

**ACCREDITATION ACTION REPORT
Annual Report Review**

The Council on Academic Accreditation in Audiology and Speech-Language Pathology has reviewed the program's accreditation annual report and took the following accreditation action at its February 19-21, 2025 meeting, as indicated below.

Name of Program: Inter American University of Puerto Rico

File #: 321

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): MS

Current Accreditation Cycle: 07/01/2023 – 06/30/2028

Action Taken: Place on Probation

Effective Date: February 21, 2025

Next Review: End of Probation Report due January 16, 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 (Cause for Probation)

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 A program will be placed on probation or accreditation withdrawn after the review of a second consecutive report reveals that issues continue for the same standard(s) and the program remains not in full compliance with all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 4.2 The program makes reasonable adaptations in curriculum, policies, and procedures to accommodate differences among individual students.

Requirement for Review:

- The program must demonstrate that its language proficiency policy is applied consistently.

Evidence of Non-Compliance:

During the review of the program's submitted 2024 annual report, it was noted that the program did not respond to the prior concern related to Standard 4.2 - Student Adaptations as required in the 2023 Accreditation Action Report (2023 AAR). In the 2023 AAR, the CAA determined that this standard was out of compliance due to the program reporting that the program did not have a policy regarding English or other languages. The program stated that it had modified the admission requirements to include essay prompts in both English and Spanish during the interview process, and added an admission requirement to demonstrate fluency in oral and written communication in Spanish and English. However, the program did not provide evidence that this policy was implemented or applied consistently.

In the 2023 AAR, the program was instructed to provide an update on the implementation of the language proficiency policy and demonstrate how it is applied consistently for that purpose.

The program failed to respond to this non-compliance citation in their 2024 Annual Report, indicating that there were no citations regarding this requirement and no changes have occurred. Accreditation staff reached out to the program director on file on several occasions between August 2024 and January 2025 to ask for information and correct the information displayed, however these attempts were not successful and a response from the program was not received.

Steps to Be Taken:

In its End of Probation Report, the program must provide an update on the implementation of its language proficiency policy and demonstrate how it is applied consistently.

Standard 5.5 The percentage of students who are enrolled on the first census date of the program and complete the program within the program’s published academic terms meets or exceeds the CAA’s established threshold.

Requirement for Review:

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

Evidence of Non-Compliance:

In review of the program’s 2024 annual report, the CAA determined that the program has not yet been able to demonstrate compliance with Standard 5.5. The program was cited for non-compliance for this standard in its 2023 Accreditation Action Report following the award of initial accreditation. The program’s average program completion rates remain below the required 80% threshold at 45%.

Steps to Be Taken:

At the time of the end of probation report, the program must demonstrate that it has met or exceeded the established threshold of 80% and if not, provide an explanation and a plan for improving the results.

Standard 5.6 The percentage of test-takers who pass the Praxis® Subject Assessments in audiology or speech-language pathology meets or exceeds the CAA’s established threshold.

Requirement for Review:

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

Evidence of Non-Compliance:

In review of the program’s 2024 annual report, the CAA determined that the program has not yet been able to demonstrate compliance with Standard 5.6. The program was cited for non-compliance for this Standard in their 2023 Accreditation Action Report following the award of initial accreditation. The program’s average PRAXIS Pass Rates are still below the required 80% threshold at 50%.

Steps to Be Taken:

At the time of the end of probation report, the program must demonstrate that at least 80% of test-takers from the program pass the Praxis exam, as averaged over the three most recently completed academic years. The program must also provide a plan for improving these results.

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

Requirement for Review:

- At a minimum, the following results of student outcome measures for the most recently completed 3 academic years must be provided:
 - Number and percentage of students completing the program within the program's published time frame for each of the 3 most recently completed academic years,
 - Number and percentage of program test-takers who pass the *Praxis*[®] Subject Assessment examination for each of the 3 most recently completed academic years (programs need report only the results once for test-takers who take the test more than one time in the reporting period),

Evidence of Non-Compliance:

Upon review of the program's 2024 annual report, it was noted that the program was not displaying the most recent three years of student outcome measures. The most recent year of data published is 2023. Accreditation staff reached out to the program director on file on several occasions to correct the information displayed, however these attempts were not successful.

Steps to Be Taken:

At the time of the next annual report, the program must publish the most recent three years of completion and PRAXIS pass rate data to maintain compliance with Standard 1.9.

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 2.3 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 qualifications and competence to teach graduate-level courses and to provide clinical education are evident in terms of appropriateness of degree level, practical or educational experiences specific to responsibilities in the program, and other indicators of competence to offer graduate education.

Evidence of Concern:

In its 2024 annual report, the program did not include Faculty Data Collection Worksheets for several faculty members that were listed on the faculty roster who contribute to the graduate program in speech-language pathology. The CAA was unable to determine compliance with this standard due to this missing data. Accreditation staff attempted to reach out to the program director on file on multiple occasions, however these attempts were unsuccessful.

Steps to Be Taken:

At the time of the next annual report, the program must provide Faculty Data Collection Worksheets for all faculty that are listed on the Faculty Roster and who in any way contribute to the graduate program in speech-language pathology.

Standard 3.1B An effective entry-level professional speech-language pathology program allows each student to acquire knowledge and skills in sufficient breadth and depth to function as an effective, well-educated, and competent clinical speech-language pathologist (i.e., one who can practice within the full scope of practice of speech-language pathology). The education program is designed to afford each student with opportunities to meet the expectations of the program that are consistent with the program's mission and goals and that prepare each student for professional practice in speech-language pathology.

Requirement for Review:

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

Offer opportunities for students to qualify for state and national credentials that are required for entry into professional practice, consistent with the program's mission and goals (e.g., state license, state teacher certification, national credentialing).

Evidence of Concern:

In its 2024 annual report, the program did not provide a completed Standards 3.0B Courses Worksheet, so the CAA was unable to verify the program's overall curriculum sufficiency. Accreditation staff reached out to the program director on file on several occasions to have the Standard 3.0B Courses Worksheet completed, however these attempts were not successful.

Steps to Be Taken:

At the time of the next annual report, the program must accurately complete and submit the Standard 3.0B Courses Worksheet so that the CAA is able to assess the graduate program's curriculum sufficiency.

Standard 3.3B An effective speech-language pathology program is planned and delivered in an organized, sequential, and integrated manner to allow each student to meet the program's established learning goals and objectives and develop into a competent speech-language pathologist.

Requirement for Review:

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

Evidence of Concern:

In its 2024 annual report, the program did not provide a completed Standards 3.0B Courses Worksheet, which the CAA uses to determine the program's sequence of learning. At this time, the CAA was unable to assess the program's sequence of learning. Accreditation staff reached out to the program director on file on several occasions to have the Standard 3.0B Courses Worksheet completed, however these attempts were not successful.

Steps to Be Taken:

At the time of the next annual report, the program must accurately complete the Standard 3.0B Courses Worksheet so that the CAA is able to review and determine the program's sequence of learning.

Standard 5.4 The program uses the results of its ongoing programmatic assessments for continuous quality improvement and evaluates the improvements.

Requirement for Review:

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

Evidence of Concern:

In its 2024 annual report, the program did not provide a description of the processes that the program uses to ensure that any changes are consistent with the program's stated mission, goals, and objectives. The program also did not describe how it uses programmatic assessment data to promote continuous quality improvement of the program.

Steps to Be Taken:

At the time of the next annual report, the program must provide detailed or updated plans for ongoing program improvement, specifically around the areas of concern as noted in this Accreditation Action Report.

Standard 5.8 The program demonstrates how it uses the results of its analyses of success in meeting the established CAA thresholds for program completion rate and Praxis® Subject Assessments pass rate for continuous quality improvement at the programmatic level.

Requirement for Review:

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

Evidence of Concern:

In its 2024 annual report, the program states it compares its student outcome measures with other accredited programs in Puerto Rico. However, the program did not provide a sufficient amount of detail as it relates to how it analyzes and uses its own programmatic data to facilitate continuous quality improvement.

Steps to Be Taken:

At the time of the next annual report, the program must provide additional information on how it plans to, or currently analyzes and integrates student outcome data to improve the experience and outcomes of the overall program.

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>	
	Program Completion Rates
	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.