The Council on Academic Accreditation in Audiology and Speech-Language Pathology has reviewed the program’s application for substantive change and took the following accreditation action at its July 19-22, 2023 meeting, as indicated below.

**Name of Program:** Ithaca College

**File #:** 139

**Professional Area:**
- [ ] Audiology
- [x] Speech-Language Pathology

**Modality:**
- [x] Residential
- [x] Distance Education
- [ ] Satellite Campus
- [ ] Contractual Arrangement

**Degree Designator(s):** MS

**Current Accreditation Cycle:** 02/01/2019 – 01/31/2027

**Action Taken:** Continue Accreditation and Approve Distance Education Modality

**Effective Date:** July 22, 2023

**Next Review:** Annual Report due February 1, 2024

**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 timeline 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 A program will be placed on probation or accreditation withdrawn after the review of a second consecutive report reveals that issues continue for the same standard(s) and the program remains not in full compliance with all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 1.5**  The program develops and implements a long-term strategic plan.

**Requirement for Review:**
- The plan must be congruent with the mission and goals of the program and the sponsoring institution, have the support of the administration, and reflect the role of the program within its community.
- The plan identifies long-term goals, specific measurable objectives, strategies for attainment of the goals and objectives, and a schedule for analysis of the plan.
- The plan must include a mechanism for regular evaluation of the plan itself and of progress in meeting the plan’s objectives.
- An executive summary of the strategic plan or the strategic plan must be shared with faculty, students, staff, alumni, and other interested parties.

**Evidence of Non-Compliance:**
The program’s reported strategic plan and the plan published on its website is from 2018-2021. The program reported that it is currently completing an updated strategic plan to be completed by the end of 2023.

**Steps to Be Taken:**
At the time of the next annual report, the program must provide an update on the completion of the new strategic plan and describe how it meets all Requirements for Review under Standard 1.5.

**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 2.1**  The number and composition of the program faculty (academic doctoral, clinical doctoral, other) are sufficient to deliver a program of study that:
- 2.1.1 allows students to acquire the knowledge and skills required in Standard 3,
- 2.1.2 allows students to acquire the scientific and research fundamentals of the discipline,
2.1.3 allows students to meet the program’s established goals and objectives, 
2.1.4 meets the expectations set forth in the program’s mission and goals, 
2.1.5 is offered on a regular basis so that it will allow the students to complete the 
program within the published time frame.

Requirement for Review:
- The program must document
  - how the faculty composition is sufficient to allow students to acquire the knowledge and skills 
    required in Standard 3
  - how the faculty composition is sufficient to allow students to acquire the scientific and research 
    fundamentals of the profession

Evidence of Concern:
In its annual report, the program stated that in May 2022 two tenured faculty members with terminal degrees left 
the program. The program reported that it has been approved to conduct a search for one tenure track faculty 
member, and has plans to request an additional faculty member. In its substantive change for distance education 
application, the program indicated that it will not be using current faculty unless they choose to take voluntary 
overload and plan to hire four faculty members to deliver the program.

Steps to Be Taken:
At the time of the next annual report, the program must provide an update on the current state of hiring faculty 
members to replace open lines faculty for the distance education modality. The program should describe any 
impacts on the program’s overall faculty composition and provide evidence to demonstrate that the faculty 
composition remains sufficient to allow students to acquire the knowledge and skills required in Standard 3, and 
to acquire the scientific and research fundamentals of the profession.

Standard 2.3 All faculty members (full-time, part-time, adjuncts), including all individuals providing clinical 
education, are qualified and competent by virtue of their education, experience, and 
professional credentials to provide academic and clinical education as assigned by the 
program leadership.

Requirement for Review:
- The program must demonstrate that the majority of the academic content is taught by doctoral faculty 
  who hold the appropriate terminal academic degree (PhD, EdD).

Evidence of Concern:
In its annual report, the program stated that in May 2022 two tenured faculty members with terminal degrees left 
the program. The program reported that it has been approved to conduct a search for one tenure track faculty 
member, and has plans to request an additional faculty member.

Steps to Be Taken:
At the time of the next annual report, the program must provide an update on the addition of any new faculty 
members and provide evidence demonstrating that the majority of academic content, in both the residential and 
distance education modalities, is taught by doctoral faculty who hold the appropriate terminal academic degree 
(PhD or EdD).
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:

<table>
<thead>
<tr>
<th>Area</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>Program Completion Rates</td>
<td>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 not in compliance are described earlier in this report in the context of the relevant standard.</td>
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<tr>
<td>Praxis Examination Rates</td>
<td></td>
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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.