

**ACCREDITATION ACTION REPORT**  
**Reaccreditation Review**

The Council on Academic Accreditation in Audiology and Speech-Language Pathology took the following accreditation action during its July 16-19, 2025 meeting, as indicated below.

**Name of Program: Eastern Michigan University**

**File #: 88**

**Professional Area:**

<input type="checkbox"/>	Audiology
<input checked="" type="checkbox"/>	Speech-Language Pathology

**Modality:**

<input checked="" type="checkbox"/>	Residential
<input type="checkbox"/>	Distance Education
<input type="checkbox"/>	Satellite Campus
<input type="checkbox"/>	Contractual Arrangement

**Degree Designator(s):** MA

**Current Accreditation Cycle:** 06/01/2017 – 05/31/2025

**Action Taken:** Continue Accreditation – With Monitoring

**Effective Date:** July 19, 2025

**New Accreditation Cycle:** 06/01/2025 – 05/31/2033

**Next Review:** Annual Report due August 1, 2026

**Notices:** The program is advised to adhere to the following notices that are appended to this report.

- PROGRAM COMPLIANCE EXPECTATIONS
- PUBLIC DISCLOSURE OF DECISION AND ACCREDITATION STATUS

*In the context of the institutional and program mission statements and in consideration of the credentials for which the program is preparing students, the CAA conducted its comprehensive review and found the program to be in compliance with the Standards for Accreditation of Graduate Education Programs in Audiology and Speech-Language Pathology, except as noted below.*

## **AREAS OF NON-COMPLIANCE**

The CAA found the program to be not in compliance with the following Standards for Accreditation. Non-compliance means that the program does not have in place the essential elements necessary to meet the standard. The program must demonstrate its compliance with these standards when responding to prior concerns in the next annual report or reaccreditation application or by the time line specified below. The CAA will indicate in its review of that report whether the program has addressed these areas sufficiently to achieve compliance. **Failure to demonstrate compliance with the standards may jeopardize the program's accreditation status or require the CAA to place the program on probation. A program will be placed on probation or accreditation withdrawn after the review of a second consecutive report reveals that issues continue for the same standard(s) and the program remains not in full compliance with all standards (effective January 1, 2021- see [CAA Accreditation Handbook, Chapter XVII](#)).**

**Standard 1.4 The program faculty must regularly evaluate the congruence of program and institutional missions and the extent to which the goals are achieved.**

### **Requirement for Review:**

- The program periodically reviews and revises its mission and goals.

### **Evidence of Non-Compliance:**

At the time of the site visit, the site visit team was unable to verify that the program periodically reviews and revises its missions and goals based upon faculty interviews and meeting notes. In the program's response to the site visit, it reported that it recognizes it has inconsistently documented efforts, but reported that moving forward it will use its regular program meeting of each academic year in September to compare and assess progress towards the mission and goals of the institution. At the time of the review, the CAA was unable to find evidence that the program periodically reviews and its mission and goals.

### **Steps to Be Taken:**

At the time of the next annual report, the program must provide evidence that it periodically reviews and revises its mission and goals, and must provide an update on its plan to review and revise its mission and goals during the first regular program meeting of the academic year.

**Standard 3.2B An effective speech-language pathology program is characterized by planning and organization, is reviewed systematically and on a regular basis, and is consistent with current knowledge and practice guidelines of the profession.**

### **Requirements for Review:**

- The program must demonstrate that the:
  - Curriculum is reviewed systematically and on a regular basis

### **Evidence of Non-Compliance:**

At the time of the site visit, the site visit team was unable to verify that the program reviews its curriculum systematically and on a regular basis. In response to the site visit report, the program stated that it holds regular

curriculum and instruction meetings each academic year. The program reported that beginning with the 2025–2026 academic year, it plans to revise its curriculum and instruction meeting minutes template to more clearly align with the curriculum currency standard, in an effort to document that curriculum reviews are conducted systematically and regularly.

**Steps to Be Taken:**

At the time of the next annual report, the program must provide evidence that its curriculum is reviewed systematically and on a regular basis. In addition, the program must provide an update on its implementation of the new meeting template.

**AREAS FOR FOLLOW-UP (clarification/verification)**

The CAA did not find the program to be out of compliance with the following Standards for Accreditation at this time. However, the program must provide additional information or an update in the program’s next annual report or reaccreditation application for clarification or verification of these issues, in order to monitor the program’s continued compliance in the stated areas.

**Standard: 4.3 The program has policies and procedures for identifying the need to provide intervention for each student who does not meet program expectations for the acquisition of knowledge and skills in the academic and clinical components of the program**

**Requirement for Review:**

- The program has policies and procedures for implementing and documenting all forms of intervention used to facilitate each student’s success in meeting the program’s expectations.
- The program must demonstrate that the policies and procedures are applied consistently across all students who are identified as needing intervention.

**Evidence of Concern:**

At the time of the site visit, the site visit team was unable to verify that the program has established policies and procedures for implementing and documenting all forms of intervention used to support each student’s success in meeting program expectations, or that such policies are applied consistently across all students identified as needing intervention. In response to the site visit report, the program provided its current academic intervention policy as outlined in the graduate companion but noted that, at the time of the site visit, the policy was under review. The program also stated that at the start of the 2025–2026 academic year, the policy will be reviewed, discussed, and finalized at its first departmental meeting, and once approved, it will be added to the graduate companion.

**Steps to Be Taken:**

At the time of the next annual report, the program must provide an update on its progress toward its new policy, its implementation, documentation, and consistent application across all students who are identified as needing intervention.

## PERFORMANCE WITH RESPECT TO STUDENT ACHIEVEMENT

The CAA has evaluated this program regarding its performance with respect to student achievement and provides the following report, required as an accrediting agency recognized by the US Secretary of Education [[34 CFR 602.17\(f\)](#)].

### Comments/Observations:

<i>The CAA assessed the program's performance with respect to student achievement and found the program to meet or exceed the established CAA expectations (as described in accreditation standard 5.0-Assessment) in the following checked areas. Details regarding any of these areas found to be <u>not</u> in compliance are described earlier in this report in the context of the relevant standard.</i>	
X	Program Completion Rates
X	Praxis Examination Rates

## PROGRAM COMPLIANCE EXPECTATIONS

As an accrediting agency recognized by the U.S. Secretary of Education, the CAA must comply with Criterion §602.20 [[34 CFR 602.20](#)]. This criterion requires that if an accrediting agency's review of a program indicates that the program is not in compliance with any standard, the CAA must provide a written timeline to the program to come into compliance that is reasonable, as determined by the CAA, based on the nature of the finding, the stated mission, and educational objectives of the program. The timeline may include intermediate checkpoints on the way to full compliance and must not exceed three years for programs, regardless of professional area. If the review of a second consecutive report reveals that issues continue for the same standard(s), regardless of which requirements for review were identified, and the program remains not in full compliance with all standards, the CAA may act to place the program on probation or withdraw its accreditation status in accordance with the policy and procedures outlined in the [Accreditation Handbook](#). The CAA may place a program on probation or withdraw accreditation from a program prior to this time when there is clear evidence of circumstances that jeopardize the capability of the program to provide acceptable educational experiences for the students.

## PUBLIC DISCLOSURE OF THIS DECISION AND ACCREDITATION STATUS

The CAA publishes a notice of final accreditation actions on its website after comprehensive reviews are completed in accordance with its published policies. In the event an adverse action is taken and becomes final (i.e., withdrawal or withholding of an accreditation status), the CAA is required to publish a brief statement summarizing the reasons for withholding or withdrawing the accreditation status of a program, together with the comments, if any, that the affected program may wish to make.

The Criteria for Recognition by the U.S. Secretary of Education requires all recognized accrediting agencies to provide for the public correction of incorrect or misleading information an accredited or preaccredited program releases about accreditation or preaccreditation status, contents of site visit reports, and accrediting or preaccrediting actions with respect to the program. [[34 CFR 602.23\(d\)](#) and [602.23\(e\)](#)] The program must make accurate public disclosure of the accreditation or preaccreditation status awarded to the program, using the language provided in the [Accreditation Handbook](#) (see Chapter XII Informing the Public) on the academic accreditation website. If the program chooses to disclose any additional information within the scope of the ED rule, such disclosure also must be accurate. Any public disclosure of information within the scope of the rule must include the CAA's name, address, and telephone number as described in the [Accreditation Handbook](#). If an institution or program misrepresents or distorts any action by the CAA with respect to any aspect of the accreditation process, its accreditation status, the contents of the site visit report, or final CAA accreditation

actions or decisions, the CAA will inform the chief executive officer of the institution and the program director that corrective action must be taken. If corrective action is not taken, the CAA will release a public statement that provides correct information and may invoke other sanctions as may be appropriate.