

ACCREDITATION ACTION REPORT

Re-Accreditation Review

The Council on Academic Accreditation in Audiology and Speech-Language Pathology took the following accreditation action at its February 17-20, 2021 meeting, as indicated below.

Name of Program: SUNY at Plattsburgh

File #: 207

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): M.A.

Current Accreditation Cycle: 6/1/2012 – 5/31/2020

Action Taken: Continue Accreditation

Effective Date: February 20, 2021

New Accreditation Cycle: 6/1/2020 – 5/31/2028

Next Review: Annual Report due August 1, 2021

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.**

Standard 1.5: The program develops and implements a long-term strategic plan.

Evidence of non-compliance:

The strategic plan must identify long-term goals, specific measurable objectives, strategies for attainment of the goals and objectives, and a schedule for analysis of the plan. The plan must include a mechanism for regular evaluation of the plan itself and of progress in meeting the plan's objectives. The revised strategic plan does not include specific objectives, strategies for meeting the objectives, or mechanisms for a regular evaluation of the plan or progress in meeting the objectives.

Steps to be Taken:

At the time of the annual report, revise the strategic plan to include the missing elements. Provide the revised plan or link to where the plan can be reviewed in the response.

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.

Evidence of non-compliance:

Websites, catalogs, advertisements, and other publications/ electronic media must be accurate regarding standards and policies regarding recruiting and admission practices, academic offerings, matriculation expectations, academic calendars, grading policies and requirements, and fees and other charges. The program response to the Site Visit Report noted several updates to the program website, course catalogue, and Graduate Student Handbook regarding

course sequencing, clarification of clinical practicum credits, and syllabi to be implemented in spring 2021.

Steps to be Taken:

At the time of the annual report, provide verification of the changes to the program website, course catalogue, and Graduate Student Handbook have been updated.

Standard 4.4: Students are informed about the program’s policies and procedures, expectations regarding academic integrity and honesty, ethical practice, degree requirements, and requirements for professional credentialing.

Evidence of non-compliance:

The program must provide information regarding:

- Program policies and procedures
- Program expectations regarding academic integrity and honesty
- Program expectations for ethical practice
- The degree requirements
- The requirements for professional credentialing

The program response to the Site Visit Report noted updates to the program website, Graduate Student Handbook, and course catalogue to clarify course sequence and clinical practicum credits.

Steps to be taken:

At the time of the annual report, provide verification that the changes to the program website, course catalogue, and Graduate Student Handbook have been updated.

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

Evidence of non-compliance:

The program must use the results of its assessment protocols to improve and refine the program goals and objectives and ensure alignment between the programs’ stated goals and objective and the measured student learning outcomes. The program approved a new assessment collection and review protocol.

Steps to be taken:

At the time of the annual report, provide an update on the new assessment and review protocol.

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 accreditation standards.**

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	Employment 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) 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.