences with appropriate equipment and resources

Our on campus clinics are equipped with state of the art equipment and resources. Students learn to perform procedures on a variety of equipment on campus and then expand their exposure through off campus placements.

Exposure to the business aspects of the practice of audiology (e.g., reimbursement requirements, insurance and billing procedures, scheduling)

The on campus clinic uses an electronic medical records system for scheduling and billing. Students are provided with access to the system to perform their documentation duties when they are in clinic. They also learn about billing in the clinic meeting and in courses.

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

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.

Temporary adjustments were made to service delivery and student opportunities due to the COVID-19 pandemic. Some services were provided via tele-audiology (i.e., hearing aid follow-up; cochlear implant mapping; patient education and support). Students were also provided simulated experiences through video-based case scenarios and debriefing discussions. The debriefings were structured to support reflective practice and development of critical thinking related to clinical decision-making.

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.

Clinic procedures for infection prevention and control were expanded in response to the COVID-19 pandemic.
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 externship coordinator obtains and maintains electronic agreements with externship sites qualified and willing to supervise AuD students at their facility. Once the externship agreements are established they are reviewed each semester by the externship coordinator prior to placement to ensure that the current contract is still valid or that a new contract is signed. The externship coordinator and USU Purchasing and Contract Services keep an electronic copy of the signed agreement.

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

All AuD students work with the Externship Coordinator to develop a clinic externship plan to ensure that they are receiving diversity in clinical population to meet the educational needs of each student. The externship coordinator contacts the sites each semester to determine if they are qualified based on the USU AuD Externship Requirements document and willing to supervise AuD students at their facility for the following semester. For the 4th year externship placement, students are allowed to search for sites that meet the externship requirements and apply for available positions. The students and the externship coordinator maintain communication regarding the search for a suitable 4th year externship. The student is allowed to apply for positions that meet the USU AuD Externship requirements. Before accepting a position the student must inform the externship coordinator so they can contact the externship site to ensure that they will meet the USU AuD Externship requirements and that the USU contract is acceptable and will be signed by the appropriate individual. Documents containing the USU AuD Externship Requirements, USU Learning Objectives for 4th Year AuD Externship and USU Student Externship Agreement are all sent to the externship site supervisor for review. If all guidelines are met then the student is allowed to accept the position. The externship coordinator continues to work with the site to ensure that all required documentation is in place prior to the student starting the 4th year externship placement.
Describe policies and procedures the program uses to select and place students in external facilities

As outlined in the “USU AuD EXTERNSHIP REQUIREMENTS” document:

Off campus clinical supervisors in Audiology are carefully chosen by the department for their professional skill level, supervision ability and current ASHA CCC-AUD status.

Utah State University AuD students will participate in supervised off-campus externships during the 3rd year of their graduate education in order to fulfill the degree requirements. This is usually 1-2 days per week. The externship shall include experiences in direct patient care, consultation, record keeping, and other administrative duties related to audiology service delivery.

Utah State University AuD students will participate in a full time supervised externship during the 4th year of their graduate education in order to fulfill the degree requirements. For our program, full time experience is defined as at least 35 hours per week for at least 35 weeks. In addition, a student must have a total of 1,820 hours throughout the course of the AuD program. The externship shall include experiences in direct patient care, consultation, record keeping, and other administrative duties related to audiology service delivery.

The externship experience must provide the student with diversity in the audiology scope of practice, including clinical work in several core areas of audiology diagnosis and treatment, including amplification, electrophysiologic measure, audiologic rehabilitation, pediatric audiology, and screening and prevention. Other areas of experience may include vestibular disorders, tinnitus management, cochlear implants, intraoperative monitoring, auditory processing disorders, educational audiolog, occupational conservation, and practice management. These requirements can be modified, depending upon the student’s pre-externship experiences and interests. Any modification to externship requirements must be approved by the externship coordinator prior to placement. Likewise, any modification of the clinical focus during the externship year must be approved (in writing) by the training program.

Supervision shall be performed by an ASHA certified audiologist and be sufficient to ensure the welfare of the patient and the student according to the Code of Ethics. The amount of supervision should be appropriate to the student’s level of academic and clinical training and level of competence.

The 4th Year externship is considered to be an educational experience. While monetary compensation may be provided in the form of a traineeship, stipend, or salary, the emphasis at the site must be on student training.

A contract between the site and the University will be signed before the student begins any placements.

Site Guidelines

Clinical education site employs two or more professional staff members.

Clinical education site conforms to the rules of state code of business, has appropriate accreditation (JCAHO, ASHA, OSHA) and has been in business for more than 3 years.

Clinical education site has an appropriate and safe physical plant for the provision of clinical services.

Clinical education site holds an affiliation agreement with Utah State University that outlines other criteria.

Supervisor Guidelines

Supervisor(s) hold current license/registration in the practicing state and must submit a copy of that license/registration.

Supervisor(s) currently holds ASHA certification in the appropriate area. Ideally the supervisor(s) should have a minimum of two-three years post graduation experience.

Supervisor(s) maintain an appropriate student to supervisor ratio.

Students shall be supervised by a limited number of supervisors.

The majority of supervision shall be performed by an ASHA certified individual.

All required paperwork documenting the student’s progression and related activities must be submitted according to the departmental guidelines and timelines.
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.

As outlined in the Audiology Externship Supervisor Manual, all external sites are required to complete Site Information Forms within Calipso. These forms include:

- Estimations of the total number of clients/patients treated by the audiology department during a 4 month period in Auditory Disorders, Vestibular Disorders and Related Communication Disorders for adults and children.
- Information about the number of full-time and part-time audiology positions at the site, number of student interns accepted, the ratio of students to supervisors and the daily work schedule.
- The type of work setting for the externship and the special learning opportunities are available to students during clinical rotation.

In addition, all 4th year sites are provided with a USU Learning Objectives for 4th Year AuD Externship document, which outlines the policy of USU. The sites must agree to the policy before a student is placed there. The USU Learning Objectives for 4th Year AuD Externship states:

The purpose of the fourth year externship is to provide a comprehensive training environment for students to expand and sharpen their clinical skills. The practicum experience should focus on the prevention, identification, assessment, (re)habilitation, advocacy and consultation of individuals with disorders of auditory, balance, communication and related systems. To achieve clinical proficiency, AuD students need to complete an externship experience of sufficient breadth and depth with the guidance of an experienced ASHA accredited practitioner. The 4th year extern is not an expert and independent practitioner of audiology but a student finishing training. The student's supervisor and the university must work together through the externship experience to complete the student's transition from a novice clinician to an independent, self-evaluating practitioner. It is the responsibility of the supervisor to provide students with a well-organized, structured, state-of-the-art learning experience with measurable, well documented outcomes that builds knowledge and skills required by the standards that have been set.

Outcome standards for audiologists, established by the American Speech-Language Hearing Association, are used to determine if the student is acquiring the requisite academic knowledge and demonstrating the clinical skills necessary to enter the profession. The outcome standards are assessed in the externship practicum experience with evaluation of background knowledge and application of knowledge to specific clinical skills using a scale that assesses specific skill areas. The skills that are assessed based on the ASHA CAA and CFCC required skills. It is expected that a student will obtain an independent rating in all areas by the conclusion of the 4th year externship.

All supervised clinical activities provided by the student must fall within the scope of practice in audiology to count toward the student's certification. The supervisor must achieve and maintain competency in supervisory practice as well as in the disability areas for which supervision is provided. The amount of supervision provided by the ASHA-certified supervisor must be commensurate with the student's knowledge, experience, and competence to ensure that the welfare of the client is protected. The supervisor must also ensure that the student supervisee maintains confidentiality of client information and documents client records in an accurate and timely manner.

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.

All external sites are required to sign either the USU Student Externship Agreement or may use their own agreement upon approval from Utah State University. The externship coordinator facilitates the electronic agreements and works with the externship sites. The externship agreements are reviewed each semester by the externship coordinator prior to placement to ensure that the current contract is still valid or that a new contract is signed. The externship coordinator communicates with the externship sites to inform them that the agreement must be signed prior to the student being placed with an externship site. All agreements are submitted to the COMD Department Head, USU Financial Officer, USU Purchasing and Contract Services for review. Externship agreements are valid for 5 years unless voided by either party. Upon the expiration of this term, the agreement continues from year to year unless terminated by either party with thirty (30) days' written notice to the other.

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 audiology 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.

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

The audiology program follows university code to address student academic violations (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.

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 audiology seminar. 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 audiology program follows the process described in the university code to address student academic violations (https://studentconduct.usu.edu). Violations of student conduct are addressed by the program chair.

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.

If requested, instructors allow students to take exams on alternate days if the scheduled exam conflicts with a day of religious obligation.

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, internalexternal clinical placement and student retention policies/procedures, proficiency in English).

The university notice of non-discrimination is posted on the website (e.g., https://studentconduct.usu.edu/) and in student handbooks.

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.

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 remediation are conducted within courses. Struggling students are identified and discussed at monthly faculty meetings. Remediation and intervention plans are set up with the division chair and the instructor of concern. 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 division chair and the instructor of concern. 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 under the heading Graduate Education at [http://comd.usu.edu/programs/policies](http://comd.usu.edu/programs/policies). Students receive information in the student handbook and 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 remediation is not successful, the program director or clinic coordinator sets up the subsequent remediations. Students can access their progress through the program via CALIPSO 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

https://studentconduct.usu.edu/studentcode/article6

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. If the issue cannot be resolved, or for matters of discrimination or harassment, students may file a grievance through procedures and timelines specified in [https://studentconduct.usu.edu/studentcode/article7](https://studentconduct.usu.edu/studentcode/article7). For matters of grievances pertaining to student conduct, see Article V. For academic integrity, see Article VI.

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.

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.

N/A

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.

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.

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. Clinical assessment measures are completed within CALIPSO. In addition to feedback at the time of each session, students receive mid-semester and end of semester 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, employer, and client surveys. Students also complete course evaluations for academic courses and clinic.

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

The audiology 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/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 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 audiology 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 Audiology 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.

- Full-time with CSD undergraduate major: 11
- Full-time without CSD undergraduate major: NA
- Part-time with CSD undergraduate major: NA
- Part-time without CSD undergraduate major: NA

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.

Provide the program completion rate for graduation cohorts in the residential program 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>6</td>
<td>0</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td>1 Year Prior</td>
<td>6</td>
<td>0</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td>2 Years Prior</td>
<td>7</td>
<td>0</td>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td>3 Year Average</td>
<td></td>
<td></td>
<td></td>
<td>100.000</td>
</tr>
</tbody>
</table>
3 year average program completion rate average for all modalities

100.000

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 audiology students 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>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>7</td>
<td>7</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.

The graduate advisor distributes an alumni survey and this information is queried in the survey.

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

The graduate advisor distributes an alumni survey and this information is queried in the survey.

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>6</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td>2 Year Prior</td>
<td>6</td>
<td>1</td>
<td>6</td>
</tr>
<tr>
<td>3 Years Prior</td>
<td>3</td>
<td>0</td>
<td>3</td>
</tr>
</tbody>
</table>

3-Year Average 93.7500

3 year Employment rate average for all modalities

93.7500

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 audiology 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.

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>1236510.0000</td>
<td>1187063.0000</td>
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<tr>
<td>Supplies &amp; Expenses (non-capital/non-salary expenses)</td>
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<td>74167.0000</td>
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<td>Capital Equipment</td>
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<td>88414.0000</td>
<td>230.1494</td>
</tr>
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<td>Institutional Support Sub-Total</td>
<td>1339662.0000</td>
<td>1349644.0000</td>
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</tr>
<tr>
<td>Grants/contracts</td>
<td>249974.0000</td>
<td>284404.0000</td>
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</tr>
<tr>
<td>Clinic Fees</td>
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<td>-14.9944</td>
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<tr>
<td>Other Funding</td>
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<td>0.0000</td>
</tr>
<tr>
<td>Non-Institutional Support Sub-Total</td>
<td>549439.0000</td>
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<td>-1.9061</td>
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<td>Total Budget</td>
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<td>1888610.0000</td>
<td>-0.0260</td>
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<tr>
<td>% of budget represented by non-institutional support</td>
<td>29.0847</td>
<td>28.5377</td>
<td>-1.8807</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.

Capital equipment increased: we needed to replace some clinic equipment and purchase some new research equipment.

Grants and contracts increased: faculty successfully obtained new funding awards.

Clinic fees decreased: income was substantially reduced due to the COVID pandemic.

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.

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 manager 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

<table>
<thead>
<tr>
<th>Unreferenced Documents</th>
</tr>
</thead>
<tbody>
<tr>
<td>2020 AUD-Knowledge-and-Skills-within-the-Curriculum.docx</td>
</tr>
<tr>
<td>Program-Completion-Rate-Calculator-Worksheet-1.xlsx</td>
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