

**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: Jacksonville University

File #: 308

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

Degree Designator(s): MS

Current Accreditation Cycle: 02/01/2018 – 01/31/2023

**Action Taken: Continue Accreditation;
Approve Substantive Change - Distance Education Modality**

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 A program will be placed on probation or accreditation withdrawn after the review of a second consecutive report reveals that issues continue for the same standard(s) and the program remains not in full compliance with all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 stated that in reviews of student handbooks, student files, and faculty interviews, the program did not appear to have written policies for consistently identifying students needing intervention nor documenting all forms of intervention used to facilitate each student's success in meeting the program's expectations. Faculty meeting minutes did demonstrate discussions of students who needed intervention, but it was inconsistent in the documentation. Consistent application of the policy was not observed in student files or in faculty interviews. In the program's response to the site visit report, it indicated that there is a new procedure to ensure that all students are reviewed on a regular basis. Beginning in the summer 2023 term, students will be divided into advisement groups that are assigned to faculty members who will monitor academic and clinical progress and provide intervention if students are not progressing. The program will also be holding monthly cohort meetings to connect students to programmatic updates and reminders. 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 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.
- The records for each student must include documentation that can demonstrate that the student has met all the academic, clinical, and other requirements for the degree and the credential(s) that are identified by the program in its mission and goals.

Evidence of Non-Compliance:

The CAA requires that the program must maintain complete and accurate records of all students' progress during the entire time of their matriculation in the program, and that the records for each student must include documentation that can demonstrate that the student has met all the academic, clinical, and other requirements for the degree and the credential(s) that are identified by the program in its mission and goals. The site visit report stated that clinical files are contained in CALIPSO and indicated documentation of advising; however, the academic program did not have clear documentation of student progress. Information contained within the student files varied. Students' files, regardless of the cohort year, did not contain the information/data that is identified in the clinical handbook. The program, as noted in the student handbook, specifically identifies items that are to be in all student folders, but that information is not consistently present. In the program's response to the site visit report, it indicated that the program director, assisted by key faculty, will ensure that student files are updated at the end of each semester. Each current student's file will be reviewed, and missing documentation completed by the end of the summer 2023 term.

Steps to Be Taken:

At the time of the next annual report, the program must provide evidence to demonstrate that it maintains complete and accurate records of all students' progress during the entire time of their matriculation in the program, and that the records for each student include documentation that can demonstrate that the student has met all the academic, clinical, and other requirements for the degree and the credential(s) that are identified by the program in its mission and goals.

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 2.1 The number and composition of the program faculty (academic doctoral, clinical doctoral, other) are sufficient to deliver a program of study that:**
- 2.1.1 allows students to acquire the knowledge and skills required in Standard 3,**
 - 2.1.2 allows students to acquire the scientific and research fundamentals of the discipline,**
 - 2.1.3 allows students to meet the program's established goals and objectives,**
 - 2.1.4 meets the expectations set forth in the program's mission and goals,**
 - 2.1.5 is offered on a regular basis so that it will allow the students to complete the program within the published time frame.**

Requirement for Review:

- The program must document:
 - how the faculty composition is sufficient to allow students to acquire the knowledge and skills required in Standard 3
 - how the faculty composition is sufficient to allow students to acquire the scientific and research fundamentals of the profession
 - how the faculty composition is sufficient to allow students to meet the program's established learning goals and objectives
 - how the faculty composition is sufficient to allow students to meet the expectations set forth in the program's mission and goals

Evidence of Concern:

The CAA expects that the program's faculty composition is sufficient to allow students to acquire the knowledge and skills required in Standard 3, to acquire the scientific and research fundamentals of the profession, to meet the program's established learning goals and objectives, and to meet the expectations set forth in the program's mission and goals. In its substantive change for distance education application (submitted August 2022), the program reported that three additional full-time faculty would be hired in addition to adjunct faculty to support the distance education modality. That hiring plan was scheduled to kick off September 2022. The initial observations report in response to the reaccreditation application submitted by the program noted that the program reported nearly 50% growth in the last year with the addition of the satellite program and additional residential students.

Steps to Be Taken:

At the time of the next annual report, the program must provide an update on the hiring plan related to the distance education modality and report any additional hires. The program must provide evidence to demonstrate that the faculty composition is sufficient, given the growth of the program and modalities, to allow students to acquire the knowledge and skills required in Standard 3, to acquire the scientific and research fundamentals of the profession, to meet the program's established learning goals and objectives, and to meet the expectations set forth in the program's mission and goals.

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.