

## ACCREDITATION ACTION REPORT

### Re-Accreditation Review

The Council on Academic Accreditation in Audiology and Speech-Language Pathology took the following accreditation action at its April 27, 2021 meeting, as indicated below.

**Name of Program: University of Louisiana, Monroe**

**File #: 213**

**Professional Area:**

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

**Modality:**

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

**Degree Designator(s): M.S.**

**Current Accreditation Cycle: 8/1/2012 – 7/31/2020**

**Action Taken: Continue Accreditation**

**Effective Date: April 27, 2021**

**New Accreditation Cycle: 8/1/2020 – 7/31/2028**

**Next Review: Annual Report due September 7, 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 2.3: All faculty members (full-time, part-time, adjuncts), including all individuals providing clinical education, are qualified and competent by virtue of their education, experience, and professional credentials to provide academic and clinical education as assigned by the program leadership.**

### **Evidence of non-compliance:**

The program must demonstrate that all individuals providing didactic and clinical education, both on-site and off-site, have appropriate experience and qualifications for the professional area in which education is provided. The program must demonstrate that the faculty possess appropriate qualifications and expertise to provide the depth and breadth of instruction for the curriculum as specified in Standard 3.0. The program noted in the response to the site visit report that new faculty will be hired for the swallowing and audiology courses starting fall 2021. A current faculty member will take over the fluency course to replace a retirement. The neurological disorders courses will possibly be rearranged, and the current instructor will continue to teach while taking continuing education on the topic and bring in a guest lecturer to help support course content. If the courses in neurological disorders are rearranged, the program noted they will seek to bring in an adjunct instructor to teach the Cognitive Communication elective course.

### **Steps to be taken:**

At the time of the annual report, provide an update on hiring new faculty and the program's decision whether to rearrange the neurological disorders courses. The program must demonstrate appropriate faculty qualifications for all coursework.

**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.**

**Evidence of non-compliance:**

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. The site visit team was not able to verify the process followed by the clinic director in on boarding a new site. The program is in the process of expanding the current Policy and Responsibilities into a complete Externship Handbook. The program noted that the handbook will be completed and implemented before the next cohort of students begins their externship placements in June of 2021.

**Steps to be taken:**

At the time of the annual report, provide the expanded written procedures and demonstrate implementation of the new procedures.

**Standard 5.3: The program conducts ongoing and systematic formative and summative assessments of the performance of its students.**

**Evidence of non-compliance:**

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. The program provided a survey that is sent to alumni; however, it is not clear how the program collects and analyzes data from multiple sources.

**Steps to be taken:**

At the time of the annual report, provide information on how data are collected from multiple sources and are used to evaluate the program's success in achieving its goals, objectives, and the extent to which student learning outcomes have been met.

**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 3.2B: An effective speech-language pathology program is characterized by planning and organization, is reviewed systematically and on a regular basis, and is consistent with current knowledge and practice guidelines of the profession.**

**Evidence of concern:**

The program must demonstrate that the

- Curriculum is reviewed systematically and on a regular basis
- Review of the curriculum is conducted by comparing existing plans to current standards of speech-language pathology practice, current literature, and other documents related to professional practice and education in speech-language pathology.

The program noted the record-keeping policy and procedures associated with curriculum review has been revised. In spring 2021, four courses will undergo review, and subsequently, each semester (excluding summer), four additional courses will be reviewed. By the end of fall 2022, all courses will have been reviewed and evaluated and the continuous process will begin again in spring 2023.

**Steps to be taken:**

At the time of the annual report, provide an update on the new system to review and revise curriculum.

**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.