

ACCREDITATION ACTION REPORT
Reaccreditation Review

The Council on Academic Accreditation in Audiology and Speech-Language Pathology took the following accreditation action at its May 22 – 23, 2023 meeting, as indicated below.

Name of Program: University of Akron

File #: 132

Professional Area:

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

Modality:

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

Degree Designator(s): MA

Current Accreditation Cycle: 02/01/2015 – 01/31/2023

Action Taken: Continue Accreditation

Effective Date: May 23, 2023

New Accreditation Cycle: 02/01/2023 – 01/31/2031

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 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 A program will be placed on probation or accreditation withdrawn after the review of a second consecutive report reveals that issues continue for the same standard(s) and the program remains not in full compliance with all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: 4.3 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 must demonstrate that the policies and procedures are applied consistently across all students who are identified as needing intervention.

Evidence of Non-Compliance:

The CAA requires that the program demonstrate that its intervention policies and procedures are applied consistently across all students who are identified as needing intervention. The site visit report findings stated that the site visit team was unable to verify consistent application across all students who are identified as needing intervention academically for two reasons: the lack of specificity and clarity in the academic policy, and inconsistencies in interpretation and implementation based on interviews with faculty and students. The program's response to the site visit report showed that the policies and detailed intervention procedures in both residential and distance education settings, including an academic support plan, are now clearly stated in syllabi, the Graduate Student Handbook, academic advising plans, and orientation handouts. At the time of review, evidence was not verified that there is consistent implementation of these policies and procedures as stated in the program materials to demonstrate compliance with the Standard.

Steps to Be Taken:

At the time of the next annual report, the program must demonstrate consistent application of intervention policies and procedures. This could include providing evidence of how the program identifies students requiring intervention and how the policies and procedures are consistently applied to any identified students.

Standard: 5.2 The program conducts ongoing and systematic formative and summative assessments of the performance of its students.

Requirement for Review:

- The program must develop an assessment plan that is used throughout the program for each student. The plan must include the purpose of the assessments and use a variety of assessment techniques, including both formative and summative methods.
- The program must demonstrate that a student assessment is applied consistently and systematically.
- For purposes of assessing compliance, the Praxis examination cannot be used to meet this standard as a form of summative assessment.

Evidence of Non-Compliance:

The CAA requires that the program conduct ongoing and systematic formative and summative assessments of the performance of its students. The requirements for review under this Standard state that the program must develop an assessment plan that is used throughout the program for each student; that the plan must include the purpose of the assessments and use a variety of assessment techniques, including both formative and summative methods; that the program demonstrate that a student assessment is applied consistently and systematically, and that the Praxis examination cannot be used to meet this standard as a form of summative assessment. The site visit report findings focused on summative assessment, stating that the program previously utilized the Praxis Exam as a summative assessment and noted that the reaccreditation application and interviews with faculty indicated tracking of students' knowledge and skills through the KASA document was what the program currently considered summative. The site visit report noted that the program's faculty were considering developing a comprehensive examination as the summative assessment, but this was not in place at the time of the site visit. The program's response to the site visit report stated that a comprehensive examination would be available in March 2023 and that all students will have to take this as a summative assessment. At the time of review, evidence that the comprehensive examination for summative assessment has been developed and consistently and systematically applied could not be verified.

Steps to Be Taken:

At the time of the next annual report, the program must provide evidence that it has developed and consistently and systematically applied the comprehensive examination for summative assessment that it described in its response to the site visit report. The program must explain how the comprehensive examination and process is valid as a summative assessment.

Standard: 5.10 The faculty and staff involved in delivering the program to students use the results of the evaluation of their performance to guide continuous professional development that facilitates the delivery of a high quality program.

Requirement for Review:

- The program must demonstrate how faculty and staff use the results of evaluations of performance to guide continuous professional growth and development.

Evidence of Non-Compliance:

The CAA requires that the program must demonstrate how faculty and staff use the results of evaluations of performance to guide continuous professional growth and development. The site visit report findings stated that, while full-time faculty and staff have an evaluation process that meets the standard, the program's part-time faculty do not. Part-time faculty may talk with directors informally about goals for improvement of course or clinical instruction, but using results of evaluations to guide continuous professional growth and development was not consistently evident. The program's response to the site visit report provided a detailed policy and procedure for supporting part-time faculty and enhancing their teaching excellence which specifically includes use of the results of peer evaluations, director review of part-time faculty evaluations, and program coordinator review of syllabi in guiding growth. However, the program has not presented evidence of implementation of these processes for part-time faculty at the time of review.

Steps to Be Taken:

At the time of the next annual report, the program must provide evidence of implementation of evaluations of part-time faculty. The program must show how the results of evaluations of performance are used to guide continuous professional growth and development.

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.**

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.