

ACCREDITATION ACTION REPORT Reaccreditation Review

The Council on Academic Accreditation in Audiology and Speech-Language Pathology took the following accreditation action at its July 19-22, 2023 meeting, as indicated below.

Name of Program: Texas Christian University

File #: 106

Profe	ssional Area:	
	Audiology	
X	Speech-Language Patho	plogy
Moda	ality:	
X	Residential	
	Distance Education	
Satellite Campus		
	Contractual Arrangeme	nt
Degre	ee Designator(s):	MS
Current Accreditation Cycle:		09/01/2015 - 08/31/2023
Action Taken:		Continue Accreditation
Effective Date:		July 22, 2023
New Accreditation Cycle:		09/01/2023 - 08/31/2031
Next	Review:	Annual Report due August 1, 2024
Notic	The program is advised to adhere to the following notices that are appended to this report	
	PROGRAM COMPLIANCE EXPECTATIONS	
		SCLOSURE OF DECISION AND ACCREDITATION STATUS

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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 A program will be placed on probation or accreditation withdrawn after the review of a second consecutive report reveals that issues continue for the same standard(s) and the program remains not in full compliance with all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 4.6 Students receive advising on a regular basis that pertains to both academic and clinical performance and progress.

Requirement for Review:

- The program must maintain records of advisement for each of its students.
- The program must maintain records demonstrating that students are advised on a timely and continuing basis regarding their academic and clinical progress.

Evidence of Non-Compliance:

The CAA requires that programs maintain records that demonstrate timely and ongoing advisement regarding students' academic and clinical progress. While interviews conducted with the program director, clinical director, and students during the site visit confirmed that advising sessions take place, the review found evidence that these advisory meetings, whether conducted individually or in groups, are not consistently documented in the students' files. In its response to the site visit report, the program stated that the institution has now adopted Stellic as the advising system that will be implemented to document academic and clinical advising meetings.

Steps to Be Taken:

At the time of the next annual report, the program must provide an update on the use of Stellic and provide evidence that records demonstrating timely and continuing advisement for each student is maintained.

Standard 4.7 The program documents student progress toward completion of the graduate degree and professional credentialing requirements.

Requirement for Review:

• The program must maintain complete and accurate records of all students' progress during the entire time of their matriculation in the program.

Evidence of Non-Compliance:

The CAA requires that programs maintain complete and accurate records of all students' progress during the entire time of their matriculation in the program. The site visit team found records lacking consistent Date of CAA Decision: July 22, 2023

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documentation of students' academic and clinical progress. The site visit report found that the program did not have a consistent mechanism for documenting progress. The report notes that milestones for progress exist in student files but lack dates, while Calipso is used to document total clinical hours, and transcripts verify academic requirements and semester completion. In its response to the site visit report, the program indicated that it will be implementing an academic knowledge chart to be included in the student's file by the program director at the end of each semester.

Steps to Be Taken:

At the time of the next annual report, the program must provide an update on implementing mechanisms to ensure that complete and accurate records of all students' progress are maintained. These mechanisms include the academic knowledge chart, the evaluation of practicum performance, and tracking clinical hours through Calipso.

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.

There were no areas for follow-up with the Standards for Accreditation.

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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:

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.

Х	Program Completion Rates	
Х	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 <u>Accreditation Handbook</u>. 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

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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.

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