

ACCREDITATION ACTION REPORT
Re-Accreditation Review

The Council on Academic Accreditation in Audiology and Speech-Language Pathology took the following accreditation action at its March 15-17, 2023 meeting, as indicated below.

Name of Program: University of Maine, Orono

File #: 188

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: 6/1/2014 – 5/31/2022

Action Taken: Continue Accreditation

Effective Date: March 17, 2023

New Accreditation Cycle: 6/1/2022 – 5/31/2030

Next Review: Annual Report due August 1, 2023

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 A program will be placed on probation or accreditation withdrawn after the review of a second consecutive report reveals that issues continue for the same standard(s) and the program remains not in full compliance with all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 3.9B Clinical education obtained in external placements is governed by agreements between the program and the external facility and is monitored by program faculty.

Requirements for Review:

- The program must have written policies that describe the processes used by the program to select and place students in external facilities.
- The program must have written policies and procedures that describe the processes used to determine whether a clinical site has the appropriate clinical population and personnel to provide an appropriate clinical education experience for each student.

Evidence of Non-Compliance:

The CAA requires that programs have written policies that describe the processes used by the program to select and place students in external facilities and have written policies and procedures that describe the processes used to determine whether a clinical site has the appropriate clinical population and personnel to provide an appropriate clinical education experience for each student. The site visit report noted that the program has not developed written policies regarding the role of students in the selection of externship sites or the placement of students within such sites. The site visit team was unable to confirm that there is a policy that describes whether a clinical site has the appropriate clinical population to provide an adequate clinical education experience for each student.

Students interviewed during the site visit reported a lack of knowledge as to how student placements were made. In response to the site visit report, the program provided a policy regarding clinical practicum that will be added to the University of Maine Clinical Practicum Handbook that will be provided to students in August at orientation. The response to the site visit report states that the policy is currently located on the program's website, but the Council was unable to locate the policy or the Clinical Practicum Handbook via the program's website.

The program provided a narrative about the procedure of reviewing external sites and the monitoring of student progress and performance during clinical experiences in the response to the site visit report.

However, a policy regarding how the program determines if the clinical site has the appropriate population and personnel to provide the experience was not included in the response to demonstrate compliance with the Standard.

Steps to Be Taken:

At the time of the next annual report, the program must demonstrate that written policies that describe the processes used by the program to select and place students in external facilities have been implemented, and that written policies that describe whether a clinical site has the appropriate population and personnel to provide clinical education experiences have been created and implemented. The program must provide a copy of the updated Clinical Practicum Handbook or a link to its location on the program's website and note where these policies are located within this handbook, along with finalized copies of each policy.

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 of advisement for each of its students, and that programs maintain records demonstrating that students are advised on a timely and continuing basis regarding their academic and clinical progress. The site visit report noted that a review of several student files did not find examples of advising records, nor was there documentation elsewhere that showed maintenance of these records. The program was unable to provide examples of advising records, although faculty confirmed that advising does occur inconsistently. In response to the site visit report, the program stated that a form to be used for documenting advising sessions was included and reported that departmental records are currently being uploaded to CALIPSO, which will enhance documentation of student progress. However, this advising form was not included in the site visit report response and no evidence was included to demonstrate compliance with the Standard.

Steps to Be Taken:

At the time of the next annual report, the program must demonstrate that it maintains records of advisement for students and demonstrate that students are advised on a timely and continuing basis regarding their academic and clinical progress. The program must provide documentation of advising forms and documentation that the forms have been implemented consistently and timely, as well as the policy that guides the advising process.

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 report noted that a review of past and current graduate student files yielded inconsistent and incomplete records, and outdated knowledge and skills forms. In response to the site visit report, the program provided a copy of the old Knowledge and Skills Assessment form, and reported that curriculum mapping is currently in progress and departmental records are currently being uploaded to CALIPSO. However, no evidence was included to demonstrate compliance with the Standard.

Steps to Be Taken:

At the time of the next annual report, the program must demonstrate that complete and accurate records of all students' progress during the entire time of their matriculation in the program are maintained. The program must provide evidence that a current and updated Knowledge and Skills Assessment form is utilized in tracking progress, and must provide evidence that the departmental records have been updated and implemented for use.

Standard 5.3 The program administers regular and ongoing assessment protocols to evaluate the quality of the program and to facilitate continuous quality improvement.**Requirement for Review:**

- The program must collect data from multiple sources (e.g., alumni, faculty, employers, off-site clinical educators, community members, individuals receiving services) and allow evaluation of the program's success in achieving its goals, objectives, and the extent to which student learning outcomes have been met.

Evidence of Non-Compliance:

The CAA requires that programs collect data from multiple sources and allow evaluation of the program's success in achieving its goals, objectives, and the extent to which student learning outcomes have been met. The site visit report noted that while the program has procedures in place to evaluate student learning and course offerings, the scope does not extend to multiple sources such as alumni, employers, or off-site clinical educators. In response to the site visit report, the program provided a survey instrument that will be used to collect data. However, no evidence was included to demonstrate that this instrument has been implemented and distributed to multiple sources in order to evaluate the program's success and to demonstrate compliance with the Standard.

Steps to Be Taken:

At the time of the next annual report, the program must demonstrate that data is collected from multiple sources to evaluate the program's success in achieving its goals, objectives, and meeting student learning outcomes. The program must provide documentation of completed surveys from multiple sources and provide evidence that the results of these surveys have been used to evaluate and improve the program as applicable.

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.

Evidence of Non-Compliance:

The CAA requires that the program describes how it uses programmatic assessment data to promote continuous quality improvement of the program. The site visit report noted that data collected by the program is limited to student learning and course offerings and does not extend to continuous quality improvement of the curriculum and program operations. In response to the site visit report, the program reported that data from the employer and alumni surveys are reviewed annually at the CSD retreat held every spring, and that outcomes from surveys are used in curriculum and practicum review. However, no evidence was included to demonstrate the collection of the survey data or that the data is used in programmatic assessment to promote continuous quality improvement of the program and to demonstrate compliance with the Standard.

Steps to Be Taken:

At the time of the next annual report, the program must demonstrate how it uses programmatic assessment data to promote continuous quality improvement of the program. The program must provide documentation that shows that survey data is collected and is used to promote program improvement.

Standard 5.11 The individual responsible for the program of professional education seeking accreditation effectively leads and administers the program.

Requirement for Review:

- The program director's effectiveness in advancing the goals of the program and in leadership and administration of the program must be regularly evaluated.

Evidence of Non-Compliance:

The CAA requires that the program director's effectiveness in advancing the goals of the program and in leadership and administration of the program must be regularly evaluated. The site visit report noted that the Graduate Coordinator is evaluated every four years based on their status as a tenured faculty member, as consistent with university guidelines. The Department Chair and Graduate Coordinator both confirmed that the effectiveness in advancing the goals of the program and in leadership and administration of the program are not regularly evaluated as a part of that review. In response to the site visit report, the program reported that it has developed an annual evaluation survey. However, this survey has not been implemented and this data has not been collected.

Steps to Be Taken:

At the time of the next annual report, the program must demonstrate that the program director's effectiveness in advancing the goals of the program and in leadership and administration of the program are regularly evaluated. The program must provide documentation that the annual evaluation survey has been implemented and will be used on a consistent basis.

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.