2023 CAA Application - Audiology

Utah State University   See Standard 5.0, page 123, for Student and Program Assessment

General Information & Instructions

Reports submitted to the CAA are major sources of substantiating information about elements of an education program in relation to its compliance with the Standards for Accreditation of Graduate Education Programs in Audiology and Speech-Language Pathology. Programs must report on the continuity and recovery of the program's operations if events occur that significantly interrupt normal institutional operations, as applicable. It is the responsibility of the program director to submit completed reports to the CAA on or before the due date.

Programs are required to submit accreditation review materials by February 1 or August 1, except for programs applying for candidacy status for which applications are scheduled to be submitted January 1 or July 1. Due dates for programs that hold an accreditation status, e.g., accredited, candidate, are assigned based on the dates of the programs' accreditation or candidacy cycles. Accreditation reports must be filed through the on-line reporting system unless otherwise directed.

I. **Entering Responses**

    a. Save often! When entering data, clicking the NEXT button will advance you to the next section of the instrument, however the SAVE feature should be used often to prevent loss of data.

    b. Whenever possible, program responses to questions within this instrument should be ***plain, unformatted* text**. Using other text formatting may cause the system to slow and content may be lost. If content needs to be added from a website, Word document, or other computer application, users should do the following:

        i. Open Notepad or a similar application to create a new text file.

        ii. Copy the desired content from the website, Word document, or other application.

        iii. Paste the copied content into the Notepad text file (this will strip out formatting).

        iv. Copy your now unformatted content from the text file and paste into the report.

        v. Save. Failure to follow these steps will cause the system to freeze and content will be lost.

II. **Reporting Prior Concerns**

    a. You **must** have the previous year's Accreditation Action Report and respond to any concerns from that report in the Annual Report. There is a text box at the start of each section to respond to prior concerns.

    b. When providing supporting evidence to the CAA for Standards and especially prior concerns, refer to the **Document Guidance** resource from the CAA website for tips on how to respond that can be found here:

https://caa.asha.org/siteassets/files/accreditation-standards-documentation-guidance.pdf

III. **Use of Distance Education Technologies**

  a. If your program offered (or is currently offering) coursework via distance education on a temporary basis due to the pandemic *or* if your program has been approved for a permanent distance education modality, your program **must** address institutional policies regarding verification of student identity.

  b. Standard 4.10 states the following:

  - **Standard 4.10: The program must adhere to its institutional policies and procedures to verify that a student who registers for a distance education course or program is the same student who participates in and completes the program and receives the academic credit.**

    - The program must document that the institutional policies regarding verification of a student's identity are followed and implemented and applied consistently.

    - The program must make clear that the identities of students enrolled in a distance education course or program are protected.

      - All programs who utilized distance education technologies, even if on a temporary basis, are required to answer the questions related to distance education.

IV. **Submitting Your Report**

  a. Before submitting:

    i. Review and verify all data reported is accurate and current.

    ii. Ensure that all links to websites are accurate and are working.

  b. **Only Program Directors may submit the report.**

  c. It is understood that any information submitted for the purposes of this evaluation shall be used to determine compliance with CAA Standards; furthermore, non-identifying program data may be analyzed and published in the aggregate in order to further the purpose of the CAA, which is to assure quality in preparation of students in audiology and speech-language pathology to serve the professions and the public.

V. **Additional Resources**

  a. Refer to the following policies regarding report submission and timelines which are outlined in the **Accreditation Handbook** (Chapter XI. EXPECTATIONS OF PROGRAMS). Make sure you are familiar with the rationale, criteria, and timelines for each of these policies.

    i. Requests for Submission Extension (Chapter XI.C)

    ii. Administrative Probation (Chapter XI.D)

    iii. Lapse of Accreditation (Chapter XI.E)

  b. Additional reporting resources may be found on the CAA website (https://caa.asha.org/) and include data

collection worksheets, templates for documents to be uploaded with your CAA report, additional documentation guidance (https://caa.asha.org/siteassets/files/accreditation-standards-documentation-guidance.pdf), and other information about submitting your CAA report.

Institution Description and Authorization

Accreditation Authorization Form

USU_AuD_CAA_application-authorization-form.pdf

Download, complete, and save the **Accreditation Authorization form**, then upload that document to this question.

The institution desires that its graduate education program leading to a master's degree in speech-language pathology or a clinical doctoral degree in audiology be accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) of the American Speech-Language-Hearing Association (ASHA) and hereby applies for an evaluation of this graduate education program. It is understood that the evaluation will be conducted in accordance with the procedures set forth in the (CAA) Accreditation Handbook. The institution agrees to cooperate fully in the evaluation procedures therein described; including furnishing such written information to the CAA as shall be required for the evaluation and arranging of a site visit to the education program.

The institution of higher education verifies that it has conducted a comprehensive self-analysis that demonstrates how the program has met each of the accreditation standards. The results of this analysis are documented in this accreditation application.

The signatures of the President of the institution, or designee, and the Program Director attest to adherence of the conditions stipulated in the attached Accreditation Authorization.

Federal Grant

Has the program been awarded a Federal grant?

Yes

Federal Grant Information

Indicate the Federal grant program, the grant name, and the Federal Award Identification Number (FAIN).

Federal grant program	Grant name	FAIN

Office of Special Education Program 84.325 "Personnel Development to Improve Service and Results for Children with Disabilities"	Personnel Preparation for Audiologists and Speech-Language Pathologists Serving Children Who are Deaf or Hard of Hearing	H325K190017
Office of Special Education Program 84.325 "Personnel Development to Improve Service and Results for Children with Disabilities"	Preparing Personnel to Serve Infants, Toddlers, and Preschool-Age Children with Disabilities	H325K17004

RESPONSE - 1

Indicate the Federal grant program, the grant name, and the Federal Award Identification Number (FAIN).

Federal grant program	Grant name	FAIN
Office of Special Education Program 84.325 "Personnel Development to Improve Service and Results for Children with Disabilities"	Personnel Preparation for Audiologists and Speech-Language Pathologists Serving Children Who are Deaf or Hard of Hearing	H325K190017

RESPONSE - 2

Indicate the Federal grant program, the grant name, and the Federal Award Identification Number (FAIN).

Federal grant program	Grant name	FAIN
Office of Special Education Program 84.325 "Personnel Development to Improve Service and Results for Children with Disabilities"	Preparing Personnel to Serve Infants, Toddlers, and Preschool-Age Children with Disabilities	H325K17004

Modalities

Modality Information and Confirmation

If coursework is offered via <u>distance learning</u> (DE) or <u>satellite</u> campus, then any changes and updates in both residential and DE and/or satellite must be noted throughout the report with respect to all program offerings.

Your response to the following questions could enable additional questions within this report. If you later alter your response to these questions, you risk losing information entered.

Confirm

Distance Education

Are graduate courses for the entry-level graduate program available through distance education?

No

Satellite Location

Is this graduate program or a component of the program offered through a satellite location?

No

Standard 1.0 Administrative Structure and Governance

Standard 1.0 Administrative Structure and Governance

Standard 1.1 Institutional Accreditation

Standard 1.1 Institutional Accreditation

The sponsoring institution of higher education holds current institutional accreditation.

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Requirement for Review:

- The institution of higher education within which the audiology and/or speech-language pathology program is housed must hold institutional accreditation from one of the following institutional accrediting bodies:
    - Middle States Commission on Higher Education;
    - New England Commission of Higher Education;
    - North Central Association of Colleges and Schools, The Higher Learning Commission;
    - Northwest Commission on Colleges and Universities;
    - Southern Association of Colleges and Schools, Commission on Colleges;
    - Western Association of Schools and Colleges, Accrediting Commission for Senior Colleges and Universities.

Findings

No findings provided

Standard 1.1 Prior Concerns

If there were areas of non-compliance or follow-up regarding Institutional Accreditation noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Institutional Accreditation listed in the last Accreditation Action Report

Standard 1.1 Institutional Accreditor

Name of Institutional Accreditor:

Northwest Commission on Colleges and Universities

Standard 1.1 Institutional Accreditor URL

Provide the URL from your Institutional Accreditor's website that specifically shows your institution's accreditation information. You will need to navigate to your institution's page and then provide the URL in the field below:

https://nwccu.org/member-institutions/directory/

Standard 1.1 Institutional Review

Is the institution currently undergoing review by the Institutional Accreditor?

No

Standard 1.1 Consortium Institutional Accreditation

List all institutions participating in the consortium, the institutional accreditation for the participating entity, and which entity(s) will be granting the degree.

Name of Institution	Name of Institutional Accreditor

Program is not part of a consortium

Standard 1.1 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.1

None

Standard 1.2 Degree Granting Authority

Standard 1.2 Degree Granting Authority

The sponsoring institution of higher education must be authorized to provide the program of study in audiology and/or speech-language pathology.

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Requirement for Review:

- The sponsoring institution of higher education must be authorized under applicable laws or other acceptable authority to provide the program of post-secondary education.
- The sponsoring institution of higher education must have appropriate graduate degree-granting authority.

Findings

No findings provided

Standard 1.2 Prior Concerns

If there were areas of non-compliance or follow-up regarding Degree Granting Authority noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Degree Granting Authority listed in the last Accreditation Action Report

Standard 1.2 Initial Accreditation

Is this your program's initial application for accreditation (i.e. you did not go through candidacy, you have not previously held accreditation)?

No, this program has either previously held accreditation or has gone through the candidacy process

Standard 1.2 Degree Authority

Provide documentation that the program has received authorization to provide the program of study from a state agency that has authority for higher education or other authorized entity that has authority for programs of study at the sponsoring institution, OR provide a letter of attestation from the sponsoring institution's board of regents or from a recognized board or panel with this authority. If the program is part of a consortium, provide the appropriate attestation for each entity within the consortium, if different.

Authorization Documentation
Download

RESPONSE - 1

Provide documentation that the program has received authorization to provide the program of study from a state agency that has authority for higher education or other authorized entity that has authority for programs of study at the sponsoring institution, OR provide a letter of attestation from the sponsoring institution's board of regents or from a recognized board or panel with this authority. If the program is part of a consortium, provide the appropriate attestation for each entity within the consortium, if different.

USU_COMDDE Program + Degree Authority_letterJune2023.pdf

Standard 1.2 Degree Granting Authority

Provide documentation that the sponsoring institution of higher education has appropriate graduate degree-granting

authority.

USU_COMDDE Program + Degree Authority_letterJune2023.pdf

Standard 1.2 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.2.

None

Standard 1.3 Mission, Goals and Objectives

Standard 1.3 Mission, Goals, and Objectives

The program has a mission and goals that are consistent with preparation of students for professional practice.

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Requirement for Review:

- The mission statement and the goals of the program (including religious mission, if relevant) must be presented.
- The program must describe how the mission statement and program goals are used to guide decision making to prepare students for entry level into professional practice in audiology or speech-language pathology.

Findings

No findings provided

Standard 1.3 Prior Concerns

If there were areas of non-compliance or follow-up regarding Mission, Goals and Objectives noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Mission, Goals and Objectives listed in the last Accreditation Action Report

Standard 1.3 Program Mission

Provide the mission and goals of the program. If the program is part of a consortium, provide the mission statement and goals for each entity within the consortium.

Our Audiology Graduate Program is committed to educating students to the highest level of quality, advancing awareness and knowledge of typical and disordered processes of communication, and providing clinical and educational practices that effectively meet the communication and academic needs of children and adults with communication differences and disorders. Specifically, we aim to prepare doctor of audiology students to evaluate and treat hearing and balance disorders through education, research, and clinical experiences for individuals throughout the lifespan.

Standard 1.3 Mission Statement

Describe how the program will use the mission and goals statements to guide decision making to prepare students for entry into professional practice in audiology or speech-language pathology.

We fulfill our mission through the core themes of learning, discovery, and engagement:

LEARNING

- Teaching knowledge and skills pertaining to typical and disordered hearing, balance, language, speech, cognition, literacy, and swallowing
- Fostering professional competencies of problem solving and critical thinking; spoken, visual, written, and digital communication; interpersonal skills and teamwork; professional and ethical behavior
- Offering student-centered opportunities for learners of diverse ages, cultures, backgrounds, and locations to further their own educational and professional goals
- Offering graduate professional programs in audiology, deaf education, and speech-language pathology that train effective, dedicated

DISCOVERY

- Conducting research that advances knowledge pertaining to the nature and management of typical and disordered hearing, balance, language, speech, cognition, and swallowing
- Conducting research that improves the training of clinicians, and the implementation of evidence-based practices in deaf education, audiology, and speech-language pathology

- Providing research opportunities and mentoring that develop students into professionals who implement evidence-based decisions, and into scientists and scholars who continue to advance knowledge and improve the professions

ENGAGEMENT

- Offering person-centered clinical and educational services in campus and outreach settings that help maximize communication outcomes and achieve functional goals for individuals and their families in Utah and the inter-mountain west
- Promoting leadership, service, and civic engagement of faculty and students in ways that benefit individuals with communication differences and disorders within local, state, national, and global communities

Standard 1.3 Credentials

For which credentials are students prepared? Select all that are relevant to the program's mission and goals.

Certificate of Clinical Competence (CCC)

State licensure

Standard 1.3 State Licensure

Specify States for State Licensure:

Utah

Standard 1.3 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.3.

None

Standard 1.4 Evaluation of Mission and Goals

Standard 1.4 Evaluation of Mission and Goals

The program faculty must regularly evaluate the congruence of program and institutional missions and the extent to which the goals are achieved.

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Requirement for Review:

- The program monitors its mission and goals to ensure that they remain congruent with those of the institution.
- The program periodically reviews and revises its mission and goals.
- The program systematically evaluates its progress toward fulfillment of its mission and goals.

Findings

No findings provided

Standard 1.4 Prior Concerns

If there were areas of non-compliance or follow-up regarding the Evaluation of Mission and Goals noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

 There were no citations regarding the Evaluation of Mission and Goals listed in the last Accreditation Action Report

Standard 1.4 Institution's Mission

Provide the mission statement of the institution and the URL where this may be found if published on the institution's website. If the program is a consortium, include information for all participating entities.

"Utah State University is a premier land- and space-grant institution committed to excellence, access, and inclusion" is the university's mission. It can be found here (along with links to USU's more detailed strategic plan): https://www.usu.edu/president/mission-statement/#:~:text=We%20empower%20all%20people%20to,involvement%2C%20innovation%2C%20and%20impact.

Standard 1.4 Institutional Goals

What mechanisms are used by the program to regularly evaluate the congruence of the mission and goals of the program and the institution? (Select all that apply)

Discuss and review at faculty meetings

Discuss and review at faculty retreat

Compare program goals with institutional goals

Develop program goals based on institutional goals

Discuss program goals with institution administration

Standard 1.4 Program Goals

What mechanisms are used by the program to regularly review and revise its mission and goals? (Select all that apply)

Establish measurable outcomes for the goals

Monitor achievement of outcomes and progress toward goals

Discuss and review at faculty meetings

Discuss and review at faculty retreat

Standard 1.4 Evaluate Mission and Goals

Describe how the program will systematically evaluate its progress toward fulfilling its mission and goals.

The program evaluates progress towards fulfilling the mission and goals by systematically gathering data, monitoring, and discussing program data at the annual retreat. They also critically consider events and items that arise each year and bring issues and proposals to the division faculty to make principled adjustments as needed throughout the year during audiology division faculty meetings.

Standard 1.4 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.4.

None

Standard 1.5 Program Strategic Plan

Standard 1.5 Program Strategic Plan

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

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Requirement for Review:

- The plan must be congruent with the mission and goals of the program and the sponsoring institution, have the support of the administration, and reflect the role of the program within its community.
- The plan identifies 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.
- An executive summary of the strategic plan or the strategic plan must be shared with faculty, students, staff, alumni, and other interested parties.

Findings

No findings provided

Standard 1.5 Prior Concerns

If there were areas of non-compliance or follow-up regarding the Strategic Plan noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding the Strategic Plan listed in the last Accreditation Action Report

Standard 1.5 Strategic Plan Process

Describe the process for creating, implementing, and evaluating the program's strategic plan.

The audiology faculty assesses the division's strategic plan's goals, measures, and outcomes annually during the division retreat each spring. This process typically involves group discussions and brainstorming rooted in the division's, university's, and department's missions. This process yields the audiology division's goals along with their: action steps for achievement (and the responsible parties), priorities, and alignment with the department's and university's missions/plans. Our faculty have nearly-monthly meetings during which we monitor and discuss our program's outcomes/key performance measures. During these meetings faculty are always ready to revise our action steps/implementation of the plan. We report on the final academic year's outcomes (and evaluate our success) during our division's annual retreat each spring.

Standard 1.5 Method for Mission

Describe the methods used to assure the congruence of the program's strategic plan with the mission and goals of the program and the sponsoring institution.

In addition to the continuous monitoring by our audiology division's faculty and chair, we work closely with Utah State University's Office of Analysis, Assessment and Accreditation (AAA). AAA help establish systems and measures that facilitate and inform continuous improvement of the audiology division as well helping ensure congruence across our department, graduate program and the university at large.

Standard 1.5 Method for Plan in Community

Describe the methods used to ensure that the strategic plan reflects the role of the program within its community.

Faculty meet and discuss the plan's goals, outcome measures, and accompanying data annually during our audiology division retreat to ensure the strategic plan reflects our audiology program's role in the university and the surrounding community at large.

Standard 1.5 Strategic Plan and Goals

Describe how the disseminated plan is regularly updated to reflect the results of the ongoing evaluation of the plan.

Every 5 years the audiology faculty retrospectively assess the division's strategic plan's goals and measures, as well as the degree to which they reflected/fostered the university's and department's missions. The plan's goals and outcomes are revised as the faculty deems necessary. In the upcoming AY 2023-2024, the division plans to have an extensive discussion and revision of the division's strategic plan and goals to better align with Utah State University's recently released "Aggie Action 2028: Utah State University Strategic Plan".

Standard 1.5 Executive Summary of Plan

Provide an executive summary of the strategic plan that is shared with faculty, students, staff, alumni, and other interested parties.

To meet the land grant mission of Utah State University, the Emma Eccles Jones College of Education & Human Services, and the Department of Communicative Disorders & Deaf Education plans to implement the following 5-year strategic plan to address: national reputation, growth, and program quality.
AUDIOLOGY DIVISION
Goal: Maintain or increase the number of applicants for the AuD program annually, through recruiting efforts targeting

universities

across the United States.

Outcome measure: Number of applicants in the annual spring application.

Goal: 100% of AuD students will present outcomes from their clinical research projects at a research conference.

Outcome measure: Count of presentations

Goal: 50% of AuD students will publish their research.

Outcome measure: Count of publications

Goal: Maintain or increase total grant dollars from internal and external sources to support our research, teaching, and service.

Outcome measure: Grant dollar annual total

Goal: Maintain or increase the percentage of students who receive funding

Outcome measure: Percentage of students

Standard 1.5 Plan Accessibility

Describe how the executive summary of the strategic plan is disseminated to faculty, staff, alumni, and other interested parties.

The executive summary of the strategic plan is primarily distributed via USU's department of Communicative Disorders and Deaf Education website. It is also distributed to USU faculty and staff via email and shared via Box (a secure cloud-content management system used across the university).

Standard 1.5 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.5.

None

Standard 1.6 Program Authority and Responsibility

Standard 1.6 Program Authority and Responsibility

The program's faculty has authority and responsibility for the program.

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Requirement for Review:

- The institution's administrative structure demonstrates that the program's faculty is recognized as the body that can initiate, implement, and evaluate decisions affecting all aspects of the professional education program, including the curriculum.
- The program faculty has reasonable access to higher levels of administration.

Findings

No findings provided

Standard 1.6 Prior Concerns

If there were areas of non-compliance or follow-up regarding Program Authority and Responsibility noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Program Authority and Responsibility listed in the last Accreditation Action Report

Standard 1.6 Organizational Chart

Provide an organizational chart that demonstrates how the program fits into the administrative structure of the institution.

Standard 1.6 Organizational Chart_USU_June2023.pdf

Audiology is one of 3 divisions in the department of Communicative disorders and Deaf Education (i.e., audiology, speech-language pathology, and deaf education). We are housed within USU's Emma Eccles Jones College of Education and Human Services.

Standard 1.6 Independent Dept Status

If your program does not have independent departmental status, describe how the program will maintain authority and responsibility for the program within the structure or policies and procedures of the institution.

Our AuD program maintains authority and responsibility within the structure of USU's Department of Communicative Disorders and Deaf Education. Audiology is one of 3 divisions in our department (i.e., audiology, speech-language pathology, and deaf education). There are checks and balances in place across the department and divisions. Each division

has its own chair. Dr. Brittan Barker is the chair of the audiology division. She is responsible for overseeing and coordinating the audiology graduate program as well as governing its students and faculty. It is also her responsibility to ensure that the division is aligned with the department policies and USU at large in collaboration with Dr. Karen Muñoz, department head.

Standard 1.6 Administratively Housed

Where is the program housed administratively (e.g., College of Education, School of Medicine)?

Other

Standard 1.6 Administratively Housed "Other"

Specify Other:

College of Education and Human Services

Standard 1.6 Program Authority

Describe how the program faculty and instructional staff have authority and responsibility to initiate, implement and evaluate substantive decisions affecting all aspects of the professional education program, including curriculum.

The audiology division faculty each play a theoretically equal role in the audiology program. The division chair works to organize and prioritize the program's actions and goals while guiding the team of faculty. However both graduate and clinical faculty play active roles in the division when it comes to decision making, implementation, and evaluation. This includes everything from self-evaluations, curriculum development, strategic planning, direct student care/instruction, and clinical supervision/placements.

Standard 1.6 Faculty Access to Admin

Describe the ways in which the faculty have access to higher levels of administration.

Faculty have access to higher levels of administration through various means: two faculty members are part of faculty senate, the
department head meets monthly with the dean of the college and has phone and email access to the provost office, and a college
department head is part of an executive group that meets monthly with the provost. In addition, individual faculty can directly communicate with the department head about any issue. If the results are not satisfactory, they can contact the

Dean. If that does not work out, they can contact the Provost.

Standard 1.6 Department Chair

If applicable, discuss the role of the department chair over the program director/coordinator and any shared responsibilities regarding decisions about faculty, student admissions, curriculum and budget.

The department head is directly responsible for decisions/actions regarding faculty and budget. The division chair does not have administrative power regarding these responsibilities. However, the department head maintains open and explicit lines of communication with the division chair regarding input on both topics. For example, the department head might ask for feedback regarding a faculty member's recent student challenges or a course's funding priorities for the upcoming academic year. The division chair takes lead responsibility when it comes to the audiology program's student admissions and curriculum. This includes the complete student admissions process from recruiting to distribution of the final acceptance letters. Curriculum responsibilities of the division chair include faculty teaching assignments, scheduling, classroom allocation, CAA standard adherence, insurance of coordination of classes and clinics, university-wide course approval, and USU's annual catalog updates.

Standard 1.6 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.6.

None

Standard 1.7 Program Director

Standard 1.7 Program Director

The individual responsible for the program of professional education seeking accreditation holds a graduate degree with a major emphasis in speech-language pathology, in audiology, or in speech, language, and hearing science and holds a full-time appointment in the institution.

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Requirement for Review:

- The individual designated as program director holds a graduate degree with a major emphasis in speech-language pathology, in audiology, or in speech, language, and hearing science
- The individual designated as program director holds a full-time appointment in the institution.

Findings

No findings provided

Standard 1.7 Prior Concerns

If there were areas of non-compliance or follow-up regarding the Program Director noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding the Program Director listed in the last Accreditation Action Report

Standard 1.7 Program Director

Provide the name of the individual designated as program director below.

Name of Program Director:	Brittan A. Barker, Ph.D.

☑ The program understands that it must notify the CAA of program director changes as soon as possible, but no later than 30 days after the change, including temporary appointments and sabbaticals. Failure to notify the CAA Accreditation Office within the timelines may jeopardize the program's accreditation status.

Information about reporting changes can be found on the CAA website at https://caa.asha.org/reporting/reporting-changes/

Standard 1.7 Program Director Date

Date appointed:

09/09/2021

Standard 1.7 New Program Director

Is the program director new since submission of the last CAA report?

No

Standard 1.7 Program Director Interim

If this program director is serving in an interim capacity, describe the program's specific plans for appointing a permanent program director.

This Program Director has a permanent appointment

Standard 1.7 Program Director Example

Describe how the individual responsible for the program effectively leads and administers the program. Include examples of contributions made by this individual to support your explanation.

The audiology division chair is responsible for program oversight and facilitates an iterative process of monitoring program implementation and the effectiveness of changes made to the program. Mechanisms to do this include holding monthly meetings with faculty to monitor student progress, review program outcomes, and plan for steps needed to complete upcoming program tasks. The program director communicates with the department head as needed in planning and problem-solving issues that arise. An example of a leadership contribution was a recent process to review the curriculum and then make changes to adjust programming. Outcomes from this process included adjusting course sequence, modifying a seminar course to shift its focus to implementation science, adding a lab for electrophysiology, and adding a 1-credit supervision course for third-year AuD students. Student responses to these changes during this academic year were positive, and the division chair plans to continue to monitor the curriculum, with a focus on purposeful integration of DEI into the curriculum this upcoming year.

Standard 1.7 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.7.

None

Standard 1.8 Equitable Treatment

Standard 1.8 Equitable Treatment

The institution and program must comply with all applicable laws, regulations, and executive orders prohibiting discrimination towards students, faculty, staff, and persons served in the program's clinics. This includes prohibitions on discrimination based on any category prohibited by applicable law but not limited to age, citizenship, disability, ethnicity, gender identity, genetic information, national origin, race, religion, sex, sexual orientation, and veteran status.

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Requirement for Review:

- The institution and program must comply with all applicable federal, state, and local laws, regulations, and executive orders prohibiting discrimination, including laws that prohibit discrimination based on age, citizenship, disability, ethnicity, gender identity, genetic information, national origin, race, religion, sex, sexual orientation, and veteran status.
- The program must adhere to its institutional policies and procedures—including non-harassment policies, internal complaint procedures, and appropriate educational programs—to ensure that the program complies with all applicable nondiscrimination statutes and that all staff, faculty, and students are made aware of the policies and the conduct they prohibit.
- The program must maintain, as relevant, a record of internal and external complaints, charges, and litigation alleging violations of such policies and procedures and ensure that appropriate action has been taken.

Findings

No findings provided

Standard 1.8 Prior Concerns

If there were areas of non-compliance or follow-up regarding Equitable Treatment noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Equitable Treatment listed in the last Accreditation Action Report

Standard 1.8 Complaint Records

Describe the mechanism(s) used to maintain a record of internal and external complaints, charges, and litigation alleging violations of policies and procedures related to non-discrimination.

Records of complaints and concerns are monitored kept by the Audiology Division Head in the USU Box server. The Department Head has access to all the Audiology Division's administrative files. If the complaints and concerns are not resolved at the level of the Audiology Division, they are escalated to the Department Head. Records at this level are kept in the Department Head's administrative Box folders. Concerns that go above that level, and anything that turns into charges and litigation are kept in high-level administrative Box folders. Students, faculty, and staff can submit complaints about discrimination directly to the USU Office of Equity at https://www.usu.edu/equity/non-discrimination.

Standard 1.8 Corrective Action

Describe the program's policy for ensuring that appropriate corrective action is taken when violations of compliance with non-discrimination laws and regulations occur.

The department works with the Office of Equity, Dean and Provost offices to ensure appropriate corrective action is taken.

Standard 1.8 Student Communication

How is information regarding equitable treatment communicated to students? (Select all that apply)

Student handbook

Website

Other

Standard 1.8 Student Communication "Website URL"

Website URL:

https://www.usu.edu/equity/non-discrimination

Standard 1.8 Student Communication "Other"

Specify Other:

All graduate students (faculty and staff) are required to complete annual trainings held by USU's Office of Equity regarding equitable treatment.

Standard 1.8 Faculty and Staff Communication

How is information regarding equitable treatment communicated to <u>faculty and staff</u>? (Select all that apply)

Departmental/program meetings

Employee orientation

Website

Other

Standard 1.8 Faculty and Staff Communication "Website URL"

Website URL:

https://www.usu.edu/equity/non-discrimination

Standard 1.8 Faculty and Staff Communication "Other"

Specify Other:

All graduate students (faculty and staff) are required to complete annual trainings held by USU's Office of Equity regarding equitable treatment.

Standard 1.8 Clinic Communication

If your program has a clinic, how is information regarding equitable treatment communicated to <u>clients</u>? (Select all that apply.)

Brochures

Posted signage

Website

Standard 1.8 Clinic Communication "Website URL"

Website URL:

https://cehs.usu.edu/scce/client-resources [located mid-page: under "What is the Sorenson Center's Non-discrimination Policy?"]

Standard 1.8 Complaint Process

Describe the process used by the program to ensure adherence to institutional policies related to non-discrimination, non-harassment, internal complaint procedures, and training to ensure that all staff, faculty and students are made aware of

the policies and the conduct they prohibit.

Again, all graduate students (faculty and staff) are required to complete annual trainings held by USU's Office of Equity regarding equitable treatment. During AuD graduate student orientation, students also receive a presentation from the Division Chair to ensure our department/university's behaviors expectations are clear as well as the mechanisms for students to file complaints if needed. Complaints are taken very seriously and receive immediate attention and Department administrators do not hesitate to seek guidance from higher levels of authority.

Standard 1.8 Exemption Request

Have you ever requested an exemption from any federal anti-discrimination provisions based on your institution's religious tenets?

No

Standard 1.8 Exemption Qualification

If you have not requested an exemption from federal anti-discrimination provisions, do you believe you qualify for such an exemption? If so, clarify which provisions and for what reasons.

N/A

Standard 1.8 Clarifying Information

Use the text box provided to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.8.

During AY 2022-2023 our program began an intentional effort to increase faculty knowledge of diversity, equity, and inclusion. This effort includes frequent, division-wide educational opportunities and discussions when it comes to equity--particularly regarding the graduate students we educate and the clients we serve. The efforts will continue into the 2023-2024 AY with the intention for developing clear action steps that emerge from this past year's education.

Standard 1.9 Public Information

Standard 1.9 Public Information

The program provides information about the program and the institution to students and to the public that is current, accurate, and readily available.

<div style="border:1px solid #666; padding:8px; display:inline-block;">--</div>

Requirement for Review:

- The program must publish to the general public on its website the program's CAA accreditation status, in accordance with the language specified in the Public Notice of Accreditation Status in the CAA *Accreditation Handbook*, as required under federal regulations. This must be displayed in a clearly visible and readily accessible location. Additional references to the program's accreditation status must be accurate but need not include all components of the accreditation statement.

- 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 must make student outcome measures available to the general public by posting the results on the program's website via a clearly visible and readily accessible link.

- The program must make public the number of expected terms for program completion for full-time and part-time students.

- At a minimum, the following results of student outcome measures for the most recently completed 3 academic years must be provided:

  - number and percentage of students completing the program within the program's published time frame for each of the 3 most recently completed academic years,

  - number and percentage of program test-takers who pass the *Praxis*® Subject Assessment examination for each of the 3 most recently completed academic years (programs need report only the results once for test-takers who take the test more than one time in the reporting period),

- Student outcome measures must be labeled "Student Achievement Data" or "Student Outcome Data."

  - If both the audiology and the speech-language programs are accredited, separate data tables must be provided for each program.

  - If the program has a distance education component or a satellite campus, the student outcome data must be presented for each modality.

Findings

No findings provided

Standard 1.9 Prior Concerns

If there were areas of non-compliance or follow-up regarding Public Information noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Public Information listed in the last Accreditation Action Report

Standard 1.9 Accreditation Statement

The CAA requires programs to disclose accurate and complete information on their respective websites about their accreditation status to include the specific degree program holding the accreditation status and the full name, address, and phone number of the accrediting agency: Council on Academic Accreditation in Audiology and Speech-Language Pathology.

See chapter XII.C *Public Notice of Accreditation Status* within the Accreditation Handbook for guidance and examples of applicable accreditation statements.

Be sure to confirm the current Accreditation Statement is written in accordance with the Accreditation Handbook, **then** provide the URL where this information can be found:

https://cehs.usu.edu/comdde/graduate/doctor-of-audiology [scroll to bottom]

Standard 1.9 Checklist for Programs

The CAA has developed a checklist for programs to use related to Standard 1.9 – Public Information:

- Are the student data labeled as "Student Achievement Data" or "Student Outcome Data"?
- Are the outcome data separated by professional area and modality (if applicable)?
- Do you have the number AND percentage for each of the required outcomes listed?
- Do the data reflect the last 3 mostly recently completed years?
- Are the specific academic years listed, so that timelines are clear to a potential student?
- Do you have written policies and procedures for updating the website content at least annually? If so, where is that documentation stored for faculty/staff to reference? Does it specify *when* the program data will be updated?

☑ Check this box to confirm that the above items have been reviewed prior to answering all remaining questions below.

Standard 1.9 Praxis URL

Provide the URL where the Praxis pass rates are located on the program's website.

https://cehs.usu.edu/comdde/assessment/student-achievement-data/accreditation-statement

Standard 1.9 Completion URL

Provide the URL where the completion rates are located on the program's website.

https://cehs.usu.edu/comdde/assessment/student-achievement-data/program-completion-rate

Standard 1.9 Student Achievement Posted

In addition to publishing these student achievement data (Praxis pass rate, program completion rates, and program's graduation rates) on the program's website, does the program publish student achievement information anywhere else? (Select all that apply)

Not applicable

Standard 1.9 Public Info Update

When is information about the program and institution updated?

Annually

Standard 1.9 Process for Public Info

What is the process for maintaining the currency and accuracy of public information? (Select all that apply)

Program director reviews for currency and accuracy
Graduate coordinator reviews for currency and accuracy

Standard 1.9 Responsible Party

Who is responsible for ensuring information is available about the program and the institution to students and to the public? (Select all that apply)

Graduate coordinator
Program director
Other

Standard 1.9 Responsible Party "Other"

Specify Other:

The institution has countless people/offices responsible for ensuring information is available about the institution to students and to the public.

Standard 1.9 Public Info Access

How is public information about your program accessed and *readily available*? (Select all that apply)

Catalogs – online
Program websites

Standard 1.9 Public Info Access "Catalogs – online"

Provide URL:

https://catalog.usu.edu/preview_program.php?catoid=38&poid=36721

Standard 1.9 Public Info Access "Program websites"

Provide URL:

https://cehs.usu.edu/comdde/graduate/doctor-of-audiology

Standard 1.9 Program Completion Made Public

Describe how information regarding the number of expected terms for program completion (full-time, part-time, different delivery modalities, etc.) is made available to the public and to students. If it is available on the program's website, include the specific URL.

This information is described both in the USU Catalog and the Audiology websites listed above:
 https://catalog.usu.edu/preview_program.php?catoid=38&poid=36721 and
 https://cehs.usu.edu/comdde/graduate/doctor-of-audiology

Standard 1.9 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's

compliance with Standard 1.9.

None

Standard 2.0 Faculty

Standard 2.0 Faculty

Standard 2.0 Faculty Roster and Details

Standard 2.0 Faculty Roster and Details

Provide information about individuals who are currently employed by the university and contribute to the graduate program for which you are seeking accreditation.

Visit the CAA website's Program Resources webpage to download the Faculty Roster Summary Worksheet. Once this worksheet is completed, you will be able to upload it below.

For each faculty listed on the roster summary, a Faculty Data Collection Worksheet must be downloaded and completed. Each completed faculty data worksheet must be uploaded to the Documents section of your program record in Fabric. This can be accomplished by logging into the Armature Fabric site and selecting Organization Representative on the *Choose your Persona* screen. Once you select your program, or are automatically brought to the organization Home tab, you will click the Documents tab. You will then click on the Faculty Data Collection Worksheets folder in the folder library in order to upload each worksheet to that folder.

USU Audioogy_faculty-roster-summary-worksheet_AY22-23.xlsx

Standard 2.0 Faculty Roster and Details Confirmation

Faculty data collection document(s) have been uploaded to the "Faculty Data Collection Worksheets" folder under the Documents tab in the organization record, for each faculty member listed in the Faculty Roster Summary Worksheet.

☑ Check box to confirm

Standard 2.1 Faculty Sufficiency – Overall Program

Standard 2.1 Faculty Sufficiency – Overall Program

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
    - the number of individuals in and composition of the group that delivers the program of study;
    - the distribution of faculty in terms of the number of full-time and part-time individuals who hold academic doctoral degrees, clinical doctoral degrees, and master's degrees;
    - 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;
    - how the faculty composition ensures that the elements (classes and clinical practica) of the program are offered on a regular basis so that students can complete the program within the published time frame.

Findings

No findings provided

Standard 2.1 Prior Concerns

If there were areas of non-compliance or follow-up regarding Overall Program Faculty Sufficiency noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Overall Program Faculty Sufficiency listed in the last Accreditation Action Report

Standard 2.1 Define FT and PT Student

Provide the institution's definition of full-time and part-time student.

A full-time graduate student is one enrolled in at least 9 credit hours; a part-time graduate student is one enrolled in 8-1 credit hours.

Standard 2.1 Faculty Changes

Have there been any faculty changes since your last report to the CAA?

Yes

Standard 2.1 Faculty Changes Table

Faculty Name	Status	Courses Taught/Assigned	Effective Date
Tanner Price	New and replaced former faculty member	COMD 7000 – Implementation Science Seminar COMD 7050 – Introduction to the Field of Audiology	07/05/2022
Aryn Kamerer	New and replaced former faculty member	COMD 7310 Psychoacoustics & Instrumentation COMD 7380 Advanced Audiology COMD 7490 Medical Aspects of Audiology COMD 7860 Practice Management	08/15/2022

RESPONSE - 1

Faculty Name	Status	Courses Taught/Assigned	Effective Date

| Tanner Price | New and replaced former faculty member | COMD 7000 – Implementation Science Seminar
COMD 7050 – Introduction to the Field of Audiology | 07/05/2022 |

RESPONSE - 2

Faculty Name	Status	Courses Taught/Assigned	Effective Date
Aryn Kamerer	New and replaced former faculty member	COMD 7310 Psychoacoustics & Instrumentation COMD 7380 Advanced Audiology COMD 7490 Medical Aspects of Audiology COMD 7860 Practice Management	08/15/2022

Standard 2.1 Residential Enrollment

What is the total number of students currently enrolled in the residential component of the CAA accredited graduate education program?

Student Status	Current Report	Prior Report	Percent Change
Full-time	24	23	4.35%
Part-time	1	0	
Total	25	23	8.70%

Standard 2.1 Enrollment Totals

Percentage change of enrollment across all modalities

% Change Full-time	4.35%
% Change Part-time	

Standard 2.1 Enrollment Increase

If student enrollment has increased 50% or more since last year for any modality (residential, distance education,

satellite/branch campuses), explain steps taken by the program to ensure:

- Sufficient faculty

- Sufficient financial and other resources

- Students meet student outcome measures (Praxis pass rates, program completion rates)

- Students have access to client/patient base that is sufficient to achieve the program's stated mission and goals and includes a variety of clinical settings, client/patient populations, and age groups.

- Program mission and goals are met

- Long-term stability and quality programming

Enrollment did not increase by 50% or more in the last year

Standard 2.1 Undergraduate CSD Program

Do you offer an undergraduate program in the field of Communication Sciences and Disorders (CSD)?

Yes

Standard 2.1 Undergraduate CSD Program Table

Complete the table with your total enrollment for Undergraduate CSD degrees.

Degree Program	Current Total Enrollment	Full-time Enrollment	Part-time Enrollment
BA/BS in Communicative Disorders and Deaf Education	468	280	188

RESPONSE - 1

Complete the table with your total enrollment for Undergraduate CSD degrees.

Undergraduate Degree (e.g.BA,BS,etc)	Current Total Enrollment	Full-time Enrollment	Part-time Enrollment
BA/BS in Communicative Disorders and Deaf Education	468	280	188

Standard 2.1 Graduate Degrees Offered

Does your department offer any other graduate programs in addition to the one you are currently reporting on?

Yes

Standard 2.1 Graduate Program Table

List all other graduate programs offered in your department, in addition to the one you are currently reporting on:

Degree Program	Current Total Enrollment	Full-time Enrollment	Part-time Enrollment
MS/MA in Communicative Disorders + Deaf Education with a specialization in Speech-Language Pathology	41	41	0
MS in Communication Sciences, non-clinical degree	1	1	0
PhD in Developmental Disabilities (specialization in audiology and SLP available); interdisciplinary program housed in Department of Special Education and Rehabilitation Counseling	1	1	0
PhD in Neuroscience (specialization in audiology and SLP available); interdisciplinary program housed in Department of Psychology	1	1	0

RESPONSE - 1

List all other graduate programs offered in your department, in addition to the one you are currently reporting on:

Degree Program	Current Total Enrollment	Full-time Enrollment	Part-time Enrollment
MS/MA in Communicative Disorders + Deaf Education with a specialization in Speech-Language Pathology	41	41	0

RESPONSE - 2

List all other graduate programs offered in your department, in addition to the one you are currently reporting on:

Degree Program	Current Total Enrollment	Full-time Enrollment	Part-time Enrollment
MS in Communication Sciences, non-clinical degree	1	1	0

RESPONSE - 3

List all other graduate programs offered in your department, in addition to the one you are currently reporting on:

Degree Program	Current Total Enrollment	Full-time Enrollment	Part-time Enrollment
PhD in Developmental Disabilities (specialization in audiology and SLP available); interdisciplinary program housed in Department of Special Education and Rehabilitation Counseling	1	1	0

RESPONSE - 4

List all other graduate programs offered in your department, in addition to the one you are currently reporting on:

Degree Program	Current Total Enrollment	Full-time Enrollment	Part-time Enrollment
PhD in Neuroscience (specialization in audiology and SLP available); interdisciplinary program housed in Department of Psychology	1	1	0

Standard 2.1 Adjunct Reliance

Provide the program's rationale for reliance on adjunct faculty.

The program does not have adjunct faculty

Standard 2.1 Sufficient Methods

Describe the methods that the program uses to ensure that the number of individuals in and the composition of the group that delivers the program of study are sufficient to allow students to:

Acquire the knowledge and skills in sufficient breadth and depth as required in Standard 3 and meet the expected student learning outcomes

The audiology program ensures that the number and composition of the instructional team are sufficient to facilitate student learning and meet the required breadth and depth of knowledge and skills. This is accomplished by maintaining an adequate ratio of faculty to students, employing qualified and experienced faculty members with expertise in relevant areas, and providing appropriate support staff. Regular evaluation and assessment of faculty performance and

qualifications help ensure that students receive the necessary breadth and depth of instruction to meet expected learning outcomes.

Acquire the scientific and research fundamentals of the profession including evidence-based practice

There are sufficient research-intensive PhD/EdD faculty teaching graduate-level AuD courses. Additionally, these faculty engage in 1-on-1 mentorship of all AuD students during their 2-year-long clinical research projects (CRP). The end-goal of each CRP is a manuscript eligible for publication in a peer-reviewed journal. The clinical faculty in this research-intensive (R01) institution are familiar with science and research applications to clinical practice, and guide students in making evidence-based decisions. Clinical faculty also serve on students' CRP committees. Finally, all audiology graduate students and faculty participate in a weekly 1-hour course, COMD 7000: implementation science, during which we collaboratively discuss researcher articles, clinical cases, and, recent developments within the field (e.g., OTC HAs) in the context of implementation science.

Meet the program's established learning goals and objectives

The number and composition of the faculty in audiology allow us to meet the established learning goals and objectives of the audiology program. We maintain a faculty-to-student ratio that allows for to student to receive personalized instruction, supervision, and research mentoring. Furthermore, the expertise in hearing and balance across faculty members (along with their diverse range of clinical and research experiences) facilitates our ability to meet the AuD program's learning goals and objectives. The program regularly assesses the adequacy (and utilization) of the faculty group to ensure that students receive the necessary support and guidance to achieve the program's learning goals and objectives in audiology.

Meet other expectations set forth in the program's mission and goals

The program ensures that the number and composition of the audiology faculty are sufficient to enable students to meet the mission of educating audiology ready for entry-level employment across the scope of practice. This is achieved by maintaining a faculty-to-student ratio that allows for personalized instruction, expertise in audiology among faculty members, and a diverse range of clinical and research experiences. Again, the program regularly assesses the adequacy (and utilization) of the faculty group to ensure that students receive the necessary support and guidance to achieve the program's learning goals and objectives in audiology.

Complete the program within the published timeframe

The audiology division ensures that the number and composition of the graduate student cohorts are sufficient to

enable students to complete the program within the published timeframe through several methods. These include careful planning of curriculum/course offerings, a variety of on- and off-site clinical education experiences, and supportive clinical externships. We work to ensure effective faculty-student communication and continuous monitoring of students' progress via our Graduate Program Coordinator. Students are also provided with detailed documents (including a program of student independently completed during orientation) in personalized digital folders so that they can simultaneously monitor their progress. The program maintains an appropriate faculty-to-student ratio to provide timely guidance and the talents and efforts of our experienced externship coordinator to obtain sufficient externship sites for all our campus and distance students both facilitated timely program completion. Additionally, proactive academic advising, explicitly communicated program requirements, and efficient resource allocation contribute to students' ability to successfully complete the program within the designated timeframe.

Standard 2.1 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 2.1.

None

Standard 2.2 Faculty Sufficiency – Institutional Expectations

Standard 2.2 Faculty Sufficiency – Institutional Expectations

The number, composition, and workload of all full-time faculty who have responsibility in the graduate program are sufficient to allow them to meet expectations with regard to teaching, research, and service of the sponsoring institution.

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Requirement for Review:

- The program must demonstrate that all faculty who have responsibility in the graduate program and have obligations to provide teaching, research, and service as part of their workload
    - are accessible to students,
    - have sufficient time for scholarly and creative activities,
    - have sufficient time to advise students,
    - have sufficient time to participate in faculty governance,
    - have sufficient time to participate in other activities that are consistent with the expectations of the sponsoring institution.
- The program must demonstrate that all faculty who have responsibility in the graduate program and have obligations to provide clinical education and service as part of their workload
    - are accessible to students,
    - have sufficient time for scholarly and creative activities,
    - have sufficient time to advise students,
    - have sufficient time to participate in faculty governance,
    - have sufficient time to participate in other activities that are consistent with the expectations of the sponsoring institution.
- The program must demonstrate that faculty who are tenure eligible have the opportunity to meet the criteria for tenure of the sponsoring institution.
- The program must demonstrate that faculty who are eligible for promotion have the opportunity to meet the criteria for promotion of the sponsoring institution.
- The program must demonstrate that faculty who are eligible for continuing employment have the opportunity to meet the expectations for continued employment of the sponsoring institution.

Findings

No findings provided

Standard 2.2 Prior Concerns

If there were areas of non-compliance or follow-up regarding Institutional Expectations for Faculty Sufficiency noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Institutional Expectations for Faculty Sufficiency listed in the last Accreditation Action Report

Standard 2.2 Workload Formula

What is the institution's formula for assigning faculty workload.

USU's personalized role statements indicate faculty teaching load. Standard research faculty in audiology's workload is 50% research, 45% teaching, and 5% service. That translates into 4, 3-credit courses per 9-month year. As the research allotment increases or decreases, teaching credit hours decrease or increase. For clinical faculty who teach (in the classroom and/or via clinical supervision), 95% teaching, and 5% service. The course workload is 24 credits per year.

Standard 2.2 Workload Exceptions

Describe any exceptions to the institution's policy for assigning faculty workload that are currently being employed. Provide the rationale for making this exception.

Faculty workloads may vary further with resources and specific situations. Typically, new faculty receive a 1-course release in their first year. Faculty may buy-out a course with grant funds, depending on the grant and department instructional resources.
Some administrative duties are classified as teaching within role statements, such as those of this Audiology Division (Program) Director. For this position, the administrative work is considered equal to one academic course.

Standard 2.2 Methods for Faculty

Describe the methods that the program uses to ensure that faculty (including adjuncts) who have responsibility in the graduate program and who have obligations to provide teaching, research, and service as part of their workload:

Are accessible to students
Faculty teach graduate classes in person and are required to hold weekly office hours. Students can email or phone faculty directly or message them via the learning management system of Canvas. The Department Head meets with the program's graduate student representatives at least once per semester. Student course evaluations and department surveys of student well-being are used to check on possible issues. Finally, the Audiology Division Head meets with each cohort of AuD students (a minimum) of 1 time each semester.

Have sufficient time to advise students (if required)
Advising students (outside of the research mentor context) is not required of audiology faculty. This task is taken on by the graduate program coordinator in our department.
Have sufficient time to pursue scholarly and creative activities, and participate in faculty governance and other activities that are consistent with the expectations of the sponsoring institution
Research faculty are allotted 50% time for research and 5% time for service. Thus, it is each faculty's responsibility to use their allotted time as intended (i.e. participate in scholarly activities and/or services such as faculty governance).

Standard 2.2 Methods for Clinical Faculty

Describe the methods that the program uses to ensure that faculty (including adjuncts) who have responsibility in the graduate program and who have <u>obligations to provide clinical education and service</u> as part of their workload:

Are accessible to students
Clinical faculty teach graduate classes and provide clinical care in person. They required to hold weekly office hours. Clinical faculty also debrief/meet-up with students to discuss their patients weekly. Students can email or phone faculty directly or message them via the learning management system of Canvas. Students contact the Audiology Clinic Director if there are issues with accessibility; the next step would be to reach out to the Audiology Division Chair.
Have sufficient time to advise students (if required)
Advising students (outside of the research mentor context) is not required of audiology faculty. This task is taken on by the graduate program coordinator in our department.
Have sufficient time to pursue scholarly and creative activities, and participate in faculty governance and other activities that are consistent with the expectations of the sponsoring institution
Clinical faculty are allotted 95% time for teaching/clinical supervision and 5% time for service. Thus, it is each faculty's responsibility to use their allotted time as intended (i.e. participate in scholarly collaborations and/or service, such as faculty governance).

Standard 2.2 Tenure Process

Describe the processes that the program uses to ensure that tenure-eligible faculty have the opportunity to meet the

criteria for tenure of the sponsoring institution.

Tenure-eligible faculty at USU have a number of support systems in place to help them meet the criteria for tenure. This includes university-wide coaching and workshops, along with meetings with the Dean. Tenure-eligible faculty are also assigned a Promotion and Tenure Committee to guide and evaluate them annually. In the first 1 year pre-tenure, faculty receive a reduced teaching load. They are given lab space and start-up funds for equipment, supplies, and graduate assistants. Audiology research faculty are provided with funded graduate research assistants available to work 10-20 hours/week in the faculty's research lab. The Department Head also reviews faculty annually (outside of the tenure-specific process) across all dimensions of their role statement and provides feedback. There are institutional resources available to guide faculty in their teaching. There are a number of internal research grants and grant-writing workshops available to faculty.

Standard 2.2 Continued Employment

Describe the processes that the program uses to ensure that faculty who are eligible for continuing their employment have the opportunity to meet the criteria for continued employment of the sponsoring institution.

Term faculty (Clinical Faculty) are assigned a Promotion Committee to guide and evaluate them toward promotion. The Audiology Clinic Director, Department Head, and/or Audiology Division Chair reviews term faculty annually and gives guidance toward success as needed. There are institutional resources available to guide faculty in their teaching and clinical supervision.

Standard 2.2 Opportunity for Other Activities

Describe the processes that the program uses to ensure that faculty will have the opportunity to participate in other activities consistent with institutional expectations.

Again, research and clinical faculty's roles consist of 5% service, ensuring that faculty will have the opportunity to participate in other activities consistent with institutional expectations. For members of the division's administrative team (such as myself in the Audiology Division Chair role), the Department Head provides either a 1-course reduction or 1-month summer pay to allow the administrative team carry out their roles. The Department Head will helps problem-solve our the administration team's task management if we are overloaded.

Standard 2.2 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 2.2.

None

Standard 2.3 Faculty Qualifications

Standard 2.3 Faculty Qualifications

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.

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Requirement for Review:

- The program must demonstrate that the qualifications and competence to teach graduate-level courses and to provide clinical education are evident in terms of appropriateness of degree level, practical or educational experiences specific to responsibilities in the program, and other indicators of competence to offer graduate education.
- 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.
- The program must demonstrate that the majority of academic content is taught by doctoral faculty who hold the appropriate terminal academic degree (PhD, EdD).

Findings

No findings provided

Standard 2.3 Prior Concerns

If there were areas of non-compliance or follow-up regarding Faculty Qualifications noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Faculty Qualifications listed in the last Accreditation Action Report

Standard 2.3 Majority Doctoral Faculty

If the information provided in the Standard 2.0 Faculty section **does not** demonstrate that the majority of academic content is taught by doctoral faculty who hold a PhD or EdD degree, provide rationale.

NOTE: *The majority of academic content should be calculated based on <u>credit hours</u> (not the number of courses) for academic courses only, not clinical coursework.*

Academic content includes lectures or other pedagogical methods, laboratory experiences, and/or clinically related activities or experiences provided within the context of a credit-earning didactic course or research experience.

Majority of academic content is taught by doctoral faculty who hold a PhD or EdD degree

Standard 2.3 Tenure Expectations

Briefly summarize the institution's expectations for granting tenure. Provide the URL for the institution's policy if available.

Tenure and promotion from assistant to associate professor are awarded on the basis by which a faculty member performs his or her responsibilities as defined by the role statement. Although tenured and tenure-eligible faculty members are expected to carry out the major university functions of teaching, research or creative endeavors, extension, and service, individual emphasis will vary within and among academic departments as described in each faculty member's role statement. Each candidate must present evidence of effectiveness in all of the professional domains in which he or she performs, and must present evidence of excellence in the major emphasis of his or her role statement.

The criteria for the award of tenure and the criteria for the award of promotion from assistant to associate professor are the same. These criteria include, but are not limited to: an established reputation based upon a balance of teaching, research or creative endeavors, extension, and service; broad recognition of professional success in the field of appointment; evidence of effectiveness in all of the professional domains in which the faculty member performs; and evidence of excellence in the major emphasis of his or her role statement (policies 401.3.2(3) and 405.2.1). Excellence is measured by standards for associate professors within the national professional peer group.

https://www.usu.edu/policies/405/

Standard 2.3 CCC Supervisor Credentials Verified

Describe how verification of supervisor certification is completed.

Each on-campus supervisor is required to submit proof of certification (copy of ASHA card) and documentation of supervisory CEU's each year. CCC information for off-campus supervisors is looked up in the ASHA database by our Clinical Outplacement Coordinator. Updated ASHA credentials are stored in CALIPSO for all supervisors, as well as in the COMDDE cloud-based *Box* Folder for on-campus supervisors.

Standard 2.3 CCC Verification - Responsibility

Identify who is responsible for verifying that all clinical supervision of clock hours counted for ASHA certification requirements is provided by persons who currently hold the ASHA CCC in the appropriate area. (Select all that apply)

Clinic Director or Coordinator

Other

Standard 2.3 CCC Verification - Responsibility "Other"

Specify Other:

Audiology's Clinical Outplacement Coordinator

Standard 2.3 CCC Hours Verified

Describe how the program ensures that all clinical supervision of clock hours counted for ASHA certification requirements is provided by persons who currently hold the ASHA CCC in the appropriate area.

The clinic director and/or clinical outplacement coordinator verify approved hours in CALIPSO. Supervisors must be ASHA-certified to access CALIPSO website and approve hours.

Standard 2.3 CCC Verification - When

When does the program verify ASHA certification status for individuals providing supervision?

Prior to each student's placement

Standard 2.3 State License Verification - How

Describe how the program verifies that individuals providing supervision hold credentials consistent with state licensure requirements?

On-campus supervisors submit proof of Utah Licensure every 2 years, it is uploaded into the USU COMDDE cloud-based

Box folder by the Department's Administrative Assistant. For off-campus supervisors, when a student is placed with an off-campus supervisor, our clinical outplacement coordinator looks up the supervisor in the ASHA database to verify licensure requirements. These details are then input into CALIPSO.

Standard 2.3 State License Verification - Responsibility

Who is responsible for verifying that credentials for individuals providing supervision are consistent with state licensure requirements? (Select all that apply)

Other

Standard 2.3 State License Verification - Responsibility "Other"

Specify Other:

Clinical Outplacement Coordinator

Standard 2.3 State License Verification - When

When does the program verify the state licensure status for individuals providing supervision?

Annually

Standard 2.3 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 2.3.

None

Standard 2.4 Faculty Continuing Competence

Standard 2.4 Faculty Continuing Competence

All faculty members maintain continuing competence and demonstrate pursuit of lifelong learning.

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Requirement for Review:

- The program must demonstrate that all individuals who have responsibility to deliver academic and clinical components of the graduate program maintain continuing competence.
- The program must demonstrate that all individuals who have responsibility to deliver the graduate program pursue lifelong learning.

Findings

No findings provided

Standard 2.4 Prior Concerns

If there were areas of non-compliance or follow-up regarding Faculty Continuing Competence noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

No data available

Standard 2.4 Continuing Competence

How do faculty obtain continuing competence in a variety of ways, including course and curricular development, professional development, and research activities?

Faculty are responsible for continuing their own competence (in alignment with their role statements) and do so in a number of ways. In regard to teaching in the classroom, clinic, and laboratories--faculty have stellar on-campus continuing education opportunities through USU's Empowering Teaching Excellence (ETE) program https://www.usu.edu/empowerteaching/ ETE offers everything from annual, on-campus teaching conferences to weekly book clubs to personal learning programs. For faculty interested in disseminating research and/or learning new techniques, professional development funding is available from the department for travel to in-person events. These funds can also be used by clinicial faculty for continuing education. There are also institutionally-based, in-person and online workshops and trainings available.

Standard 2.4 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's

compliance with Standard 2.4.

None

Standard 3.0A Curriculum (Academic and Clinical Education) in Audiology

Standard 3.0A Curriculum (Academic and Clinical Education) in Audiology

Standard 3.0A Courses

Standard 3.0A Courses Worksheet

Visit the CAA website's Program Resources webpage to download the Standard 3.0 Courses Worksheet. Once this worksheet is completed, you will be able to upload it below.

USU_Audiology_standard-3.0-courses-worksheet_AY22-23.xlsx

Standard 3.0A Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's courses.

None

Standard 3.1A Overall Curriculum

Standard 3.1A Overall Curriculum

An effective entry-level professional audiology program allows each student to acquire knowledge and skills in sufficient breadth and depth to enable the student to function as an effective, well-educated, and competent clinical audiologist (i.e., one who can practice within the full scope of practice of audiology). The education program is designed to afford each student with opportunities to meet the expectations of the program that are consistent with the program's mission and goals and that prepare each student for independent professional practice as an audiologist.

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Requirement for Review:

The doctoral program in audiology must meet the following requirements.

- Provide evidence of a curriculum that allows students to achieve the knowledge and skills listed below. Typically, the achievement of these outcomes requires the completion of 4 years of graduate education or the equivalent.

- Include a minimum of 12 months' full-time equivalent of supervised clinical experiences. These include short-term rotations and longer term externships and should be distributed throughout the program of study.

- Establish a clear set of program goals and objectives that must be met for students to acquire the knowledge and skills needed for entry into independent professional practice.

- Establish a clear process to evaluate student achievement of the program's established objectives.

- Offer opportunities for each student to acquire the knowledge and skills needed for entry into independent professional practice, consistent with the scope of practice for audiology, and across the range of practice settings.

- Offer a plan of study that encompasses the following domains:

    - professional practice competencies;

    - foundations of audiology practice;

    - identification and prevention of hearing loss, tinnitus, and vestibular disorders;

    - assessment of the structure and function of the auditory and vestibular systems as well as the impact of any changes to such systems;

    - intervention to minimize the effects of changes in the structure and function of the auditory and vestibular systems on an individual's ability to participate in his or her environment.

- Offer high quality learning environments that are learner centered, knowledge and skill centered, and assessment centered.

- Offer the academic and clinical program on a regular basis so that students are able to satisfy degree and other requirements within the published time frame.

- Offer opportunities to qualify for state and national credentials that are required for entry into independent professional practice that are consistent with the program mission and goals.

Findings

No findings provided

Standard 3.1A Prior Concerns

If there were areas of non-compliance or follow-up regarding Overall Curriculum noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in

compliance with this standard.

There were no citations regarding Overall Curriculum listed in the last Accreditation Action Report

Standard 3.1A Credit Hours

How are credit hours offered at the institution?

Semester

Standard 3.1A Course Descriptions

Provide the URL for the current graduate program course descriptions.

https://catalog.usu.edu/preview_program.php?catoid=38&poid=36721

Standard 3.1A Degree Requirements

Based on full-time enrollment, indicate the academic and clinical requirements for the degree, including the minimum number of graduate semester/quarter credit hours required to earn the degree.

Requirements	Number of Credits
Minimum required academic credits	53
Minimum elective academic credits	3
Minimum required practicum/clinical credits	30
Minimum elective practicum/clinical credits	0
Minimum required research credits (include dissertation if applicable)	4
Minimum elective research credits (include dissertation if applicable)	0
Indicate any other requirements below:	
Total:	90

Standard 3.1A Curriculum Missions and Goals

Describe how the curriculum is consistent with the mission and goals of the program.

The curriculum is built around a department mission of fulfilling learning, discovery, and engagement in communication sciences and disorders. More specifically, the curriculum adheres closely to the AuD program mission to prepare doctorate of audiology students to evaluate and treat hearing and balance disorders through education, research and clinical experiences for individuals throughout the lifespan.

Standard 3.1A Knowledge and Skills

Download, complete, and save this Knowledge and Skills chart document, then upload the completed document to this question.

usu_aud-knowledge-and-skills-within-the-curriculum_ay22-23_1.docx

Standard 3.1A Prerequisites

How do students entering the graduate program with degrees from other disciplines complete the prerequisite academic and clinical requirements? (Select all that apply)

Completion of prerequisite requirements prior to admission

Standard 3.1A Communication Assessment

Indicate the assessments used to ensure students have oral and written communication skills sufficient for professional practice. (Select all that apply)

Case studies or research presentations (e.g., roundtable presentations)

Class exam scores/grades

Completion and review of clinical assignments (reports, lesson plans, progress notes)

Completion and defense of research project, thesis, or dissertation

Completion of class assignments (oral and written)

Comprehensive exams (oral and/or written)

Oral communication screenings

Personal interviews by faculty of applicants and/or students

Personal statement on application

Other

Standard 3.1A Communication Assessment "Other"

Specify Other:

preliminary exam involving simulated patient (i.e. actor with hearing loss from the community)

Standard 3.1A Graduate Credits in Combined Course

Indicate how graduate students earn graduate credit when a course may be taken for either graduate or undergraduate credit. (Select all that apply)

Note: A different grading scale _alone_ would not meet the intent of this standard.

Courses for both graduate and undergraduate credit are not offered

Standard 3.1A Verifying Clinical Experience

Describe the process for verifying the successful completion of the minimum clinical experience required for each student in the graduate program of study.

Successful completion of the minimum clinical experience is verified via CALIPSO records, communication with clinical instructors, and course grades. The Clinic Director (and at times in collaboration with the Clinical Outplacement Coordinator) reviews opportunities, guidance, and performance on CALIPSO and through communication with the clinical faculty for on-campus clinical experiences (COMD 7200, 7300, & 7400). The Clinical Outplacement Coordinator communicates about opportunities, guidance, and performance with off-campus supervisors (including 4th-year externship supervisors) and monitors CALIPSO (COMD 7800). The Clinical Outplacement Coordinator submits all clinical practicum grades to USU. The Clinic Director and Clinical Outplacement Coordinator review all students' clinical performance and progress on CALIPSO in the fall of their final semester to determine possible gaps to be filled before graduation.

Standard 3.1A Professional Practice Infused

Describe how the professional practice competencies of accountability, effective communication skills, evidence-based practice, and professional duty, are infused throughout the curriculum.

Accountability, communication skills, evidence-based practice, and professional duty are in fused throughout the AuD students' clinic, classroom, and research experiences. They are addressed through on-campus clinical practicum requirements and assignments (COMD 7200, 7300, & 7400). For example, for accountability, students must adhere to

clinical documentation products and processes; for communication skills, students must speak and write to and about clients and their families in clinical documentation; for evidence-based practice, students must present a case study annually to the faculty division and students (in COMD 7000) with accompanying evidence; and for professional duty, students must thoughtfully prepare for appointments in collaboration with their supervision (and sometimes a peer). In the classroom the AuD curriculum addresses accountability, communication skills, evidence-based practice, and professional duty in lectures and assignments embedded within the majority of coursework. These important aspects of professional practice are also directly addressed in Practice Management (COMD 7860), Introduction to the Field of Audiology (7050), and Implementation Science Seminar (COMD 7000; a course attended weekly by all AuD faculty and students). For example, oral presentations and discussions are required in multiple courses. Evidence-based final papers and/or weekly, written reflections are completed for most classes (e.g., COMD 7460); all of which reflect accountability because of their firm due dates. An example of professional duty is how faculty emphasize respecting client autonomy and choices via person-/child-family-centered care as the cornerstone of academic coursework. Finally, the clinical research project (CRP; COMD 7870) is a 2-year-long, mentored research experience that also implicitly and explicitly infuses all of the professional practice competencies. Accountability is highlighted when the students develop and navigate their own deadlines. Communication skills are emphasized when working with participants, fellow lab members, and their mentor. Evidence-based practices guides the research experience while students' professional duty is to complete the task with (ideally) a manuscript eligible for publication in a peer-reviewed journal.

Standard 3.1A Professional Practice Demo

Describe how the professional practice competencies are demonstrated, assessed, and measured, including inter-professional education and supervision.

Students must demonstrate professional competencies at their clinical sites under the supervision of their clinical preceptors. The preceptors write feedback and assign performance grades that are reported in CALIPSO. All audiology doctoral students participate in interprofessional activities at the Sorenson Center for Clinical Excellence. Clinical opportunities to work with interprofessional teams occur in the campus Sorenson Center for Clinical Excellence Integrated Assessment clinic. Students also have opportunities to work as part of IFPS/IEP teams in educational settings (like our on-campus early education center, *Sound Beginnings,* for children with hearing loss) and on allied health teams in medical settings.

Standard 3.1A Education of Life Span

List the ways in which students obtain academic and clinical education pertaining to normal and impaired human development across the life span.

AuD students receive a foundational education of typical human development across the lifespan during their undergraduate education. However, all graduate courses typically focus on impaired development in the areas of balance and hearing, using typical development as a point of reference (i.e. norm references and theoretical foundations for assessments and intervention). During their program AuD students provide supervised clinical care to individuals across the life span (from infancy to older adulthood) who are in need of a range of assessments and interventions (e.g., pure-tone assessments to rotary chair evaluations to communication strategies training). Additionally, students are involved in hearing screenings with individuals across the lifespan from newborns in the birthing hospital to preschoolers in the classroom to adults in the workplace--many of who usually have typical hearing.

Standard 3.1A Interrelationship of SLP and AUD

How do students obtain information about the interrelationship of speech, language, and hearing in the discipline of human communication sciences and disorders? (Select all that apply)

Clinical experiences (e.g. hearing screening, speech screening, audiologic (re)habilitation, co-supervision, multidisciplinary teams)
Course offerings (e.g. introductory courses in audiology and speech pathology, graduate courses)

Standard 3.1A Professional Issues

Describe how contemporary professional issues (such as reimbursement and credentialing regulations) are presented in the curriculum.

Contemporary professional issues are addressed on a daily basis during students' clinical practicum experiences. For example, students learn about about billing for insurance, IFSPs/IEPs, along with billable hours and their accompanying codes.

Standard 3.1A Student Clinical Assessments

Describe how the program guides students to assess the effectiveness of their clinical services?

Students participate in weekly meetings with clinical preceptors where they are asked to reflect upon and discuss the effectiveness of their clinical care provision. They also complete self video evaluations each semester which entails watching a video of a session they completed and answering reflective questions about their service delivery. Students complete surveys through out the semester which reflect on service delivery and overall session effectiveness. Students often reflection on their service delivery during classroom work as well (e.g., during Counseling COMD 7450, students are required to watch videos of their clinical interactions and reflect on them weekly).

Standard 3.1A Hours for Team Assessments

When students are assigned in teams for assessment or intervention, describe how the students count the hours and how this time is verified.

When students are assigned in teams when there are 2 students in a session, they are only counting hours for activities they are directly involved in. This could be time they are inputting the audiogram into medical records for the other student, writing part of the note, checking and cleaning hearing aids, answering questions with the patient, etc. Students count and record all hours in CALIPSO (in 5-minute increments). This is verified monthly by their clinical supervisor for each clinic and the clinical outplacement coordinator.

Standard 3.1A Clinical Ed for Undergrad

Does the program offer clinical education for undergraduates?

No

Standard 3.1A Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.1A.

The clinical education for undergraduates is an elective, available by invitation only, to top-achieving students. Students are assigned 1 pediatric client in the SLP clinic on-campus. The clinical experience graded on a P/F basis and conducted in a highly supportive manner.

Standard 3.2A Curriculum Currency

Standard 3.2A Curriculum Currency

An effective audiology 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.

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Requirement for Review:

- The program must demonstrate that the
    - curriculum is planned and based on current standards of audiology practice;
    - curriculum is based on current literature and other current documents related to professional practice and education in audiology;
    - curriculum is delivered using sound pedagogical methods;
    - curriculum is reviewed systematically and on a regular basis;
    - review of the curriculum is conducted by comparing existing plans to current standards of audiology practice, current literature, and other documents related to professional practice and education in audiology.

Findings

No findings provided

Standard 3.2A Prior Concerns

If there were areas of non-compliance or follow-up regarding the Curriculum Currency noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Curriculum Currency listed in the last Accreditation Action Report

Standard 3.2A Curriculum Planning

Describe the curriculum planning process used by the program.

Our curriculum planning process is rooted in the current standards of audiology practices and our program's commitment to implementation science, person-/child-/family-centered care, and the equitable treatment of students and clients. The process is lead by the Audiology Division Chair, but occurs in a collaborative manner with all audiology faculty. We prioritize each of the aforementioned variables during the infancy of the planning process. We begin by taking into account the number of faculty we have, their (and the students') workloads, and the size of the cohorts. We also account for the total number of course credits and clinical hours required for graduation with an AuD. Next we factor in the current standards of

practice (particuarlly how and where they are being addressed in our curriculum). Then we have multiple discussions about our programs' strengths, weaknesses, and long-term goals. Taking all of these variables into account we end the process by developing and organizing a feasible schedule for all to successful execute the curriculum.

Standard 3.2A Planning Documents

How did the program use literature and other guiding documents to facilitate curriculum planning?

The overall curriculum is primarily guided by the literature and documents specifying accreditation and certification curriculum requirements. However, because of our program's commitment to implementation science, we also rely on what we learn in the recent research in the fields of audiology and pedagogy. For example, our AuD curriculum now includes a large movement toward "ungrading" after many faculty attended recent Excellence in Teaching conferences on campus (e.g., COMD 7000, 7380, 7310, 7490). When informing the curriculum regarding person-/child-/family-centered care, we rely heavily on recommendations from the Ida Institute's research and teaching modules. We also employ what we learn from continuing education our faculty obtain from ASHA, USU's Office of Equity, and other resources (e.g., Carnegie Mellon University's Eberly Center) when it comes to equity priorities within the curriculum and program.

Standard 3.2A Pedagogy

Describe the pedagogical approaches that the program will use to deliver the curriculum.

Three primary pedagogical approaches/models are currently employed by faculty's curriculum delivery: (1) Community of Inquiry (CoI) model, (2) Practitioner-Teacher model, and (3) Ungrading. First, The Community of Inquiry (CoI) model is a framework used in education to promote meaningful and engaging learning experiences. It consists of three essential elements: cognitive presence, social presence, and teaching presence. Cognitive presence involves critical thinking and inquiry-based learning, social presence focuses on building a sense of community and interpersonal interaction, and teaching presence refers to the role of the instructor in facilitating and guiding the learning process. Second the Practitioner-Teacher model is an instructional approach that combines practical expertise with pedagogical knowledge. It emphasizes the importance of teachers actively engaging in reflective practice and continuously refining their teaching methods based on evidence and feedback. The model promotes a learner-centered approach, where teachers adapt their strategies to meet the specific needs and interests of their students, fostering a dynamic and effective learning environment.Third, ungrading is an educational approach that challenges the traditional grading system by prioritizing student-centered learning and feedback. It involves minimizing or eliminating grades in favor of meaningful feedback, fostering dialogue and collaboration between students and instructors, and emphasizing mastery and growth over comparisons and rankings. Ungrading promotes an equitable and inclusive learning environment that encourages students

to take ownership of their learning and focus on deep understanding rather than chasing grades. Finally, each faculty member naturally introduces approaches of their own to best accommodate their areas of expertise and teach their courses' subject matter.

Standard 3.2A Currency of Curriculum

Describe the mechanisms and schedule that the program will use to review and update the academic and clinical curriculum to reflect current knowledge, skills, technology, and scope of practice.

The program employs a systematic approach to review and update the audiology program's curriculum in order to align it with current knowledge, skills, technology, and the scope of practice. This is accomplished through the audiology division's retreat and (bi)monthly faculty meetings. Other smaller meetings occur between the division chair or clinic director and faculty as needed. Data informing decisions includes regular needs assessments, stakeholder feedback, and professional development, and periodic curriculum mapping reviews--particularly when there are changes to national standards (e.g., the implementation of KASA 2020).

Standard 3.2A Q6

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.2A.

Our AuD program underwent a major curriculum re-design in 2021 in collaboration with all audiology faculty members. With the addition of high-impact classes, such as COMD 7000 Implementation Science, and on-campus clinical experiences prioritizing the explicit implementation of person-/child-/family-centered care; we are already seeing huge growth in our students knowledge and skills sets since the new curriculum's full implementation in 2022. We are excited to gather outcome measures during these next years to better understand this curriculum's impact on future audiologists from our program.

Standard 3.3A Sequence of Learning Experiences

Standard 3.3A Sequence of Learning Experiences

An effective audiology program is planned and delivered in an organized, sequential, and integrated manner to allow each student to meet the program's established learning goals and objectives and develop into an independent, competent audiologist.

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Requirement for Review:

- The program must demonstrate how the courses and clinical experiences are organized and sequenced and allow for integration across all elements of the program.

Findings

No findings provided

Standard 3.3A Prior Concerns

If there were areas of non-compliance or follow-up regarding the Sequence of Learning Experiences noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding the Sequence of Learning Experiences listed in the last Accreditation Action Report

Standard 3.3A Course Sequence

Provide a typical academic program, showing the sequence of courses and clinical experiences.

YEAR 1, FALL	
Course Number + Title	Credits
EDUC 6040 Applied Research Methods	3
COMD 7320 Amplification I	3
COMD 7380 Advanced Audiology	1
COMD 7200 Intro to Clinical Practice	1
COMD 7050 Introduction to	

the field of Audiology	1
COMD 7000 Implementation Science Seminar	3

YEAR 1, SPRING

Course Number + Title	Credits
EDUC 6050 Applied Statistical Analysis	3
COMD 7420 Amplification II	3
COMD 7310 Psychoacoustics	3
COMD 7200 Intro to Clinical Practice	1
COMD 7000 Implementation Science Seminar	1

YEAR 2, SUMMER

Course Number + Title	Credits
COMD 7340 Pediatric Audiology	3
COMD 7520 Cochlear Implants	3
COMD 7300 Intermediate Clinical Practicum	1

YEAR 2, FALL

Course Number + Title	Credits
COMD 7430 Electrophysiology	3
COMD 7433 Electrophysiology lab	1
COMD 7530 Balance Eval and Management	3

COMD 7450 Counseling for Audiological Care	3
COMD 7300 Intermediate clinical Practicum	1
COMD 7000 Implementation Science Seminar	1
YEAR 2, SPRING	
Course Number + Title	Credits
COMD 7490 Medical Aspects	3
COMD 7300 Intermediate Clinical Practicum	2
COMD 7920 Preliminary Exam	1
COMD 7000 Implementation Science Seminar	1
COMD 7870 Clinical Research Project	4
YEAR 3, SUMMER	
Course Number + Title	Credits
COMD 7400 Advanced Clinical Practicum	3
YEAR 3, FALL	
Course Number + Title	Credits
COMD 7860 Practice Management	3
COMD 7400 Advanced Clinical Practicum	4
XXX elective (F or Sp)	

Course Number + Title	Credits
COMD 7480 Clinical Training and Supervision Strategies in Audiology	1
COMD 7000 Implementation Science Seminar	1
YEAR 3, SPRING	
Course Number + Title	Credits
COMD 7460 Aural Rehabilitation Across the Lifespan	3
COMD 7400 Advanced Clinical Practicum	4
COMD 7930 Comprehensive Exam	1
COMD 7000 Implementation Science Seminar	1
XXX elective (F or Sp)	3
YEAR 4, SUMMER	
Course Number + Title	Credits
COMD 7800 Clinical Externship	3
YEAR 4, FALL	
Course Number + Title	Credits
COMD 7800 Clinical Externship	5
YEAR 3, SPRING	
Course Number + Title	Credits
COMD 7800 Clinical Externship	5

Standard 3.3A Differences in Tracks

Describe any differences in the expected sequence of courses and clinical experiences that result from different tracks.

There is only 1 track in the AuD program. However, some students may choose to pursue a Listening and Spoken Language (LSL) specialization. These students have additional coursework and clinical experiences but they do not affect the sequence of the students' courses and clinical experiences.

Standard 3.3A Integration

Describe the method(s) used to organize, sequence, and provide opportunities for integration across all elements of the content.

The academic course curriculum sequence is planned to match the clinical populations and skill sets that students encounter earlier versus later in the program. Thus, the students move through the program in concert with their peers that begin the program at the same time (i.e. the "cohort"). Each cohort adheres to the same thoughtfully organized sequence of classes and clinical rotations. The foundational knowledge taught in the classroom is then built upon in clinic and the forthcoming classroom/clinical experiences build on the educational experiences in the previous year and so forth. This classroom and clinical integration occurs via frequent conversations between the designated classroom instructors and clinical supervisors. The supervisors have the classroom syllabi and are aware of the unfolding timeline of when new clinical skills (and their accompanying theory) that is taught in the classroom and students ready for clinical execution/application. As described under Standard 3.2A of this document, the audiology's curriculum and its execution was thoughtfully redesigned in such a way that, aside from the detailed methodologies listed above, few are required during curriculum's execution to ensure integration--integration is embedded in the curriculum. However, the Clinical Outplacement Coordinator keeps the integration of all elements at the forefront of their mind when coordinating the schedules for each student's clinical experiences every semester.

Standard 3.3A Examples of Integration

Provide two (2) examples of the sequential and integrated learning opportunities

Example One:
In the fall semester of each year the 1st year cohort takes COMD 7380 Advanced Audiology while the 3rd year cohort takes COMD 7480 Clinical Training and Supervision Strategies. These courses occur sequentially in the program and present for "full circle", integrated learning opportunities for all students involved. COMD 7380 is the introductory classroom course that teaches students how to conduct auditory testing of the site of lesion in the conductive, sensory,

and neural/central auditory systems with special emphasis on the comprehensive behavioral audiologic test battery. In COMD 7480 students gain classroom knowledge and experiences related to clinical training and supervision of graduate students in audiology. Most notably, the 3rd year students of COMD 7480 are taught how to engage in guided, hands-on supervision of the 1st-year AuD students enrolled in COMD 7380. Specifically, the 3rd year students are supervising the 1st years as they learn to improve upon each of the foundational, clinical skills necessary for their concurrent 1st-year clinical practicum experiences.

Example Two:

Each semester during the division-wide meeting of COMD 7000 Implementation Science, AuD students from the 2nd and 3rd-year cohorts independently prepare for and present one case study and peer-reviewed journal article related to the case. Specifically, each student thoughtfully selects, prepares, and presents on a patient they were directly involved in for audiological diagnostic or treatment to the seminar attendees. Following the presentation, the student leads a roundtable discussion between all faculty and students focused on a peer-reviewed article, that they selected, that relates to the case presented. The discussion is aimed to center on how the article relates to the case, how it can shape future interactions with similar patients, and how it is linked to implementation science within audiology.

Standard 3.3A Integration Goals

Describe how the organization, sequential nature, and opportunities for integration allow each student to meet the program's established learning goals and objectives.

The organization of the program ensures that each student can meet the established learning goals and objectives by providing a structured and coherent curriculum. The sequential nature of the program allows students to build upon previously acquired knowledge and skills, gradually advancing towards competency. Opportunities for integration, such as projects, assignments, and collaborative activities, enable students to apply their learning across different clinic and courses, fostering a deeper understanding and better application of concepts. This holistic approach ensures that every student can achieve the desired learning outcomes effectively and efficiently.

Standard 3.3A Course Order Preparation

When a student is assigned to a clinical experience before or concurrent with appropriate coursework, how does the program ensure that the student is appropriately prepared for this clinical experience? (Select all that apply)

Additional time spent with supervisor

Extra readings

Observations prior to hands-on experience (live or video)

One-to-one tutorial

Standard 3.3A Course Order Preparation Adequacy

If students are assigned to a clinical experience before or concurrent with appropriate coursework, how does the program evaluate the adequacy and effectiveness of the activities used to ensure the student is appropriately prepared for the clinical experience?

Although is a rare occurrence in our audiology program, when a student is assigned such a clinical experience, the clinical supervisor tracks the student's performance and the client's outcomes/experiences. Throughout the experience additional supervisory support is given to the student to ensure the student is successful in that clinical experience. If student weakness emerge, the supervisor provides further support and assigns the student additional learning experiences to lead to success (e.g., clinical observation or simulated experiences). The welfare of the client is paramount during these situations.

Standard 3.3A Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.3A.

None

Standard 3.4A Diversity Reflected in the Curriculum

Standard 3.4A Diversity Reflected in the Curriculum

An effective audiology program is organized and delivered in such a manner that the diversity, equity, and inclusion are reflected in the program and throughout academic and clinical education.

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Requirement for Review:

- The program must provide evidence that diversity, equity, and inclusion are incorporated throughout the academic and clinical program, in theory and practice.
- The program must provide evidence that students are given opportunities to identify and acknowledge approaches to addressing culture and language that include cultural humility, cultural responsiveness, and cultural competence in service delivery.

- The program must provide evidence that students are given opportunities to identify and acknowledge the impact of both implicit and explicit bias on clinical service delivery and actively explore individual biases and how they relate to clinical services.
- The program must provide evidence that students are given opportunities to identify and acknowledge:
    - The impact of how their own set of cultural and linguistic variables affects patients/clients/students care. These variables include, but are not limited to, age, disability, ethnicity, gender expression, gender identify, national origin, race, religion, sex, sexual orientation, or veteran status.
    - The impact of cultural and linguistic variables of the individual served may have on delivery of effective care. These variables include, but are not limited to, age, disability, ethnicity, gender expression, gender identity, national origin, race, religion, sex, sexual orientation, or veteran status.
    - The interaction of cultural and linguistic variables between the caregivers and the individual served. These variables include, but are not limited to, age, disability, ethnicity, gender expression, gender identity, national origin, race, religion, sex, sexual orientation, or veteran status.
    - The social determinants of health and environmental factors for individuals served. These variables include, but are not limited to, health and healthcare, education, economic stability, social and community context, and neighborhood and built environment, and how these determinants relate to clinical services.
    - The impact of multiple languages and ability to explore approaches to addressing bilingual/ multilingual individuals requiring services, including understanding the difference between audiological and cultural perspectives of being d/Deaf and acknowledge Deaf cultural identities.
- The program must provide evidence that students are given opportunities to recognize that cultural and linguistic diversity exists among various groups, including among d/Deaf and hard of hearing individuals, and foster the acquisition and use of all languages (verbal and nonverbal), in accordance with individual priorities and needs.

Findings

No findings provided

Standard 3.4A Prior Concerns

If there were any areas of non-compliance or follow-up regarding Diversity Reflected in the Curriculum noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Diversity Reflected in the Curriculum listed in the last Accreditation Action Report

Standard 3.4A Incorporation of Diversity

Describe how and where diversity, equity, and inclusion are incorporated throughout the academic and clinical program, in theory and in practice.

We work to incorporate diversity, equity, and inclusion (DEI) throughout audiology's academic and clinical program, in theory and in practice. The extent to which DEI is covered and to what extent specific topics are covered is variable. This past academic year the audiology division began to actively work to increase DEI's explicit presence in our program and clinical provisions; we continue to have room for growth regarding the incorporation of DEI. We have identified systematic improvements we can make to provide a better structured educational approach that ensures all students receive equitable learning opportunities and all clients receive equitable care. Thus, we will be incorporating specific exercises/activities and discussions into *all* of our graduate students' early coursework during the forthcoming years. This includes discussions of prioritizing the students' equity and inclusion as well as the clients they will serve. Nonetheless, there are currently tangible examples of DEI's incorporation into our program's coursework and clinical practice. For example, in COMD 7450 Counseling for Audiological Care, lectures and discussions are thoughtfully paired with students' completion of cultural competency assessments and other activities from ASHA's thatsunheardof.org. In clinical practicum supervisors discuss aspects of DEI with students during preparation for sessions, during debriefing discussions, and during clinic-wide meetings. Students also have opportunities to experiences various aspects of DEI at play when they are enrolled in our on-campus Spanish-English pediatric clinical practicum. Finally, all incoming AuD cohorts receive education about DEI and implicit bias during their orientation prior to any class or clinic work.

Standard 3.4A Clinic Diversity

Describe how students are given opportunities to identify and acknowledge approaches to addressing culture and language that include cultural humility, cultural responsiveness, and cultural competence in service delivery.

Person-/child-/family-centered care incorporates intentional approaches when addressing differences in culture and language, and our program embraces person-/child-/family-centered care as an essential foundation to practice. Students have opportunities to identify and acknowledge such approaches broadly in clinic meetings, during group discussions (such as those that take place across division faculty and students during COMD 7000), and individually for specific clinical encounters with their supervisors. Again, we are in the process of employing systematic improvements to ensure that we provide a better structured educational approach addressing cultural humility, cultural responsiveness, and cultural competence in service delivery.

Standard 3.4A Multicultural Education

Describe how students are given opportunities to identify and acknowledge the impact of both implicit and explicit bias on clinical service delivery and actively explore individual biases and how they relate to clinical services.

Students have opportunities to discuss implicit and explicit bias and explore their individual biases related to clinical services in clinic meetings, group discussions, and individually with their supervisors; as well as, in discussions with course instructors/during in-class activities such as role plays and self-reflections. We have identified a need for systematic improvement in this context to provide a better structured approach that ensures all students receive similar learning opportunities. Thus, we will be incorporating specific exercise and discussions into *all* of our program's early coursework during the forthcoming years.

Note: For each of the following questions, "variables" include, but are not limited to, age, disability, ethnicity, gender expression, gender identify, national origin, race, religion, sex, sexual orientation, or veteran status.

Standard 3.4A Variables Impact

Describe how students are given the opportunities to identify and acknowledge the impact of how their own set of cultural and linguistic variables affects clients/patients/students' care.

Students are most often given opportunities to identify and acknowledge the impact of how their own set of cultural and linguistic variables affects clients/patients/students' care during structured classroom activities (such as those discussed above in 3.4A or during meetings of COMD 7000). To date, these activities have been driven by ASHA's thatsunheardof.org and work from Harvard University's Project Implicit. During clinical meetings with supervisors, students are given opportunities to identify and acknowledge their own values and experiences can affect clinical care. We are in the process of employing systematic improvements to ensure that we provide a better structured educational approach addressing how students' own set of cultural and linguistic variables affects clients/patients/students' care via experiences such as reflective exercises and dialogue in clinic and in courses..

Standard 3.4A Variables Impact Delivery

Describe how students are given the opportunities to identify and acknowledge the impact cultural and linguistic variables of the individual served may have on delivery of effective care.

Students have opportunities to discuss and explore how the variables of the individual served may impact delivery of effective services through discussions in clinic meetings, group discussions, and individually with their supervisors; as well

as, in discussions with course instructors/during in-class activities such as self-reflections. Students also have direct opportunities for identification and acknowledgment when working in our on-campus Spanish-English pediatric clinic. We are in the process of employing systematic improvements to warrant that we provide a better structured approach that ensures all students receive similar learning opportunities and patients received similar care, such as employing case-based scenarios to raise awareness and discussions to explore actions that can reduce disparities and improve effective delivery of services in clinic and in courses.

Standard 3.4A Variables Interaction

Describe how students are given the opportunities to identify and acknowledge the interaction of cultural and linguistic variables between the caregivers and the individual served.

Students have opportunities to discuss and explore how the variables of the individual served may impact delivery of effective services through discussions in clinic meetings, group discussions, and individually with their supervisors; as well as, in discussions with course instructors/during in-class activities such as self-reflections. This past year this specific topic was also targeted during a lecture and follow-up roundtable discussion in COMD 7000 regarding working with interpreters in the hearing health care system. Students, again, have direct opportunities for identification and acknowledgment when working in our on-campus Spanish-English pediatric clinic. We are in the process of employing systematic improvements to ensure that our program has improved opportunities for students to identify and acknowledge the interaction of cultural and linguistic variables between the caregivers and the individual served while exploring critical factors and actions to reduce nega.

Standard 3.4A Social Determinants

Describe how students are given the opportunities to identify and acknowledge the social determinants of health and environmental factors for individuals served.

Discussions centered on identifying and acknowledging the social determinants of health and environmental factors for clients occur in the audiology program's classrooms and clinics. These opportunities arise in the classroom and are often rooted in race and socioeconomic disadvantages (e.g, lectures, discussions, and self-reflections that occur in COMD 7380 Advanced Audiology and COMD 7460 AR Across the Lifespan). In the clinic (given the ethnic homogeneity of the local population served in Logan, UT) these discussions are often rooted in socioeconomic disadvantages. We continue to employ systematic improvements that ensure all students receive similar learning opportunities and individuals served receive similar care.

Standard 3.4A Multiple Languages

Describe how students are given the opportunities to identify and acknowledge the impact of multiple languages and ability to explore approaches to addressing bilingual/ multilingual individuals requiring services, including understand the difference in cultural perspectives of being d/Deaf and acknowledge Deaf cultural identities.

Students primary opportunities to identify and acknowledge the impact of multiple languages and ability to explore approaches to addressing bilingual/ multilingual individuals requiring services occurs in our on-campus (1) early education center, *Sound Beginnings*, for young children and their families affected by hearing loss and (2) Spanish-English pediatric audiology clinic as well as off-campus clinical practicum placements with the Utah School for the Deaf and Blind. Students have further opportunities to discuss and reflect on said impact clinic meetings, group discussions, and individually with their supervisors; as well as, in discussions with course instructors/during in-class activities reflections on experiences guest lectures from Deaf individuals (COMD 7460). We are in the process of employing systematic improvements to ensure that we provide a better approach for providing students with opportunities to identify and acknowledge the impact of multiple languages and ability to explore approaches to addressing bilingual/ multilingual individuals requiring services.

Standard 3.4A Diversity/Foster Acquisition

Describe how students are given opportunities to 1) recognize that cultural and linguistic diversity exists among various groups, including among d/Deaf and hard of hearing individuals, and 2) foster the acquisition and use of all languages (verbal and nonverbal), in accordance with individual priorities and needs.

Students have opportunities to recognize that cultural and linguistic diversity exists among various groups and to foster the acquisition and use of all languages based on individual priority and needs. Person-/child-/family-centered care is the foundation of our approach to our program's service delivery. Person-/child-/family-centered care is rooted in respecting the individual's/family's preferences and priorities while supporting them in meeting their needs through a shared process. Students are approach to care in classes and in clinic and it is modeled by supervisors, thus students develop skills in person-/child-/family-centered care through clinical experiences that scaffold and support their learning.

Standard 3.4A Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.4A.

The program is engaged in a department-lead initiative that began in 2022 to increase faculty awareness about DEI, explore status of teaching and learning opportunities in our program, and to identify areas in need of improvement. This process is ongoing, with annual goals and expectations to expand integration of DEI in the program curriculum, evaluate learning outcomes, and to continue to engage in a process of ongoing improvement.

Standard 3.5A Scientific and Research Foundation

Standard 3.5A Scientific and Research Foundation

An effective audiology program is organized so that the scientific and research foundations of the profession are evident.

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Requirement for Review:

- The program must demonstrate the procedures used to verify that students obtain knowledge in
    - the basic sciences;
    - basic science skills (e.g., scientific methods, critical thinking);
    - the basics of communication sciences (e.g., acoustics, psychoacoustics and neurological processes of speech, language, and hearing).
- The program must demonstrate how the curriculum provides opportunities for students to
    - understand and apply the scientific bases of the profession,
    - understand and apply research methodology,
    - become knowledgeable consumers of research literature,
    - become knowledgeable about the fundamentals of evidence-based practice,
    - apply the scientific bases and research principles to clinical populations.
- The program must include research and scholarship participation opportunities that are consistent with the mission and goals of the program.

Findings

No findings provided

Standard 3.5A Prior Concerns

If there were areas of non-compliance or follow-up regarding the Scientific and Research Foundations noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding the Scientific and Research Foundations listed in the last Accreditation Action Report

Standard 3.5A Knowledge of Sciences

How do you verify that students have obtained knowledge in the basic sciences (e.g. biology, physics, social sciences, and statistics)?

Our departmental graduate program coordinator, in collaboration with the division chair, manually review incoming AuD students' transcripts in detail. To further verify course content/students' background knowledge sometimes course syllabi are obtained and further reviewed.

Standard 3.5A Basis Communication Science Skills

How do students obtain knowledge in the basic communication sciences (e.g. acoustics, physiological and neurological processes of speech, language, hearing; linguistics)? (Select all that apply)

Deficiency or prerequisite course work

Graduate course work

Participation in faculty research

Research project or dissertation

Standard 3.5A Scientific Basis

How does the curriculum reflect the scientific basis of the professions and include research methodology and exposure to research literature? (Select all that apply)

Attend research conferences

Complete research literature reviews within courses

Complete research project or dissertation

Grand rounds

Incorporate evidence-based practice into the clinic

Participate in faculty research

Other

Standard 3.5A Scientific Basis "Other"

Specify Other:

The program curriculum requires 2, graduate-level evidence-based statistics courses taught by faculty from the education department

Standard 3.5A Basic Science Skills

How do you verify that students have obtained knowledge in basic science skills (e.g., scientific methods and critical thinking)?

These skills are explicitly highlighted and interwoven through out our program in both classroom, clinic, and laboratory work. A primary outcome measure of students' understanding of the scientific method and critical thinking is via their clinical research projects (COMD 7870). Additional primary outcome measures of students' critical thinking are our preliminary exam that utilizes simulated patients and requires the students to complete a full audiology evaluation in the presence of faculty observers (COMD 7920) and our comprehensive exam (COMD 7930) during which students role play with faculty through a multi-step clinical case study spanning years of the "patient's" life.

Standard 3.5A Research Opportunities

How does the program ensure that there are opportunities for each student to participate in research and scholarship that are consistent with the mission and goals of the program? (Select all that apply)

Independent research project
Interdisciplinary research
Participate in faculty research
Other

Standard 3.5A Research Opportunities "Other"

Specify Other:

clinical research project

Standard 3.5A Consumers of Literature

Describe the methods that the program uses to ensure all students have opportunities to become knowledgeable consumers of research literature.

Students have opportunities to become knowledgeable consumers of research literature from the start to finish of their AuD program. Consumption and discussion of research literature serves as the foundation of the program. Faculty employ various methods ensuring all students have opportunities for literature consumption throughout the their coursework, clinical decision making, and clinical research projects.

Standard 3.5A Knowledge of EBP

Describe the methods that the program uses to ensure that there are opportunities for each student to become knowledgeable about the fundamentals of evidence-based practice.

Evidence-based practice is a foundation of our audiology program. It is interwoven throughout the program explicitly and implicitly. EBP is deeply tied into our program's continuous consumption of research literature in classes, clinic, and the laboratory. The methods for creating opportunities to learn about EBP range from lectures in class and seminars (it is particularly hard-hit in COMD 7000), direct teaching via supervisors in clinic, modeling via supervisors in clinic, and throughout students' elbow-to-elbow mentored research experience of the clinical research project.

Standard 3.5A Apply Research

Describe methods that the program uses to ensure that there are opportunities for each student to apply the scientific bases and research principles to clinical populations.

The methods for creating opportunities for students to apply scientific bases and research principles to clinical populations range from in-class discussions/activities, classroom assignments, direct teaching via supervisors in clinic, modeling via supervisors in clinic, and through out the elbow-to-elbow mentored research experience of the clinical research project (COME 7870).

Standard 3.5A Research Within Institution

Describe how research opportunities offered by the program are consistent with the institution's expectations for this program.

USU expects that students participating in a clinical doctoral graduate program have rich educational experiences rooted in the core themes of learning, discovery, and engagement. The research opportunities offered by our audiology graduate program are consistent with these expectations as they afford students opportunities to pursue research experiences/opportunities that reflect each of the 3 themes.

Standard 3.5A Research Within Mission

Describe how the research opportunities offered by the program are consistent with the specified mission and goals of the program.

All research opportunities offered by our program help grow critical-thinking audiologists who understand implementation science along with the benefits and boundaries of EBP. This is consistent with our program's mission to prepare doctorate

of audiology students to evaluate and treat hearing and balance disorders through education, research and clinical experiences for individuals throughout the lifespan.

Standard 3.5A Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.5A.

None

Standard 3.6A Clinical Settings/Populations

Standard 3.6A Clinical Settings/Populations

The clinical education component of an effective entry-level audiology program is planned for each student so that there is access to a base of individuals who may be served that is sufficient to achieve the program's stated mission and goals. That base includes a variety of clinical settings, populations, and age groups. The comprehensive clinical experiences must include direct contact with individuals seeking services, consultation, record-keeping, and administrative duties relevant to professional service delivery in audiology.

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Requirement for Review:

- The program must demonstrate that it has mechanisms to develop comprehensive plans of clinical educational experiences so that each student has an opportunity to
    - experience the breadth and depth of clinical practice,
    - obtain experiences with different populations,
    - obtain a variety of clinical experiences in different work settings,
    - obtain experiences with appropriate equipment and resources,
    - learn from experienced audiologists who will serve as effective clinical educators.

Findings

No findings provided

Standard 3.6A Prior Concerns

If there were areas of non-compliance or follow-up regarding Clinical Settings/Populations noted in the CAA Accreditation

Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Clinical Settings/Populations listed in the last Accreditation Action Report

Standard 3.6A Clinical Sites Details

Visit the CAA website's Program Resources webpage to download the Standard 3.6 Clinical Sites Worksheet. Once this worksheet is completed, you will be able to upload it below.

usu_standard-3.6-clinical-sites-worksheet_ay22-23_1.xlsx

Standard 3.6A Clinical Site Category Summary - AUD

Provide the average number of clock hours per semester earned in each category in the past 4 years across all clinical sites.

Category	Children	Adults
AUDITORY DISORDERS		
Prevention & Identification	81	31
Evaluation	160	281
Intervention	101	180
VESTIBULAR DISORDERS		
Prevention & Identification	0	0
Evaluation	6	260
Intervention	1	35
RELATED COMMIUNCATION DISORDERS		
Prevention & Identification	0	0
Evaluation	0	1

Intervention	0	0

Standard 3.6A Clinical Education Plan

Describe the methods used to ensure that the plan of clinical education for each student includes the following:

Experiences that represent the breadth and depth of audiology and clinical practice
To ensure our that students' clinical experiences on campus represent the breadth and depth of audiology and clinical practice, at USU we house hearing and balance clinics that serve individuals across the lifespan with a variety of needs-- from balance assessment to tinnitus intervention to pediatric cochlear implant programming. In these clinics we employ evidence-based, top-of-the-line equipment paired with specialized clinical faculty serving as preceptors. Additionally, despite the fact that USU is housed in a rural location in the Mountian West and healthcare access is limited, our audiology division builds intentional and meaningful relationships with hearing healthcare providers across the state. Our clinical outplacement coordinator specifically works to secure theses relationships with audiologists and USU to ensure that students clinical experiences off-campus represent the breadth and depth of audiology and clinical practice.
Opportunities to work with individuals across the life span and the continuum of care
We provide hearing and balance services in our clinics to individuals across the lifespan, across all areas of our scope of practice, with a variety of culturally and linguistically diverse populations, and across a variety of severity levels. All students have a minimum of 6-semesters-worth of on-campus clinical practicum placement (prior to more specialized off-campus placements) to ensure that the plan of clinical education for each student includes opportunities to work with individuals across the life span and the continuum of care.
Opportunities to work with individuals from culturally and linguistically diverse backgrounds
We provide hearing and balance services in our clinics to individuals across the lifespan, across all areas of our scope of practice, with a variety of culturally and linguistically diverse populations, and across a variety of severity levels. Student's clinical practicum placements in USU's Spanish-English pediatric audiology campus during their 2nd and 3rd years ensure that the plan of clinical education for each student includes opportunities to work with individuals from culturally and linguistically diverse backgrounds; as do their off-site clinical practicum placements across Utah and the country at large.
Experiences with individuals who express various types of severities of changes in structure and function of the auditory and vestibular systems and related disorders

All students have a minimum of 6-semesters-worth of on-campus clinical practicum placement (prior to more specialized off-campus placements) to ensure that the plan of clinical education for each student includes opportunities to work with individuals who express various types of severities of changes in structure and function of the auditory and vestibular systems and related disorders. In our on-campus clinics provide hearing and balance services in our clinics to individuals across the lifespan, across all areas in our scope of practice, with a variety of culturally and linguistically diverse populations, and across a variety of severity levels. Students also have a experiences various types of hearing and balance disorders in their off-site clinical practicum placements across Utah and the country at large.

Opportunities to obtain experiences with appropriate equipment and resources

The way we ensure students obtain experiences with appropriate equipment and resources for hearing and balance assessment and treatment is by outfitting our on-campus clinics with efficacious, updated, and top-of-the-line equipment and resources. Our program's clinics offer standardized audiological assessment and care across the lifespan; hearing aid services; cochlear implant fittings and programming (of cochlear, advance bionics, and MEDEl devices); tinnitus evaluation and treatment; hearing assistive technology fittings; and full balance evaluations (using VNG, cVEMP, oVEMP, CDP, vHIT, and rotary chair). Thus, at a minimum, students obtain experiences with appropriate equipment and resources via their on-campus clinical practicums throughout the program.

Exposure to the business aspects of the practice of audiology (e.g., reimbursement requirements, insurance and billing procedures, scheduling)

Students are exposure to the business aspects of the practice of audiology on daily basis by way of their on- and off-campus clinical practicum experiences. For example, students learn about about billing for insurance, IFSPs/IEPs, along with billable hours and their accompanying codes. Our method of exposure also includes incorporating these business aspects via didactic methods employed in our courses, such as Practice Management (COMD 7860) and Implementation Science (COMD 7000).

Standard 3.6A Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.6A.

Please note for Standard 3.6A Clinical Site Category Summary: Detailed data is not available for "Prevention & Identification" of "Vestibular Disorders" and "Related Communication Disorders" due to limitations with CALIPSO clock hour submissions. The current system does not allow for students to designate of they participated in Hearing or Balance screenings, all hours

are collapsed and reported under the heading of "Hearing and Balance Screening". The same is true for related communication disorders as students report this information under the heading of "Evaluation/Screening of Speech Disorders" or "Evaluation/Screening of Language Disorders". Thus, "0" reported in these fields equals "data not available".

Standard 3.7A Clinical Education - Students

Standard 3.7A Clinical Education - Students

An effective audiology program ensures that clinical education is provided in a manner that supports student development so that each student is prepared to enter independent professional practice. The type and structure of the clinical education are commensurate with the development of knowledge and skills of each student.

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Requirement for Review:

- The program must demonstrate that the procedures used in clinical education ensure that student development is supported and that each student acquires the independence needed to enter professional practice.
- The program must demonstrate that the clinical education component of the program is structured to be consistent with the knowledge and skill levels of each student.

Findings

No findings provided

Standard 3.7A Prior Concerns

If there were areas of non-compliance or follow-up regarding Clinical Education - Students noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Clinical Education - Students listed in the last Accreditation Action Report

Standard 3.7A Supervision for Independence

Explain the policies and procedures that describe how the manner and amount of supervision are determined and are adjusted to reflect the competence of each student and that allow each student to acquire the independence to enter independent professional practice.

Our program's pedagogical approaches to supervision echo many of the core principles of our approach to person-/child-/family-centered clinical care--we place the students and their needs at the center of supervision. Due to the fact that our AuD cohorts do not exceed 8 students, supervisors are able to meet them at their level of clinical competency and supervise them accordingly. Thus, the manner and amount of supervision are determined individually by each supervisor for each student based on the clinical competency rubrics we employ for each clinical practicum (COMD 7200, 7300, & 7400). At the beginning of the semester, a clinical supervisor (CCC-A) is assigned to each student clinician. The supervisor's role is to guide their students in meeting clinical objectives and delivering safe and quality patient care. This supervision occurs in real time and is never less than 25% of the total contact time (diagnostic and/or treatment) with each client. The amount of supervision/hands-on support is increased when warranted depending on the student's skill level or the specific needs of patient. Supervisors provide more direct assistance early in the clinical experience to guide the student. More support is also provided when students have not yet completed the graduate coursework relevant to their particular patient. This may involve supervisors modeling during the session, assigning extra readings, conducting extra meetings with the student, assisting in appointment prep, role playing, or engaging in/assigning other types of extra activities. When students are in need of additional support to acquire the independence to enter professional practice, the percentage of direct supervision is much higher.

Standard 3.7A Practicum Described

Describe how clinical practicum will be offered and how supervision of practicum will be managed, including sequence, supervision, and coordination of placements with external facilities, and diversity of client populations.

All graduate students complete at least 6 semesters of on-campus clinical practicum (COMD 7200, 7300, & 7400). Students enrolled in these courses receive the following practicum assignments:

COMD 7200 (Y1- Fall & Spring): USU adult Hearing Clinic for 2 half-day session per week (Fall and Spring)

COMD 7300 (Y2- Summer, Fall, Spring): USU adult Hearing and adult Balance Clinic for 1 half-day session per week, USU adult Cochlear Implant Clinic for 1 half-day sessions per week, USU Pediatric Audiology Clinic (includes cochlear implants)

COMD 7400 (Y3- Summer): USU adult Hearing and adult/peds Balance Clinic for 1 half-day session per week, USU Cochlear Implant Clinic for 1 half-day sessions per week, USU Pediatric Audiology Clinic(includes cochlear implants)

Program course curriculum directly corresponds to the patient population served by the on-campus clinic (e.g., pediatric cochlear implants) This is consistent across all practicum placements and population of patient served.

Off-campus clinics begin in the summer or fall of AuD students' 3rd year. Prior to and during off-campus placements,

students are in regular communication with the clinical outplacement coordinator to discuss external placement interests. Placement opportunities are discussed and reviewed, and 3 possible locations are selected. Diversity of clinical population and setting are discussed, and students are expected to travel to larger cities in northern Utah (e.g., Ogden or Salt Lake City) where there is greater population diversity than in our rural community of Logan. The clinical outplacement coordinator contacts each external site to discuss if a student could be placed for the requested semester. They also maintain contact with each site throughout the semester to ensure proper coordination between off-campus clinic sites and USU.

All external placements follow the USU academic calendar (i.e. Fall, Spring, and Summer semesters) and the students are enrolled in either COMD 7400 or 7800 (4th year externship) for external placements.

The clinical outplacement coordinator is in regular contact with all external clinical sites and supervisors (and our students) to ensure needs and expectations are being met.

Standard 3.7A Undergraduate Practicum

If undergraduate students are enrolled in practicum, explain how this impacts resources for clinical supervision to the graduate program.

Undergraduate students may enroll in a supervised practicum experience during their senior year by invitation (COMD 4100). However, all undergraduate practicum students are managed and supervised by the SLP program, thus they do not impact the audiology program's resources.

Standard 3.7A Qualified Supervisor

What indicators and/or criteria are used to identify qualified supervisors/preceptors both in and outside the professions? (Select all that apply)

Accessibility to students

Appropriate state credentials for clinical practice

Appropriate national credentials for clinical practice

Clinical practice setting

Demonstrated abilities in the supervisory processes

Mastery and expertise in the clinical area supervised

Previous student evaluations

Previous supervisory experience

Recommendations or referrals from other professionals

Specialized training in supervision

Other

Standard 3.7A Qualified Supervisor "Other"

Specify Other:

Access to clinical outplacement coordinator

Standard 3.7A Amount of Supervision

How does the program determine the appropriate amount of supervision for the development of clinical skills in individual students? (Select all that apply)

Establish and monitor reasonable supervision schedules to ensure supervisor availability during diagnostic and treatment sessions

Evaluate student clinical performance at mid-term

Evaluate student clinical performance at end of term

Use student feedback

Use supervisor feedback

Standard 3.7A Access to Supervisors

How do students have access to supervisors/preceptors when providing services to clients in on- and off-campus placements? (Select all that apply)

During the clinical session

Email

Phone

Posted office hours

Regularly scheduled meetings/conferences

Unscheduled meetings

Standard 3.7A Informing Students

How does the program inform students regarding ethics, legal and safety issues and procedures? (Select all that apply)

Clinical handbook

Clinical practice

HIPAA training

Student handbook

Student orientation

Standard 3.7A Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.7A.

None

Standard 3.8A Clinical Education - Client Welfare

Standard 3.8A Clinical Education - Client Welfare

Clinical education is provided in a manner that ensures that the welfare of each person served by a student and clinical educator team is protected and in accordance with recognized standards of ethical practice and relevant federal and state regulations.

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Requirement for Review:

- The program must demonstrate that the supervision provided to each student is adjusted to ensure that the specific needs are met for each individual who is receiving services.
- The program must demonstrate that the procedures used in clinical education ensure that the welfare of each person being served by the student and clinical educator team is protected.
- The program must demonstrate that the services provided by the student and clinical educator team is in accordance with recognized standards of ethical practice and relevant federal and state regulations.
- The program must demonstrate that it provides the opportunity for students to understand and practice the principles of universal precautions to prevent the spread of infectious and contagious diseases.

Findings

No findings provided

Standard 3.8A Prior Concerns

If there were areas of non-compliance or follow-up regarding Clinical Education – Client Welfare noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Clinical Education – Client Welfare listed in the last Accreditation Action Report

Standard 3.8A Client Needs

Describe policies and procedures that the program uses to ensure that the amount of supervision provided to each student is adjusted so that the specific needs are met for each individual who is receiving services.

Our program's clinical care is rooted in a person-/child-/family-centered approach--we place the patient/children/families and their needs at the center of care. Due to the fact that our AuD cohorts do not exceed 8 students, supervisors are able to supervise them accordance to both their needs AND the patients' needs. Thus, the amount of supervision is determined individually by each supervisor for each student based on the clinical competency rubrics we employ for each clinical practicum (COMD 7200, 7300, & 7400) and the specific needs of the individual receiving care. The amount of supervision/hands-on support is increased when student's skill does not meet that necessary for the specific needs of patient. More support is also provided when students have not yet completed the graduate coursework relevant to their particular patient's needs. In some extreme cases, this may involve supervisors taking the lead in care provision while the student engages in support tasks (e.g, inputting data into medical records or preparing a hearing aid order).

Standard 3.8A Clinical Consultation

Describe how consultation between the student and the clinical educator occurs in the planning and provision of services.

Consultation between the student and the clinical educator always occurs prior to the provision of services. The student and the clinical educator initially meet weekly to consult regarding client welfare, planning and provision of services. Feedback is provided to the student clinician following the majority of clinical visits. The methods and rate of consultation vary across clinical supervisors. For example, some supervisors have extensive in-person meetings with students prior to a patient's arrival; some supervisors communicate and plan via email or of online conference; and some supervisors maintain shared, running documentation in cloud-based folders.

Standard 3.8A Client Welfare

Describe policies and procedures that ensure that the welfare of each individual who is served is protected.

The USU Audiology Graduate Student Handbook states policies and procedures specific to client welfare including: HIPAA,

contacting and communicating with clients, required assessments, reports and notes, universal precautions, client safety and supervision. Students complete professional onboarding through the Sorenson Center for Clinical Excellence which includes training/approval related to HIPAA, FERPA, medicare reimbursements, and patient confidentiality.

Standard 3.8A Client Ethics

Provide policies and procedures describing how the care that is delivered by the student and clinical educator team is in accordance with recognized standards of ethical practice and relevant state and federal regulation.

Client welfare is paramount to our clinical training model. Each client/student is supervised by an ASHA certified audiologist who has specific knowledge and experience relating to the hearing and/or balance disorder being served. ASHA's Code of Ethics is explicitly taught to students in COMD 7000 & 7380 and during clinical practicum. Student's must read the ASHA Code of Ethics in the USU Audiology Graduate Student Handbook and sign a document stating that they have read and will abide by the code of ethics.

Standard 3.8A Code of Ethics

Describe where the codes of ethics are in the relevant published materials provided by the program.

USU Audiology Graduate Student Handbook

Standard 3.8A Disease Prevention

Provide policies and procedures that demonstrate how the program provides the opportunity for students to understand and practice the principles of universal precautions to prevent the spread of infectious and contagious diseases.

Universal precautions are explicitly taught in Medical Aspects (COMD 7490). Principles of universal precautions are discussed and modeled in clinical practicum as well. Policies and procedures are also posted in the clinic spaces.

Standard 3.8A Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.8A.

None

Standard 3.9A External Placements

Standard 3.9A External Placements

Clinical education obtained in external placements is governed by agreements between the program and the external facility and is monitored by program faculty.

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Requirement for Review:

- The program must have evidence of valid agreements (written or electronic) with all active external facilities in which students are placed for clinical practicum experiences.
- The program must have written policies regarding the role of students in the selection of externship sites and the placement of students in the sites.
- 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.
- The program must have processes to ensure that the clinical education in external facilities is monitored by the program to verify that educational objectives are met.

Findings

No findings provided

Standard 3.9A Prior Concerns

If there were areas of non-compliance or follow-up regarding External Placements noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding External Placements listed in the last Accreditation Action Report

Standard 3.9A Agreements to Accept Students

Describe how valid agreements (written or electronic) or statements of intent to accept students are established and maintained, once agreements are established with all active external facilities in which students will be placed for clinical practicum experiences.

New agreements are established by the AuD Clinical Outplacement Coordinator contacting the prospective external facility. Once a verbal or written statement of intent is established, the coordinator sends an electronic copy of the USU approved

"Student Externship Agreement" to the facility to be reviewed. If the facility agrees to the USU agreement, it is signed by both parties, and a copy is provided to each. A copy is placed in *Box*. Contract expiration is also noted in CALIPSO. If the facility does not agree to the USU document, they will then provide their own copy to the Clinical Outplacement Coordinator for review. The coordinator fills in necessary areas with track changes, and then forwards the document to Kathy Clements, Financial Officer Sr in the Emma Eccles Jones College of Education & Human Services, for further review. It is then submitted for Legal and Risk Management to review before being signed. Once signed, the coordinator sends the signed copy to the facility. Once an executed contract is signed, a copy is sent back to Kathy Clements, a copy is stored in *Box*, and the expiration date is noted in CALIPSO. Certificates of Insurance (COI) are requested and updated on an annual basis (July 1 through June 30). These are obtained through USU's office of Risk Management. Once a COI is obtained, it is saved into *Box.*

Standard 3.9A Externship Sites Policy

Describe policies regarding: (a) the role of students in the selection of externship sites, and (b) the placement of students in the sites.

Fourth year students independently search, apply, and interview with externship sites. The coordinator is available as much, or as little, as the student needs with this process. Students cannot accept an externship location until it has been approved by the Clinical Outplacement Coordinator. Once an offer has been extended, the student provides the coordinator with direct contact information externship contact. Once the offer has been confirmed and other questions addressed, the student is notified of being able to either accept or decline a position.

Obtaining a valid and active agreement between the externship site and USU is then started by following the procedure outlined above in "Standard 3.9A Agreements to Accept Students".

Standard 3.9A Policy for External Facilities

Describe policies and procedures the program uses to select and place students in external facilities.

Third year students have an active role in selecting and requesting placement in external facilities. These students and the Clinical outplacement Coordinator collaborate and discuss the student's current clinical interests and potential placements. This information is noted in the the "Externship Tracking" spreadsheet located in *Box*. Regular formal and informal discussions take place between the coordinator and student throughout the end of their 2nd and start of their 3rd year. Students provide their *Top 3* external placements for each semester they will be off campus.

Standard 3.9A Clinical Due Diligence

Describe policies and procedures that demonstrate due diligence to ensure that each external facility has the clinical population and personnel to meet the educational needs of each student assigned to that site.

Before a new agreement is started by either party, the Clinical Outplacement Coordinator communicates with the external facility via phone call or email to discuss clinical opportunities and expectations. Additionally, when facilities register for a CALIPSO account they are instructed to complete a "Site Information Form". This document contains information regarding to clinic population, learning opportunities, specialty clinics, distance from university, etc.

Standard 3.9A Effective Sites

Describe the processes that the program uses to evaluate the effectiveness of the educational opportunities provided at each active site.

Students complete an online survey at the end of each semester where they provide information regarding their experiences with each supervisor they work with. These results are sent to the Clinic Director, Cache Pitt, who disseminates the results to supervisors.

Standard 3.9A Monitoring Sites

Describe the processes that the program uses to ensure monitoring of the clinical education in external facilities.

All external facility is provided with the contact information of the Clinical Outplacement Coordinator. They are contacted at various times throughout the semester by the Clinical Outplacement Coordinator regarding the student placed with them and if there are any questions, concerns, or issues that should be addressed by USU.

Prior to the end of their placement, students are required to complete an online survey detailing their clinical experiences and interactions at their off-site placements. These results are also reviewed by Clinic Director, Cache Pitt. When potential concerns arise regarding the sites (e.g., students may not be receiving an appropriate amount of supervision) this information is communicated with the Clinical Outplacement Coordinator, Division Chair, and audiology faculty at large. All faculty then discuss whether or not further action is needed regarding the external facility (e.g., the clinical outplacement coordinator will call the facility to learn more or in extreme cases they will cease placing students at the location).

A separate survey is also sent to all students in off-campus placements/externships to obtain site-specific information. This information is compiled by the clinical outplacement coordinator and used to guide future students when requesting

placements.

Standard 3.9A Objectives Sites

Describe the process that the program uses to verify that the educational objectives of each active site are met.

Data collection regarding the educational objectives of each active site are also gathered from the students' online survey that they complete at the end of each semester. Recall, in this survey students answer questions and provide information regarding their experiences at the external clinical sites. These results are sent to the Clinic Director, Cache Pitt, who disseminates the results to supervisors.

Standard 3.9A Signed Agreements

Describe the procedures that the program uses to ensure that valid agreements (written or electronic) between the external site and the program are signed before students are placed.

Once a location agrees to take a student, the coordinator checks the agreement term. A student cannot begin their placement if an agreement is expired or invalid. In that event, the coordinator works with the facility to get a current and valid agreement in place promptly. If an agreement is not current and valid prior to the anticipated start date, the student cannot attend the placement and other accommodations/placements are made on a case-by-case basis.

Standard 3.9A External Facilities Agreements

Who is responsible for monitoring agreements with external facilities? (Select all that apply)

Faculty

Other

Standard 3.9A External Facilities Agreements "Other"

Specify Other:

AuD Clinical Outplacement Coordinator (who is a clinical faculty)

Standard 3.9A Placement Coordinator

Who is responsible for coordinating clinical education placements? (Select all that apply)

Faculty

Intern\externship supervisor

Other

Standard 3.9A Placement Coordinator "Other"

Specify Other:

AuD Clinical Outplacement Coordinator

Standard 3.9A Placement Monitor

How does the program monitor and document clinical education placements? (Select all that apply)

Phone calls

Review of clinical practicum evaluations

Review of externship supervisor evaluation

Review of student clinical records/files

Other

Standard 3.9A Placement Monitor "Other"

Specify Other:

Students complete the "Supervisor Summary" survey at the end of each placement.

Standard 3.9A Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.9A.

None

Standard 3.10A Student Conduct

Standard 3.10A Student Conduct

An effective entry-level audiology program ensures that its students know the expectations regarding their exercise of the highest level of academic and clinical integrity during all aspects of their education.

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Requirement for Review:

- The program must have written policies and procedures that describe its expectations of student behavior with regard to academic and clinical conduct.
- The program must have policies and procedures that describe the processes used to address violations of academic and clinical conduct, including, but not limited, to plagiarism, dishonesty, all aspects of cheating, and violations of ethical practice.

Findings

No findings provided

Standard 3.10A Prior Concerns

If there were areas of non-compliance or follow-up regarding Student Conduct noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Student Conduct listed in the last Accreditation Action Report

Standard 3.10A Policy for Student Conduct

Describe policies and procedures that are pertinent to expectations of student academic and clinical conduct.

The program (and university) has specific policies and procedures in place to outline the expectations of student academic and clinical conduct. These guidelines clearly define the standards and behaviors expected from students in both academic and clinical settings. The policies emphasize integrity, professionalism, respect, and adherence to ethical guidelines. Students are expected to maintain academic honesty, demonstrate professionalism in their interactions, and follow all protocols and procedures in clinical settings. These policies and procedures are listed in USU's Audiology Clinical Doctorate Student Handbook and more broadly in USU's student code https://www.usu.edu/student-conduct/student-code/

Standard 3.10A Policy for Clinical Conduct

Describe policies and procedures that the program uses to address violations of expectations regarding academic and clinical conduct.

The audiology program employs the policies and procedures put in place by USU's Office of Student Conduct and Community Standards to to address student violations of expectations regarding academic and clinical conduct. They discuss the faculty's concerns and the student's perspective and understanding. If indeed a violation occurred, various sanctions are put in place such as warnings, loss of clinical hours, probation from the program/USU, and/or expulsion.

Standard 3.10A Clinical Integrity

Describe how the program ensures that students know the expectations regarding their application of the highest level of academic and clinical integrity during all aspects of their education (e.g., written policies and procedures that are pertinent to expectations of student academic and clinical conduct) and that these expectations are consistently applied.

The program ensures that students know the expectations regarding their application of the highest level of academic and clinical integrity during all aspects of their education via synonymous written policies accessible across a variety of places, such as USU's Audiology Clinical Doctorate Student Handbook and more broadly in USU's student code https://www.usu.edu/student-conduct/student-code/. Faculty also continually communicate these expectations in courses (e.g., verbally and via syllabi) and model similar behaviors during their own professional practice. These expectations are also talked about during orientation when AuD students first begin the program. It is our faculty's hope that we consistently apply our expectations, but that can vary naturally across individuals. Thus, we constantly have our understandings of the expectations in check and leave time to discuss our expectations at the end of each faculty division meeting (while holding each other accountable).

Standard 3.10A Violations

Describe the process that the program will use to address violations of expectations regarding academic and clinical conduct.

The audiology program employs the policies and procedures put in place by USU's Office of Student Conduct and Community Standards to to address student violations of expectations regarding academic and clinical conduct. This process involves (1) the overseeing audiology faculty initiating a discussion withe student regarding a potential violation. They discuss the faculty's concerns and the student's perspective and understanding. (2) If indeed a violation seems to have occurred, the division chair is informed of the potential violation and the key players involved discuss the situation with the chair. Often at this point the division chair may be require to involve the Department Head. This could also be the time that the division chair needs to involve the Office of Student Conduct and Community Standards via their reporting portal, if that is the case USU will continue the process at higher levels. If indeed a violation occurred, various sanctions could be put in place such as warnings, loss of clinical hours, probation from the program/USU, and/or expulsion.

Standard 3.10A Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.10A.

None

Standard 4.0 Students

Standard 4.0 Students

Standard 4.1 Student Admission Criteria

Standard 4.1 Student Admission Criteria

The program criteria for accepting students for graduate study in audiology or speech-language pathology meet or exceed the institutional policy for admission to graduate study.

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Requirement for Review:

- The admission criteria must meet or exceed those of the institution and be appropriate for the degree being offered.
- Policies regarding any exceptions to the criteria (such as "conditional" status) must be clearly explained and consistently followed.

Findings

No findings provided

Standard 4.1 Prior Concerns

If there were areas of non-compliance or follow-up regarding Student Admission Criteria noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Admission Criteria listed in the last Accreditation Action Report

Standard 4.1 Admission Requirements

Indicate the university and program requirements for admission to the graduate program.

	University/College	Accredited Program
Minimum GPA	0.0	3.0
Minimum combined GRE score (If applicable)		
Letters of recommendation	Yes	Yes
Personal statements/interviews	Yes	Yes
Writing Sample	No	No
Undergraduate major in CSD	No	No

Standard 4.1 Additional GPA

Describe any additional GPA requirements for admission used by the program (e.g., GPA in the major, GPA in the last 30 hours, etc.).

Our program does not have additional GPA requirements for admission.

Standard 4.1 Admission Rationale

Describe the program's rationale for admissions criteria that are different than that of the university.

Same as that of the university

Standard 4.1 Admission Exceptions

Describe the program's policies regarding any exceptions to the criteria (e.g., conditional status) and explain how they are consistently followed.

Our program does not have policies regarding any exceptions to the criteria.

Standard 4.1 Clarifying Information

Use the text box below to provide any additional clarifying information regarding the program's compliance with Standard 4.1.

None

Standard 4.2 Student Adaptations

Standard 4.2 Student Adaptations

The program makes reasonable adaptations in curriculum, policies, and procedures to accommodate differences among individual students.

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Requirement for Review:

- The program must provide evidence that its curriculum and program policies and procedures for admission, internal and external clinical placements, and retention of students reflect a respect for and understanding of cultural, linguistic, and individual diversity.
- The program must have a policy regarding proficiency in spoken and written English and other languages of instruction and service delivery and all other performance expectations.
- The program must demonstrate that its language proficiency policy is applied consistently.
- The program must have a policy regarding the use of accommodations for students with reported disabilities.

Findings

No findings provided

Standard 4.2 Prior Concerns

If there were areas of non-compliance or follow-up regarding Student Adaptations noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Student Adaptations listed in the last Accreditation Action Report

Standard 4.2 Policy for Diversity

Describe how the program's curriculum and program policies and procedures for admission, internal and external placements, and retention of students reflect a respect for and an understanding of cultural, linguistic, and individual diversity.

The program's curriculum and program policies and procedures reflect a respect for and understanding of cultural, linguistic, and individual diversity via a number of different policies and procedures. The curriculum is designed to reflect

diverse perspectives, experiences, and cultural contexts via classroom content (e.g., readings, lecture materials, discussions, and media) and clinic expectations/requirements. Admission policies reflect a respect for and understanding of cultural, linguistic, and individual diversity as we serve students accross the state of Utah and offer targeted support for first-generation and underrepresented students. Additionally, we recruit students from out of state as well as internationally. We (particularly our clinical outplacement coordinator) thoughtfully evaluate out internal and external placements with the aim to provide diverse learning environments that are supportive of ALL students and patients. Finally, when it comes to retention of students, our division faculty work to implement policies and behaviors shown to support underrepresented minority students. For example, the division chair holds one-on-one annual meetings with these students to ask how they can be supported; faculty make sure to spend time learning how to pronounce and spell each student's name; clinical faculty and students share a "safe word" that allows students to escape uncomfortable situations with patients at their leisure (e.g., when a patient is engaging in microagressions "no where are you *froooom*?" or sexual harassment); and we provide students with a list of resources for safe living quarters for incoming LGBTQIA students.

Standard 4.2 Example of Diversity in Curriculum

Provide an example documenting the fact that the program's curriculum demonstrates respect for and understanding of cultural, linguistic, and individual diversity.

Below are excerpts from the COMD 7460 Aural Rehabilitation Across the Lifespan's course syllabus. These excerpts are evidence of the fact that the program's curriculum demonstrates respect for and understanding of cultural, linguistic, and individual diversity.

"**Important note:** The field of audiology, and more specifically AR, has a long history of being very White and male. Both the professionals who provide and research said care (in addition to those who can access and benefit from hearing healthcare) are a privileged subset of individuals across the globe. It is important to acknowledge the history of exclusion of people with diverse identities, backgrounds, or ideologies from our field. This history of exclusion has resulted in a constrained perspective of hearing healthcare theories and provision. This exclusion also explains why authors from marginalized backgrounds or identities are lacking in our syllabus reading list. As a life-long learner I encourage you to pay attention to new and valuable perspectives—particularly when they are coming from individuals with marginalized backgrounds—and share your knowledge with me so that I can include such perspectives in this course."

"***Academic Freedom + Professional Responsibilities***
This course involves participation in discussions and activities. We each have different experiences and that influence our perspectives of the world. You may feel uncomfortable or disagree with certain ideas or opinions expressed by others or

with certain topics in the class. You may also find you share perspectives or experiences with others. The classroom should be a lively, interactive and comfortable place where information is shared ideas tested and issues debated. Comments shared within this course are to remain confidential to the audience of this course; do not copy or share statements or writings from this course with others, not in this course section. As a student, you should expect me to be prepared for each course, to treat each student with respect and compassion. Students will, in turn, come to each class prepared, complete assignments on time, and will adhere to the university's academic standards."

"**Sensitive + Professional Language**

As future audiologists, you must make every effort to acknowledge individuals who happen to have communication challenges. As such, it is required that in writing and in verbal exchanges you use PERSON CENTERED LANGUAGE when possible (e.g., *"What language do you use to describe yourself?" "I'm deaf" "Cool. Should I use that language to describe you too?" "Yes, please!"*). You should use PERSON FIRST LANGUAGE in circumstances when person centered language is not possible (e.g., *person with hearing loss*; *a child who is deaf*). It is also required that you adopt a social-perspective of disability and refer to individuals who have an impaired ability to hear as a person with *hearing loss* (i.e. not *hearing impairment*)."

"**Parenting Needs + Concerns**

Dr. XXX knows students have lives outside of class, and some of them may be parents or the primary caretaker for a young child. Dr. XXX expects that students have made arrangements for childcare to enable them to attend class. That being said, sometimes the best laid plans fall through. Dr. XXX is a parent; she understands. Nursing or bottle-fed infants are welcome in class anytime, and students are welcome to feed their babies during class. If class lasts for more than 2 hours, students are welcome to take a break to pump. If you are a student caring for an infant so young that childcare is not possible, you are welcome to bring that infant to classes."

"**Part 8: Classroom Inclusivity**

Preferred Name & Preferred Gender Pronouns

"Professional courtesy and sensitivity are especially important with respect to individuals and topics dealing with differences of race, culture, religion, politics, sexual orientation, gender, gender variance, and nationalities. Class rosters are provided to the instructor with the student's legal name. I will gladly honor your request to address you by an alternate name or gender pronoun. Please advise me of this preference early in the semester so that I may make appropriate changes to my records."

Diversity Statement

Regardless of intent, careless or ill-informed remarks can be offensive and hurtful to others and detract from the learning climate. If you feel uncomfortable in a classroom due to offensive language or actions by an instructor or student(s) regarding ethnicity, gender, or sexual orientation, contact..."

Standard 4.2 Example of Diversity in Policy

Provide an example documenting how the program's policies and procedures demonstrate respect for and understanding of cultural, linguistic, and individual diversity (e.g., admission, internal/external clinical placement and student retention policies/procedures, proficiency in English).

This year, the department has focused on raising awareness of DEI issues in preparation for a strategic introduction and implementation of policy across all of our programs. The department has provided multiple opportunities and mechanisms for DEI learning this year, including setting up a DEI *Box* folder with articles and resources available since October 2022, establishing a DEI library in a small meeting room located in the department, purchasing the book *Blind Spot* (focused on implicit bias) for all the faculty and staff, and presenting a DEI panel discussion in February 2023 (with a recording available in the DEI *Box* folder).

Standard 4.2 Policy for Language

Provide the program's policy regarding proficiency in English and/or other languages, and describe how that policy will be applied consistently.

Students must communicate proficiently in spoken English. Proficiency in other languages is welcomed but optional. Proficiency in spoken English for international students from non-English-speaking countries is monitored and confirmed by USU's Graduate School.

Standard 4.2 Policy for Accommodations

Provide the program's policy regarding the processes used to determine the need for and the provision of accommodations for students with reported disabilities.

The audiology program works with USU's Disability Resource Center (DRC) to support students with disabilities. When a student initiates a request for accommodation(s) for learning or is exhibiting difficulties possibly related to a disability, they are directed to the DRC. If an accommodation is warranted, the DRC, student, Audiology division chair (and other individuals as needed) determine appropriate accommodations for academic and clinical contexts. Specific adaptations depend on the individual student's needs, strengths, and context.

Standard 4.2 Clarifying Information

Use the text box below to provide any additional clarifying information regarding the program's compliance with Standard 4.2.

None

Standard 4.3 Student Intervention

Standard 4.3 Student Intervention

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.

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Requirement for Review:

- The program has policies and procedures for identifying students who need intervention to meet program expectations for the acquisition of knowledge and skills in the academic component of the curriculum.
- The program has policies and procedures for identifying students who need intervention to meet program expectations for the acquisition of knowledge and skills in the clinical component of the curriculum.
- The program has policies and procedures for implementing and documenting all forms of intervention used to facilitate each student's success in meeting the program's expectations.
- The program must demonstrate that the policies and procedures are applied consistently across all students who are identified as needing intervention.

Findings

No findings provided

Standard 4.3 Prior Concerns

If there were areas of non-compliance or follow-up regarding Student Intervention noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Student Interventions listed in the last Accreditation Action Report

Standard 4.3 Policy on Intervention

Describe the program's policies and procedures for identifying students who need intervention in order to meet program expectations for the acquisition of knowledge and skills in all aspects (academic and clinical) of the curriculum:

Academic aspects of the program

The audiology division regularly monitors its graduate students' academic progress. The program's expectations are that student's achieve academic success. Student success requires that they: (1) achieve a minimum GPA of 3.0 across their coursework and earn no more than one grade of C+ or lower and (2) achieve competence for the ASHA Knowledge And Skill Assessment (KASA) standards associated with each course in their program. Students' course grades are recorded in the *Canvas* and *Banner* software programs by course instructors. Competency progress on each course's KASA standard is documented by the course instructor in *Canvas* and/or a separate data sheet; students' final progress is reported by the course instructors to the clinical outplacement coordinator. The clinical outplacement coordinator inputs this course competency progress into CALIPSO. Instructors specify in their course syllabi the KASA standards for their courses, and the student outcomes required to meet the competencies within that course. Students who do not meet the competency criterion on the specified evaluation task (e.g., total exam, exam section, assignment, activity) are given further opportunities such as other tasks in that course, a task re-do, or other specially-designed tasks. In some cases, students may have another opportunity in another course or context. Performance on any re-takes or additional tasks will not change the original task grade or the final course grade. A course is more than a collection of competency objectives tied to a particular standard. Other valuable learning experiences contribute to the knowledge gained and the course grade. As a result, it is possible for a student to earn a course grade of B- or higher but have made additional efforts to meet particular competencies; conversely, it is possible for the student to meet all the competencies at the first opportunity, but earn a course grade of C+ or lower. If students do not achieve academic success—as measured by their course grades and/or competency levels—they warrant intervention to meet program expectations. When a student requires formal intervention, a plan of action with specific performance criteria will be designed by the course faculty and Division Chair. If the plan requires a student to repeat a course or part of a course, the student will audit the course or enroll in an independent study for the number of credit hours determined in the remediation plan. The repetition grade will not replace or change the grade earned in the original course. The grade on that remediation course will count toward the maximum of two unsatisfactory grades. If a student on in intervention fails to successfully remediate but has not met the maximum of two unsatisfactory grades, the student will be placed on departmental probation the following semester. The Division will determine the actions and timeline required for the student to end probation up to a maximum of one additional semester. If a student fails to successfully complete the required probationary steps within the assigned timeline then that student may be dismissed from the graduate program.

Clinical aspects of the program

The audiology division regularly monitors its graduate students' clinical progress. The program's expectations are that student's achieve levels of clinical competency across all ASHA standards (along with appropriate grades in their clinical practicum courses). Student clinical success requires that they: (1) achieve a minimum GPA of 3.0 across their coursework and earn no more than one grade of C+ or lower and (2) achieve competence for the ASHA Knowledge And Skill Assessment (KASA) standards associated with each clinical practicum placement. Students' practicum grades are reported via the clinical supervisors to the clinical outplacement coordinator. The clinical outplacement coordinator records them in the *Banner* and CALIPSO software programs. Competency progress on each KASA standard is documented by the clinical supervision and reported in CALIPSO. Clinical practicum supervisors specify in their practicum course syllabi the KASA standards for their practicum, and the student outcomes required to achieve competency in the practicum. Students who do not meet competency are given further opportunities--such as a task re-do or other specially-designed activities (e.g., simulated patients). In some cases, students may have another opportunity in another practicum or context to achieve competency. Performance on any re-takes or additional tasks will not change the original and final practicum grade. A practicum experience is more than a collection of competency objectives tied to a particular standard. Other valuable learning experiences contribute to the knowledge gained and the practicum grade. As a result, it is possible for a student to earn a practicum grade of B- or higher but have made additional efforts to meet particular competencies; conversely, it is possible for the student to meet all the competencies at the first opportunity, but earn a practicum course grade of C+ or lower. If students do not achieve clinical success—as measured by their practicum grades and/or competency levels—they warrant intervention to meet program expectations. When a student requires formal intervention, a plan of action with specific performance criteria will be designed by the clinical practicum faculty and Division Chair. If the plan requires a student to repeat a practicum or part of a practicum, the student will audit the practicum course or enroll in an independent study for the number of credit hours determined in the remediation plan. The repetition grade will not replace or change the grade earned in the original course. The grade on that remediation practicum course will count toward the maximum of two unsatisfactory grades. If a student on in intervention fails to successfully remediate but has not met the maximum of two unsatisfactory grades, the student will be placed on departmental probation the following semester. The Division will determine the actions and timeline required for the student to end probation up to a maximum of one additional semester. If a student fails to successfully complete the required probationary steps within the assigned timeline then that student may be dismissed from the graduate program.

Standard 4.3 Intervention Plan and Procedures

Describe the program's policies and procedures for ensuring that intervention plans are implemented, documented, and provided to students.

The program's policies and procedures ensure the implementation, written documentation, and provision of intervention plans to students. These policies are indicated in the *Audiology Clinical Doctorate Student Handbook* and documented in further detail for faculty in *Box.* They include clear guidelines and timelines for plan execution, thorough record-keeping of interventions, and efficient distribution of plans to students. Although each intervention varies as required by the course and/or practicum and the students' skill set—the faculty overseeing the clinical practicum and/or course (in collaboration with the Division Chair) are responsible for intervention implementation and oversight. Intervention progress is reported to the audiology faculty during division meetings. Intervention is typically expected to last no longer than the duration of the following semester.

Standard 4.3 Intervention Consistency

Describe how these policies and procedures will be applied consistently across all students who are identified as needing intervention.

We aim to apply our policies and procedures consistently across all students who are identified as needing intervention via our faculty's thorough documentation and plans identified above.

Standard 4.3 Clarifying Information

Use the text box below to provide any additional clarifying information regarding the program's compliance with Standard 4.3.

None

Standard 4.4 Student Information

Standard 4.4 Student Information

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.

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Requirement for Review:

- 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.

Findings

No findings provided

Standard 4.4 Prior Concerns

If there were areas of non-compliance or follow-up regarding Student Information noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Student Information listed in the last Accreditation Action Report

Standard 4.4 Students Informed of Policy

How are students informed about program policies and procedures? (Select all that apply)

Academic advising

Coursework

Student orientation meetings

Student handbooks

Website

Standard 4.4 Students Informed of Policy "Website"

Website URL:

https://cehs.usu.edu/comdde/policies/index

Standard 4.4 Students Informed of Honesty

How are students informed about expectations regarding academic integrity and honesty? (Select all that apply)

Academic advising

Coursework

Student handbooks

Website

Standard 4.4 Students Informed of Honesty "Website"

Website URL:

https://www.usu.edu/student-conduct/

Standard 4.4 Informed of Degree Requirements

How are students informed about degree requirements? (Select all that apply)

Academic advising

Coursework

Bulletin board posting

Student handbooks

Website

Other

Standard 4.4 Informed of Degree Requirements "Website"

Website URL:

https://cehs.usu.edu/comdde/graduate/doctor-of-audiology and https://catalog.usu.edu/preview_program.php?catoid=38&poid=36721

Standard 4.4 Informed of Degree Requirements "Other"

Specify Other:

Degreeworks, USU's online software and their personal program plans stored in their personalized Box folder

Standard 4.4 Informed of Credential Requirements

How are students informed about requirements for professional credentialing? (Select all that apply)

Academic advising

Coursework

Student orientation meetings

Website

Standard 4.4 Informed of Credential Requirements "Website"

Website URL:

https://cehs.usu.edu/comdde/graduate/doctor-of-audiology

Standard 4.4 Informed of Ethics

How are students informed about ethical practice? (Select all that apply)

Coursework

Student orientation meetings

Student handbooks

Website

Other

Standard 4.4 Informed of Ethics "Website"

Website URL:

https://www.asha.org/practice/ethics/

Standard 4.4 Informed of Ethics "Other"

Specify Other:

Clinical instructors guide students on ethical decision-making and client welfare in individual cases.

Standard 4.4 Clarifying Information

Use the text below to provide any additional clarifying information regarding the program's compliance with Standard 4.4.

None

Standard 4.5 Student Complaints

Standard 4.5 Student Complaints

Students are informed about the processes that are available to them for filing a complaint against the program.

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Requirement for Review:

- The program must provide information regarding the process and mechanism to file a complaint against the program within the sponsoring institution.
- The program must maintain a record of student complaints filed against the program within the sponsoring institution.
- The program must maintain a record of student complaints regarding any of the program's policies and procedures or regarding unlawful conduct and make these available to the CAA upon request.
- Students must be made aware of the process and mechanism, including contact information for the CAA, to file a complaint related to the program's compliance with standards for accreditation.

Findings

No findings provided

Standard 4.5 Prior Concerns

If there were areas of non-compliance or follow-up regarding Student Complaints noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Student Complaints listed in the last Accreditation Action Report

Standard 4.5 Policy for Student Complaints

Describe the program's policy and procedures regarding student complaints and unlawful conduct.

Students who feel they have been unfairly treated in academic matters should first discuss the matter with the instructor/practicum supervisor. If the issue cannot be resolved, the student may contact the audiology division chair who

will contact the department head or assistant department head (who is also the SLP Division Chair and SLP Program Director). The student may choose to go directly to the department head or assistant department head. If matters are still not resolved to the student's satisfaction, the student may file a grievance though procedures and timelines specified in https://studentconduct.usu.edu/studentcode/article7. For matters of grievances pertaining to student conduct, see Article V. For academic integrity, see Article VI.

For matters of student well-being, discrimination or harassment, the student, instructor or other reporting employees may immediately file a report at the appropriate entity listed at https://www.usu.edu/intervention/reporting

Standard 4.5 Institution Complaint

Describe how the program conveys to students the process and mechanism required to file a complaint against the program within the institution.

The program clearly communicates to students the process of filing a complaint within the institution. This is information is conveyed in each course syllabus, the graduate student handbook, during orientation, and throughout USU's website. Each of these sources provides easily accessible information, including written materials and online resources, outlining the steps to follow, appropriate channels to approach, and necessary documentation. The audiology program prioritizes transparency, fairness, and confidentiality, ensuring students are aware of their rights and feel supported in expressing concerns and seeking resolution.

Standard 4.5 Complaint Mechanism

Describe the program's policy for maintaining a record of student complaints regarding any of the program's policies and procedures or regarding unlawful conduct, and describe how those complaints will be made available to the CAA upon request.

A confidential record of student complaints and steps taken to respond them are maintained in secure *Box* folders accessible by the Dept Head, the Asst Dept Head, Audiology Division Chair, and Clinic Director. Depending on the nature of the complaint, the department may not have access to actions taken beyond the department level. Given that CAA has a legitimate interest in student welfare, and if the university allows it, CAA may be given access to these written records.

Standard 4.5 CAA Complaint

Describe how the program informs students of the process and mechanism required to contact the CAA to file a complaint regarding the program's compliance with accreditation standards.

The contact information and statement is posted on the audiology Graduate webpage under the CAA accreditation statement at https://cehs.usu.edu/comdde/graduate/doctor-of-audiology Students who have a complaint about compliance with accreditation standards may contact the Council on Academic Accreditation at https://caa.asha.org/, 800-498-2071, 301-296-5700, or caareports@asha.org.

Standard 4.5 Review of Complaints

Explain how student complaints are reviewed to assess their impact on compliance with accreditation standards.

The Division Chair and Department Head carefully review student complaints to assess their impact on compliance with accreditation standards. The process involves analyzing the nature of the complaint, evaluating its validity, and determining if it pertains to any specific accreditation requirement. The review may include gathering additional evidence, interviewing relevant parties, and assessing the overall impact on compliance. The goal is to ensure that any identified issues are addressed promptly and appropriately to maintain adherence to accreditation standards.

Standard 4.5 Privacy Complaint

Describe how the program protects the privacy of student information when handling student complaints.

The program prioritizes the protection of student privacy when handling student complaints. It follows strict protocols to ensure that student information remains confidential and is only accessed by authorized personnel involved in the complaint review process. The program adheres to relevant privacy laws and regulations and implements secure data storage and transmission practices. Confidentiality measures are in place to safeguard the privacy of student information throughout the complaint handling procedures.

Standard 4.5 Clarifying Information

Use the text box below to provide any additional clarifying information regarding the program's compliance with Standard 4.5.

None

Standard 4.6 Student Advising

Standard 4.6 Student Advising

Students receive advising on a regular basis that pertains to both academic and clinical performance and progress.

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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.
- The program must maintain records demonstrating that any concerns about a student's performance in meeting the program requirements, including language proficiency, are addressed with the student.

Findings

No findings provided

Standard 4.6 Prior Concerns

If there were areas of non-compliance or follow-up regarding Student Advising noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Student Advising listed in the last Accreditation Action Report

Standard 4.6 Advising Policy

Describe the student advisement processes with respect to academic and clinical instruction. Include in your description the timelines for advising, individuals who will serve as academic advisors, and access to adjunct faculty. Provide the web site URL if available.

The Graduate Advisor (who also has the title of Graduate Program Coordinator) conducts the initial advisement of students. Throughout the application process and then after students are accepted and a cohort is formed, the graduate advisor communicates with the students individually and as a group about admission and registration. The graduate advisor examines their transcripts for undergraduate requirements, tells them the courses in which they should register for for their first fall semester. The graduate advisor conducts the initial student summer orientation, with assistance from the AuD division chair. The graduate advisor guides students through processes and documentation throughout their programs. For specific clinical matters, the clinic director or externship coordinator provide additional advising. The AuD division chair works behind the scenes to guide the graduate advisor and is available directly to students as needed.

Standard 4.6 Academic Advisors

Indicate those individual(s) who serve as academic advisors. (Select all that apply)

Program Director

Staff

Standard 4.6 Clinical Advisors

If advisement of clinical performance is provided separate from academic advisement, indicate the individual(s) who serve as clinical advisors. (Select all that apply)

Clinical director

Clinical supervisor/preceptor

Standard 4.6 Clinical Advisement

How often do students receive clinical advisement?

More than once per term

Standard 4.6 Student Requirements

Describe the process that the program uses to identify students who may not meet program requirements, including those related to language proficiency.

Applicant materials are reviewed carefully to select top candidates for the program. If there are any questions about whether students may meet incoming program requirements, further investigation occurs. Minimum proficiency in English is determined by the university. Candidate statement and other materials, including a Zoom interview with the candidate, help determine if proficiency appears to be sufficient to be successful in clinical placements and become an English-speaking CCC-A by the end of the program.

Standard 4.6 Document Advisement

Describe the mechanisms that the program uses to document the timely and continuing advisement that pertains to students' academic and clinical progress.

The graduate advisor keeps records of timely and continuing advisement of students for academic progress. The clinic director and clinical outplacement coordinator keeps records of timely and continuing advisement of students for clinical

progress. Students can access CALIPSO for specific clinical progress and academic coursework progress records as well as personalized e-folders in our cloud storage system, *Box*.

Standard 4.6 Document Student Performance

Describe the processes that the program uses to document concerns about a student's performance in meeting all program requirements and to ensure that those concerns are addressed with the student.

CALIPSO is used by the division chair, clinical director, clinical outplacement coordinator, and supervisors to track academic and clinical requirements/competencies. Degreeworks is used by graduate program coordinator to help track university requirements for graduation. Faculty discuss student concerns as they arise (typically discussions occur during division faculty meetings) and determine if further action is needed, such as: remediation, repeating competencies, or clinical/professional development. If further action is required, faculty document and meet with student to develop a plan and its accompanying outcomes.

Standard 4.6 Student Support

How are students informed about student support services? (Select all that apply)

Academic advising
Student orientation meetings
Website

Standard 4.6 Student Support "Website"

Website URL:

https://gradschool.usu.edu/resources/student-resources

Standard 4.6 Advisement

Describe how student advisement occurs for students in the residential component. Include an explanation about how advisement affects advisor workload and how students have access to faculty.

Advisement starts from before the time students are admitted. The graduate program coordinator is the primary advisor for our AuD students, but a team of people support and advise students throughout their program. They include: the graduate program coordinator, division chair, clinic director, clinical outplacement coordinator, and faculty. The graduate program coordinator acts as primary contact for prospective, current, and alumni students in regards to admissions and

program completion. The graduate program coordinator is the liaison between students and administrative offices. The advising workload consists of meetings with students, maintaining timely email responses, recruiting potential AuD students, tracking AuD students through degree completion and the graduation process, and helping facilitate student funding. Prior to the beginning of the AuD program, students receive a welcome letter with information and instructions for their upcoming program experience. Then, in-person orientation occurs the week before the Fall semester of the 1st year begins. Throughout the year, the graduate program coordinator monitors students' course registration and follows up on student and/or faculty concerns. Faculty welcome frequent student interactions, maintain office hours, and have open-door policies for AuD students. Faculty are also easily accessible by students via email, phone, and Zoom.

Standard 4.6 Clarifying Information

Use the text box below to provide any additional clarifying information regarding the program's compliance with Standard 4.6.

None

Standard 4.7 Student Progress Documentation

Standard 4.7 Student Progress Documentation

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.

Findings

No findings provided

Standard 4.7 Prior Concerns

If there were areas of non-compliance or follow-up regarding Student Progress Documentation noted in the CAA

Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Student Progress Documentation listed in the last Accreditation Action Report

Standard 4.7 Student Records

Describe the process for development and maintenance of documentation of each student's records for the entire time of his or her matriculation in the program.

For development and maintenance of documentation, when students are admitted, they are entered into the university Banner system which tracks demographics, academic registration, and grades. Advisor maintains departmental records and student progress through Degreeworks, Excel spreadsheets, and facilitates graduation paperwork and PRAXIS completion. CALIPSO is used to track KASA standards and clinical hours. Program chair oversees comprehensive exams and completion documentation. Externship coordinator maintains contracts, completion, and site requirements of students on externships.

Standard 4.7 Tracking Requirements

Describe the mechanisms that the program uses to ensure proper documentation and tracking of student progress toward meeting the academic, clinical, and other requirements for the degree.

For documentation and tracking of student progress, when students are admitted, they are entered into the university Banner system which tracks demographics, academic registration, and grades. Advisor maintains departmental records and student progress through Degreeworks, Excel spreadsheets, and facilitates graduation paperwork and PRAXIS completion. CALIPSO is used to track KASA standards and clinical hours. Program chair oversees comprehensive exams and completion documentation.Externship coordinator maintains contracts, completion, and site requirements of students on externships.

Standard 4.7 Maintain Course of Study

If the program **does not** maintain the records required to document the student's planned course of study for completion of the degree and applicable credentials, use the space below to explain.

The program maintains these records

Standard 4.7 Monitor Course of Study

Describe the process used by the program to monitor and update each student's planned course of study to ensure they are kept accurate, complete and current throughout the student's graduate program.

The graduate program coordinator monitors students' registration each semester and updates a Program of Study in conjunction with the School of Graduate Studies and each student.

Standard 4.7 Responsible for the Course of Study

Indicate the individual(s) responsible for maintaining the records for each student's planned course of study. (Select all that apply)

Student

Other

Standard 4.7 Responsible for the Course of Study "Other"

Specify Other:

The Clinical Outplacement coordinator updates academic progress each semester including required formal interventions in CALIPSO.

Standard 4.7 Schedule for the Course of Study

Indicate the schedule or timeline for updating records for each student's planned course of study.

At least once every semester/quarter

Standard 4.7 Maintain Completion Records

If the program **does not** maintain the records required to document the student's progress toward completion of degree requirements, use the space below to explain.

The program maintains these records

Standard 4.7 Monitor Completion Records

Describe the process used by the program to monitor and update records for student progress toward completion of degree requirements to ensure they are kept accurate, complete and current throughout each student's graduate program.

The graduate program coordinator monitors and updates records toward degree completion every semester via university-

based software and *Box* USU's secure, cloud-based storage. Every student has a Program of Study that must be followed and documented to graduate. In addition, the academic advisor checks for additional requirements such as reporting a Praxis score to the department. All of which are monitored and updated at the beginning of each semester by graduate program coordinator in collaboration with the AuD students. It is worth noting that this collaborative monitoring process was revised in Spring 2023 as it emerged that there was miscommunication between some AuD students and the past clinical outplacement coordinator regarding course credits and clinical practicum courses. The misunderstandings were rectified and the monitoring program has improved in a way that allows for students to be more actively involved in record and document keeping.

Standard 4.7 Responsible for the Completion Records

Indicate the individual(s) responsible for maintaining records toward each student's completion of degree requirements. (Select all that apply)

Student

Other

Standard 4.7 Responsible for the Completion Records "Other"

Specify Other:

The clinical outplacement coordinator is also responsible for maintaining records.

Standard 4.7 Schedule of Completion Records

Indicate the schedule or timeline for updating records toward each student's completion of degree requirements.

At least once every semester/quarter

Standard 4.7 Maintain Certification Records

If the program **does not** maintain the records required to document the student's progress toward the completion of certification requirements, use the space below to explain.

The program does not track student progress toward completion of state licensure requirements beyond those required for CCC-A requirements which are the same as Utah licensure. It is up to individual students to meet other states' licensure requirements.

Standard 4.7 Monitor Completion Records

Describe the process used by the program to monitor and update records for each student's progress toward the completion certification requirements to ensure they are kept accurate, complete, and current throughout each student's graduate program.

The program monitors and updates records for each student's progress toward completion of certification requirements on CALIPSO. The academic advisor monitors and updates the degree progress needed for certification in university documentation locations.

Standard 4.7 Responsible for the Completion Records

Indicate the individual(s) responsible for maintaining records toward each student's progress toward the completion of certification requirements. (Select all that apply)

Student

Other

Standard 4.7 Responsible for the Completion Records "Other"

Specify Other:

The clinical outplacement coordinator is also responsible for maintaining records toward each student's progress.

Standard 4.7 Monitor Certification Requirements

Describe the process used by the program to monitor and update records for each student's progress toward the completion certification requirements to ensure they are kept accurate, complete, and current throughout each student's graduate program.

The clinical outplacement coordinator and the student monitor and update records of their progress toward completion of certification requirements in CALIPSO. During orientation, each AuD student is taught how to monitor and maintain their clinical records in CALIPSO. The clinical outplacement coordinator communicates with clinical supervisors and classroom instructors to gather data regarding each student's KASA competency levels at the end of each semester. The clinical outplacement coordinator inputs, monitors, and maintains this data in CALIPSO.

Standard 4.7 Responsible for Certification Requirements

Indicate the individual(s) responsible for maintaining records toward each student's progress toward the completion of

certification requirements. (Select all that apply)

Clinical advisor

Student

Other

Standard 4.7 Responsible for Certification Requirements "Other"

Specify Other:

The clinical outplacement coordinator is also responsible for maintaining records toward each student's progress.

Standard 4.7 Schedule of Certification Records

Indicate the schedule or timeline for updating records toward each student's progress toward the completion of certification requirements.

At least once every semester/quarter

Standard 4.7 Maintain Licensure Records

If the program **does not** maintain the records required to document the student's progress toward completion of state licensure, use the space below to explain.

The program does not track student progress toward completion of state licensure requirements beyond those required for CCC-A requirements which are the same as Utah licensure. It is up to individual students to meet other states' licensure requirements.

Standard 4.7 Monitor Licensure Requirements

Describe the process used by the program to monitor and update records for student's progress toward completion of state licensure to ensure they are kept accurate, complete and current throughout each student's graduate program.

The program does not track student progress toward completion of state licensure requirements beyond those required for CCC-A requirements which happen to overlap with those required of Utah licensure. It is up to individuals students to meet other states/licensure requirements.

Standard 4.7 Responsible for Licensure Requirements

Indicate the individual(s) responsible for maintaining the records for each student's progress toward completion of state

licensure. (Select all that apply)

Student

Other

Standard 4.7 Responsible for Licensure Requirements "Other"

Specify Other:

The clinical outplacement coordinator is also responsible for maintaining records toward each student's progress.

Standard 4.7 Schedule of Licensure Requirements

Indicate the schedule or timeline for updating records for each student's progress toward completion of state licensure.

At least annually

Standard 4.7 Maintain Teacher Certification Records

If the program **does not** maintain the records required to document the student's progress toward completion of state teacher certification and/or other program certifications, use the space below to explain.

The audiology program does not track student progress toward completion of teacher certification requirements beyond those may overlap with what is required for CCC-A requirements because is it not a goal of our audiology clinical doctorate program.

Standard 4.7 Monitor Teacher Certification Records

Describe the process used by the program to monitor and update student's progress toward completion of state teacher certification and/or other program certifications to ensure they are kept accurate, complete and current throughout each student's graduate program.

The audiology program does not track student progress toward completion of teacher certification requirements beyond those may overlap with what is required for CCC-A requirements because is it not a goal of our audiology clinical doctorate program.

Standard 4.7 Responsible for Teacher Certification Records

Indicate the individual(s) responsible for maintaining the records for each student's progress toward completion of state teacher certification and/or other program certification. (Select all that apply)

Other

Standard 4.7 Responsible for Teacher Certification Records "Other"

Specify Other:

The audiology program does not track student progress toward completion of teacher certification requirements beyond those may overlap with what is required for CCC-A requirements because is it not a goal of our audiology clinical doctorate program.

Standard 4.7 Schedule of Teacher Certification Records

Indicate the schedule or timeline for updating records for each student's progress toward completion of state teacher certification and/or other program certifications.

No set schedule

Standard 4.7 Clarifying Information

Use the text box below to provide any additional clarifying information regarding the program's compliance with Standard 4.7.

Fabric's interface will not allow me to leave this blank. I have no clarifying information.

Standard 4.8 Availability of Student Records

Standard 4.8 Availability of Student Records

The program makes the documentation of student progress toward completing the graduate degree and meeting professional credentialing requirements available to its students to assist them in qualifying for the credential(s).

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Requirement for Review:

- The program must provide each student access to his or her own records upon request.
- The program must make records available to program graduates and those who attended the program, but did not graduate.
- The availability of records for program graduates and those who attended the program, but did not graduate, must be consistent with the institution's and the program's policies regarding retention of student records.

Findings

No findings provided

Standard 4.8 Prior Concerns

If there were areas of non-compliance or follow-up regarding Availability of Student Records noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Availability of Student Records listed in the last Accreditation Action Report

Standard 4.8 Access for Graduates

Describe the process that the program uses to provide access to student records that are requested by the students and by program graduates.

Students have access through USU's Banner system to their records. They can also contact the registrar for academic information, using their student identification number and required identity documentation. For clinical education records, students access CALIPSO directly. If alumni cannot access their CALIPSO records, they can request the information with their student identification number and identity documentation.

Standard 4.8 Access for Non-Graduates

Describe the processes that the program uses to provide access to student records that are requested by those who

attended the program but did not graduate.

The same as for graduates of the program.

Standard 4.8 Institution Policy for Records

Describe the institution's policy for retention of student records.

As reported by the USU Assistant Registrar Adam Gleed, the institution follows the retention and disposal of student records specified by the governing body of the American Associate of Collegiate Registrars and Admissions Officers. The document specifying this can be retrieved at:

https://2014.accreditation.ncsu.edu/pages/3.9/3.9.2/AACRAO_Retention_Guidelines.pdf

Standard 4.8 Program Policy for Records

Describe the program's policy for retention of student records.

The program retains student clinical and academic records for at least 10 years. Now that all documents are digitized, we do not intentionally delete any program records.

Standard 4.8 Difference in Policy for Records

Explain the rationale for any differences between the institutional policy and the program policy for retention of student records.

The program policy is more feasible for a small department (vs. an entire institution).

Standard 4.8 Clarifying Information

Use the space below to provide any additional clarifying information regarding the program's compliance with Standard 4.8.

None

Standard 4.9 Student Support Services

Standard 4.9 Student Support Services

Students are provided information about student support services available within the program and institution.

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Requirement for Review:

- The program must have a mechanism to inform students about the full range of student support services (beyond accommodations for disabilities addressed in Standard 4.2) available at the sponsoring institution.

Findings

No findings provided

Standard 4.9 Prior Concerns

If there were areas of non-compliance or follow-up regarding Student Support Services noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Student Support Services listed in the last Accreditation Action Report

Standard 4.9 Institution Student Support

Describe the mechanism by which students are informed about the full range of student support services available at the sponsoring institution.

Students are provided the link to university resources in their welcome letter. Student resources are then touched upon during orientation.

Standard 4.9 Clarifying Information

Use the text box to provide any additional clarifying information regarding the program's compliance with Standard 4.9.

None

Standard 4.10 Verification of Student Identity

Standard 4.10 Verification of Student Identity

The program must adhere to its institutional policies and procedures to verify that a student who registers for a distance education course or program is the same student who participates in and completes the program and receives the academic credit.

| -- |

Requirement for Review:

- The program must document that the institutional policies regarding verification of a student's identity are followed and implemented and applied consistently.
- The program must make clear that the identities of students enrolled in a distance education course or program are protected.
- If there are fees associated with learning within a distance modality, the program must document how that information is provided to students.
- If the institution does not have specific policies, the program must develop and implement its own policies for this purpose.

Findings

No findings provided

Standard 4.10 Prior Concerns

If there were areas of non-compliance or follow-up regarding Verification of Student Identity noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Verification of Student Identity listed in the last Accreditation Action Report

Standard 4.10 Clarifying Information

Use the text box below to provide any additional clarifying information regarding the program's compliance with Standard 4.10.

Our audiology program does not offer distance education. It is a residential program.

Standard 5.0 Assessment

Standard 5.0 Assessment

Standard 5.1 Assessment of Student Learning

Standard 5.1 Assessment of Student Learning

The program regularly assesses student learning.

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Requirement for Review:

- The program must demonstrate that it assesses the achievement of student learning outcomes to determine student success in the acquisition of expected knowledge and skills.
- The program must demonstrate that it provides a learning environment that provides each student with consistent feedback.

Findings

No findings provided

Standard 5.1 Prior Concerns

If there were areas of non-compliance or follow-up regarding Assessment of Student Learning noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Assessment of Student Learning listed in the last Accreditation Action Report

Standard 5.1 Student Learning Outcomes Process

Describe the processes that the program will use to assess achievement of student learning outcomes.

The program utilizes multiple processes to assess student achievement via learning outcomes of both grades and competencies. For the academic coursework, processes include assignments, quizzes, exams, papers, projects, in-class discussions, and presentations.

Standard 5.1 Knowledge and Skills Acquisition

Describe the processes that the program will use to assess acquisition of the expected knowledge and skills.

Students' clinical competencies are also assessed through practical demonstrations, simulations, or example case studies. The primary process of assessment is via supervisors' observations of students' performance during live and administrative

tasks involving client care. Additionally, the students' acquisition of expected knowledge and skills are assessed during their preliminary exam involving their audiological assessment of a simulated patient and during their comprehensive exam involving a case-based, oral exam. The assessment processes are designed to provide a comprehensive evaluation of students' knowledge, skills, and abilities, aligning with the program's learning objectives and ensuring accurate measurement of their achievement.

Standard 5.1 Student Feedback

Describe the processes and mechanisms that the program uses to provide regular and consistent feedback to each student regarding his or her progress in achieving the expected knowledge and skills in all academic and clinical modalities (including all off-site experiences) of the program.

The program provides regular and consistent feedback to each student regarding their progress in achieving expected knowledge and skills in both the classroom and the clinic. For academic coursework, this includes ongoing communication with instructors, feedback on assignments and assessments, and individualized discussions on strengths and areas for improvement. Aside from one-on-one feedback interactions with instructors, students can access immediate feedback via the online course software *Canvas* for each course. For clinical experiences, there is ongoing critical and constructive guidance and feedback from instructors before, after, and (if necessary) during a clinical session. There is feedback after every patient contact including students doing their own reflective feedback. Additionally, periodic evaluations, mentorship, and advisory sessions facilitate tracking and monitoring of student progress. Off-campus supervisors provide regular guidance and feedback to students around clinical interactions. Records of clinical feedback are maintained by instructors and entered into CALIPSO.

Standard 5.1 Clarifying Information

Use the text box below to provide any additional clarifying information regarding the program's compliance with Standard 5.1.

None

Standard 5.2 Program Assessment of Students

Standard 5.2 Program Assessment of Students

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

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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.
- Assessments must be administered by multiple academic and clinical faculty members.
- The program must demonstrate how it uses its assessments to evaluate and enhance student progress and acquisition of knowledge and skills.
- The program must demonstrate that 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.

Findings

No findings provided

Standard 5.2 Prior Concerns

If there were areas of non-compliance or follow-up regarding Program Assessment of Students noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Program Assessment of Students listed in the last Accreditation Action Report

Standard 5.2 Assessment Plan

Describe the assessment plan that the program uses to assess performance of students, including the timelines for administering the elements of the assessment plan. The plan must include the purpose of the assessments and use a variety of assessment techniques, including both formative and summative methods.

The audiology program implements an assessment plan that incorporates a variety of techniques to assess student performance. Formative assessments, such as quizzes, discussions, group work, and hands-on activities provide ongoing feedback to guide learning. Summative assessments within courses, including final exams, papers, and projects, are used to evaluate overall achievement. The completion and defense of the student's clinical research project is the largest

summative assessment regarding the student's academic work.

For clinical education, the primary process of assessment is performance on tasks involving client care, which include actions directed at screening, evaluation, treatment planning, treatment execution, progress data collection, and treatment outcome reporting. Clinical competencies may also be assessed through practical demonstrations, simulations, or example case studies. Summative assessments spanning across both the classroom and the clinic include the preliminary exam during spring of the 2nd year and the comprehensive exam during spring of the 3rd year.

The assessment plan includes clear timelines for administering academic and clinical assessments each semester, ensuring timely feedback, identifying areas for improvement, and determining overall competency. By combining formative and summative methods, the program maintains a comprehensive and balanced approach to assessing student progress and learning outcomes. Students must achieve specified levels of competency on KASA standards that are recorded in CALIPSO. Students must obtain approval that they have achieved competency across all KASA standards—and accrued a total of 1820 supervised clinical hours—by the clinical outplacement coordinator at the during spring semester of their 4th year in preparation for graduation.

A gross timeline for the assessment plan administration can be found here: https://cehs.usu.edu/comdde/graduate/doctor-of-audiology under "Roadmap for AuD program".

Standard 5.2 Learning Goals

Describe the processes that the program will use to assess the extent to which students meet the learning goals that were developed to address the acquisition of knowledge and skills, attributes, and abilities, including professionalism and professional behaviors.

The audiology program uses multiple procedures to assess the extent to which students meet the academic and clinical learning goals. These processes may include evaluating knowledge through exams, assessing skills through practical demonstrations or simulations, and observing professional behaviors in clinical or professional settings. Rubrics or established criteria are used to assess the acquisition of attributes and abilities, including professionalism. Specific clinical knowledge and skill achievement are documented on CALIPSO. The assessment processes provide a comprehensive evaluation of students' progress towards achieving the learning goals.

Standard 5.2 Three Learning Outcome Examples

Provide three examples of student learning goals that address the acquisition of knowledge and skills, aptitudes, and

abilities, including professionalism and professional behaviors. Describe how they are related to the mission of the program.

Examples	Description	How it's related to the Program Mission
Graduate Learning Outcome 1	Students will gain knowledge of the principles of research and the application of evidence-based practice (i.e. scientific evidence, clinical expertise, and client/patient perspectives) for accurate and effective clinical decision making.	Our program's mission is to prepare "...doctors of audiology students to evaluate and treat hearing and balance disorders through education, research and clinical experiences for individuals throughout the lifespan." This learning outcome is related to our program's mission as it reflects how we intend for students to gain knowledge at the intersection of research education and clinical practice.
Graduate Learning Outcome 2	Students will demonstrate awareness of audience(s) by providing specific, effective, and productive feedback to supervisees with an understanding of the factors that motivate change in performance.	This learning outcome is related to our program's mission because it targets the development/preparation of students' professional behavior and audiological clinical supervision (upon graduation and certification). These skills necessary for future clinical experiences as doctors of audiology.
Graduate Learning Outcome 3	Students will gain knowledge of the theories underlying basic principles of acoustics and psychology of hearing.	This outcome is related to our program's mission as it reflects an educational experience that is foundational for preparing "...doctors of audiology students to evaluate and treat hearing and balance disorders".

Standard 5.2 Assessment Examples

Provide examples of how the program uses formative and summative assessments to evaluate students' academic and

clinical progress.

Note: for purposes of assessing compliance, the Praxis examination cannot be used to meet this standard as a form of summative assessment.

Academic Formative Assessment	An example of of an academic formative assessment are the 3 "checkpoints" included as a component of students' final portfolio in Medical Aspects class. The portfolio is a semester-long project that includes 10 diagnostic reference guides, 20 case studies, infection control protocol, and 3 progress reflections. Students have complete freedom in formatting, software, and pace. Students are also required to choose 3 different times in the semester to reflect on their project and their progress. Next formative assessment is introduced--the course faculty provides feedback on the portfolio (including assessment of accuracy) and the student is able to learn from it and respond as the semester continues to unfold.
Academic Summative Assessment	An AuD student's final Clinical Research Project (CRP) paper and formal defense is our program's largest academic summative assessment. The CRP is a mentored research experience for graduate students in audiology. The CRP requirement is designed to provide students with an opportunity to conduct high-quality research projects with a faculty mentor to: (1) foster appreciation for evidence-based practice, (2) enhance capacity to be a critical consumer of research, and (3) gain experience and knowledge about the process involved in contributing to the knowledge base of audiology, hearing science, and related fields. The CRP is a substantive evidence-based experience that requires students to demonstrate critical thinking and synthesis of information resulting in a written paper. It can take the form of a guided quantitative study, qualitative study, or a comprehensive literature review. The CRP is a graded experience required for fulfillment of the doctorate of audiology degree at Utah StateUniversity.
	Some clinical preceptors provide counseling-specific feedback to AuD students following

Clinical Formative Assessment	their patient encounters. Their feedback is guided by a rubric that employs a Likert scale ranging from 0 (limited) to 4 (consistent) that is used to assess students' targeted counseling skills (e.g., nonverbal communication, shared planning, validation, etc.). Preceptors are also coached to employ effective feedback during this formative assessment. Effective feedback includes: (1) discussing skills/concerns ahead of time, (2) discussing/reflecting on performance after session, (3) reviewing and discussing specific skills in audio/video of session, (4) role playing skills, and (5) setting goals.
Clinical Summative Assessment	AuD students' preliminary exam experience is an example of a clinical summative assessment in our program (although it also, naturally, pulls from academic experiences as well). The preliminary examination is a graduation requirement. All audiology students take a preliminary examination in January during their second year in the program. The examination is a 1.5-hour experience designed as an opportunity for students to apply their knowledge and skills gained during their graduate studies by interacting with a standardized patient and/or parent, using case-based scenarios. A committee of two-three faculty members score each scenario using a rubric that reflects expected knowledge, skill, and interaction behaviors. After the exam, students review their video and perform a self-assessment.

Standard 5.2 Student Progress Evaluated

Describe the protocols for administering the assessment plan, including the use of multiple academic and clinical faculty.

Protocols for assessment of academic learning in each course are determined by individual instructors. Each semester, there are at least two academic courses with different instructors, providing multiple sources of data on student performance. The instructors specify on their syllabi what topics they address, how they assess student performance, and how assignment grades are combined for a final grade. For the learning goals that contribute to competencies in the relevant KASA standards, instructors specify on their syllabi the opportunities to demonstrate achievement of these competencies and how additional support (informal remediation) allows students to meet the learning goals within that course. Each semester, the audiology clinical outplacement coordinator documents attainment of the relevant academic course competencies in CALIPSO (as reported by the course instructors). If students fail to meet the minimum grade and/or competencies in that course, then the instructor and audiology division chair meet over setting up a formal for-credit intervention opportunity.

Protocols for assessment of clinical learning are set by the clinical faculty based on the KASA standards as specified in CALIPSO. During COMD 7200 clinical practicum, each student sees multiple patients and has multiple clinical supervisors. Thus, the students' final competencies and clinic grade are determined by at least 2 supervisors based on multiple clinical experiences. The clinic director reviews CALIPSO assessment data for all the students and meets regularly with the clinical faculty about the students. For each off-campus clinical practicum, there may be one or multiple supervisors. The clinical outplacement coordinator receives the mid-term and final grades, and does additional checks in with the off-campus supervisor and student, especially if difficulties are apparent. This same procedure occurs during the students' 4th year externships.

For students having significant clinical or academic difficulties, the audiology division chair meets with the relevant faculty to review the case and determine supportive actions. Program extension or termination actions are developed based on program policy, the specifics of the particular case, prior case actions, and precedent-setting implications. At the regular monthly audiology Division meetings, graduate student performance in each cohort is reviewed. For students who are having academic or clinical difficulties, supportive actions and program decisions that have been taken or are planned to be taken are discussed and possibly modified. For students who at risk of program extension or termination, decision paths are explicated based on program policy, the specifics of the particular case, prior case actions, and precedent-setting implications.

Standard 5.2 Assessment Measures

Describe the use of the assessment measures to evaluate and enhance student progress and acquisition of knowledge and skills, and how the assessment measures are applied consistently and systematically.

In academic coursework, to help ensure that outcome measures are applied consistently and systematically across students, the number, type, and relative grading weight of each measure is indicated in the syllabus, For the clinical education, grading rubrics are specified and used within CALIPSO. The grading procedures are transparent and documented for each graded event whether it is academic or a clinical learning assessment event.

Standard 5.2 Clarifying Information

Use the text box below to provide any additional clarifying information regarding the program's compliance with Standard 5.2.

None

Standard 5.3 Ongoing Program Assessment

Standard 5.3 Ongoing Program Assessment

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

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Requirement for Review:

- The assessment protocols must be used to evaluate the academic and clinical aspects of the entire program.
- 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 must systematically collect evaluations of the academic and clinical aspects of the program from students and use these to assess those aspects of the program.
- The program must use the results of its assessment protocols to improve and refine the program goals and objectives and ensure alignment between the program's stated goals and objectives and the measured student learning outcomes.

Findings

No findings provided

Standard 5.3 Prior Concerns

If there were areas of non-compliance or follow-up regarding Program Assessment noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Program Assessment listed in the last Accreditation Action Report

Standard 5.3 Program Quality

Describe the assessment protocols used to evaluate the quality of the academic and clinical aspects of the entire program.

The program has multiple protocols in place to evaluate the overall quality of the academic and clinical program to indicate

areas of strength or need for improvement. Students' evaluation of academic courses and instructors are obtained (at minimum) every semester for every course. The protocol for this assessment procedure is automatized and oversee by USU's Office of Analysis, Assessment and Accreditation. A student survey has been designed by clinical faculty across disciplines in the College Sorenson Center for Clinical Excellence to evaluate clinical supervisors. This student survey evaluates clinical supervisors by employing a more specific and better approach than the standard course evaluation system used by the university (called IDEA) and is also administered each semester. The protocol for this survey's distribution and data input is administered by the Clinical Director. For qualitative feedback, we have a protocol in place that dictates each cohort of graduate students meets with the Division chair and/or the graduate program coordinator every semester for a "pulse check" and feedback. The three graduate divisions select student representatives who meet with the department head at least once per semester to discuss program satisfaction. A student exit interview and a 1-year alumni survey protocols are in place and executed by the graduate program coordinator to provide further program feedback. Finally, there is a protocol in place that dictates the division chair shares all the program assessment outcomes (except teaching evaluations) with the faculty at the annual retreat and/or monthly division meetings. Outcomes are reviewed and if student weakness/concerns emerge, the faculty determine paths toward program improvement. The Dept Head examines the students' evaluations of faculty's teaching and meets with faculty at least annually about their teaching performance. The Clinic Director is the work supervisor for the campus clinical instructors and for the Outreach Clinical Coordinator, so they see the student clinical teaching evaluation surveys and meets with clinical faculty at least annually about their clinical supervision performance. Both program leaders communicate as appropriate to the audiology division chair about instructor performance. These three leaders work as a team to maximize program quality.

Standard 5.3 Evaluate Program Assessment

Describe the procedures that the program uses to evaluate the quality, currency, and effectiveness of the program and each program component.

Audiology employs several procedures to evaluate the quality, currency, and effectiveness of the program and each program component. This includes multiple procedures for evaluating faculty's teaching, mentoring, and supervision quality and currency; such as students' end-of-the-semestser course evaluations, students' semester clinical supervisor evaluations, faculty's peer-reviewed teaching evaluations, clinical faculty's peer chart and protocol reviews, and faculty's annual reviews with the Department Head. We measure our program's effectiveness most often by our student's outcomes both during and after their participation in the AuD program. Thus we rely on the quality and assurance of student's preliminary and comprehensive exam performance, ultimate job placements, their Praxis pass rate, their ability to secure CCC-A (when they are interested), their exit interviews, and feedback from their off-campus and 4th-year supervisors.

Standard 5.3 Self Study Process

Describe the processes by which the program will engage in systematic self-study.

The audiology in engage in continuous self-study. At the end of each division faculty meeting there is time allotted for faculty to share concerns about students and/or the program (this included everything from the broad curriculum to a single assignment in a specific course). Depending on the urgency of the need for change, the division may decide to take action mid-academic year (e.g., develop a committee for evaluating the clinical practicum rubrics and subsequently improving them in time for the next semester) or wait to engage in further self-study and action plan during the division's annual retreat at the end of the academic year. Typically, the division's annual, all-day retreat is the time during which the faculty review all of the systematic outcome data gathered during the year and evaluate the program's progress. Discussions for improvement emerge from these data presentations. The division chair leads these discussions, but the faculty shares the load of identifying places for improvement and taking action toward the improvements.

Standard 5.3 Evaluation Mechanism

Describe the mechanisms that the program uses to evaluate each program component.

The program components are evaluated via the protocols, procedures, and processes. Listed above for this Standard 5.3

Standard 5.3 Program Improvement

Describe how the program will use the results of the assessment processes to improve the program.

The audiology pathology program utilizes the assessment results to enhance its academic and clinical curriculum and teaching methods. It analyzes the data to identify areas where students are struggling or excelling, adapt instructional approaches , and make strategic programmatic modifications. By carefully monitoring assessment outcomes, the program faculty and staff aim to optimize student learning, ensure competency development, and improve the effectiveness of its educational offerings.

Standard 5.3 Program Procedures

Indicate the procedures used by the program to assess the quality, currency, and effectiveness of the graduate program's academic and clinical education.

Type of Program Assessment	Frequency
Advisory committee review	No assessment

Curriculum review committee	Annually
Employer surveys	No assessment
Supervisor/preceptor evaluations	More often than annually
Program annual reports	Annually
Program staff/faculty meetings and retreats	More often than annually
University reviews	Annually
Other - Describe the type of assessment and frequency	

Standard 5.3 Student Procedures

Indicate the procedures used by students to assess the quality, currency, and effectiveness of the graduate program's academic and clinical education.

Type of Student Assessment	Frequency
Course Evaluations	More often than annually
Evaluations of clinical supervisors	More often than annually
Evaluation of clinical sites	More often than annually
Student advisory group reviews	More often than annually
Student surveys	More often than annually
Other - Describe the type of assessment and frequency	

Standard 5.3 Graduate Procedures

Indicate the procedures completed by graduates to assess the quality, currency, and effectiveness of the graduate program's academic and clinical education

Type of Graduate Assessment	Frequency

Alumni/graduate survey	Annually
Exit interviews	Annually
Other - Describe the type of assessment and frequency	

Standard 5.3 Evaluation Examples

Provide two recent examples of how the results of the evaluations described above are used to plan and implement graduate program improvements.

Recent Example #1	**Example:** During this spring semester, the Audiology Division Chair held one-on-one meetings with underrepresented AuD students to learn about their experiences in the program to date. The Division Chair learned that the majority of students were having positive graduate experiences, but there still faced some challenges as students of color. A student shared about how exhausting the microagressions were that they experienced as a student in the program. Specifically, she spoke about how upsetting it was when she was confused consistently by some faculty with other students of color. **Improvement:** During the audiology division's annual retreat the Division Chair shared this student's de-identified story and feedback. It laid the foundation for an intensive educational experience about microaggressions and action steps that the faculty can take to improve students' experiences. We specifically talked about the importance of taking time to deeply listen to and learn someone's name (and not confuse one student with another). Faculty pledged to make changes in their behaviors related to students' names (e.g., carefully reading an email before its sent or thoughtfully addressing students ALL by name during classroom discussions).
	Example: During the previous summer, our clinical outplacement coordinator received feedback from an off-campus clinical supervisor about students in our 3rd-year cohort. Specifically, we learned that the students did not engage in some of the clinical (e.g., weak skills when assessing pediatric clients) and professional (e.g., left work early) behaviors the supervisors expected of students at their point in development. **Improvement:** The clinical outplacement coordinator shared this feedback during our

Recent Example #2	division faculty meeting. The faculty discussed concerned about the students and also the supervision received at this particular site (i.e. it seemed to be going a bit downhill compared to our program's experiences in years past). The faculty decided in order to both best educate our students and protect them from potentially weakened supervision we would do two things. (1) Our 3rd year AuD students would no longer leave campus during summer, but wait until fall of their 3rd year. This would allow our on-campus supervisors to further model, coach, and refine our students' clinical and professional skill sets. (2) Our program would "take a break" from this particular off-campus clinical site for the upcoming academic year, but the clinical outplacement coordinator would use the year to gather data about the site's supervision and student expectations. This data would allow us to determine whether or not their site was a good placement for our students in the future.

Standard 5.3 Meeting Learning Outcomes

Describe the extent to which student learning outcomes have been met.

Student learning outcomes are typically met in our program as they are required for graduation. Student performance varies across individual learning outcomes, but with appropriate, equitable, individualized support, almost all the students meet competency requirements. Occasionally, personal factors impede success to such an extent that, despite the best efforts of all, students must leave the AuD program.

Standard 5.3 Measuring Learning Outcomes

Describe the processes that the program uses to monitor the alignment between:

(a) the stated mission, goals, and objectives and

The audiology program's mission is to prepares doctors of audiology students to evaluate and treat hearing and balance disorders through education, research and clinical experiences for individuals throughout the lifespan. The program goals are:

1. Goal: Maintain or increase the number of applicants for the AuD program annually, through recruiting efforts targeting universities across the United States.
   *Outcome measure*Number of applicants in annual spring application pool.
2. Goal: 100% of AuD students will present outcomes from their clinical research projects at a research conference.
   Outcome measure: Percentage of students with completed clinical research projects who presented.

3. Goal: 50% of AuD students will publish their research.

   Outcome measure: Percentage of students with completed clinical research projects who published.

4. Goal: Maintain or increase total grant dollars from internal and external sources to support our research, teaching, and service.

   Outcome measure: Grant dollar annual total.

5. Goal: Maintain or increase percentage of students who receive funding.

   Outcome Measure: Percentage of AuD students who received funding.

The stated mission, goals, and outcomes for our programs in the department (and university-wide) are stable for ~ 5 years at a time. They can be found here: https://cehs.usu.edu/comdde/assessment/strategic-plan

(b) the measured student learning outcomes

The measured student learning outcomes are similar from year to year, with a high success rate that consistently meets our mission, goals, and objectives. We continuously monitor student performance on program and individual course/clinic indicators, and make occasional adjustments as needed. We make reasoned, moderate programmatic changes based on data and avoid knee-jerk reactions to situations. The outcome measures are listed above with each program goal. They can also be found here: https://cehs.usu.edu/comdde/assessment/strategic-plan

Standard 5.3 Professional Competency

Describe the mechanisms used to measure student achievement of each professional practice competency.

Clinical supervisors evaluate all the individual components of competency in professional practice as set out in CALIPSO via evaluation rubrics shared across the division. Supervisors take notes on and rate interactions in clinical meetings, interactions with clients, and clinical documentation. Student performance by each supervisor. Professional practice competency is one of the core competencies campus students must meet in the clinical on-campus clinical practicum (COMD 7200,7 300, & 7400) before starting externships (COMD 7800).

Standard 5.3 Clarifying Information

Use the text box below to provide any additional clarifying information regarding the program's compliance with Standard 5.3.

None

Standard 5.4 Ongoing Program Improvement

Standard 5.4 Ongoing Program Improvement

The program uses the results of its ongoing programmatic assessments for continuous quality improvement and evaluates the improvements.

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- The program must describe how it uses programmatic assessment data to promote continuous quality improvement of the program.
- The program must describe the processes it uses to evaluate program improvements for congruence with its stated mission and goals.

Findings

No findings provided

Standard 5.4 Prior Concerns

If there were areas of non-compliance or follow-up regarding Ongoing Program Improvement noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding the Ongoing Program Improvement listed in the last Accreditation Action Report

Standard 5.4 Continuous Quality Improvement

Describe the procedures that the program follows to use the results of the ongoing programmatic assessments in planning and implementing program improvements that ensure continuous quality improvement.

The program follows specific procedures to utilize ongoing programmatic assessment results for continuous quality improvement. These procedures involve analyzing assessment data to identify areas for improvement, identifying trends and patterns, and comparing outcomes to established benchmarks or standards. Based on the findings, programmatic changes and enhancements are planned and implemented to address identified areas for improvement. This iterative process ensures that the program adapts and evolves to meet the needs of students, leading to continuous improvement in program quality and effectiveness.

Standard 5.4 Program Changes Mission and Goals

Describe the processes that the program uses to ensure that any program changes are consistent with the program's stated mission, goals, and objectives.

The program ensures that any program changes align with its stated mission, goals, and objectives (and the university's) through a thoughtful and systematic approach. Before implementing changes, a thorough review is conducted to assess how the proposed modifications align with the program's mission. The changes are evaluated based on their potential to enhance the program's ability to prepare students in evaluating and treating hearing and balance disorders across the lifespan. The program's mission, goals, and objectives serve as guiding principles to ensure consistency and integrity in any programmatic changes.

Standard 5.4 Clarifying Information

Use the text box below to provide any additional clarifying information regarding the program's compliance with Standard 5.4.

None

Standard 5.5 Program Completion Rate

Standard 5.5 Program Completion Rate

The percentage of students who are enrolled on the first census date of the program and complete the program within the program's published academic terms meets or exceeds the CAA's established threshold.

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Requirement for Review:

- The CAA's established threshold requires that at least 80% of students must have completed the program within the program's published time frame (number of academic terms), as averaged over the 3 most recently completed academic years.
- If, when averaged over 3 academic years, the program's completion rate does not meet or exceed the CAA's established threshold, the program must provide an explanation and a plan for improving the results.

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Findings

No findings provided

Standard 5.5 Prior Concerns

If there were areas of non-compliance or follow-up regarding Program Completion Rates noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Program Completion Rates listed in the last Accreditation Action Report

Standard 5.5 Enrollment Records

Describe the mechanisms that the program will use to keep records of the number of students enrolled on the first census day of the program.

Students are tracked from admission to graduation at both the department and university level.

Standard 5.5 Completion Process

Describe the processes that the program uses to compare each student's time to degree in light of the terms (consecutive or nonconsecutive) established by the program.

The program is cohort based consecutively for time to degree, accommodations are made for student exceptions.

Standard 5.5 Completion Mechanism

Describe the mechanism that the program uses to keep records of the numbers of students who continue to graduation, take an approved leave of absence, and leave the program for academic, clinical, personal, or other reasons.

Students are tracked from admission to graduation at both the department and university level.

Standard 5.5 Completion Times

Provide the published length of time (stated in semesters/quarters) for students to complete the residential program of study.

Full-time with CSD undergraduate major	11 semesters
Full-time without CSD undergraduate major	11 semesters
Part-time with CSD undergraduate major	n/a
Part-time without CSD undergraduate major	n/a

Standard 5.5 Completion Rate Calculator

Download the **Program Completion Rate Calculator worksheet**, complete it, and then upload it as evidence in support of the data you have provided in this report.

If there are additional components of the program (distance education or satellite campus(es)), please complete the additional tabs in the excel workbook with this data.

USU_AuD_program-completion-rate-calculator-worksheet AY22-23.xlsx

Standard 5.5 Program Completion Rates

Provide the program completion rate for graduation cohorts in the residential program for the most recently completed academic years (based on enrollment data).

Period	Number completing on time	Number completing later than on-time	Number not completing	Total
Recent Year	7	0	0	0
1 Year Prior	5	0	0	5
2 Years Prior	6	0	0	6
3-year average program completion rate	100.00%			

Standard 5.5 Completion Below 80%

Provide an explanation and a plan that will be used for improvement if the program's 3-year average for completion rate does not meet or exceed the CAA's established (80%) threshold. Include a timeline for implementing and assessing these steps. In your explanation, provide details on how the program has addressed the following areas in regards to their impact on program completion rates:

- The number, composition, and qualifications of faculty sufficient to meet the mission of the program (Std. 2.1, 2.3)

- Academic and clinical courses offered sufficiently enough for students to graduate on time (Std. 3.1)

- Academic and clinical advising offered along with remediation (Stds. 4.2, 4.3, 4.6, 4.9)

- Appropriate admissions policies (Std. 4.1)

- Classes that are more likely to be causing students to drop out or take longer to complete the program (3.0)

3-year average completion rate was above 80%

Standard 5.5 Clarifying Information

Use the text box below describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 5.5.

None

Standard 5.6 Praxis Examination Pass Rate

Standard 5.6 Praxis Examination Pass Rate

The percentage of test-takers who pass the Praxis® Subject Assessments in audiology or speech-language pathology meets or exceeds the CAA's established threshold.

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Requirement for Review:

- The CAA's established threshold requires that at least 80% of test-takers from the program pass the

  Praxis® Subject Assessment examination, as averaged over the 3 most recently completed academic years; results should be reported only once for test-takers who took the exam multiple times in the same examination reporting period.

- If, when averaged over 3 academic years, the program's *Praxis*® Subject Assessment exam pass rate does not meet or exceed the CAA's established threshold, the program must provide an explanation and a plan for improving the results.

Findings

No findings provided

Standard 5.6 Prior Concerns

If there were areas of non-compliance or follow-up regarding Praxis Examination Pass Rates noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in

compliance with this standard.

There were no citations regarding Praxis Pass Rates listed in the last Accreditation Action Report

Standard 5.6 Praxis Mechanism Takers

Describe the mechanisms that the program uses to determine the number of test-takers who take the Praxis Subject Assessment exam each year.

Students upload copies of their Praxis reports for tracking and verification by the graduate program coordinator.

Standard 5.6 Praxis Mechanism Passing

Describe the mechanisms that the program uses to determine how many individuals who took the Praxis Subject Assessment exam each year passed the exam in that year.

The graduate program coordinator reviews Praxis test reports submitted by students.

Standard 5.6 Praxis Rates

For the residential program, provide the number of test-takers who took and passed the Praxis examination for the three most recently completed years. Results must be reported only once for test-takers who took the exam multiple times in the same reporting period. Exclude individuals who graduated more than 3 years ago.

Period	Number of Test-takers Taking the Exam	Number of Test-takers Passed	Pass Rate
Recent Year	7	6	85.71%
1 Year Prior	5	4	80.00%
2 Years Prior	6	5	83.33%
3-year average	83.02%		

Standard 5.6 Praxis Below 80%

Provide an explanation and a plan for improvement that will be used if the program's 3-year average for exam pass rate does not meet or exceed the CAA's established (80%) threshold. Include a timeline for implementing and assessing these steps.

3-year average Praxis pass rate was above 80%

Standard 5.6 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 5.6.

None

Standard 5.7 RESERVED

Standard 5.7 RESERVED

The CAA has eliminated employment rates as a required student outcome measure along with the related CAA-established threshold. Programs may still choose to use employment rates as their own measure, but CAA will not require it. Thus, Standard 5.7 has been reserved. Please confirm that you understand this change by checking the box below. If you have any questions, contact accreditation staff at caareports@asha.org.

Confirm

Standard 5.8 Program Improvement – Student Outcomes

Standard 5.8 Program Improvement – Student Outcomes

The program demonstrates how it uses the results of its analyses of success in meeting the established CAA thresholds for program completion rate, Praxis® Subject Assessments pass rate, and employment rate or the rate of continuation of education in the field for continuous quality improvement at the programmatic level.

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Requirement for Review:

- The program must demonstrate its analysis processes to determine whether the program is meeting or exceeding each established CAA threshold.
- The program must demonstrate how it uses the results of these analyses to ensure continuous quality improvement.

Findings

No findings provided

Standard 5.8 Prior Concerns

If there were areas of non-compliance or follow-up regarding Program Improvement – Student Outcomes noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Program Improvement – Student Outcomes listed in the last Accreditation Action Report

Standard 5.8 Outcome Improvement

Describe the analysis processes that the program uses to evaluate the results of graduation rate and Praxis Subject Assessment pass rate to facilitate continuous quality improvement.

Annually we gather the number of students who graduate from our AuD program and ultimately pass the Praxis Subject Assessment. We use these data to calculate the pass rates. Then we use those data points as part of our bigger picture when assessing program quality and identifying areas in need of improvement.

Standard 5.8 Clarifying Information

Use the text box below to provide any additional clarifying information regarding the program's compliance with Standard 5.8.

None

Standard 5.9 Evaluation of Faculty

Standard 5.9 Evaluation of Faculty

The program regularly evaluates and documents the results of the assessment of all faculty and staff to determine their effectiveness in delivering a thorough and current program.

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Requirement for Review:

- The program must demonstrate the mechanisms that it uses to evaluate the effectiveness of the faculty and staff in delivering the program.
- The program must demonstrate that the evaluation takes place in a fair and systematic fashion that is consistent with institutional policy and procedures.
- The program faculty must be actively involved in these evaluations in a manner that is consistent with institutional policy and procedures.

Findings

No findings provided

Standard 5.9 Prior Concerns

If there were areas of non-compliance or follow-up regarding the Evaluation of Faculty noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Evaluation of Faculty listed in the last Accreditation Action Report

Standard 5.9 Policy for Faculty Evaluations

Describe the institutional policy and guidelines for regular evaluation of the faculty by program leadership.

Annual evaluations are required in faculty code 405.12 (https://www.usu.edu/policies/405/). During the Fall semester the procedures for the annual review are agreed upon by majority vote of the faculty in the department. The annual review spans a 5-year window of performance to evaluate fulfillment of the role statement. The department head or supervisor meets with the faculty member annually during the Spring semester and a written report is provided to the faculty member

that includes comments from the faculty member and the department head or supervisor.

Standard 5.9 Faculty Expectations

Describe the mechanisms that the program uses to evaluate how the effectiveness of the program's delivery is consistent with institutional policies and procedures.

Faculty role statements are used to provide expectations for faculty and is the basis of the annual review to determine if the program's delivery is consistent with institutional policies. Each year at the beginning of the Fall semester, faculty review and sign their role statement.

Standard 5.9 Student Evaluations of Faculty

Indicate the mechanisms through which students will have an opportunity to evaluate academic and clinical faculty on an ongoing and regular basis. (Select all that apply)

Course evaluations

Supervisor evaluations

Exit interviews

Informal feedback provided in classes

Informal feedback provided in clinical experiences

Other

Standard 5.9 Student Evaluations of Faculty "Other"

Specify Other:

bi-annual "pulse checks" with the Audiology Division Chair

Standard 5.9 Faculty Evaluation Method

Indicate the mechanisms used by the program to evaluate the academic and clinical teaching, scholarship competence, and other professional expectations of faculty and the frequency with which they are used.

Type of Program Assessment	Frequency
Review by personnel committee	Not used
Review by department chair	Annually

Review of professional development activities	Annually
Review of manuscripts and research proposals	Annually
Review of publications	Annually
Peer evaluations	Annually
Student evaluations	Every academic term
Teaching evaluations	Annually
Promotion and tenure review	Annually
Post-tenure review	Greater than every 2 years
Maintenance of certification	Annually
Maintenance of state credentials	Annually
Other - describe the type of assessment and frequency	

Standard 5.9 Fair Evaluations

Describe the processes, timelines, and safeguards of the evaluation procedures that the program has in place to ensure that the processes are fair.

The College assigns a different ombudsperson to each faculty member every year for their promotion and tenure committee meetings. The ombudsperson follows guidelines to ensure the process is conducted according to faculty code expectations. For the annual performance review, during the Fall semester the procedures for the annual review are agreed upon by majority vote of the faculty in the department. The faculty submit their completed review form three days prior to the scheduled meeting, then the department head or supervisor completes their comments on the document and provides this to the faculty member one day before the scheduled meeting.

Standard 5.9 Clarifying Information

Use the text box below to provide any additional clarifying information regarding the program's compliance with Standard

5.9.

None

Standard 5.10 Faculty Improvement

Standard 5.10 Faculty Improvement

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.

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Requirement for Review:

- The program must demonstrate how the faculty and staff use the results of evaluations of performance to guide continuous professional growth and development.
- The program must demonstrate how the growth and development of its faculty and staff facilitate the delivery of a high quality program.

Findings

No findings provided

Standard 5.10 Prior Concerns

If there were areas of non-compliance or follow-up regarding the Faculty Improvement noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Faculty Improvement listed in the last Accreditation Action Report

Standard 5.10 Faculty Evaluation Growth

Describe the mechanisms that the program uses to assess how the faculty and staff evaluation processes result in continuous professional growth and development.

Professional development is an ongoing process, reflection on past efforts and future goals are discussed during the annual review, and this supports check-ins throughout the year on progress as needed. The annual performance review form prompts faculty to indicate their goals for the coming year and the professional development they plan to pursue.

During the review, this information is discussed, including exploring barriers the faculty member feels may impede their ability to take desired steps in professional growth and development and supports needed. Progress on their goals from the previous year are also reviewed and discussed.

Standard 5.10 Faculty Evaluation Communication

Describe how the program will communication evaluation results to the faculty and how the faculty will use this feedback to improve their performance.

Faculty are provided with the supervisor comments one day prior to the annual evaluation meeting. After the meeting, the faculty member and the department head/supervisor electronically sign the evaluation form. The faculty member receives the report for their records. Faculty members can reference the feedback in their annual review to guide their planning and actions during the next year. The performance review spans a five-year period to help the faculty in consider their strengths and areas where they can improve in the context of larger time window than just one year. This facilitates the ability to identify strategies to effectively address patterns that need attention.

Standard 5.10 Professional Development Quality

Describe the mechanisms that the program uses to determine whether continuous professional development facilitates delivery of a high-quality program.

Program evaluation is iterative and based on a process of continuous quality improvement. Faculty discuss professional development goals and expected influence on the program. Outcomes from professional development, such as attending training to expand or update clinical services or implementation of a new pedagogical teaching approach, are reviewed, and discussed in faculty meetings. Next steps are identified to support delivery of a high-quality program, and this iterative process continues.

Standard 5.10 Clarifying Information

Use the text box below to provide any additional clarifying information regarding the program's compliance with Standard 5.10.

None

Standard 5.11 Effective Leadership

Standard 5.11 Effective Leadership

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

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Requirement for Review:

- The program must demonstrate how the individual responsible for the program of professional education effectively leads and administers the program.
- The program director's effectiveness in advancing the goals of the program and in leadership and administration of the program must be regularly evaluated.

Findings

No findings provided

Standard 5.11 Prior Concerns

If there were areas of non-compliance or follow-up regarding the Effective Leadership noted in the CAA Accreditation Action Report last year describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Effective Leadership listed in the last Accreditation Action Report

Standard 5.11 Program Director Effectiveness

How does the program or institution evaluate the effectiveness of the program director? (Select all that apply)

Evaluation by the Chair

Standard 5.11 Program Director Evaluation

How often does evaluation of the program director occur?

Once a year

Standard 5.11 Clarifying Information

Use the text box below to provide any additional clarifying information regarding the program's compliance with Standard 5.11.

None

Standard 6.0 Program Resources

Standard 6.0 Program Resources

Standard 6.1 Institutional Financial Support

Standard 6.1 Institutional Financial Support

The institution provides adequate financial support to the program so that it can achieve its stated mission and goals.

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Requirement for Review:

- The program must demonstrate
    - that its budgetary allocation is regular, appropriate, and sufficient to deliver a high quality program that is consistent with its mission and goals;
    - that there is sufficient support, consistent with the program mission and goals, for personnel, equipment, educational and clinical materials, and research activities;
    - consistency of sources of funds that are received outside the usual university budgeting processes, if the program is dependent on them.

Findings

No findings provided

Standard 6.1 Prior Concerns

If there were areas of non-compliance or follow-up regarding Institutional Financial Support noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Institutional Financial Support listed in the last Accreditation Action Report

Standard 6.1 Budget Process

Describe the budgeting process for the program.

The department has core stable funding from the state to cover faculty salaries and supplementary funds from other sources. The department head determines where discretionary funding is allocated based on need and priority on an ongoing basis.

Standard 6.1 Program Budget Table

Report the total budget for the accredited program.

Sources of Support	Prior Year Annual Budget (Amount in $)	Current Year Annual Budget (Amount in $)	% increase/decrease
Faculty/Staff Salaries	$1,094,930.00	$1,097,524.00	0.24%
Supplies & Expenses (non-capital/non-salary expenses)	$72,000.00	$62,534.00	-13.15%
Capital Equipment	$15,000.00	$11,225.00	-25.17%
Institutional Support Sub-Total	$1,181,930.00	$1,171,283.00	-0.90%
Grants/contracts	$283,344.00	$465,551.00	64.31%
Clinic Fees	$349,000.00	$362,587.00	3.89%
Other Funding	$0.00	$0.00	0.00%
Non-Institutional Support Sub-Total	$632,344.00	$828,138.00	30.96%
Total Budget	1,814,274.00%	1,999,421.00%	10.21%
% of budget represented by non-institutional support	34.85%	41.42%	18.84%

Standard 6.1 Other Funding Descriptions

If you included funding in the "Other Funding" line in the table above, describe the source(s).

Not Applicable

Standard 6.1 Budget Difference

For variances in any budget category that differ from the previous academic year by 10% or more, explain the reasons and the impact of the variance.

This academic year our audiology program budget increased by more than 10% in the grants/contracts category (which subsequently affects the non-institutional support sub-total). Our grant budget increased significantly this year because our new graduate faculty member, Aryn Kamerer, brought with her federal grant funds totaling nearly $115,000.

Standard 6.1 Institutional Commitment

Which of the following indicators of institutional commitment to the accredited program are currently being employed? (Select all that apply)

Support for professional development
Student support (graduate assistantships, scholarships, etc.)

Standard 6.1 Adequate Support

Describe how the program determines that there is sufficient support for the specific areas of personnel, equipment, educational and clinical materials, and research.

The department head oversees the budget, collects information from faculty and staff concerning needs and resources, and makes budgetary decisions in the best interest of the entire program.

Standard 6.1 Anticipated Financial Changes

Describe potential budget insufficiencies or anticipated changes to financial resources that may impact program capacity in the near and long term. Discuss steps that will be taken by the program to ensure sufficient financial resources to achieve the program's mission and goals.

There are no anticipated changes to financial resources that would impact program capacity in the near or long term. To ensure sufficient financial resources, the department head oversees the budget throughout the year, manages the department budget, and tracks income and expenditures with the business manager to make appropriate financial decisions.

Standard 6.1 Outside Funds

If the program's budget includes funds generated from activities outside the usual budgeting processes, describe the

consistency of these funds and the portion of the budget that is accounted for by these funds.   Describe the possible impact on program viability if these funds are not available.

Not Applicable

Standard 6.1 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.1.

None

Standard 6.2 Support for Faculty Continuing Competence

Standard 6.2 Support for Faculty Continuing Competence

The institution provides adequate support to the program so that its faculty and staff have the opportunities to maintain continuing competence.

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Requirement for Review:

- The program must demonstrate that support, incentives, and resources are available for the continued professional development of the faculty.

Findings

No findings provided

Standard 6.2 Prior Concerns

If there were any areas of non-compliance or follow-up regarding Support for Faculty Continuing Competence noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Support for Faculty Continuing Competence listed in the last Accreditation Action Report

Standard 6.2 Professional Development Support

Indicate all the areas in which the institution provides support for continuing professional development. (Select all that

apply)

Institutional faculty development or instructional grants

Institutional research grants

Professional development opportunities on campus

Release time for professional development

Support for professional travel

Standard 6.2 Support for Competence

Describe how the program provides sufficient support for the faculty and staff to maintain continuing competence.

Faculty and staff have opportunities for maintaining continuing competence across aspects of their job role statements within the institution. Faculty receive a professional development and travel allowance for external professional development opportunities. They can submit additional requests to the department head and college for special expenditures. Staff can submit requests for funding for external professional development. There are also a number of opportunities for continuing competence afforded by USU's direct community on campus at various times of the year.

Standard 6.2 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.2.

None

Standard 6.3 Physical Facilities

Standard 6.3 Physical Facilities

The program has adequate physical facilities (classrooms, offices, clinical space, research laboratories) that are accessible, appropriate, safe, and sufficient to achieve the program's mission and goals.

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Requirement for Review:

- The program must demonstrate that its facilities are adequate to deliver a program that is consistent with its mission and goals.
- The program must demonstrate that the facility has been evaluated and that the program includes access and accommodations for the needs of individuals with disabilities, in accordance with federal regulations.

Findings

No findings provided

Standard 6.3 Prior Concerns

If there were areas of non-compliance or follow-up regarding Physical Facilities noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Physical Facilities listed in the last Accreditation Action Report

Standard 6.3 Adequacy Quality

Describe the processes the program uses, and the results of those processes, to determine the facility's adequacy in delivering a high-quality program.

The division chair, clinic director, and clinical outreach clinical coordinator discuss as a group and via one-on-one interactions, factors related to our facilities that are supporting or impeding quality program delivery. Discussions and recommendations also occur at AuD division and department meetings. The audiology division chair and clinic director communicate with the department head (along with the directors and coordinators of other programs in the department) about supportive and impeding facility factors for maintaining the quality of all the department programs.

Standard 6.3 Adequacy Standards

Describe the processes the program uses, and the results of those processes, to determine the facility's adequacy in meeting contemporary standards of access and use.

USU is at the cutting edge of contemporary standards of access and use for education and clinical services. The institution has considerable facilities for in-person, online asynchronous and synchronous, and hybrid formats for campus and distance education. The primary locations of campus clinical education are at the Sorenson Center for Clinical Excellence and the Dolores Doré Eccles Center for Early Care & Education facilities. Clinical services via telehealth are also available via our top-speech internet connections and video-audio equipment. USU facility staff, in consultation with clinic directors and department heads, set policies and procedures to determine client access and use across buildings/clinics. Physical and financial factors are considered when determining the facility's adequacy in meeting contemporary standards of access and use.

Standard 6.3 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.3.

None

Standard 6.4 Program Equipment and Materials

Standard 6.4 Program Equipment and Materials

The program's equipment and educational and clinical materials are appropriate and sufficient to achieve the program's mission and goals.

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Requirement for Review:

- The program must demonstrate that the quantity, quality, currency, and accessibility of materials and equipment are sufficient to meet the mission and goals of the program.
- The program must demonstrate that it has a process for reviewing and updating materials and equipment to determine whether the quantity, quality, and currency are sufficient to meet the mission and goals of the program.
- The program must demonstrate that the equipment is maintained in good working order.
- The program must demonstrate that any equipment for which there are ANSI or other standards-setting body requirements meets the expectations of the standard(s).

Findings

No findings provided

Standard 6.4 Prior Concerns

If there were areas of non-compliance or follow-up regarding Program Equipment noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Program Equipment listed in the last Accreditation Action Report

Standard 6.4 Process for Materials

Describe the processes the program uses to evaluate the quantity, quality, currency, and accessibility of the program's materials and equipment to determine whether these processes are sufficient to meet the mission and goals of the program.

Clinical faculty constantly monitor clinic materials and equipment to determine relevance, efficacy, quality, and application. Up-to-date materials and equipment are considered vital to our training program. Materials and equipment are digitally catalogued in collaboration with clinical faculty, the clinic director, and a departmental business assistant in a cloud-based storage, *Box* folder. Each year, funds are allocated to updating and maintaining materials and equipment through the on-campus audiology clinics, as well as for student practice and classroom demonstrations. Equipment is inventoried and

calibrated yearly.

Standard 6.4 Equipment Standards

Describe the mechanisms that the program will use to determine whether the equipment is in good working order and, where appropriate, whether the equipment meets standards established by the American National Standards Institute (ANSI) or other standards-setting bodies.

Our audiology program contracts with an external service that annually assess and calibrates all of our equipment in accordance with ANSI standards. This happens across all devices in both the clinics and the research labs. Annual calibration ensures that our patients are provided with efficacious care and students have valid learning experiences. We also in engage in daily maintenance across our devices with the help of students, faculty, and researchers. Daily maintenance includes (1) functional listening checks to make sure output is occurring normally and (2) biological verification to ensure there has been no significant output drifts since calibration. Finally, individuals interacting with the equipment engage in daily-visual checks for wear and tear, etc.

Standard 6.4 Calibration Staff

Indicate the individual(s) responsible to ensure proper equipment calibration (Select all that apply)

Administrative assistant
Clinical director

Standard 6.4 Calibration Frequency

Indicate how often equipment is calibrated.

Annually

Standard 6.4 Calibration Records

Indicate the individual(s) responsible for maintaining written records that equipment is calibrated in accordance with manufacturer standards, American National Standards Institute (ANSI), or other appropriate agencies. (Select all that apply)

Clinical director or coordinator

Standard 6.4 Clarifying Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's

compliance with Standard 6.4.

None

Standard 6.5 Technical Infrastructure

Standard 6.5 Technical Infrastructure

The program has access to an adequate technical infrastructure to support the work of the students, faculty, and staff. The technical infrastructure includes access to the Internet, the online and physical resources of the library, and any streaming or videoconferencing facilities needed for the program to meet its mission and goals

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Requirement for Review:

- The program must demonstrate adequate access to a technical infrastructure that supports the work of the students, faculty, and staff.
- The program must demonstrate how access to this infrastructure helps the program meet its mission and goals.

Findings

No findings provided

Standard 6.5 Prior Concerns

If there were areas of non-compliance or follow-up regarding Technical Infrastructure noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding Technical Infrastructure and Resources listed in the last Accreditation Action Report

Standard 6.5 Infrastructure Adequacy

Describe the processes that will be used to evaluate the adequacy of the infrastructure to support the work of the program's students, faculty, and staff.

The division chair and clinic director discuss factors affecting the technical infrastructure adequacy. Discussions and recommendations also occur at audiology division and department meetings. The audiology division chair and clinic

director communicate with the department head, along with the directors and coordinators of other programs in the department, about supportive and impeding factors for maintaining infrastructure adequacy. When needed--higher-level resources/divisions within the university are brought into the conversation (e.g., IT, Classroom Technologies, and Accessibility).

Standard 6.5 Infrastructure Mission

Describe how access to the infrastructure will allow the program to meet its mission and goals.

Adequate access to the technical infrastructure allows the audiology program and the larger department with its other undergraduate and graduate programs to offer campus and distance education, campus-based and telehelath clinical services, and transdisciplinary research experiences that underlie its mission and goals.

Standard 6.5 Infrastructure Resources

Describe how faculty and students have access to appropriate and sufficient resources, such as library resources, interlibrary loan services, computers and the internet, laboratory facilities, and support personnel.

Each employee and student at USU has an A-number which allows them to access a resources from the university's rich infrastructure. Faculty and students have access to appropriate and sufficient resources, such as library resources (including a content-specific librarian designated to our department), interlibrary loan services, personal computers and the internet, Zoom HIPAA-compliant video conferencing services, laboratory facilities, and support personnel (like the graduate program coordinator and vast, free-of charge mental health resources). Furthermore, each AuD student is provided with a digitally secured laptop throughout the duration of their graduate program for clinical use (e.g., writing reports and inputting data into medical records).

Standard 6.5 Infrastructure Resources Evaluation

Describe how the adequacy of support is evaluated and how these resources are addressed in the program's strategic plan.

USU regularly evaluates the adequacy of the university-wide infrastructure and updates it as needed and as resources allow. The audiology program's strategic plan does not typically address technical infrastructure resources this because it has not been an area of deficiency. If a deficiency should arise, the division faculty with discuss their concerns/needs and bring them to the department head. The department head will pursue the concerns at higher levels within the university.

Standard 6.5 Infrastructure Resources Frequency

How frequently does the program evaluate the adequacy of resources?

Annually

Standard 6.5 Additional Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.5.

None

Standard 6.6 Clerical and Technical Staff Support

Standard 6.6 Clerical and Technical Staff Support

The program has access to clerical and technical staff that is appropriate and sufficient to support the work of the students, faculty, and staff. The access is appropriate and sufficient for the program to meet its mission and goals.

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Requirement for Review:

- The program must demonstrate adequate access to clerical and technical staff to support the work of the students, faculty, and staff.
- The program must demonstrate how access to the clerical and technical staff helps the program meet its mission and goals.

Findings

No findings provided

Standard 6.6 Prior Concerns

If there were areas of non-compliance or follow-up regarding Clerical and Technical Staff Support noted in the CAA Accreditation Action Report last year, describe the steps taken by the program to address the concern and how the program is now in compliance with this standard.

There were no citations regarding clerical and technical staff support listed in the last Accreditation Action Report

Standard 6.6 Staff Support Mission

Describe how clerical and technical staff and support services are adequate and sufficient to meet the program's mission

and goals.

The department has adequate clerical and administrative support staff. There is further support staff in the Sorenson Center for Clinical Excellence, the Dolores Doré Eccles Center for Early Care & Education building, and in the College. The College has a technical support unit dedicated to College faculty and staff. The Sorenson Center for Clinical Excellence has its own dedicated technical support services. There is also a university technical support help line for lower-level issues.

Standard 6.6 Evaluation of Staff

Describe the process the program uses to evaluate the adequacy of access to clerical and technical staff to support the work of the program's students, faculty, and staff.

The division chair and clinic director contact the department head about factors affecting access to clerical and technical staff. The clinic director also communicates with administrators in the Sorenson Center for Clinical Excellence about access to shared clerical and technical staff.

Standard 6.6 Additional Information

Use the text box below to describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.6.

None