

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 accreditation action indicated below.

Name of Program: Western Michigan University

File #: 11

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: 10/01/2024 – 09/30/2032

Action Taken: Continue Accreditation – With Monitoring

Effective Date: December 11, 2025

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 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 A program will be placed on probation or accreditation withdrawn after the review of a second consecutive report reveals that issues continue for the same standard(s) and the program remains not in full compliance with all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 6.3 The program has adequate physical facilities (classrooms, offices, clinical space, research laboratories) that are accessible, appropriate, safe, and sufficient to achieve the program's mission and goals.

Requirement for Review:

- The program must demonstrate that its facilities are adequate to deliver a program that is consistent with its mission and goals.

Evidence of Non-Compliance:

In its annual report, the program explained that renovations associated with a collaboration with a local practice have reduced access to spaces used for clinical education, training, and supervision. Some changes are temporary, while others may be long-term. The program noted that a comprehensive CHHS space management plan will be developed in FY 2026 to address facility needs, including those related to the Unified Clinics.

Current evidence indicates that the program's facilities are not sufficient to fully support delivery consistent with its mission and goals. The program reported a lack of permanently designated spaces for clinical instructors, as well as shortages in observation suites and workstations. These limitations are affecting operations, and the impact of future space planning remains uncertain.

Steps to Be Taken:

At the time of the next annual report, the program must provide an update on renovations and demonstrate that current and planned facilities adequately support program delivery consistent with its mission and goals.

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

Evidence of Concern:

In its annual report, the program noted that one PhD faculty member resigned in December 2024 and that a successful search resulted in a new hire expected to begin in January 2026. Because this appointment has a future start date, the program must demonstrate how the current faculty composition supports students in acquiring the knowledge and skills required under Standard 3.

Steps to Be Taken:

At the time of the next annual report, the program must provide an update on the status of the new faculty member, including whether the individual began employment as planned in January 2026, and describe how the existing faculty composition is sufficient to support students in acquiring the knowledge and skills required under Standard 3.

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.