

2018 Application - Speech Language Pathology

Program Demographics

This page contains the information that the CAA currently has about your program. **All fields on this page are read-only.**

To update your program's address, phone number, fax, website, and email [click here](#).

If you have updated any information, you will need to click **Data Refresh** in the menu bar at the top of this page and select "Program Information" in order to display the updates here.

For help while completing this report, contact caareports@asha.org

Institution Name:	California State University, Fullerton
Address:	California State University, Fullerton Dept of Comm Scien Disorders 800 N State College Blvd Fullerton, CA 92834-9480
Phone Number:	(657)278-7602
Fax Number	(657)278-3377
Program Website	http://communications.fullerton.edu/comd/
Professional Area	Speech Language Pathology
Degree Designator	MA
Second Degree Designator	No Response Provided
Consortium	No
Satellite Campus	No

Distance Education

No

Contractual Arrangement

No

Current Accreditation Cycle Dates:

01/01/2011-12/31/2018

Institution Description and Authorization

Please download the [Accreditation Authorization form](#), complete it, and then attach it 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 is 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.

[authorization of accreditation.pdf](#)

Academic institution type

Public

Academic institution size

>20,000 students

Basic Carnegie classification of institution

M1: Master's Colleges and Universities – Larger programs

Modalities

****Your response to the following question will enable additional questions within this report regarding the modalities. If you later alter your response to these questions, you risk losing information entered.**

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

No

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

No

Standard 1.1 Regional Accreditation

If there were areas of non-compliance, partial compliance or follow-up regarding Regional 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 Regional Accreditation listed in the last Accreditation Action Report

Name of Regional Accreditor

WSCUC

Provide the URL from your Regional 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 here (see Help content for links to directories):

<https://www.wascsenior.org/>

Is the program currently undergoing review by the regional accreditor?

No

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.1

Institutional accreditation is in AY 2019-2020.

Standard 1.2 Degree Granting Authority

If there were areas of non-compliance, partial 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

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

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.2

We became an independent department (Communication Sciences and Disorders) in fall 2017 from the Communicative Disorders program in the Human Communication Studies department.

Standard 1.3 Mission, Goals and Objectives

If there were areas of non-compliance, partial 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

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.

<http://communications.fullerton.edu/hcom/hcom-cd-ma.php> (M.A. Program Handbook in Communicative Disorders P.26-30)

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

Our mission and goals statements serves as our guiding principles in evaluating our graduate training and making any changes of the current academic and/or clinical training program.

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

	State licensure,	Teaching Credentials
	Specify States,	Specify
Certificate of Clinical Competence (CCC),	California,	California Teaching Credential

Please 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

If there were areas of non-compliance, partial 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

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.

<http://webcert.fullerton.edu/aboutcsuf/mission.asp>

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

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

Monitor achievement of outcomes and progress toward goals, Discuss and review at faculty retreat

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

Monitor achievement of outcomes and progress toward goals, Discuss and review at faculty retreat

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

At the program retreat annually or biannually, the faculty members review the strategic plan and identify met/unmet goals.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.4

Our university is currently developing 2018-2023 strategic plan, <http://planning.fullerton.edu/>

Standard 1.5 Program Strategic Plan

If there were areas of non-compliance, partial 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

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

The program's strategic plan (2013-2018) was updated at the retreat to be aligned with the California State University, Fullerton (CSUF) strategic plan 2013-2018. The progress in implementing the strategic plan (AY 15-16 and 16-17) has been evaluated annually at the faculty retreat.

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.

The program's strategic plan (2013-2018) was updated at the retreat to be aligned with the California State University, Fullerton (CSUF) strategic plan 2013-2018. Currently, CSUF is updating the next strategic plan. As the CSUF strategic plan is updated, our program will update our strategic plan as well.

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

Our faculty member (Dr. Terry Saenz), who serves in the California credential coordinator, hosts an annual Advisory Board Meeting and updates our program activities with the community members. The department chair also participates in the annual Advisory Board Meeting.

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

Following the Advisory Board Meeting, Dr. Saenz shares the meeting minutes with all advisory board members and the program faculty. The program faculty implement any suggestions from the advisory board. At the program retreat, the faculty in the program review the plan, our accomplishment of the plan, and identify unmet aspects of the plan.

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

Strategic plan (2013-2018) executive summary

GOAL 1

To ensure the preeminence of learning by addressing the knowledge and skill areas delineated in the appropriate ASHA Standards for the Certificate of Clinical Competence in Speech-Language Pathology.

Student Learning Outcomes are strong. We are striving to maintain the current level of learning outcomes. The following is the summary of the past three years.

On-time Program Completion Rates: The expected time of study is 2.5 to 3 years.

¹When students needed to complete some undergraduate courses or take a reduced course load due to a personal preference, it took three years plus a summer or four years.

Reporting Period	# Completed within Expected Time Frame	% Completed within Expected Time Frame
2016-2017 ¹	27 out of 29	93
2015-2016 ¹	23 out of 25	92

2014-2015	23 out of 23	100
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Praxis Examination Pass Rates of Test-takers

Reporting Period	# Taking the Exam	% Passed Exam Rate
Sept 2016-Aug 2017	25	96
Sept 2015-Aug 2016	30	100
Sept 2014-Aug 2015	21	95

Employment Rates of Graduates

Reporting Period	# of Graduates from Prior Year	% Graduates from Prior Year
2016-2017	25	100
2015-2016	23	100
2014-2015	26	100

GOAL 2

To provide a high-quality program by ongoing identification of the most appropriate student learning outcomes.

We have graduated 24, 25, and 29 students respectively in the past three years. We are striving to continue high completion rates within the expected time frame of 2.5-3 years by creating more clinical practicum sections. The clinic waiting area has been improved with repainting, new furniture donated from Univision, new signs, a wall-mounted TV monitor, and new decorations. The conversion of the observation room recording system from an analog to a digital system is in progress.

GOAL 3

To incorporate formative and summative assessment instruments to evaluate student achievement.

With the university assessment requirement, undergraduate assessment methods have been modified, and data collection is in progress. Graduate academic KASA administration methods have been modified through pilot testing in COMD 576, the AAC seminar, and with infusion into semester exams to reduce the faculty workload and students' stress levels when taking multiple KASAs in the same week. We continue to monitor the implementation of the modified methods and discuss the evidence at retreats. The committee members (Kurt Kitselman, Terry Saenz, Kristofer Brock) revised the graduates' and employers' survey items, and Dr. Saenz put the survey on Qualtrics. Dr. Seung sent out emails to the 11 fall 2016 graduates and received six responses from the graduates, but one incomplete response from an employer. Overall, the responses were strong with a few ratings on diagnostic testing show ratings of 2 or below on the 4-point rating scale. We will develop plans to increase the response rate.

GOAL 4

To create an environment where students have opportunities to succeed.

KASA result reporting and posting on-line have been developed by the graduate adviser, which allows the faculty members to see failed KASA competency trends easily and adapt that data into their seminars. As we transition to Calipso starting with the fall 2016 admits, all faculty members will become familiar with the student progress management system and identify any issues to improve. In the COMD 501 class, Dr. Tsao and Dr. Seung will provide guidance to students on how to monitor their academic and clinical progress in Calipso. Additionally, through academic advising and teaching clinics, graduate students will be informed of how to monitor their progress on Calipso.

GOAL 5

To strengthen institutional and community agency collaboration through expanded clinical site connections and educational partnerships.

Dr. Saenz has been hosting annual Advisory Board meetings and sharing the updates on the department and obtaining the board's feedback for improvement. The department chair has been attending the Advisory Board meeting. We plan to continue to invite new advisory members from the community.

GOAL 6

Develop and maintain a curricular and co-curricular environment that prepares students for participation in a global society

and is responsive to workforce needs

NSSHLA, Student Speech Therapists And Audiologists Nurturing Cultural Enrichment (STANCE), and clinic student assistants have done well. We plan to continue supporting them to enhance their co-curricular preparation. We will offer a COMD 495, undergraduate internship course, in fall 2018 and monitor its success. Dr. Tsao continues to provide student exchange experiences with the local Tzu-Chi foundation and Tzu-Chi University in Taiwan.

GOAL 7

Improve student persistence, increase graduation rates, and narrow the achievement gap for underrepresented students.

The chair and undergraduate adviser collaborate to participate fully in Graduation Initiative 2025 to increase the 4-year graduation rate. A graduate advising on-line sign-off is working well, and we are continuing to distribute graduate student advisees to all tenure-track faculty members. We plan to obtain data from the Institutional Research office regarding ethnic distribution of our graduates to ensure decreasing the achievement gap between ethnic majority and minority students.

GOAL 8

Recruit and retain a high-quality and diverse faculty and staff.

We plan to continue to recruit diverse faculty members in AAC, neurogenic, hearing, and literacy development to increase the proportion of instructors who are on the tenure-track positions.

GOAL 9

Increase revenue through fundraising, entrepreneurial activities, grants, and contracts.

We had a very successful NSSHLA Speakeasy fund raiser in November 2017. Scottish Rite endowed a \$100,000 scholarship for our graduate students who plan to work with children in their future careers. A NSSHLA scholarship was established for NSSHLA members. We plan to continue to work closely with the college director of development and increase fundraising, scholarships, and grant revenue.

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 disseminated to faculty and staff at the program retreat. It will be shared in the alumni news letter that is sent out by the director of development in the college.

Please 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

If there were areas of non-compliance, partial 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

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

[Coll_Comm_Org_Chart_2018_Spring.pdf](#)

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.

Program has independent departmental status

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

Communication, Fine Arts

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

As a new department, we have more autonomy in managing our professional education programs (undergraduate and graduate programs). New ideas and any changes to make are discussed at the monthly department meetings and retreat in the first week of each semester.

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

Our dean's office (both associate dean and dean) are very accessible. Any faculty can schedule meetings with them if they have any issues to discuss/consult with them about.

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 current department chair was elected by full-time and part-time faculty in March 2017 when the approval of the establishment of the new department was finally approved by the president. Previously, we had the communicative disorders program coordinator who did oversee the degree program in collaboration with the graduate and undergraduate advisers and clinic director, clinical services coordinator and clinical administrative assistant. The program coordinator handled curriculum including course planning and scheduling. Graduate admissions were handled by the graduate adviser and graduate committee. The departmental budget was handled by the department chair who handled both degree programs (communicative disorders and communication studies programs). The clinic budget was handled by the clinic director.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.6.

None

Standard 1.7 Program Director

If there were areas of non-compliance, partial 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

The name of the program director is displayed based on information currently on file with the CAA.

If this information is incorrect, please submit a [Change in Program Director Form](#) to accreditation@asha.org. Once reviewed by staff, the information displayed here will be updated.

Dr. Hye Kyeong Seung

Date appointed:

8/17/2017

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

no

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

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.

Dr. HyeKyeong Seung served as the program coordinator since fall 2013 until she was elected to serve as an inaugural department chair. She wrote a proposal to establish a Department of Communication Sciences and Disorders from the Communicative Disorders program in the Human Communication Studies Department. As the program coordinator, with collaboration with the program faculty, she implemented an online graduate admission on CSDCAS and changed graduate admissions to once per year in the fall from spring and fall admissions since fall 2014. Again in collaboration with the program faculty members, she adopted Calipso to manage graduate students' academic and clinical training since fall 2016.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.7

The department chair was the Communicative Disorders (CD) program coordinator when the last report was submitted. She was elected as the department chair when the CD program became the Department of Communication Sciences and Disorders in fall 2017.

Standard 1.8 Equitable Treatment

If there were areas of non-compliance, partial 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

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.

Complaint procedures for students, faculty, staff, and members of community are posted on the department bulletin boards, in the clinic, and in the graduate handbook. Any complaints reported to the department chair are handled internally and follow the chain of command as needed.

Human Resources, Diversity and Inclusion (HRDI) website, <http://hr.fullerton.edu/diversity/> provides information about the discrimination, harassment, or retaliation on the link, http://hr.fullerton.edu/faculty_staff_relations/DiscriminationHarassment.php. The HRDI handles and maintains records of any complaints.

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

When any case of the violations of compliance with non-discrimination laws and regulations is reported to the department chair, the chair consults the dean and/or HRDI.

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

Other

Specify

Student handbook, Posting on the department and clinic bulletin boards.

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

No Response Provided

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

Website

URL

Clinic materials, <http://communications.fullerton.edu/speechclinic/>

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 and faculty are made aware of the policies and the conduct they prohibit.

When there is any complaint, the complaint is handled internally by the department chair, subsequently consulting with the dean, and/or Human Resources, Diversity and Inclusion office as needed.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.8

None

Standard 1.9 Public Information

If there were areas of non-compliance, partial 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

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.

Please provide the URL where this information can be found:

http://communications.fullerton.edu/comd/dept_accrediation/department_accrediation.php

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

http://communications.fullerton.edu/comd/learning_outcomes/learning_outcomes.php

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

http://communications.fullerton.edu/comd/learning_outcomes/learning_outcomes.php

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

http://communications.fullerton.edu/comd/learning_outcomes/learning_outcomes.php

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)

Brochures

When is information about the program and institution updated?

Annually

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

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

Administrative assistant, Clinic director, Graduate coordinator, Program director

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

Program websites

URL

<http://communications.fullerton.edu/comd/degree/cd-ma.php>

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.

On-time program completion rates are 2.5-3 years as posted on

http://communications.fullerton.edu/comd/learning_outcomes/learning_outcomes.php.

When students need to complete some undergraduate courses or take a reduced course load due to personal preference, it takes three years plus a summer or four years. This information is available to the public.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 1.9

Since we became a department in fall 2017, we are working on ways to promote our program.

Standard 2.0 Faculty

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

To add or remove faculty from this list [click here](#).

If you have added or removed faculty from the list using the link above, you will need to click Data Refresh in the menu bar at the top of this page and select "Faculty Information" in order to display the updates here.

You will then be able to provide details about each newly added faculty member. You must provide details for all faculty members. A checkmark will appear next to the faculty member's name when the entry has been completed.

At the bottom of each faculty page, you will see two saving option. 1) Save and Close and 2) Close - Remember to Save Later. Save and Close will save that faculty page immediately, but the save function can be slow. If you are working on more than one record, then Close - Remember to Save Later will allow you make edits to multiple faculty records and then save them all at once. The system will time out if you have not saved in approximately 30 minutes, so be sure to save often.

Detail Summary

Faculty Name	CCC Status	Employment Status to the University	Academic Rank	Role	Highest Degree	Classroom Teaching Contribution	Other Activites
Nancy L Adzovich	CCC-A	Adjunct	Lecturer	Clinical Supervisor	Clinical Doctorate	0.2000	Supervision
Therese J Cooper	CCC-SLP	Adjunct	Lecturer	Clinical Supervisor, Instructional Faculty	Master's	0.3000	Supervision
Michael J Davis	CCC-A	Other	Associate Professor	Instructional Faculty	Research Doctorate (e.g. PhD, EdD, etc)	0.2000	Advising
Minjung Kim	CCC-SLP	Full-Time 9mo.	Assistant Professor	Instructional Faculty, Other	Research Doctorate (e.g. PhD, EdD, etc)	0.2000	Research, Advising, Not currently contributing
Kurt Kitselman	CCC-SLP	Other	Full Professor	Instructional Faculty	Research Doctorate (e.g. PhD, EdD, etc)	0.2000	Supervision, Advising
Ellen M Lamberth	CCC-SLP	Adjunct	Instructor	Clinical Supervisor	Master's	0.1000	Supervision
Linda K Pippert	CCC-SLP	Adjunct	Instructor	Clinical Supervisor	Master's	0.2000	Supervision
Terry I Saenz	CCC-SLP	Full-Time 9mo.	Full Professor	Instructional Faculty, Other	Research Doctorate (e.g. PhD, EdD, etc)	0.5000	Supervision, Advising
Hye Kyeung Seung	CCC-SLP	Full-Time 12mo.	Full Professor	Department Chair, Instructional Faculty	Research Doctorate (e.g. PhD, EdD, etc)	0.2000	Research, Advising, Administration
Ying-Chiao Tsao	CCC-SLP	Full-Time 9mo.	Associate Professor	Instructional Faculty, Other	Research Doctorate (e.g. PhD, EdD, etc)	0.3000	Research, Advising

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Phillip C Weir-Mayta	CCC-SLP	Full-Time 9mo.	Assistant Professor	Clinic Director, Clinical Supervisor, Instructional Faculty	Research Doctorate (e.g. PhD, EdD, etc)	0.6000	Supervision, Research, Advising
Sherri R Wolff	CCC-SLP	Full-Time 12mo.	Other	Other	Master's	0.0000	Administration
Toya A Wyatt	CCC-SLP	Full-Time 9mo.	Full Professor	Clinical Supervisor, Instructional Faculty	Research Doctorate (e.g. PhD, EdD, etc)	0.7000	Supervision, Advising
Kristofer L Brock	CCC-SLP	Full-Time 9mo.	Assistant Professor	Clinical Supervisor, Instructional Faculty	Research Doctorate (e.g. PhD, EdD, etc)	0.2000	Research, Advising, Not currently contributing
Joseph B Horodyski, III	CCC-SLP	Adjunct	Lecturer	Instructional Faculty	Other	0.2000	N/A
Susan E Noguchi	CCC-SLP	Adjunct	Lecturer	Instructional Faculty	Master's	0.3000	N/A
SallyAnn Giess	CCC-SLP	Adjunct	Lecturer	Clinical Supervisor, Instructional Faculty	Research Doctorate (e.g. PhD, EdD, etc)	0.1000	Supervision
Diane R Collins	CCC-SLP	Adjunct	Lecturer	Clinical Supervisor	Master's	0.1000	Supervision

Summary of Faculty Contribution

Number of full-time 9 month faculty	6
Number of full-time 12 month faculty	2
Number of part-time faculty	0
Number of adjunct faculty	8
Number of faculty with "other" employment status	2
Number providing supervision	10
Number providing research	5
Number providing advising	9
Number providing administration	2
Total % workload classroom teaching	4.60

Standard 2.1 Faculty Sufficiency – Overall Program

If there were areas of non-compliance, partial 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

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

Full-time graduate students are defined as the ones who are enrolled in 9 or more units, and part-time students are the ones who are enrolled in 3 to 8 units.

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

yes

Indicate faculty changes that have occurred since your last report to the CAA.

Faculty Name	Status	Courses taught/assigned	Effective date
Kenneth Tom	Other Please Specify retirement	COMD 573	8/17/2017
Kristofer Brock	Left the program	COMD 576, 548A, 558A	1/3/2018

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	60	58	3.4483
Part-time	14	20	-30.0000
Total	74	78	-5.1282

Percentage change of enrollment across all modalities (if applicable)

% Change Full-time	3.4483
% Change Part-time	-30.0000

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, employment 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

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

yes

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
B.A.	543	390	153

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

no

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

Most of our adjunct faculty in the graduate program supervise in-house clinic practicum courses. Since Kenneth Tom retired in May 2017, we have an adjunct faculty member with experience in voice disorders teaching COMD 573, Seminar in Voice Disorders, while we are currently searching for a tenure-track faculty in voice disorders. Additionally, COMD 500, Research in Speech Communication, has been taught by an adjunct faculty member with knowledge of research methods.

An audiologist with an Au.D. teaches one of the graduate audiology practicum courses.

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:

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

Our tenure-track faculty members consist of individuals with expertise in fluency, audiology, phonology, adult neurogenic disorders, autism, child language disorders, multicultural aspects of communicative disorders, and dysphagia. Currently we are searching for a faculty member in voice disorders and will request a faculty line for AAC since Kristofer Brock left.

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

Our students take a seminar (COMD 500, Research in Speech Communication), and most seminars include evidence-based practice in various disorders as demonstrated in course syllabi.

Meet the program's established learning goals and objectives

Each graduate seminar syllabus includes its learning goals and objectives.

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

Most of our students take their Praxis exam before their final semester and pass it the first time except a few who took it more than once. All of our graduates have jobs within one year. The majority have jobs immediately after their graduation, except a few who only want to work in medical settings. Three of the graduates in fall 2017 had job offers before they completed their degrees.

Complete the program within the published timeframe

The department chair keeps the data of our graduates each semester regarding the time frame they completed the degree and were employed in work settings.

Please 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

If there were areas of non-compliance, partial 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

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

For each semester, faculty members are expected to assume a four-course teaching load (.2 FTE per course) and to allocate the remaining workload (.2 FTE) to student advisement, committee responsibilities, and research.

For program administration, the department chair receives .6 FTE release time. The undergraduate adviser and graduate adviser each receive .2 FTE release time. The clinic director receives .2 FTE release per semester to administer the clinic along with the clinical service coordinator (12-month appointment) and administrative support coordinator (12-month appointment).

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

Not Applicable

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

Each faculty member hosts office hours following the University Policy Statement (UPS) 230.020. The office hours are included in the course syllabi, posted outside of faculty offices, on the department bulletin board, and website.

Have sufficient time to advise students (if required)

Each faculty member hosts a minimum of three hours of office hours at designated days and times and by appointment during the semester.

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.

Out of 15 Weighted Teaching Units (WTU), three units are assigned for research and committees. Faculty members can apply for intramural grants for a course release to conduct research.

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 clinical education and service as part of their workload:

Are accessible to students

All full-time tenure-track faculty members teach graduate seminars and/or supervise practicum courses. We have part-time faculty who supervise practicum courses at our in-house Speech and Hearing Clinic. Faculty members offer office hours or scheduled individual and/or small group meetings during the practicum.

Have sufficient time to advise students (if required)

In spite of a heavy teaching load (teaching four undergraduate and/or graduate courses), our faculty members have provided time for our students through office hours or by appointment.

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.

Several of our tenure-track faculty have engaged in research with students and have published and presented their research. There are intramural grants available for a course release and/or operating expenses.

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.

We have an internal mentoring process in which senior faculty members provides guidance for recently hired tenure-track faculty members. Also our Faculty Development Center (FDC) provides workshops related to teaching and scholarship.

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

Human Resources, Diversity, and Inclusion (HRDI) and the Faculty Development Center (FDC) offers workshops for faculty and staff year round. Each faculty member registers for any of the workshops to meet their individual needs. Some workshops are offered online. The announcements are made via campus emails to all faculty and/or staff. Subsequently, the department chair sends reminders to faculty members if the subject is relevant to their interests.

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

Most opportunities are shared with the faculty via campus-wide emails, including opportunities to serve on university committees and intramural grants.

Subsequently, our college dean, associate dean, or the department chair send reminders to relevant faculty members.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 2.2

None

Standard 2.3 Faculty Qualifications

If there were areas of non-compliance, partial 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

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

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

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

Retention, Tenure, and Promotion (RTP) procedures and expectations in teaching, scholarship, and services are clearly described in the University Policy Statement (UPS) 210.000, and our department has our own expectations that are aligned to UPS 210.000. Copies of UPS 210.000 are available on the http://www.fullerton.edu/senate/publications_policies_resolutions/ups/UPS%20200/UPS%20210.000.pdf. The University Faculty Handbook is available, <http://www.fullerton.edu/far/handbook/>

Describe how verification of supervisor certification is completed.

The clinic administrative assistant verifies the currency of licenses and ASHA CCCs from the California Department of Consumer Affairs Speech-Language Pathology & Audiology & Hearing Aid Dispensers Board and ASHA websites annually.

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.

Administrative Assistant

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.

- All off-site supervisor credentials are verified each semester by the administrative support coordinator (Steven) as indicated above. The administrative support coordinator uses an Excel spreadsheet to track and verify the credentials of on-campus supervisors yearly and each semester for off-campus supervisors.
 - License numbers are looked up on the Department of Consumer Affairs Speech-Language Pathology & Audiology & Hearing Aid Dispensers Board website at the link, [http://www2.dca.ca.gov/pls/wllpub/wllqryna\\$lcev2.startup?p_qte_code=LIC&p_qte_pgm_code=7700](http://www2.dca.ca.gov/pls/wllpub/wllqryna$lcev2.startup?p_qte_code=LIC&p_qte_pgm_code=7700) and the ASHA website.
-

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

Annually

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

The clinic administrative assistant verifies the currency of licenses and ASHA CCCs from the California Department of Consumer Affairs Speech-Language Pathology & Audiology & Hearing Aid Dispensers Board and ASHA websites annually.

Who is responsible for verifying that credentials for individuals providing supervision are consistent with state licensure requirements?

Administrative Assistant

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

Annually

Please 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

If there were areas of non-compliance, partial 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.

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

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

In spite of heavy teaching loads (teaching four courses per semester), our tenure-track faculty members maintain their research with undergraduate or graduate students. They present at ASHA and California Speech-Language-Hearing Association conventions as well as their own research area conferences. Intramural grant (one course release can be requested) opportunities are available. We have a very supportive Faculty Development Center (FDC) that provides teaching-related workshops and professional development opportunities year-round.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 2.4.

None

Standard 3.0 - Courses

Instruction: Provide details for all courses (academic and clinical) in the curriculum by completing the table below.

1. Add a row in the table for each course in the curriculum.
2. Indicate the instructors assigned to teach each course for the complete program of study.
3. In the Requirement column, indicate how the course is offered and if it is for Graduate students only or a combined Undergraduate and Graduate course.

Course Title and Number/Section	Instructors	Terms offered in the last 2 years	Requirement	Type	# of credits
COMD 500 Research in speech communication	HyeKyeung Seung Joseph Horodyski	fall and spring semesters	Required-Grad	Seminar	3
COMD 501 Seminar in speech-language pathology	Ying-Chiao Tsao	fall semester	Required-Grad	Seminar	1
COMD 542 Neurologic and clinical aspects of speech, language, and cognition	Phil Weir-Mayta	fall and spring semesters	Required-Grad	Seminar	3
COMD 543 Seminar in dysphagia	Kurt Kitselman	fall and spring semesters	Required-Grad	Seminar	3
COMD 544 Seminar in neurogenic speech, language, & cognitive disorders	Jacqueline Bostrom Phil Weir-Mayta	fall and spring in three consecutive semesters and not offered in the fourth semester	Elective-Grad	Academic	3
COMD 554 Seminar in multicultural issues in communicative disorders	Toya Wyatt	fall semester	Elective-Grad	Seminar	3
COMD 564 Autism spectrum disorders in speech-language pathology	HyeKyeung Seung	spring and fall semesters	Elective-Grad	Seminar	3
COMD 571 Seminar in fluency disorders	Ying-Chiao Tsao	fall and spring semesters	Required-Grad	Seminar	3
COMD 573 Seminar in voice disorders	Kenneth Tom Susan Noguchi	fall and spring semester	Required-Grad	Seminar	3
COMD 574 Seminar in phonological disorders	Minjung Kim	fall and spring semester	Required-Grad	Seminar	3
COMD 576 Seminar in augmentative and alternative communication	kristofer Brock	fall and spring semester	Required-Grad	Seminar	3
COMD 577 Seminar in child language disorders	Toya Wyatt and Terry Saenz	fall and spring semester	Required-Grad	Seminar	3
COMD 548 Clinical practicum: speech and language disorders in children	Ellen Lamberth Amy Reeves Diane Collins	fall, spring, and summer semester	Required-Grad	Practicum	3
COMD 568 Audiology practicum	Nancy Adzovich	fall and spring semester	Required-Grad	Clinical	1
COMD 585 Aural rehabilitation practicum	Michael Davis	fall and spring semester	Required-Grad	Clinical	1
COMD 589A Public school practicum in communicative disorders	Terry Saenz	fall and spring semester	Elective-Grad	Practicum	4

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COMD 558A Clinical practicum: speech and language disorders in adults	Linda Pippert, Therese Cooper, and Phil Weir-Mayta	fall, spring, and summer semester	Required-Grad	Practicum	3
COMD 558C Clinical practicum: communicative disorders and differences in individuals from diverse backgrounds	Toya Wyatt	fall and spring semester	Required-Grad	Practicum	3
COMD 559A Advanced clinical practicum: communicative disorders	Kurt Kitselman and Phi Weir-Mayta	fall, spring, and summer semester	Required-Grad	Practicum	3
COMD 590 Seminar: speech and hearing services in schools	Terry Saenz	fall and spring semester	Elective-Grad	Academic	2

Please describe any additional clarifying information you wish to provide regarding the program's courses.

COMD 564, Autism Spectrum Disorders in Speech-Language Pathology, COMD 590, Seminar: Speech and Language Services in Schools, and COMD 589A, Public School Practicum in Communicative Disorders are required for the California Speech-Language Pathology Services Credential in Language, Speech, and Hearing. The majority of students obtain the credential, but a few opt out from the credential. Therefore, these are indicated as electives. These are not included in the Graduate Study Plan (GSP), with the exception of COMD 564, which can be selected as an elective on the GSP.

Standard 3.1 Overall Curriculum

If there were areas of non-compliance, partial 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

How are credit hours offered at the institution?

Semester

Provide the URL for the current graduate program course descriptions.

http://catalog.fullerton.edu/preview_program.php?catoid=1&poid=303

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	30
Minimum elective academic credits	3
Minimum required practicum/clinical credits	11
Minimum elective practicum/clinical credits	9
Minimum required research credits (include dissertation if applicable)	0
Minimum elective research credits (include dissertation if applicable)	0
Indicate any other requirements below	
To obtain credential, students need an additional 12 units of seminars, public school practicum, and multicultural clinic.	12
Total	65

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

We offer comprehensive courses that are taught by full-time tenure-track faculty with expertise in different clinical populations. Our students complete two semesters at our in-house Speech and Hearing Clinic (COMD 548 and COMD 558A) before they are placed in medical settings and public schools.

Please download the [Knowledge and Skills chart](#), complete it, and then upload it to this question.

[SLP-Knowledge-and-Skills-within-the-Curriculum.doc](#)

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

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

Class exam scores/grades, Completion and review of clinical assignments (reports, lesson plans, progress notes),

Completion of class assignments (oral and written), Comprehensive exams (oral and/or written), Personal statement on application

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

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

We have used graduate students' academic and clinical training tracking online system (i.e. KASA file) that was developed internally on an Excel file. The graduate students have access to their own KASA files using their password and monitor their clock hours and clinical skills ratings from each practicum. At the beginning of the final semester in the graduate program, each student meets with the department chair (formerly the CD program coordinator) to ensure they will have a total of 375 practicum hours and will have clinical experience in the big nine areas. At the end of their final semester, the department chair signs off the completion of at least 375 clock hours and the clinical skills rating in all items. We transitioned from our KASA file to Calipso with our fall 2016 admits. Currently we have students in both tracking systems until we graduate students who were admitted prior to fall 2016.

Describe how the professional practice competencies are infused throughout the curriculum.

Each seminar includes professional practice competencies, and academic faculty and clinical supervisors consult on clinical cases as needed. Writing goals and objectives have been identified as an area to infuse across seminars.

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

The professional practice competencies are assessed in each practicum course. Currently in our Calipso, items such as "collaborate with other professionals in case management" are included, and our students are evaluated on these items in each practicum.

In our COMD 544 class, there are guest speakers from other disciplines (physical therapy and occupational therapy) who speak to the class about their specific skills and how physical therapists, occupational therapists, and speech-language pathologists work together as a team. We also have two class sessions where the speech-language pathology students team up with nursing students in the nursing simulation center. During a simulation, the students help each other understand their particular role in assessing a stroke patient and a tracheotomy/vent patient. For example, nursing students suction the patient while the speech-language pathology student performs a Passy Muir Speaking Valve speech evaluation. SLP students also have the opportunity to learn from and work with nursing students on a simulated intensive care patient. To assess learning outcomes, students write reflection essays following each class and are responsible for a portfolio project which details how to do various evaluations and therapy in a medical-type setting.

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

Undergraduate courses cover normal and impaired human development across life span as listed below. Graduate seminars and practicum focus on disorders mostly across life span as listed in the academic and practicum courses. We have established prerequisite courses for both undergraduate and graduate curriculum. Both undergraduate and graduate courses consist of required and elective courses.

Undergraduate courses

- COMD 241, Introduction to Phonetics
- COMD 242, Introduction to Communicative Disorders
- COMD 307, Speech & Language Development
- COMD 352, Child Language and Phonological Disorders
- COMD 344, Anatomy & Physiology of speech & Hearing
- COMD 345, Communication and Aging
- COMD 350, Speech & Hearing Science
- COMD 404, Communicative Disorders of the Bilingual/Multicultural Child
- COMD 461, Audiology & Audiometry
- COMD 465, Aural Rehabilitation
- COMD 472, Voice & Craniofacial Disorders
- COMD 474, Neurology & Neurogenic Communicative Disorders
- COMD 475, Fluency Disorders
- COMD 476, Clinical Methods and Procedures

Graduate courses

- COMD 542, Neurogenic Bases of Speech and Language
- COMD 543, Seminar in Dysphagia
- COMD 574, Seminar in Phonological Disorders
- COMD 577, Seminar in Child Language Disorders
- COMD 571, Seminar in Fluency Disorders
- COMD 573, Seminar in Voice Disorders
- COMD 576, Seminar in Augmentative and Alternative Communication
- COMD 544, Seminar in Neurogenic Speech, Language, and Cognitive Disorders
- COMD 554, Seminar in Multicultural Issues in Communicative Disorders
- COMD 564, Seminar in Autism Spectrum Disorder in Speech-Language Pathology
- COMD 548, Clinical Practicum: Speech and Language Disorders in Children
- COMD 558A, Clinical Practicum: Speech and Language Disorders in Adults
- COMD 558C, Clinical Practicum: Communicative Disorders and Differences in Individuals from Diverse Backgrounds
- COMD 568, Audiology Practicum
- COMD 585, Aural Rehabilitation Practicum
- COMD 559A, Advanced Clinical Practicum: Communicative Disorders
- COMD 589A Public School Practicum in Communicative Disorders

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)

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

Credentialing regulations are covered in COMD 501, Seminar in Speech-Language Pathology and COMD 590, Seminar: Speech and Hearing Services in Schools. Reimbursement issues are covered in COMD 542, Neurologic and Clinical Aspects of Speech, Language, and Cognition, and COMD 544, Seminar in Neurogenic Speech, Language, and Cognitive Disorders.

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

Our graduate students collect their session data during the COMD 548: Clinical Practicum: Speech and Language Disorders in Children and COMD 558A: Clinical Practicum: Speech and Language Disorders in Adults clinics at our Speech and Hearing Clinic. They discuss the therapy outcome data with their supervisors and adjust their intervention goals/objectives accordingly as well as utilize the existing evidence in the literature.

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

Students only count the time they are involved with the client during assessment and/or intervention. The students log in their hours, and the supervisors verify the hours.

Does the program offer clinical education for undergraduates?

No

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.1

None

Standard 3.2 Curriculum Currency

If there were areas of non-compliance, partial 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

Describe the curriculum planning process used by the program.

Any curricular changes are discussed at the monthly faculty meetings and retreats. We have a department curriculum committee that reviews any new course proposals before they are submitted to the university.

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

Any updates on the CFCC and CAA guidelines are implemented into our curriculum planning. For example, with CFCC 2014 changes, we updated our KASA knowledge-based competencies in the big nine areas at the fall 2015 retreat.

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

Each graduate seminar infuses the CFCC Standard IV, and V.

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.

We have had a day-long faculty retreat on the first day of each semester to handle academic and clinical curriculum issues since fall 2014. During the semester, we have monthly faculty meetings for 1.75 hours and monthly clinical service committee (CSC) meetings for 1 hour. The CSC consists of the clinic director, clinic services coordinator, clinic administrative assistant, graduate adviser, and the department chair.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.2

None

Standard 3.3 Sequence of Learning Experiences

If there were areas of non-compliance, partial 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

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

Our program offers seminars and clinical practicum courses every semester. Additionally, practicum courses (COMD 548, 558, and 559A) are offered during the summer (Child, Adult, and Advanced practicum respectively). Typically each seminar class size is 14-15 students. We have individualized students' course schedules based on the completion of their undergraduate and graduate prerequisites. Following is a sample sequence of courses/clinics. Our program is considering implementing a cohort model in the near future and having all students follow the same sequence of courses.

- COMD 500, 501, 542, 577, 458
 - COMD 542, 574, 558
 - COMD 543, 571, 468
 - COMD 573, 576, 564, 485
 - COMD 559A (summer)
 - COMD 558C, 489, 490 Note: Course prefixes are changed from HCOM to COMD since fall 2017 when we became a department. 458, 468, 485, 489, and 490 have been changed to 548, 568, 585, 589, and 590 to be consistent with the rest of graduate courses.
-

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

We have different tracks of course plans when students are admitted with a few deficit undergraduate courses. They complete the deficit courses before taking graduate courses.

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

We have Clinical Practicum Plans (CPPs) that identify academic and practicum course prerequisites. Students are required to complete the prerequisites. Also, we have Individual Student Schedules (ISS) that are established when they are admitted to the graduate program. Our graduate adviser establishes the ISS. Once the ISS is established, then the graduate adviser and clinical service coordinator establish the admitted graduate students' CPP master list to plan practicum planning in advance.

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

Example One:

COMD 558A, Clinical Practicum: Speech and Language Disorders in Adults requires COMD 542, Neurologic and Clinical Aspects of Speech, Language and Cognition.

Example Two:

COMD 559A, Advanced Clinical Practicum: Communicative Disorders requires COMD 548, Clinical Practicum: Speech and Language Disorders in Children, COMD 558A, Clinical Practicum: Speech and Language Disorders in Adults, COMD 543, Seminar in Dysphagia, COMD 573, Seminar in Voice Disorders, COMD 571, Seminar in Fluency Disorders, COMD Seminar in Phonological Disorders, COMD 576, Seminar in Augmentative and Alternative Communication, and COMD 577, Seminar in Child Language Disorders.

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

Sequenced courses and practica allow our students to meet Goal 1 ("to ensure the preeminence of learning by addressing the knowledge and skills areas delineated in the appropriate ASHA Standards for the Certificate of Clinical Competence in speech-language pathology") and Goal 4 ("to create an environment where students have opportunities to succeed").

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, Concentrated/accelerated course work, Extra readings,

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

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?

Our students take the academic prerequisite seminars before taking their practica. However, sometimes we allow them to take seminars and practica concurrently. When we assign a student coursework and practica concurrently (e.g., COMD 542, Neurologic and Clinical Aspects of Speech, Language, and Cognition with COMD 558A, Clinical Practicum: Speech and Language Disorders in Adults), we use his/her volunteer experiences and undergraduate coursework as the basis of allowing the student to take them concurrently.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.3

None

Standard 3.4 Diversity Reflected in the Curriculum

If there were any areas of non-compliance, partial 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

Describe how and where issues of diversity will be addressed across the curriculum.

Linguistic and cultural correlates of communication and communication disorders assessment and intervention issues are infused in most seminars.

In our students' practicum clock hours recording system, we record clinical clock hours with linguistically/culturally diverse clients. Additionally, we have an elective course, COMD 554, Seminar in Multicultural Issues in Communicative Disorders, and a practicum focusing on multilingual/multicultural clients, COMD 558C, Clinical Practicum: Communicative Disorders and Differences in Individuals from Diverse Backgrounds.

Describe how students obtain clinical experience with diverse populations.

We have a practicum course, COMD 558C, Clinical Practicum: Communicative Disorders and Differences in Individuals from Diverse Backgrounds, that approximately 95% of the students take. Clients in this practicum consist of clients whose primary language is not English. Due to our location, we often have Spanish and Asian families at our clinic for COMD 548, Practicum: Speech and Language Disorders in children, and COMD 558A, Clinical Practicum: Speech and Language Disorders in Adults.

Describe how students obtain academic and clinical education necessary for professional practice in a multicultural society.

We offer COMD 404, Communication Disorders of the Bilingual/Multicultural child, and 554, Seminar in Multicultural Issues in Communicative Disorders. We have a practicum course, COMD 558C, Clinical Practicum: Communicative Disorders and Differences in Individuals from Diverse Backgrounds, that approximately 95% of the students take. Clients in this practicum consist of the clients whose primary language is not English. Due to our location, we often have Spanish and Asian families at our clinic for COMD 548, Practicum: Speech and Language Disorders in children, and COMD 558A, Clinical Practicum: Speech and Language Disorders in Adults.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.4

We plan to offer an elective practicum that focuses on transgender voice disorders.

Standard 3.5 Scientific and Research Foundation

If there were areas of non-compliance, partial 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

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

In the first semester of the graduate program, the graduate adviser reviews their transcripts and verifies if they have taken biological, physical, and social sciences courses. Completion of a statistics course is a requirement of the graduate application and is the prerequisite of the graduate research class (COMD 500). The verification of these courses is included on Calipso (as well as our internally developed academic and clinical tracking on-line KASA file).

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)

Participation in faculty research,

Other

Specify

required undergraduate courses of speech sciences (COMD 350), anatomy and physiology (COMD 344), neurology and neurogenic communication disorders (COMD 474)

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

Complete research literature reviews within courses, Incorporate evidence-based practice into the clinic, Participate in faculty research,

Require research course

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

We verify basic science skills based on their transcripts in our HCOM 501, Seminar in Speech-Language Pathology class and record it in each student's KASA file or on Calipso.

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, Participate in faculty research

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

Each graduate seminar infuses evidence-based practice and provides opportunities to become familiar with the literature and become intelligent consumers of research. For example, in COMD 564, Autism Spectrum Disorders in Speech-Language Pathology, students review three intervention-related articles and summarize and identify clinical implications and strengths and weaknesses of each study.

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.

In COMD 500, Research in Speech Communication, students learn the fundamentals of evidence-based practice in their first year in the graduate program. They apply their knowledge gained to other seminars.

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.

As our graduate seminars assign students to develop intervention plans for various disorders (e.g., voice disorders, articulation and phonological disorders, autism, fluency, AAC, dysphagia, etc.), students are expected to provide a scientific rationale by including the evidence supporting their intervention plans.

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

In spite of heavy teaching loads of teaching four courses each semester, several of our faculty conduct research and involve undergraduate and graduate students. CSUF Strategic plan 2013-2018, Goal 2 Objective 4 states "to increase participation in High-Impact Practices (HIP) and ensure that 75% of CSUF students participate in at least two HIPs by graduation." Having students involved in faculty research (HIP) is highly encouraged by the university to the extent that the intramural grant review process recognizes students' involvement as part of the merit of a grant proposal.

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

The program goals and objectives are aligned with the university strategic plan. The program identified involving students in faculty research as one HIP activity. Two junior faculty members and four senior faculty members conduct research with students.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.5

None

Standard 3.6 Clinical Settings/Populations

If there were areas of non-compliance, partial 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

Provide a complete listing of all clinical sites used by the graduate program for last 2 years. Include on-campus facilities if applicable.

In this table, for each site provide the:

- Clinical site name
- Type of Facility
- Activities which students typically engage in
- Number of terms used in the past 2 years
- Age Range of clients
- Distance From Campus
- Typical number of students per supervisor

Clinical Site Name	Facility	Activities	Terms	Age Range	Distance	#/supervisor
Casa Colina Hospital for Rehabilitative Medicine (inpatient)	Hospital	Speech, Language, Swallowing DX & TX	6, 1, 1, 1, 2, 6, 3, 1, 3, 4, 6, 1, 3	birth-adults	22, 45, 23.4, 42.8, 37.9, 12, 21, 26.6, 11.1, 18.5, 8.3, 25.4, 7.4 miles	1,1,1,1,1,1,1,1,1,1,1
Cedar Sinai Medical Center						
Citrus Valley Health Partners						
Glendale Adventist Medical Center						
Good Samaritan Hospital						
HealthSouth Tustin						
Hoag Hospital Medical						

Center

Miller's
Children
Hospital

Orange
County
Global
Medical
Center

Pomona
Valley
Medical
Center

St. Joseph
Hospital of
Orange

St. Mary's
Medical
Center

UC Irvine
Medical
Center

2018 Application - Speech Language Pathology

Anaheim Hills Speech and Language	Private practice	Speech, Language, Swallowing DX & TX	1, 2, 2, 4	birth-adults, birth- adolescents, 5 years- adults	9, 5.2, 19.4, 11.8 miles	1, 1, 1, 1
Jump and Shout Therapy						
Love 2 Learn Consulting						
Speech and Language Development Center						
Care Meridian	Other Specify SNF Rehabilitation	Speech, Language, Swallowing DX & TX	1,	adults	12.7 miles	1
Casa Colina Outpatient Rehabilitation Outpatient Therapy	Other Specify outpatient clinic	Speech, Language, Swallowing DX & TX	1	birth-adults	22 miles	1
Coast Community College District	Other Specify community reintegration program	Speech, Language, Swallowing DX & TX	4	adults	21 miles	1
Bixby Elementary	School	Speech, language Dx and Tx	1, 1, 1, 1, 2, 1, 1, 1, 1, 1, 3, 2, 1, 1, 1, 1, 1, 1,	Elementary school (5-11 years)	23, 15, 15, 29, 5.4, 13, 13, 36, 46, 15, 5.6, 4.7, 11, 6.5, 39, 22, 23, 15, 3.4, 11, 28, 15, 3.6, 4.3, 15, 4.2, 5.3, 7, 22, 26, 6.2, 11, 14, 8.2, 19, 8.1, 24, 4.3, 37, 38, 23, 32, 43, 16, 50, 3.8, 14	1 (same response for all sites)
Glazier			1, 1, 1, 1, 1, 1,			
Dolland			1, 1, 1, 1, 1, 1,			
Riverview			1, 1, 1, 1, 1, 1,			
Linda Vista						
Heritage						
Thorman						
Wagon						

Wheel

John Land

College Park

Patrick Henry

Arovista

Prospect

Nohl Canyon

Lobo

Ben Franklin

Sterns

Niemes

Golden

Kennedy

La Rosa

Tustin Ranch

Laurel

Fanning

Hawaiian

Guinn

Mariposa

Escalona

Vista De
Valle

Sumner

Fairmont

Glenn Martin

Benson

Castle Rock

Springbrook

Melbourne

Elwin

Brea Country
Hills

R.H. Dana

Palms

Magnolia

Huntington Dr

Eagle Rock

Myford

O'Melveny

Rio Vista

Tetzlaff
Accelerated
Learning
Academy

Currie	School	Speech, language Dx and Tx	1, 2, 2, 2, 1	Middle school (11- 14 years)	13, 4.2, 4.3, 2, 40	1 (same response for all sites)
Tuffree						
Yorba Linda						
Valadez Middle school Academy						
Palms						

2018 Application - Speech Language Pathology

Ramirez Intermediate	School	Speech, language Dx and Tx	1, 1, 1, 2, 1, 1, 1	High school (14-18 years)	27, 30, 25, 15, 27, 38, 32	1 (same response all sites)
Temple City						
Upland						
Cerritos						
Claremont						
R.H. Dana ENF						
Salvin Speical E.D. Center						

Provide the average number of clock hours per semester earned in each category in the past 2 years across all clinical sites.

Category	Children	Adults
ARTICULATION		
Evaluation	2	17
Intervention	26	21
VOICE & RESONANCE		
Evaluation	1	2
Intervention	4	9
FLUENCY		
Evaluation	1	1
Intervention	3	4
LANGUAGE DISORDERS (Receptive & Expressive)		
Evaluation	13	9
Intervention	51	41
SWALLOWING DISORDERS		
Evaluation	1	27
Intervention	1	32
COGNITIVE ASPECTS OF COMMUNICATION		
Evaluation	9	9
Intervention	4	35
SOCIAL ASPECTS OF COMMUNICATION		
Evaluation	0	0
Intervention	6	0
AUGMENTATIVE & ALTERNATIVE COMMUNICATION		
Evaluation	1	1
Intervention	8	2
HEARING		
Evaluation	1	1
Intervention	1	1

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 speech-language pathology clinical practice

ASHA KASA Clinical Competencies: In addition to meeting the clinical clock hour requirement for ASHA certification, students are required to demonstrate their clinical competence across a number of different skills areas.

According to ASHA's requirements for obtaining the Certificate of Clinical Competence in Speech-Language Pathology (2014), there are several different competencies that need to be met in the areas of: a) Evaluation, b) Intervention, and c) Interaction and Personal Qualities.

Students must successfully complete these competencies in each of the following disorder areas:

- Articulation
- Fluency
- Voice and Resonance
- Receptive and Expressive Language
- Hearing
- Swallowing
- Cognition
- Social
- Augmentative and Alternative Communication

Opportunities to work with individuals across the life span and the continuum of care

Clinical Practicum Plan (CPP): When students are initially admitted into the graduate program, during their first conference meeting with the graduate program advisor, students develop in consultation with the advisor a clinical practicum plan (CPP).

The CPP, different from the graduate study plan, includes a listing of all clinical practicum courses to be completed with accompanying prerequisite coursework along with a proposed semester/year for taking each of the required clinics. The following is a listing of the seven clinical practicum experiences (3 on-campus and 2 off-campus clinics) that CSUF graduate students must complete in order to fulfill the ASHA clinical clock hour component along with the required prerequisite courses that need to be completed in order for students to receive a permit to register for clinics on their CPP schedule.

The sequence and course in which clinics are scheduled on their CPP is developed based on the sequence and course of academic classes and is developed based on completion of the appropriate prerequisites for each clinic.

The graduate program advisor retains the original of the CPP for the student's graduate file and provides the clinic services coordinator with a copy for placement in the student's clinic file. The clinic services coordinator uses this information to develop a master CPP plan that includes the names of all student clinic enrollments for each semester. The student is also provided with a copy for future graduate student/faculty advising purposes

Opportunities to work with individuals from culturally and linguistically diverse backgrounds

We are located in Southern California where residents in the surrounding communities are linguistically and culturally diverse. Our students have ample opportunities to work with culturally and linguistically diverse clients across their in-house and off campus practica. Additionally, most of our students take COMD 558C, Clinical Practicum: Communicative Disorders and Differences in Individuals from Diverse Backgrounds, that serves the clients whose primary language is not English.

Experiences with individuals who express various types of severities of changes in structure and function of speech and swallowing mechanisms

Our students have opportunities to work with varying types of severity in structure and function when they complete three in-house clinic practica and two off-campus practica (i.e., COMD 589A, Public School Practicum in Communicative Disorders, and COMD 559A, Advanced Clinical Practicum: Communicative Disorders, in medical, private practice clinics, and private schools).

Exposure to the business aspects of the practice of speech-language pathology and swallowing (e.g., reimbursement requirements, insurance and billing procedures, scheduling)

COMD 542, Neurologic and Clinical Aspects of Speech, Language and Cognition, and COMD 544, Seminar in Neurogenic Speech, Language and Cognitive Disorders cover how therapy time with a patient can be limited by how much insurance authorization is given. Thus, when discussing how to do an evaluation and therapy, the professor gives them scenarios regarding how they can make the best use of their time given a certain number of minutes and/or days. Students additionally may be exposed to this during their COMD 559A, Advanced Clinical Practicum: Communicative Disorders.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.6

Both summer 2016 and 2017, we implemented an intensive intervention program, Titan Tykes, in COMD 548, Clinical Practicum: Speech and Language Disorders in Children. Our students gained more clock hours during these two summers than in the regular semester practicum. Additionally, a few students took two sessions of the practicum and gained more clock hours.

Standard 3.7 Clinical Education - Students

If there were areas of non-compliance, partial 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

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.

Each in-house clinic supervisor provides supervision to four students, and each student is assigned two clients. Each student provides therapy services to his/her individual client for one hour. This allows the supervisor to provide 25% supervision for each student per treatment session. Teaching clinics are held one hour per week during which all supervisors and graduate students meet to discuss clients, share ideas, and learn new treatment approaches. Additional supervision, training, and support is available during weekly office meetings and email communications.

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.

Clinical Practicum Courses and Prerequisites: There is a total of seven different clinical practicum courses that students must take to fulfill their ASHA, state license, and/or public school credential clinical clock hour requirements. Some clinics are operated on-campus (548, 568, 558A, and 558C) while others are operated off-campus (589A and 559A); both 568 and 585 clinics may involve a combination of on-campus and off-campus experience. The majority of these clinical practicum courses enable students to not only meet ASHA and other clinical clock hour requirements but also certain clinical competencies required by ASHA. The following is a listing of the seven clinics with prerequisites that students take as part of their graduate clinical training at CSUF:

COMD 548-Clinical Practicum: Speech and Language Disorders in Children (on-campus, clinical clock hours and competencies)

Prerequisites: 352, 476, *574 or *577 (*may be taken concurrently)

COMD 558A-Clinical Practicum: Speech and Language Disorders in Adults (on-campus, clinical clock hours and competencies)

Prerequisites: 472,474,475,476, *542 (*may be taken concurrently)

COMD 568- Audiology (combined on-and off-campus, clinical clock hours and clinical competencies)

Prerequisites: 461, Certificate of Clearance

COMD 585- Aural Rehabilitation (combined on- and off-campus, no clinical clock hours, used for meeting student clinical competencies)

Prerequisites: 461, 465 & either 548 or 558A

COMD 558C-Clinical Practicum: Communicative Disorders and Differences in Individuals from Diverse Backgrounds (on-campus, clinical clock hours and competencies)

Prerequisites: 548 and 558A, 404

COMD 589A-Public School Practicum in Communicative Disorders (off-campus, clinical clock hours and competencies);

Prerequisites: 548, 558A, 543, 571, 573, 574, 577, passing score on CBEST, concurrent enrollment in 590, Certificate of Clearance

COMD 559A-Advanced Clinical Practicum: Communicative Disorders (off-campus, clinical clock hours and competencies)

Prerequisites: 548, 558A, 542, 543, 571, 573, 574, 576, & 577

Students must successfully complete these competencies in each of the following disorder areas:

- Articulation
 - Fluency
 - Voice and Resonance
 - Receptive and Expressive Language
 - Hearing
 - Swallowing
 - Cognition
 - Social
-

- Augmentative and Alternative Communication

Clinical Practicum Plan (CPP): When students are initially admitted into the graduate program, during their first conference meeting with the graduate program advisor, students develop in consultation with the advisor a clinical practicum plan (CPP).

The CPP, different from the graduate study plan, includes a listing of all clinical practicum courses to be completed with accompanying prerequisite coursework along with a proposed semester/year for taking each of the required clinics. The following is listing of the seven clinical practicum experiences (3 on-campus and 2 off-campus clinics) that CSUF graduate students must complete in order to fulfill the ASHA clinical clock hour component along with the required prerequisite courses that need to be completed in order for students to receive a permit to register for clinics on their CPP schedule.

The sequence and course in which clinics are scheduled on their CPP is developed based on the sequence and course of academic classes and is developed based on completion of the appropriate prerequisites for each clinic.

The graduate program advisor retains the original of the CPP for the student's graduate file and provides the clinic services coordinator with a copy for placement in the student's clinic file. The clinic services coordinator uses this information to develop a master CPP plan that includes the names of all student clinic enrollments for each semester. The student is also provided with a copy for future graduate student/faculty advising purposes

Clinic Registration and Enrollment Procedures: to register for all on-campus and off-campus clinics (COMD 548, 568, 585, 589A, 558A, 558C and 559A/B), students must have a clinic permit issued by the main department office allowing students to register for the clinic.

To receive permits for Titan On-Line registration, students must complete a notice of Intent to Register (NIR) form before registration. These forms are located in the clinic and must be submitted by the following due dates.

- On-Campus Clinics (548, 568, 558A, 558C)
Spring: September 15 Summer: February 1 Fall: March 15
- Off-Campus Clinics (585, 589A, 559A/B)
Spring: May 25 Summer: August 25 Fall: December 15

NIRs must be submitted with the following attached documents:

- A copy of the Graduate Study Plan (GSP)
- Copies of unofficial transcripts showing that the student has met the prerequisites for the clinic(s)
- The following additional items are required for the following clinics:

COMD 548 and 558A: 548/558A Information Form

COMD 568: Certificate of Clearance. (The following link provides directions on how to apply <http://www.ctc.ca.gov/help/application/cert-of-clear.html>)

- COMD 589A: passed CBEST results and a copy of the student's Certificate of Clearance
- COMD 559 A: Questionnaire for Placement and a resume

We have supervisors for our in-house clinics and off-site practica (559A and 589A) are coordinated by the faculty members (Phil Weir-Mayta and Kurt Kitselman, and Terry Saenz respectively). Then each off-site supervisor provides supervisions to our graduate students. The off-site coordinator visits each site and meets with the site supervisors during the semester.

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

Undergraduate students are not enrolled in practicum

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

Appropriate state credentials for clinical practice, Appropriate national credentials for clinical practice, Clinical practice setting,
Educational experience (including post-graduate continuing education activities), Mastery and expertise in the clinical area supervised,
Previous supervisory experience, Recommendations or referrals from other professionals

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,
Maintain records of the amount of time of observations, meetings and conferences, Use student feedback, Use supervisor feedback

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, Regularly scheduled meetings/conferences

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

Acknowledgement of confidentiality policies (e.g. sign agreements), Clinical handbook, HIPAA training, Student handbook,
Student orientation

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.7

None

Standard 3.8 Clinical Education - Client Welfare

If there were areas of non-compliance, partial 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

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.

A Master Clinician Handbook for the public school sites provides information about adjusting supervision, and a nonobligatory orientation luncheon is also provided to students and their master clinicians.

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

To meet both the clinical and supervisory objectives, each student clinician participates in weekly meetings with their supervisor and participates in the scheduled teaching clinics. The weekly meetings are scheduled within the scheduled clinic times. These meetings serve as the office hour times for the clinic. However, students can request additional appointments with the supervisor outside of the scheduled meetings, if needed.

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

CONFIDENTIALITY OF CLIENT RECORDS AND INFORMATION

California State University Executive Order 814 on University Health Services requires any program that has confidential records related to a person's health or health care is to have procedures to ensure the confidentiality of those records. Further, the American Speech-Language-Hearing Association's Code of Ethics 2016 Principle 1 states the following:

O. Individuals shall protect the confidentiality and security of records of professional services provided, research and scholarly activities conducted, and products dispensed. Access to these records shall be allowed only when doing so is necessary to protect the welfare of the person or of the community, is legally authorized, or is otherwise required by law.

P. Individuals shall protect the confidentiality of any professional or personal information about persons served professionally or participants involved in research and scholarly activities and may disclose confidential information only when doing so is necessary to protect the welfare of the person or of the community, is legally authorized, or is otherwise required by law.

Maintaining confidentiality requires, but is not limited to, the following:

1. No portion of a client's record is ever removed from the clinic.
2. No portion of a client's record is ever photocopied or transmitted electronically in any way.
3. No notes that students or faculty take regarding clients may have information that could be used to identify any of our clients.
4. Persons may not discuss clients outside of the clinic in any way that could be used to identify clients.
5. Information is released to persons only according to procedures governing release of confidential client information.
6. All email correspondence between students and supervisors, including drafts of clinical reports/lesson plans and or correspondence regarding clients must

be sent using student's **CSUF University email account ONLY**. (Google

Docs is NOT permitted)

Additional guidelines:

- All electronically transmitted documents (including all documents on Fusion) should contain initials only with no client identifying information (i.e. phone number, address)
- When all clinic documents (including lesson plans, clinical reports, rationale plans) are completed and ready for supervisor signatures/initials, please use the clinic computers and enter in the client's full name (or first name, as appropriate), and all identifying information

Violations of client confidentiality will be reported to the chair of the Department of Communicative Sciences and Disorders.

CLIENT VIDEOS/DVDS/DIGITAL/AUDIO/VIDEO FILES:

As part of the clinical training and supervision process, students will be required to video tape and **back-up audiotape** baseline testing sessions, all diagnostic sessions and a minimum of 2 therapy sessions during the semester for later observation and analysis. It is highly recommended that each therapy session is audiotaped as well. Video/DVD recordings must be made using the clinic cameras, iPads or AV digital system. Personal I-pads cannot be used for any recordings/pictures.

Video sessions cannot be removed from the clinic and need to be turned in to the student assistant at the end of the clinic day for secured storage. Audio recordings can be taken home for student review. If students do take audio recordings home, they are reminded that in accordance with signed client disclosure forms on file, they cannot disclose any identifying information about their clients or share information about their clients with anyone other than themselves, clinical supervisors and other student clinicians participating in clinic at the same time. Additionally, these recordings need to be deleted immediately when no longer needed. Recorded sessions are also not to be duplicated.

Video sessions produced in our clinic are to be used for the training of CSUF students. They are to be used in such a manner as to protect the privacy and confidentiality of clients and clinicians. If a family member requests a copy of an audio- or videotape, please refer them to the supervisor who will have them complete and sign a *Videotape Review Policy* Form.

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.

Code of Ethics (Effective March 1, 2016)

Preamble

The American Speech-Language-Hearing Association (ASHA; hereafter, also known as "The Association") has been committed to a framework of common principles and standards of practice since ASHA's inception in 1925. This commitment was formalized in 1952 as the Association's first Code of Ethics. This Code has been modified and adapted as a society and the professions have changed. The Code of Ethics reflects what we value as professionals and establishes expectations for our scientific and clinical practice based on principles of duty, accountability, fairness, and responsibility. The ASHA Code of Ethics is intended to ensure the welfare of the consumer and to protect the reputation and integrity of the professions.

The ASHA Code of Ethics is a framework and focused guide for professionals in support of day-to-day decision making related to professional conduct. The Code is partly obligatory and disciplinary and partly aspirational and descriptive in that it defines the professional's role. The Code educates professionals in the discipline, as well as students, other professionals, and the public, regarding ethical principles and standards that direct professional conduct.

The preservation of the highest standards of integrity and ethical principles is vital to the responsible discharge of obligations by audiologists, speech-language pathologists, and speech, language, and hearing scientists who serve as clinicians, educators, mentors, researchers, supervisors, and administrators. This Code of Ethics sets forth the fundamental principles and rules considered essential to this purpose and is [applicable to the following individuals](#):

- a member of the American Speech-Language-Hearing Association holding the Certificate of Clinical Competence (CCC)
- a member of the Association not holding the Certificate of Clinical Competence (CCC)
- a nonmember of the Association holding the Certificate of Clinical Competence (CCC)
- an applicant for certification, or for membership and certification

By holding ASHA certification or membership, or through application for such, all individuals are automatically subject to the jurisdiction of the Board of Ethics for ethics complaint adjudication. Individuals who provide clinical services and who also desire membership in the Association must hold the CCC.

The fundamentals of ethical conduct are described by Principles of Ethics and by Rules of Ethics. The four Principles of Ethics form the underlying philosophical basis for the Code of Ethics and are reflected in the following areas: (I) responsibility to persons served professionally and to research participants, both human and animal; (II) responsibility for one's professional competence; (III) responsibility to the public; and (IV) responsibility for professional relationships. Individuals shall honor and abide by these Principles as affirmative obligations under all conditions of applicable professional activity. Rules of Ethics are specific statements of minimally acceptable as well as unacceptable professional conduct.

The Code is designed to guide members, applicants, and certified individuals as they make professional decisions. Because the Code is not intended to address specific situations and is not inclusive of all possible ethical dilemmas, professionals are expected to follow the written provisions and to uphold the spirit and purpose of the Code. Adherence to the Code of Ethics and its enforcement results in respect for the professions and positive outcomes for individuals who benefit from the work of audiologists, speech-language pathologists, and speech, language, and hearing scientists.

Principle of Ethics I

Individuals shall honor their responsibility to hold paramount the welfare of persons they serve professionally or who are participants in research and scholarly activities, and they shall treat animals involved in research in a humane manner.

Rules of Ethics

Individuals shall provide all clinical services and scientific activities competently.

Individuals shall use every resource, including referral and interprofessional collaboration when appropriate, to ensure that quality service is provided.

Individuals shall not discriminate in the delivery of professional services or the conduct of research and scholarly activities by race, ethnicity, sex, gender identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language, or dialect.

Individuals shall not misrepresent the credentials of aides, assistants, technicians, support personnel, students, research interns, Clinical Fellows, or any others under their supervision, and they shall inform those they serve professionally of the name, role, and professional credentials of persons providing services.

Individuals who hold the Certificate of Clinical Competence may delegate tasks related to the provision of clinical services to aides, assistants, technicians, support personnel, or any other persons only if those persons are adequately prepared and are appropriately supervised. The responsibility for the welfare of those being served remains with the certified individual.

Individuals who hold the Certificate of Clinical Competence shall not delegate tasks that require the unique skills, knowledge, judgment, or credentials that are within the scope of their profession to aides, assistants, technicians, support personnel, or any nonprofessionals over whom they have supervisory responsibility.

Individuals who hold the Certificate of Clinical Competence may delegate to students tasks related to the provision of clinical services that require the unique skills, knowledge, and judgment that are within the scope of practice of their profession only if those students are adequately prepared and are appropriately supervised. The responsibility for the welfare of those being served remains with the certified individual.

Individuals shall obtain informed consent from the persons they serve about the nature and possible risks and effects of services provided, the technology employed, and products dispensed. This obligation also includes informing persons served about possible effects of not

engaging in treatment or not following clinical recommendations. If diminished decision-making ability of persons served is suspected, individuals should seek appropriate authorization for services, such as authorization from a spouse, another family member, or legally authorized/appointed a representative.

Individuals shall enroll and include persons as participants in research or teaching demonstrations only if participation is voluntary, without coercion, and with informed consent.

Individuals shall accurately represent the intended purpose of a service, product, or research endeavor and shall abide by established guidelines for clinical practice and the responsible conduct of research.

Individuals who hold the Certificate of Clinical Competence shall evaluate the effectiveness of services provided, the technology employed, and products dispensed, and they shall provide services or dispense products only when benefit can reasonably be expected.

Individuals may make a reasonable statement of prognosis, but they shall not guarantee—directly or by implication—the results of any treatment or procedure.

Individuals who hold the Certificate of Clinical Competence shall use independent and evidence-based clinical judgment, keeping paramount the best interests of those being served.

Individuals who hold the Certificate of Clinical Competence shall not provide clinical services solely by correspondence but may provide services via telepractice consistent with professional standards and state and federal regulations.

Individuals shall protect the confidentiality and security of records of professional services provided, research and scholarly activities conducted, and products dispensed. Access to these records shall be allowed only when doing so is necessary to protect the welfare of the person or the community, is legally authorized, or is otherwise required by law.

Individuals shall protect the confidentiality of any professional or personal information about persons served professionally or participants involved in research and scholarly activities and may disclose confidential information only when doing so is necessary to protect the welfare of the person or the community, is legally authorized, or is otherwise required by law.

Individuals shall maintain timely records and accurately record and bill for services provided and products dispensed and shall not misrepresent services provided, products dispensed, or research and scholarly activities conducted.

Individuals whose professional practice is adversely affected by substance abuse, addiction, or other health-related conditions are impaired practitioners and shall seek professional assistance and, where appropriate, withdraw from the affected areas of practice.

Individuals who have knowledge that a colleague is unable to provide professional services with reasonable skill and safety shall report this information to the appropriate authority, internally if a mechanism exists and, otherwise, externally.

Individuals shall provide reasonable notice and information about alternatives for obtaining care if they can no longer provide professional services.

Principle of Ethics II

Individuals shall honor their responsibility to achieve and maintain the highest level of professional competence and performance.

Rules of Ethics

Individuals who hold the Certificate of Clinical Competence shall engage in only those aspects of the professions that are within the scope of their professional practice and competence, considering their certification status, education, training, and experience.

Members who do not hold the Certificate of Clinical Competence may not engage in the provision of clinical services; however, individuals who are in the certification application process may engage in the provision of clinical services consistent with current local and state laws and regulations and with ASHA certification requirements.

Individuals who engage in research shall comply with all institutional, state, and federal regulations that address any aspects of research, including those that involve human participants and animals.

Individuals shall enhance and refine their professional competence and expertise through engagement in lifelong learning applicable to their professional activities and skills.

Individuals in administrative or supervisory roles shall not require or permit their professional staff to provide services or conduct research activities that exceed the staff member's certification status, competence, education, training, and experience.

Individuals in administrative or supervisory roles shall not require or permit their professional staff to provide services or conduct clinical activities that compromise the staff member's independent and objective professional judgment.

Individuals shall make use of technology and instrumentation consistent with accepted professional guidelines in their areas of practice. When such technology is not available, an appropriate referral may be made.

Individuals shall ensure that all technology and instrumentation used to provide services or to conduct research and scholarly activities are in proper working order and are properly calibrated.

Principle of Ethics III

Individuals shall honor their responsibility to the public when advocating for the unmet communication and swallowing needs of the public and shall provide accurate information involving any aspect of the professions.

Rules of Ethics

Individuals shall not misrepresent their credentials, competence, education, training, experience, and scholarly contributions.

Individuals shall avoid engaging in conflicts of interest whereby personal, financial, or other considerations have the potential to influence or compromise professional judgment and objectivity.

Individuals shall not misrepresent research and scholarly activities, diagnostic information, services provided, results of services provided, products dispensed, or the effects of products dispensed.

Individuals shall not defraud through intent, ignorance, or negligence or engage in any scheme to defraud in connection with obtaining payment, reimbursement, or grants and contracts for services provided, research conducted, or products dispensed.

Individuals' statements to the public shall provide accurate and complete information about the nature and management of communication disorders, about the professions, about professional services, about products for sale, and about research and scholarly activities.

Individuals' statements to the public shall adhere to prevailing professional norms and shall not contain misrepresentations when advertising, announcing and promoting their professional services and products and when reporting research results.

Individuals shall not knowingly make false financial or nonfinancial statements and shall complete all materials honestly and without omission.

Principle of Ethics IV

Individuals shall uphold the dignity and autonomy of the professions, maintain collaborative and harmonious interprofessional and intraprofessional relationships, and accept the professions' self-imposed standards.

Rules of Ethics

Individuals shall work collaboratively, when appropriate, with members of one's profession and members of other professions to deliver the highest quality of care.

Individuals shall exercise independent professional judgment in recommending and providing professional services when an administrative mandate, referral source, or prescription prevents keeping the welfare of persons served paramountly.

Individuals' statements to colleagues about professional services, research results, and products shall adhere to prevailing professional standards and shall contain no misrepresentations.

Individuals shall not engage in any form of conduct that adversely reflects on the professions or on the individual's fitness to serve persons professionally.

Individuals shall not engage in dishonesty, negligence, fraud, deceit, or misrepresentation.

Applicants for certification or membership, and individuals making disclosures shall not knowingly make false statements and shall complete all application and disclosure materials honestly and without omission.

Individuals shall not engage in any form of harassment, power abuse, or sexual harassment.

Individuals shall not engage in sexual activities with individuals (other than a spouse or other individual with whom a prior consensual relationship exists) over whom they exercise professional authority or power, including persons receiving services, assistants, students, or research participants.

Individuals shall not knowingly allow anyone under their supervision to engage in any practice that violates the Code of Ethics.

Individuals shall assign credit only to those who have contributed to publication, presentation, process, or product. Credit shall be assigned in proportion to the contribution and only with the contributor's consent.

Individuals shall reference the source when using other persons' ideas, research, presentations, results, or products in written, oral, or any other media presentation or summary. To do otherwise constitutes plagiarism.

Individuals shall not discriminate in their relationships with colleagues, assistants, students, support personnel, and members of other professions and disciplines on the basis of race, ethnicity, sex, gender identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language, dialect, or socioeconomic status.

Individuals with evidence that the Code of Ethics may have been violated have the responsibility to work collaboratively to resolve the situation where possible or to inform the Board of Ethics through its established procedures.

Individuals shall report members of other professions who they know have violated standards of care to the appropriate professional licensing authority or board, other professional regulatory body, or professional association when such violation compromises the welfare of persons served or research participants.

Individuals shall not file or encourage others to file complaints that disregard or ignore facts that would disprove the allegation; the Code of Ethics shall not be used for personal reprisal, as a means of addressing personal animosity, or as a vehicle for retaliation.

Individuals making and responding to complaints shall comply fully with the policies of the Board of Ethics in its consideration, adjudication, and resolution of complaints of alleged violations of the Code of Ethics.

Individuals involved in ethics complaints shall not knowingly make false statements of fact or withhold relevant facts necessary to fairly adjudicate the complaints.

Code of Ethics (Effective March 1, 2016)

Individuals shall comply with local, state, and federal laws and regulations applicable to professional practice, research ethics, and the responsible conduct of research.

Individuals who have been convicted; been found guilty; or entered a plea of guilty or nolo contendere to (1) any misdemeanor involving dishonesty, physical harm—or the threat of physical harm—to the person or property of another, or (2) any felony, shall self-report by notifying ASHA Standards and Ethics (see Terminology for mailing address) in writing within 30 days of the conviction, plea, or finding of guilt. Individuals shall also provide a certified copy of the conviction, plea, nolo contendere record, or docket entry to ASHA Standards and Ethics within 30 days of self-reporting.

Individuals who have been publicly sanctioned or denied a license or a professional credential by any professional association, professional licensing authority or board, or other professional regulatory body shall self-report by notifying ASHA Standards and Ethics (see Terminology for mailing address) in writing within 30 days of the final action or disposition. Individuals shall also provide a certified copy of the final action, sanction, or disposition to ASHA Standards and Ethics within 30 days of self-reporting.

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

It is included in the M.A. Handbook (pp. 28-32).

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.8.

None

Standard 3.9 External Placements

If there were areas of non-compliance, partial 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

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.

Off-campus site faculty coordinators of public schools and medical settings handle the Memorandums of Understanding (MOUs) with the assistance of Contracts and Procurement, Division of Administration and Finance. In addition, master clinicians are given relevant information about supervision requirements in written form.

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

a) Students may express their preferred sites that are close to their home, but faculty coordinators identify sites and prepare for the students to have interviews at assigned sites. As much as possible, the faculty coordinator in the public school practicum tries to get students their preferred sites.

b) The faculty coordinators of public school and medical settings assign students to have interviews at the site and students are placed at the site they were selected from the interviews. Most public school sites do not require an interview.

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

Due to the high demand of off-campus sites from graduate programs in the area including online programs (e.g., Nova, etc.), faculty coordinators of off-site practicum place students at least one semester in advance. The faculty members place students based on the distance from their home, any personal preference if any, and their career goal if anyone has strong preference of working in the medical setting. Students go through interview with the sites and have to be selected from the interviews, although interviews are not frequent with public school sites.

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.

Both faculty members who coordinate public school and medical practicum courses continue to extend the pool of sites. They encourage students who have specific sites where they want to do a practicum to let the public school and/or medical practicum faculty coordinator to know in advance so that an MOU can be established in a timely manner if it is a new site.

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

The faculty coordinators visit the sites each semester and meet with the preceptor supervisor or master clinician. In the public school practicum, the practicum coordinator observes slightly more than an hour of the graduate student's therapy at the school site, and meets with the master clinician and asks how the graduate student is going overall as well as specific strengths and areas for growth.

Code of Ethics (Effective March 1, 2016)

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

The faculty coordinators visit the sites each semester and meet with the preceptor supervisor.

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

The clinical evaluation form is used to verify that the education objectives of each active site are met.

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.

Off-site faculty coordinators of public schools and medical settings handle the MOUs with the assistance of the Contracts and Procurement, Division of Administration and Finance. The representative at the Contracts and Procurement office communicates with the off-site faculty coordinators regarding the completion of the MOUs.

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

Other

Specify

Administrative assistant, Clinic director, Clinical Services Coordinator

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

Faculty, Intern/externship supervisor

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

Meeting with the externship supervisor, Onsite visits, Phone calls, Review of clinical practicum evaluations,

Review of externship supervisor evaluation, Review of student clinical records/files

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.9

None

Standard 3.10 Student Conduct

If there were areas of non-compliance, partial 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

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

Students must maintain a 3.0 GPA – both the cumulative overall GPA and a GPA based on ten seminars listed on the approved **Graduate Study Plan (GSP)**. Failure to maintain a 3.0 in either case will result in academic probation and possible disqualification.

< PROBATION:

A graduate student enrolled in a graduate degree program will be placed on academic probation if either the cumulative or the Study Plan grade-point average falls below 3.0. A graduate student may also be placed on probation for reasons other than cumulative and/or Graduate Study Plan grade-point average. This is known as administrative-academic probation. The reasons for this may include repeated withdrawal, failure to progress toward an educational objective, non-compliance with an academic requirement, failure to demonstrate a level of professional competence or fitness commensurate with the standards of the student's discipline, or inappropriate behavior as defined in the Student Bill of Rights and Responsibilities, and in the Academic Dishonesty sections of this catalog (see "University Regulations").

7. At the beginning of the last semester of graduate work (or, if summer-completion, at the beginning of Spring semester), a student must file an **Application for Graduation check** before the beginning of classes. (See current Class Schedule for deadlines.)

8. **The time limit for the degree is five years.** This time limit commences with the semester of the earliest course used on the student's graduate study plan. (See University Catalog: Time Limit for Completion.) Courses on the Graduate Study Plan (GSP) that are over five years old must be replaced by more current offerings.

9. Students must maintain continuous enrollment until graduation from the program. Students must either be enrolled for coursework or register for **Graduate Studies 700 (GS700)** to be maintained in the program. Leaves of absence may be granted for one semester to conditionally classified or classified graduate students. Students must be in good academic standing and have completed at least six credit hours work in residence at the University toward the degree. Further information is available at the Office of Admissions and Records.

10. Students may not substitute a seminar listed on the approved GSP with independent study units.

11. At the beginning of the first term, each student will work with Graduate Adviser to develop an Individual Student Schedule (ISS) for completing the program in 2.5 to 3 years.

12. Students must take seminars as they are scheduled on his or her **Individual Student Schedule (ISS)**. **No change can be made without the approval of Graduate Adviser.** The students may be administratively dropped from the seminar that was not on their ISS.

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At California State University, Fullerton

Policy One

Revised December 2006

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Commitment to working collaboratively

Commitment to lifelong learning

Wide constellation of knowledge and skills

Ethical character demonstrated by

Having integrity, and being trustworthy, honest, courteous, open minded, and by treating others fairly and impartially.

Candidates are required to demonstrate professional behavior in all aspects of their participation in the credential program. Candidates are expected to be knowledgeable about and adhere to the professional standards for their field of teaching, as well as University standards outlined in the Schedule of Classes and Catalog, especially the sections on Student Conduct, Graduate Admission, and Academic Dishonesty, and student outcomes as described in the Education Unit's Conceptual Framework. Individuals who are accepted for admission to a credential program become credential candidates and are responsible for meeting the high standards of personal

conduct expected of professional educators. Candidates' continued participation in credential programs at Cal State Fullerton is dependent upon their ability to adhere to professional standards as assessed within each credential program.

To continue to participate in a Credential Program and related Master's Program (if there is one) you must:

Behave in an honest and forthright manner.

Follow standard scholarly practice in giving credit to sources used in assignments.

Follow directions of university instructors, supervisors, and fieldwork and student teaching mentors such as master teachers.

Behave in a manner expected of professional educators.

Cooperate and collaborate with fellow candidates on projects and assignments.

Maintain successful academic progress by passing all classes and maintaining at least a 3.0-grade point average. No classes for which grades of D or F were assigned will be used to meet credential requirements. In credit/no credit classes "B" level work is required to get credit.

Maintain the standards of your department and program.

Credential candidates will be considered for removal from the program if they:

Exhibit academic dishonesty as defined by the University Catalog

Exhibit inappropriate student conduct as defined by the University Catalog

Exhibit unacceptable academic, field, pedagogical, and clinical performance behaviors

Fail to meet the standards set by the Commission on Teacher Credentialing

Fail to behave according to the standards of the profession, public schools, university, department
And program

Fail to demonstrate credentialing competencies

Procedures to be followed by departments to remove a student from a credential program:

The process to remove a candidate from a credential program in accordance with written department or program policies can be initiated by a department chair after consultation with the appropriate faculty members.

If a department is considering removing a candidate from the program, the student will be notified in writing of the specific reasons. The written notice can be provided in person or by registered mail. A copy of the document will be provided to the associate dean, College of Education.

- During in-person clinic orientation, the ASHA Code of Conduct is reviewed as well as academic expectations for successful clinic completion. Code of conduct and grade performance expectations are both outlined in the course syllabus as well. If a score of 2.99 or below is received at midterm on any rated area, then the student is placed on a Clinic Remediation plan. The Clinic Remediation Policy available upon request.

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

On our M.A. Handbook, we have a section (ASHA Code of Ethics) and the University Policy Statement (UPS 300.021), Academic Dishonesty.

- If the assigned clinical supervisor gives the student a rating of 2.99 or below on their midterm performance evaluation, the student is immediately placed on a Clinic Remediation Plan. The Clinic Remediation Policy is available upon request.

Code of Ethics (Effective March 1, 2016)

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.

In the COMD 501, Seminar in Speech-language Pathology, the ASHA Code of Ethics and the University Policy Statement (UPS 300.021), Academic Dishonesty, are reviewed and discussed. Subsequently, the students are reminded of these throughout their graduate study.

- During in-person clinic orientations, the ASHA Code of Conduct is reviewed as well as academic expectations for successful clinic completion. The code of conduct and grade performance expectations are both outlined in the course syllabi as well. If a score of 2.99 or below is received at midterm on any rated area, then the student is placed on a Clinic Remediation Plan. The Clinic Remediation Policy is available upon request.

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

When the violation is reported to the department chair, the academic adviser, the graduate adviser, and the faculty member who reported the violation meet with the student of concern and have an opportunity to hear from both sides. Depending on the seriousness of the violation, it can be handled internally, or it will be reported to the college dean of students for guidance. If necessary, it will be then reported to the the (interim) director of student conduct, office of the dean of students.

- If the assigned clinical supervisor gives the student a rating of 2.99 or below on their midterm performance evaluation, the student is immediately placed on a Clinic Remediation Plan. The Clinic Remediation Policy is available upon request.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 3.10.

None

Standard 4.1 Student Admission Criteria

If there were areas of non-compliance, partial 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

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

	University/College	Accredited Program
Minimum GPA	2.5000	3.7000
Minimum combined GRE score	N/A	N/A
Letters of recommendation	yes	yes
Personal statements/interviews	yes	yes
Writing Sample	yes	yes
Undergraduate major in CSD	yes	yes
Other (check box)	no	yes
Specify		
a statistics course		

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

The GPA in the 12 major courses.

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

Our program does not require the GRE because it was considered to disadvantage ethnic minority students, and we put an emphasis on the major course GPA.

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

Conditional Admit

It is understood that applicants may be completing the last four of the CSD prerequisite courses at the time they apply to the master's degree program, but their acceptance is contingent on confirmation of a B.A./B.S. degree in the major or successful completion of all courses before matriculating in the master's degree program. By the first day of fall semester, if an applicant whose B.A degree in CSD is not confirmed, or she or he fails to complete **12 CSD prerequisites and one statistics class**, his or her conditional admission will be revoked.

Please provide any additional clarifying information regarding the program's compliance with Standard 4.1

None

Standard 4.2 Student Adaptations

If there were areas of non-compliance, partial 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

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.

Each graduate academic and clinical courses are organized to meet CFCC

Standard IV-D: For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

Our faculty members and students consist of a culturally and linguistically diverse group who embrace the various types of diversity in the department. In addition, the university strategic plan 2013-2018 Goal 3, "recruit and retain a high-quality and diverse faculty and staff," clearly reflects this practice.

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

Our department mission statement include,

"Positioned within a comprehensive, regional university with a global outlook in Southern California, our faculty expertise and diversity provide a distinctive opportunity for exploring, understanding, and developing an appreciation for normal and disordered human communication across the life span and across culturally/linguistically diverse populations."

Provide an example documenting the fact that 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).

Standards for Continued Participation in Credential Programs

At California State University, Fullerton

Policy One

Revised December 2006

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Commitment to working collaboratively

Commitment to lifelong learning

Wide constellation of knowledge and skills

Ethical character demonstrated by

Having integrity, and being trustworthy, honest, courteous, open minded, and by treating others fairly and impartially.

Candidates are required to demonstrate professional behavior in all aspects of their participation in the credential program. Candidates are expected to be knowledgeable about and adhere to the professional standards for their field of teaching, as well as university standards outlined in the Schedule of Classes and Catalog, especially the sections on Student Conduct, Graduate Admission, and Academic Dishonesty, and student outcomes as described in the Education Unit's Conceptual Framework. Individuals who are accepted for admission to a credential program become credential candidates and are responsible for meeting the high standards of personal conduct expected of professional educators. Candidates' continued participation in credential programs at Cal State Fullerton is dependent upon their ability to adhere to professional standards as assessed within each credential program.

To continue to participate in a Credential Program and related Master's Program (if there is one) you must:

Behave in an honest and forthright manner.

Follow standard scholarly practice in giving credit to sources used in assignments.

Follow directions of university instructors, supervisors, and fieldwork and student teaching mentors such as master teachers.

Behave in a manner expected of professional educators.

Cooperate and collaborate with fellow candidates on projects and assignments.

Maintain successful academic progress by passing all classes and maintaining at least a 3.0-grade point average. No classes for which grades of D or F were assigned will be used to meet credential requirements. In credit/no credit classes "B" level work is required to get credit.

Maintain the standards of your department and program.

Credential candidates will be considered for removal from the program if they:

Exhibit academic dishonesty as defined by the University Catalog

Exhibit inappropriate student conduct as defined by the University Catalog

Exhibit unacceptable academic, field, pedagogical, and clinical performance behaviors

Fail to meet the standards set by the Commission on Teacher Credentialing

Fail to behave according to the standards of the profession, public schools, university, department and program

Fail to demonstrate credentialing competencies

Procedures to be followed by departments to remove a student from a credential program:

The process to remove a candidate from a credential program in accordance with written department or program policies can be initiated by a department chair after consultation with the appropriate faculty members.

If a department is considering removing a candidate from the program, the student will be notified in writing of the specific reasons. The written notice can be provided in person or by registered mail. A copy of the document will be provided to the associate dean, College of Education.

Part Two: Proficiency in Written and Spoken English

In addition to the previously discussed credential program requirements, all graduate students enrolled in California State University credential training programs, including the CSUF CSD Preliminary Speech-Language Pathology Services Credential in Language, Speech, and Hearing (SLPSC) graduate program, are required to demonstrate proficiency in written and spoken English.

According to the California State University (CSU) chancellor office's most recent directive (Executive Order No. 1077) issued in 2012 for all campus teacher education credential programs (The California State University, Office of the Chancellor, memorandum, May 3, 2012), candidates being considered for admission to teacher education preliminary credential programs "shall have demonstrated proficiency in written and spoken English, as determined by the campus" (p. 1). Additional requirements of this executive order are that:

- a. Students admitted to a credential program have their proficiency evaluated throughout the program.
- b. Department chairs recommend measures to address the issues for students who are unable to demonstrate the necessary proficiency.

To ensure that graduate students entering the CSD credential program meet these requirements, the CSD program instituted a new English proficiency screening process in Fall 2013. This screening process was also designed to help provide all students with feedback as appropriate to prepare them to be successful in meeting some different communication-related clinical skills that will be evaluated as part of their later on-campus and off-campus clinical practica training experiences such as the following:

- a) "Pacing and interaction during client/family interviews and counseling sessions."
- b) "Implementation of teaching strategies: Instruction and demonstration."

- c) "Implementation of teaching strategies: Modeling, cueing, reinforcement and feedback."
- d) "Oral speech and language model."

Successful completion of these oral communication clinical skills and competencies also enable students to meet ASHA Certificate of Clinical Competence (CCC) in Speech-Language Pathology standards.

One additional purpose of this screening is to help identify students who are bilingual, non-native English speaking, or speakers of varied English dialects who could potentially benefit from some form of English communication support in accordance with recommendations contained within ASHA's (1998 and 2011) position and policy statements with regard to the clinical training and education of students who speak

with accents. In accordance with these position papers, the process is designed to provide students with the support necessary to be successful in their clinical training without discriminating against their ability to provide clinical services. The feedback from these screenings enables the program to provide students with early recommendations on ways that they can enhance their overall English proficiency for future work with English-speaking clients.

As part of the process, the English written and oral communication skills of all students enrolled in COMD 501 (Seminar in Speech-Language Pathology) are observed and evaluated using the following process:

1. During a designated class period or periods, students will be asked to do the following:
 - a. Give a 5-7 minute oral presentation on a topic approved by the COMD 501 instructor. This presentation will be audio-recorded for later review as needed with student approval by the CSD credential coordinator or clinic director.
 - b. Verbally respond to questions posed by other class participants.
 - c. Respond in writing to a given writing prompt. The writing sample will be evaluated by CSD credential coordinator or clinic director.
2. Following these written and oral presentations, the clinic director will evaluate each presentation for the following oral communication skills and abilities:
 - a. Spoken English grammar
 - b. Spoken English pronunciation
 - c. Spoken English stress/intonation in words and sentences
 - d. Written English grammar
 - e. Vocal loudness and quality
 - f. Fluency, rate, and pausing

Written question responses will also be evaluated concerning the following:

- a. Written English grammar
- b. Vocabulary/word choice and phrasing
- c. Punctuation
- d. Spelling

3. No later than the last week of class before final exams, students will be provided a written summary of evaluator feedback.

4. The following process will then be used for students who are recommended for either a follow-up consult or English proficiency plan meeting with the program's English Language Proficiency Subcommittee:

a. Students who are recommended for a follow-up consultation meeting

1) Students will be asked to setup a meeting with the clinic director at the beginning of the following semester to discuss possible recommendations for support and/or improvement of English communication proficiency/competency skills to meet the above stated clinical and academic training objectives.

2) A written summary of agreed upon recommendations will be provided to the CSD graduate program advisor, credential program coordinator, and student.

3) A copy of the co-signed consultation follow-up form will be placed in the student's academic folder by the credential program coordinator.

b. Students who are recommended for a follow-up consultation and written English language proficiency plan.

1) Students will be asked to setup a meeting with the clinic director at the beginning of the following semester to discuss possible recommendations for support and/or improvement of English. This meeting will then be followed up with a second meeting involving all members of the program's English Language Proficiency Subcommittee (the clinic director, graduate adviser, department chair and credential program coordinator) during the same semester to discuss possible recommendations for support and/or improvement of English communication proficiency/competency skills to meet the above stated clinical and academic training objectives.

2) A written summary of an agreed upon English language proficiency plan will be developed by members of the subcommittee in collaboration with the student. Examples of possible recommendations include:

1. A re-evaluation of oral and/or written skills within one year of the initial evaluation
2. Possible enrollment as a student in the program's Multicultural Clinic (COMD 558c) accent modification services component or some other university-based accent modification/English language instruction program (such as the American Language program)
3. Ongoing consultation and follow-up as needed with graduate seminar instructors for feedback on oral and written English language assignments
4. CSD program peer mentor/tutor support
5. Other university programs designed to support international or non-native English student speakers

A copy of the approved and signed plan will be placed in the student's academic folder by the credential program coordinator.

4) The agreed remediation plan will need to be completed within one year of the initial COMD 501 presentation. Members of the program's English Language Proficiency subcommittee will meet again at that time with the student to evaluate their progress of the plan.

Students who successfully complete the plan within the indicated time frame which receive written documentation of their successful completion of the plan with a copy placed in their academic file.

2. Students who do not completed the plan successfully will need to meet with members of the program's subcommittee to determine the next step in the process.

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

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Part Two: Proficiency in Written and Spoken English

In addition to the previously discussed credential program requirements, all graduate students enrolled in California State University credential training programs, including the CSUF CSD Preliminary Speech-Language Pathology Services Credential in Language, Speech, and Hearing (SLPSC) graduate program, are required to demonstrate proficiency in written and spoken English.

According to the California State University (CSU) chancellor office's most recent directive (Executive Order No. 1077) issued in 2012 for all campus teacher education credential programs (The California State University, Office of the Chancellor, memorandum, May 3, 2012), candidates being considered for admission to teacher education preliminary credential programs "shall have demonstrated proficiency in written and spoken English, as determined by the campus" (p. 1). Additional requirements of this executive order are that:

- a. Students admitted to a credential program have their proficiency evaluated throughout the program.
- b. Department chairs recommend measures to address the issues for students who are unable to demonstrate the necessary proficiency.

To ensure that graduate students entering the CSD credential program meet these requirements, the CSD program instituted a new English proficiency screening process in Fall 2013. This screening process was also designed to help provide all students with feedback as appropriate to prepare them to be successful in meeting some different communication-related clinical skills that will be evaluated as part of their later on-campus and off-campus clinical practica training experiences such as the following:

- a) "Pacing and interaction during client/family interviews and counseling sessions."
- b) "Implementation of teaching strategies: Instruction and demonstration."
- c) "Implementation of teaching strategies: Modeling, cueing, reinforcement and feedback."
- d) "Oral speech and language model."

Successful completion of these oral communication clinical skills and competencies also enable students to meet ASHA Certificate of Clinical Competence (CCC) in Speech-Language Pathology standards.

One additional purpose of this screening is to help identify students who are bilingual, non-native English speaking, or speakers of varied English dialects who could potentially benefit from some form of English communication support in accordance with recommendations contained within ASHA's (1998 and 2011) position and policy statements with regard to the clinical training and education of students who speak

with accents. In accordance with these position papers, the process is designed to provide students with the support necessary to be successful in their clinical training without discriminating against their ability to provide clinical services. The feedback from these screenings enables the program to provide students with early recommendations on ways that they can enhance their overall English proficiency for future work with English-speaking clients.

As part of the process, the English written and oral communication skills of all students enrolled in COMD 501 (Seminar in Speech-

Language Pathology) are observed and evaluated using the following process:

1. During a designated class period or periods, students will be asked to do the following:
 - a. Give a 5-7 minute oral presentation on a topic approved by the COMD 501 instructor. This presentation will be audio-recorded for later review as needed with student approval by the CSD credential coordinator or clinic director.
 - b. Verbally respond to questions posed by other class participants.
 - c. Respond in writing to a given writing prompt. The writing sample will be evaluated by CSD credential coordinator or clinic director.
2. Following these written and oral presentations, the clinic director will evaluate each presentation for the following oral communication skills and abilities:
 - a. Spoken English grammar
 - b. Spoken English pronunciation
 - c. Spoken English stress/intonation in words and sentences
 - d. Written English grammar
 - e. Vocal loudness and quality
 - f. Fluency, rate, and pausing

Written question responses will also be evaluated concerning the following:

- a. Written English grammar
 - b. Vocabulary/word choice and phrasing
 - c. Punctuation
 - d. Spelling
3. No later than the last week of class before final exams, students will be provided a written summary of evaluator feedback.
 4. The following process will then be used for students who are recommended for either a follow-up consult or English proficiency plan meeting with the program's English Language Proficiency Subcommittee:
 - a. Students who are recommended for a follow-up consultation meeting
 - 1) Students will be asked to setup a meeting with the clinic director at the beginning of the following semester to discuss possible recommendations for support and/or improvement of English communication proficiency/competency skills to meet the above stated clinical and academic training objectives.
 - 2) A written summary of agreed upon recommendations will be provided to the CSD graduate program advisor, credential program coordinator, and student.
 - 3) A copy of the co-signed consultation follow-up form will be placed in the student's academic folder by the credential program coordinator.
 - b. Students who are recommended for a follow-up consultation and written English language proficiency plan.
 - 1) Students will be asked to setup a meeting with the clinic director at the beginning of the following semester to discuss possible recommendations for support and/or improvement of English. This meeting will then be followed up with a second meeting involving all members of the program's English Language Proficiency Subcommittee (the clinic director, graduate adviser, department chair and credential program coordinator) during the same semester to discuss possible recommendations for support and/or improvement of English communication proficiency/competency skills to meet the above stated clinical and academic training objectives.
 - 2) A written summary of an agreed upon English language proficiency plan will be developed by members of the subcommittee in collaboration with the student. Examples of possible recommendations include:
 1. A re-evaluation of oral and/or written skills within one year of the initial evaluation
 2. Possible enrollment as a student in the program's Multicultural Clinic (COMD 558c) accent modification services component or some other university-based accent modification/English language instruction program (such as the American Language program)
 3. Ongoing consultation and follow-up as needed with graduate seminar instructors for feedback on oral and written English language assignments
 4. CSD program peer mentor/tutor support

5. Other university programs designed to support international or non-native English student speakers

A copy of the approved and signed plan will be placed in the student's academic folder by the credential program coordinator.

- 4) The agreed remediation plan will need to be completed within one year of the initial COMD 501 presentation. Members of the program's English Language Proficiency subcommittee will meet again at that time with the student to evaluate their progress of the plan.

Students who successfully complete the plan within the indicated time frame which receive written documentation of their successful completion of the plan with a copy placed in their academic file.

2. Students who do not completed the plan successfully will need to meet with members of the program's subcommittee to determine the next step in the process.

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

Each course syllabus include the information regarding the accommodation for students with reported disabilities.

Students with Special Needs: Please inform the instructor during the first week of classes about any disability or special needs that you may have that may require specific arrangements related to attending class sessions, carrying out class assignments, or writing papers or examinations. According to California State University policy, students with disabilities must document their disabilities at the Disability Support Services Office in order to be accommodated in their courses.

Please provide any additional clarifying information regarding the program's compliance with Standard 4.2.

None

Standard 4.3 Student Intervention

If there were areas of non-compliance, partial 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

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

In the M.A. Handbook, the following information is provided.

Students must maintain a 3.0 GPA – both the cumulative overall GPA and a GPA based on ten seminars listed on the approved **Graduate Study Plan (GSP)**. Failure to maintain a 3.0 in either case will result in academic probation and possible disqualification.

< PROBATION:

A graduate student enrolled in a graduate degree program will be placed on academic probation if either the cumulative or the Study Plan grade-point average falls below 3.0. A graduate student may also be placed on probation for reasons other than cumulative and/or Graduate Study Plan grade-point average. This is known as administrative-academic probation. The reasons for this may include repeated withdrawal, failure to progress toward an educational objective, non-compliance with an academic requirement, failure to demonstrate a level of professional competence or fitness commensurate with the standards of the student's discipline, or inappropriate behavior as defined in the Student Bill of Rights and Responsibilities, and in the Academic Dishonesty sections of this catalog (see "University Regulations").

COMMUNICATION SCIENCES AND DISORDERS

COMPREHENSIVE EXAMINATION POLICY

Requirement

The student must pass a written comprehensive examination to earn the Master of Arts Degree in Communication Sciences and Disorders. The comprehensive examinations evaluate the KASA Knowledge-Based Competencies delineated by the American Speech-Language-Hearing Association. There are nine KASA Knowledge-Based Competency Areas (ten individual examinations). Students are required to pass all nine KASA Competency Areas to fulfill the M.A. terminal evaluation requirement. To pass a KASA Competency Area (e.g., Fluency), the student must pass all individual competencies within that area.

Procedure

1. The COMD 501 course instructs students on the nature of the KASA competency areas and the prerequisite coursework required before testing in each Competency Area.
2. The nine KASA competency areas encompass ten individual examinations since Receptive and Expressive Language are separate exams (Developmental and Acquired Language). The nine KASA competency areas are Articulation and Phonology, Fluency, Voice and Resonance, Receptive and Expressive Language (two separate exams), Hearing, Swallowing, Cognitive Aspects of Communication, Social Aspects of Communication, and Communication Modalities. Exam questions for each competency area (except the case study) will be specified on the KASA website. Any changes to specified questions except the case study will be provided to students one month before the examination.
3. Eight KASA exams are scheduled in graduate-level courses. These are called KASA course exams.

KASA Course Exam	Scheduled Course	
Articulation/Phonology	COMD 574	Seminar in Phonological Disorders
Fluency	COMD 571	Seminar in Fluency Disorders
Hearing (only undergraduate prerequisites)	COMD 568	Audiology Practicum
Acquired Language	COMD 542	Neurologic and Clinical Aspects of Speech, Language and Cognition
Developmental Language	COMD 577	Seminar in Child Language Disorders
Modalities	COMD 576	Seminar in Augmentative and Alternative Communication

Swallowing	COMD 543	Seminar in Swallowing Disorders
Voice	COMD 573	Seminar in Voice Disorders

The instructor administers the KASA course exams during the 14th week of class or during mid-term and final exams. Students who miss the exam due to documented emergencies (written documentation to the graduate adviser for approval) must wait until the next KASA administration to test.

4. Two KASA exams (Cognitive, Social) have multiple graduate course prerequisites. These are called KASA cumulative exams. They are typically taken toward the end of the M.A. program, when a student has 1) completed the required **course prerequisites**, 2) completed 6 out of **8 (75%) of the KASA course exams**, and 3) is **not currently on academic probation** and received a GPA of 3.0 and above on graduate study plan.

KASA Cumulative Exam	Course Prerequisites
Cognitive	COMD 542 Neurologic and Clinical Aspects of Speech, Language, and Cognition
	COMD 577 Seminar in Child Language Disorders
Social	COMD 576 Seminar in Augmentative and Alternative Communication
	COMD 577 Seminar in Child Language Disorders

KASA Cumulative Exams will be administered during Department Comprehensive exam periods: 1) the fourth week in **September**, and 2) the fourth week in **February**.

5. Students must apply to take their KASA cumulative exam(s) at least 30 days before the examination week, and return the application form (available in Speech and Hearing Clinics) with attached unofficial transcripts displaying a grade for each prerequisite course to the department office by the deadline date.

6. A 2-1/2 hour writing period is allowed for each KASA exam. Student's names will be removed from examination papers before readings and evaluations by professors. Each student will be given an identification number for the examination paper.

7. Faculty members will score questions anonymously and determine if all individual competencies within each KASA exam are met. Second opinions shall be requested when an individual competency is failed. Disagreements will be negotiated between the two faculty members involved. Final decisions will be submitted in writing.

8. If the student fails to pass any individual competency within the KASA exam, she or he must perform the completion activity designated by the primary faculty reader of that KASA Exam. The completion activity can include (but is not limited to): *short paper, assigned reading, clinical observations, oral conference, oral test of the failed competency question, and/or written rewrite of the failed competency question*.

9. Upon satisfactory completion of the completion activity, the faculty reader signs the *Failed Competency Completion* form and submits the form to the graduate adviser. The student must satisfactorily pass the completion activity within two semesters of the failed attempt (e.g., KASA Exam). Two attempts to satisfactorily pass the completion activity will be allowed. The student must ensure that this process is completed early enough so that the faculty member can document successful completion. **All areas of KASA (including Cognitive and Social) remediation must be completed and passed satisfactorily no later than one month before the graduation date (i.e., end of Nov. and end of April)**. Otherwise, graduation will be delayed until the following semester.

10. The department graduate advisor notifies the Graduate Studies Office when the student has passed all ten KASA Exams, thus completing the terminal evaluation requirement.

Clinical aspects of the program

- If the assigned clinical supervisor gives the student a rating of 2.99 or below on their midterm performance evaluation, the student is immediately placed on a Clinic Remediation Plan. The Clinic Remediation Policy is available in the M.A. Handbook.

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

CLINIC REMEDIATION PROCESS

1. In the case where a student has received ratings of "3" or below on one or more competencies during mid-term or at the end of their clinical practicum experiences, the following will be done within one week of the completed evaluation:
 - a. The clinical supervisor will notify the following individuals in writing: a) clinic director, and b) clinical services coordinator
 - b. The clinic director or clinical services coordinator will notify, in writing, the CD graduate program director and student's graduate

advisor.

c. The following three individuals, a) clinical supervisor, b) clinic director and c) clinical services coordinator, will meet to collaborate on the development of a clinic remediation plan that addresses any areas of clinical competency rated "3" or below: a) to discuss the development of an appropriate clinic remediation plan. The proposed plan should include the following:

- 1) a listing/description of remediation plan activities
- 2) deadlines for completing recommended remediation activities
- 3) a delineation of the individuals who should be involved with the implementation and/or oversight of remediation activities

(although the clinic supervisor as the primary oversight of the remediation plan, other clinical supervisory staff such as the clinical services coordinator, clinic director, part time or faculty clinic supervisors can work in consultation with the student's supervisor to carry out remediation plan activities

2. Within two weeks of the completed evaluation, the clinic director, clinical services coordinator, and clinical supervisor will meet with the student to review the proposed plan. The following should be taken into consideration when developing the plan:

a. The final due date for any clinic remediation activities included on the plan should be no later than 30 days after the last day of the clinic for the current semester.

b. The student shall receive an incomplete in their current clinic if the due dates for remediation activities are after the last day that grades are to be submitted or if they fail to complete any activities on the plan by the final date that grades are due.

c. If the student is also on an English Language Proficiency remediation plan or consults, recommendations for that plan or consult may be modified to help address clinic remediation plan concerns.

d. In those cases where clinic remediation needs may be related at least in part to a suspected or confirmed underlying disability, the clinic remediation committee should also consult with the appropriate staff member within the CSUF Disability Support Services program.

e. The student will need to complete all of the agreed-upon requirements by the designated due date for each activity on their plan. If needed, the student or clinic supervisor can request an extension.

i. Requests for extensions initiated by students should be submitted in writing to the clinic supervisor who will then consult with the clinic director and clinical services coordinator for approval.

ii. Recommendations for extensions initiated by the clinic supervisor should be submitted in writing to the clinic director and clinical services coordinator. The clinic remediation team should meet with the student to discuss the recommendation and if needed update the written remediation plan to reflect changes in remediation activity due dates.

3. Students who successfully complete the remediation plan by the designated due dates will be allowed to enroll in the next available spot for remaining clinics at an approved placement site.

4. The following applies to students who do not successfully complete all of the activities specified in their remediation plan by the established due date:

a. The student will continue to receive an incomplete until all remediation activities have been successfully completed.

b. The student will not be able to enroll in or be formally placed into a setting for the next scheduled clinic on his/her Clinical Practicum Plan (CPP) until the incomplete has been satisfied. As an alternate procedure, with approval of the committee, the student may be able to register for their next clinic before completing remediation plan activities but may need to withdraw from the clinic by the first day of clinic if all remediation activities have not been successfully completed by that date.

c. In some cases, a student's CPP schedule may need to be changed if the student has not yet successfully completed all remediation plan activities before the first day of the next scheduled clinic. If a student's CPP needs to be revised, the student should meet with the clinical services coordinator and CSD graduate program director to modify their clinic sequence/enrollment dates.

d. In the case of off-campus placements, students may also need to initiate in consultation with the appropriate clinic practicum coordinator, a new placement site that is not currently affiliated with CSUF. An affiliation agreement must be put in place before the student can be enrolled in this placement.

Academic KASA Remediation Process

8. If the student fails to pass any individual competency within the KASA Exam, she or he must perform the Completion Activity designated by the primary faculty reader of that KASA Exam. The Completion Activity can include (but is not limited to): *short paper, assigned reading, clinical observations, oral conference, oral test of the failed competency question, and/or written rewrite of the failed competency question.*

9. Upon satisfactory completion of the Completion Activity, the faculty reader signs the *Failed Competency Completion* form and submits the form to the Graduate Adviser. The student must satisfactorily pass the Completion Activity within two semesters of the failed attempt (e.g., KASA Exam). Two attempts to satisfactorily pass the Completion Activity will be allowed. The student must ensure that this process is completed early enough so that the faculty member can document successful completion. **All areas of KASA (including Cognitive and Social) remediation must be completed and passed satisfactorily no later than one month before the graduation date (i.e., end of Nov. and end of April).** Otherwise, graduation will be delayed until the following semester.

10. The department graduate advisor notifies the Graduate Studies Office when the student has passed all ten KASA Exams, thus

completing the Terminal Evaluation requirement.

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

Academic KASA and clinic remediation processes have been implemented consistently and will be continued. Academic KASA remediation completion of an in-class KASA is advised within one semester after the course's completion. The graduate advisor reminds students and faculty of KASAs that need to be remediated. During the exit interview in the first week of the final semester, the department chair reviews each student's academic and clinical progress toward graduation and reminds students of the academic KASA remediation still uncompleted.

Please provide any additional clarifying information regarding the program's compliance with Standard 4.3.

None

Standard 4.4 Student Information

If there were areas of non-compliance, partial 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

How are students informed about program policies and procedures?

Academic advising, Student orientation meetings, Student handbooks

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

Academic Advising, Student orientation meetings, Student handbooks

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

Website

Provide URL

Academic advising, Student orientation meetings, Student handbooks, <http://communications.fullerton.edu/comd/>

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

Website

Provide URL

Academic advising, Student orientation meetings, Student handbooks, <http://communications.fullerton.edu/comd/>

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

Academic advising, Coursework, Student orientation meetings, Student handbooks

Please provide any additional clarifying information regarding the program's compliance with Standard 4.4.

University catalog information on <http://communications.fullerton.edu/comd/> show our courses with the HCOM prefix (instead of COMD) because it was published before we became a department. It will be updated in the next publication cycle in 2018-2019.

Standard 4.5 Student Complaints

If there were areas of non-compliance, partial 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

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

COMPLAINT PROCEDURES

For

Students, Faculty, Staff, & Members of Community

The **Department of Communication Sciences and Disorders** is committed to providing a high-quality education in an environment that fosters learning and that is free of discrimination or harassment.

Students, faculty, staff, or members of the community who have unresolved complaints or concerns involving the Department of Communication Sciences and Disorders or the CSUF Speech and Hearing Clinic are encouraged to direct their complaints to the department chair:

HyeKyeung Seung, Ph.D., CCC-SLP, Professor and Chair

Department of Communication Sciences and Disorders

California State University, Fullerton

800 North State College Blvd.

Fullerton, CA 92834

hseung@fullerton.edu

657-278-7602

Complaints involving the Department of Communication Sciences and Disorders or the CSUF Speech, Language, and Hearing Clinic may be directed to the Council on Accreditation in Audiology and Speech Language Pathology (CAA) of the American Speech-Language-Hearing Association (see below) **if the complaint is not resolved at the campus level.**

Council on Accreditation in Audiology and Speech-Language Pathology (CAA)

Chair, Council on Academic Accreditation in Audiology and Speech-Language Pathology

American Speech-Language-Hearing Association

2200 Research Boulevard #310

Rockville, MD 20850

<http://asha.org/academic/accreditation/accredmanual/section8.htm>

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

The department chair keeps open communication with students by being accessible to students for any of their concerns (e.g., registration, etc.) and encourages them to express their concerns related to their education. She tries to create a culture of open and professional communication. Complaint procedures are posted in the department office, bulletin board in the clinic, and graduate Handbook. Recently, we placed a locked box in the department office for students to share their concerns.

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.

Prior to fall 2017, any complaints if there were any were shared with the HCOM department chairs (Dr. Bob Gass in AY 2013-2015 and Gary Ruud in AY 2015-2017). The department chair keeps the notes/emails in a file in a locked drawer as confidential information. Email communications are organized in folders.

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.

Complaint procedures are posted in the department office, clinic, and M.A. Handbook.

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

Students are encouraged to communicate any of their concerns following the chain of command starting with the department chair, who then reports the concerns to the dean if needed. Students can communicate their concerns to faculty members (e.g., academic adviser, graduate adviser, clinic director, etc.), who then consult the department chair and dean as needed.

The university also offers services to help with student complaints. The Dean of Students office assists with issues of student conduct. The assistant dean for student affairs is the referral for "students of concern" and "students with concerns." The Division of Human Resources, Diversity and Inclusion becomes involved with any issues of potential discrimination. The Title IX office handles any complaints regarding potential sexual harassment or gender inequity.

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

The complaints are handled anonymously when presented to the appropriate line of command (i.e., dean of students, dean, or associate dean) until it is appropriate to reveal their identity.

Please provide any additional clarifying information regarding the program's compliance with Standard 4.5

None

Standard 4.6 Student Advising

If there were areas of non-compliance, partial 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

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.

PROCEDURES FOR NEW GRADUATE STUDENTS

1. Following admission to the M.A. program, the following conferences are scheduled. You must complete all conferences with the graduate adviser before the first semester of enrollment.
 - a) Conference with the Graduate Adviser concerning your academic and clinical schedule.
Your undergraduate coursework will be included in your graduate academic file.
 - b) Conference with Dr. Terry Saenz (equivalency adviser/credential adviser) if your undergraduate coursework was completed at another institution (not-CSUF). Dr. Saenz will determine whether your undergraduate coursework is equivalent to CSUF coursework. The equivalency form is included in your graduate academic file and submitted with KASA Competency Exam applications. This conference precedes the graduate adviser conference.
2. Within the first month of the M.A. program, in a graduate seminar (COMD 501), you will learn about graduate policies and procedures in detail. You will be asked to choose your faculty adviser no later than mid-semester. The selection of an adviser is not final until the faculty member involved has agreed to serve in this capacity. Further, if one faculty member has an overload of advisees, it may be necessary for the graduate adviser to assign the adviser. Forms for the graduate student adviser's signature will be distributed in COMD 501; they are also available in the Department of Human Communication Studies office.
3. New graduate students will be conditionally classified until the successful completion of the classification process.
4. For the classification process, the development and approval of a 30-unit Graduate Study Plan (GSP) should be undertaken toward the middle of the first semester of graduate work. Early selection of a graduate adviser will expedite the development of the GSP for submission to the Department Graduate Committee.

< Important Note: COMD 500, Research in Speech Communication, is required within the first nine units of your graduate work.

CLASSIFICATION OF GRADUATE STUDENTS

1. As noted, students are admitted to the program in conditionally classified status. To matriculate in the degree program, a student must successfully complete the classification process. This should be done toward the middle of the first semester of graduate work but no later than when nine units have been completed toward the degree.
2. The graduate student should confer with her or his adviser to draft a tentative Graduate Study Plan (GSP). The graduate adviser will then submit the GSP to the Graduate Studies Office for approval.
3. The Graduate Study Plan will include 30 units of only 500 level works.
4. Factors to be taken into consideration in approving a GSP are:
the student's future professional objectives,
the breadth and depth of the student's knowledge and training before admission to the
the graduate program, and
coursework for the graduate program which is consistent with all university standards for
an advanced degree.
5. The Graduate Study Plan serves as a means of completing the classification process. When the GSP has been officially approved by the student's adviser, the Department Graduate committee, and the dean of Graduate and International Programs, it serves as a contract for the degree. **Changes in the plan MUST be petitioned by the student on a departmental Change of Study Plan form before substituting any courses for those listed and approved on the GSP.** The petition must be approved by both the graduate adviser and the student's adviser. Course substitutions may not be made once a grade is received for a course.

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

Other

Specify

Faculty member, Graduate Adviser (Dr. Tsao)

How often do students receive academic advisement?

Once per term

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

No Response Provided

How often do students receive clinical advisement?

Other

Specify

as needed

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

Proficiency in Written and Spoken English

In addition to the previously discussed credential program requirements, all graduate students enrolled in California State University credential training programs, including the CSUF CSD "Preliminary Speech-Language Pathology Services Credential in Language, Speech, and Hearing (SLPSC) graduate program, are required to demonstrate proficiency in written and spoken English.

According to the California State University (CSU) chancellor office's most recent directive (Executive Order No. 1077) issued in 2012 for all campus teacher education credential programs (The California State University, Office of the Chancellor, memorandum, May 3, 2012), candidates being considered for admission to teacher education preliminary credential programs "shall have demonstrated proficiency in written and spoken English, as determined by the campus" (p. 1). Additional requirements of this executive order are that:

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- b. Department chairs recommend measures to address the issues for students who are unable to demonstrate the necessary proficiency.

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- a) "Pacing and interaction during client/family interviews and counseling sessions."
- b) "Implementation of teaching strategies: Instruction and demonstration."
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- d) "Oral speech and language model."

Successful completion of these oral communication clinical skills and competencies also enable students to meet ASHA Certificate of Clinical Competence (CCC) in Speech-Language Pathology standards.

One additional purpose of this screening is to help identify students who are bilingual, non-native English speaking, or speakers of varied English dialects who could potentially benefit from some form of English

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position and policy statements with regard to the clinical training and education of students who speak

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As part of the process, the English written and oral communication skills of all students enrolled in COMD 501 (Seminar in Speech-Language Pathology) are observed and evaluated using the following process:

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a. Give a 5-7 minute oral presentation on a topic approved by the COMD 501 instructor. This presentation will be audio-recorded for later review as needed with student approval by the CSD Credential coordinator or Clinic Director.

b. Verbally respond to questions posed by other class participants.

c. Respond in writing to a given writing prompt. The writing sample will be evaluated by CSD credential coordinator or clinic director.

2. Following these written and oral presentations, the clinic director will evaluate each presentation for the following oral communication skills and abilities:

a. Spoken English grammar

b. Spoken English pronunciation

c. Spoken English stress/intonation in words and sentences

d. Written English grammar

e. Vocal loudness and quality

f. Fluency, rate, and pausing

Written question responses will also be evaluated concerning following:

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b. Vocabulary/word choice and phrasing

c. Punctuation

d. Spelling

3. No later than the last week of class before final exams, students will be provided a written summary of evaluator feedback.

4. The following process will then be used for students who are recommended for either a follow-up consult or English proficiency plan meeting with the program's English Language Proficiency Subcommittee:

a. Students who are recommended for a follow-up consultation meeting

1) Students will be asked to setup a meeting with the clinic director at the beginning of the following semester to discuss possible recommendations for support and/or improvement of English communication proficiency/competency skills to meet the above stated clinical and academic training objectives.

2) A written summary of agreed upon recommendations will be provided to the CSD graduate program advisor, credential program coordinator, and student.

3) A copy of the co-signed consultation follow-up form will be placed in the student's academic folder by the credential program coordinator.

b. Students who are recommended for a follow-up consultation and written English language proficiency plan.

1) Students will be asked to setup a meeting with the clinic director at the beginning of the following semester to discuss possible recommendations for support and/or improvement of English. This meeting will then be followed up with a second meeting involving all members of the program's English Language Proficiency Subcommittee (the clinic director, graduate adviser, department chair and credential program coordinator) during the same semester to discuss possible recommendations for support and/or improvement of English communication proficiency/competency skills to meet the above stated clinical and academic training objectives.

2) A written summary of an agreed upon English language proficiency plan will be developed by members of the subcommittee in collaboration with the student. Examples of possible recommendations include:

1. A re-evaluation of oral and/or written skills within one year of the initial evaluation

2. Possible enrollment as a student in the program's Multicultural Clinic (COMD 558c)

accent modification services component or some other university-based accent modification/English language instruction program (such as the American Language program)

3. Ongoing consultation and follow-up as needed with graduate seminar instructors for feedback on oral and written English language assignments
4. CSD program peer mentor/tutor support
5. Other university programs designed to support international or non-native English student speakers

A copy of the approved and signed plan will be placed in the student's academic folder by the Credential Program Coordinator.

4) The agreed remediation plan will need to be completed within one year of the initial COMD 501 presentation. Members of the program's English Language Proficiency subcommittee will meet again at that time with the student to evaluate their progress of the plan.

Students who successfully complete the plan within the indicated time frame which receive written documentation of their successful completion of the plan with a copy placed in their academic file.

2. Students who do not completed the plan successfully will need to meet with members of the program's subcommittee to determine the next step in the process.

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

Each faculty adviser signs off on their advising and place it in the Dropbox folder so that the graduate adviser can monitor proper advising.

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.

When any faculty member identifies concerns in his/her own seminar or clinical course, the faculty member communicate with the gradate adviser and academic adviser. Subsequently, a meeting is called with the involved faculty member and the student with a concern to hear both sides and develop solutions/plans.

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

Other

Specify

Academic advising, Student handbooks, Student orientation meetings, syllabi

Please provide any additional clarifying information regarding the program's compliance with Standard 4.6

None

Standard 4.7 Student Progress Documentation

If there were areas of non-compliance, partial 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

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.

Academic and clinical progress (academic KASA completion, clock hours and clinical skills ratings of each practicum, etc.) are recorded in on-line password protected electronic files (KASA files), and a hard copy is placed in each student's folder that is kept in a locked cabinet in the clinic office. The graduate adviser, Dr. Tsao, handles all academic files (both hard copies and e-copies). The administrative support coordinator, Steven Gonzalez, handles clinical records, and the department chair monitors the currency of the updated information throughout. From fall 2016 admits on, all electronic records are in Calipso.

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.

The graduate adviser, Dr. Tsao, updates all academic KASA completion results (including the completion of remediation if needed) in their efiles and hard copy academic files. The administrative support coordinator updates clinical skills ratings and clock hours in efiles and hard copy clinic files.

Academic advisers monitor students' academic and clinic progress during semester advising. The department chair checks both academic and clinic progress at the exit interview the first week of their final semester to ensure they will meet all requirement by the end of the final semester.

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, please explain.

The program maintains these records

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.

At the beginning of the first term, each student will work with the graduate adviser to develop an Individual Student Schedule (ISS) for completing the program in 2.5 to 3 years. Students must take seminars as they are scheduled on his or her **Individual Student Schedule (ISS)**. **No change can be made without the approval of the graduate adviser.** The student may be administratively dropped from the seminar that was not on his/her ISS.

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

Other

Specify

Graduate adviser

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

Other

Specify

At the beginning of the first term, each student will work with the graduate adviser to develop an Individual Student Schedule (ISS) for completing the program in 2.5 to 3 years. Students must take seminars as they are scheduled on his or her Individual Student Schedule (ISS). No change can be made without the approval of the graduate adviser.

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

The program maintains these 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 adviser, Dr. Tsao, updates all academic KASA completion results (including the completion of remediation if needed) in their efiles and hard copy academic files. The administrative support coordinator updates clinical skills ratings and clock hours in efiles and hard copy clinic files.

Academic advisers monitor students' academic and clinic progress during the semester advising. The department chair checks both academic and clinic progress at the exit interview the first week of their final semester to ensure they will meet all requirement by the end of the final semester.

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

Other

Specify

Program director, Graduate Adviser

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

Other

Specify

At the beginning of the first term, each student will work with the graduate adviser to develop an Individual Student Schedule (ISS) for completing the program in 2.5 to 3 years. Students must take seminars as they are scheduled on his or her Individual Student Schedule (ISS). No change can be made without the approval of the graduate adviser.

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

The program maintains these 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 graduate adviser, Dr. Tsao, updates each academic KASA completion result (including the completion of remediation if needed) in their efiles and hard copy academic files. The administrative support coordinator updates clinical skills ratings and clock hours in efiles and hard copy clinic files.

Academic advisers monitor their academic and clinic progress during the semester advising. The department chair checks both academic and clinic progress at the exit interview the first week of their final semester to ensure they will meet all requirements by the end of the final semester.

At the end of their final semester, the graduate adviser checks the currency of academic information and then the department chair checks the completion of academic, clinical skills, and clock hours on their efiles and completes the cover page KASA Summary Form for certification in speech-language pathology after their M.A. degree is conferred on their transcript. The cover page in hard copy is placed in each student file in the clinic.

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

Other

Specify

Administrative/support staff, Program director, Graduate Adviser

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

Other

Specify

The graduate adviser, Dr. Tsao, updates each academic KASA completion results (including the completion of remediation if needed) in their efiles and hard copy academic file. The administrative support coordinator update clinical skills ratings and clock hours in efiles and hard copy clinic files. Academic advisers monitor their academic and clinic profess during the semester advising. The department chair checks both academic and clinic profess at the exit interview the first week of their final semester to ensure they will meet all requirement by the end of the final semester.

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

The program maintains these records

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 graduate adviser, Dr. Tsao, updates all academic KASA completion results (including the completion of remediation if needed) in their efiles and hard copy academic file. The administrative support coordinator updates clinical skills ratings and clock hours in efiles and hard copy clinic files.

Academic advisers monitor their academic and clinic progress during the semester advising. The department chair checks both academic and clinic progress at the exit interview the first week of their final semester to ensure they will meet all requirement by the end of the final semester.

Code of Ethics (Effective March 1, 2016)

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

Other

Specify

Administrative/support staff, Program director, Graduate Adviser

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

Other

Specify

Graduate adviser, Dr. Tsao, updates each academic KASA completion results (including the completion of remediation if needed) in their efiles and hard copy academic file. Administrative Support Coordinator update clinical skills ratings and clock hours in efiles and hard copy clinic files. Academic advisers monitor their academic and clinic progress during the semester advising. Department chair check both academic and clinic progress at the exit interview the first week of their final semester to ensure they will meet all requirement by the end of the final semester.

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, please explain.

The program maintains these 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 graduate adviser, Dr. Tsao, updates all academic KASA completion results (including the completion of remediation if needed) in their efiles and hard copy academic files. The administrative support coordinator update clinical skills ratings and clock hours in efiles and hard copy clinic files.

Academic advisers monitor their academic and clinic progress during the semester advising. The department chair checks both academic and clinic progress at the exit interview the first week of their final semester to ensure they will meet all requirement by the end of the final semester.

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

Specify

Administrative/support staff, Program director, Graduate Adviser and Credential Coordinator

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

Other

Specify

The graduate adviser, Dr. Tsao, updates all academic KASA completion results (including the completion of remediation if needed) in their efiles and hard copy academic file. The administrative support coordinator update clinical skills ratings and clock hours in efiles and hard copy clinic files. Academic advisers monitor their academic and clinic profess during the semester advising. Department chair check both academic and clinic profess at the exit interview the first week of their final semester to ensure they will meet all requirement by the end of the final semester.

Please provide any additional clarifying information regarding the program's compliance with Standard 4.7

None

Standard 4.8 Availability of Student Records

If there were areas of non-compliance, partial 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

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

Current graduate students have access to their password-protected academic and clinical records. When our program graduates request their records, the clinic director, clinical services coordinator, administrative support coordinator communicate with the department chair and provide their records if available in either ecopy or hard copy. We maintain the program graduates' clinical records following the university guidelines for record keeping.

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 program retains the records for seven years from the time students were admitted to the program for those who did not graduate.

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

California State University records/information retention and disposition schedule is available for various types of information. For example, teacher credential certification records must be retained for seven years from date of certification.

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

The program retains the clinical records for seven years from the date of certification following the California State University records/information retention and disposition schedule for teacher credential certification records.

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

The program retains the clinical records for seven years from the date of certification following the California State University records/information retention and disposition schedule for teacher credential certification records.

Describe how documentation of student progress toward the completion of graduate degree and professional credentialing requirements is readily available to students in the distance education component.

n/a

Please provide any additional clarifying information regarding the program's compliance with Standard 4.8.

None

Standard 4.9 Student Support Services

If there were areas of non-compliance, partial 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

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

The graduate adviser shares the information at the new student orientation. The information regarding the available student support services are included in the graduate handbook and the graduate study office link, <http://www.fullerton.edu/graduate/currentstudents/resources.php>. Also, accommodations for the students with known disabilities are included in course syllabi.

Please provide any additional clarifying information regarding the program's compliance with Standard 4.9.

None

Standard 4.10 Verification of Student Identity

If there were areas of non-compliance, partial 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

Please provide any additional clarifying information regarding the program's compliance with Standard 4.10.

None

Standard 5.1 Assessment of Student Learning

If there were areas of non-compliance, partial 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

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

Student learning outcomes are assessed by their completion of any academic KASA remediation, a minimum of the required 375 hours of clinical practicum, clinical skills in all nine areas, and the Praxis passing rate. In the first week of their final semester, the department chair meets with each student individually (exit interview) to ensure that he/she meets all these measures at the end of the final semester. She informs each student of any areas to focus on in the final semester (e.g., clinical skills rating in fluency clients, the number of hours needed to obtain, etc.).

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

The nine KASA Competency Areas encompass ten individual examinations since Receptive and Expressive Language are separate exams (Developmental and Acquired Language). The nine KASA competency areas are Articulation and Phonology, Fluency, Voice and Resonance, Receptive and Expressive Language (two separate exams), Hearing, Swallowing, Cognitive Aspects of Communication, Social Aspects of Communication, and Communication Modalities. Exam questions for each competency area (except the case study) are specified on the KASA website. Any changes to specified questions except the case study are provided to students one month before the examination.

3. Eight KASA exams are scheduled in graduate-level courses. These are called KASA course exams.

KASA Course Exam	Scheduled Course	
Articulation/Phonology	COMD 574	Seminar in Phonological Disorders
Fluency	COMD 571	Seminar in Fluency Disorders
Hearing (only undergraduate prerequisites)	COMD 568	Audiology Practicum
Acquired Language	COMD 542	Neurologic and Clinical Aspects of Speech, Language and Cognition
Developmental Language	COMD 577	Seminar in Child Language Disorders
Modalities	COMD 576	Seminar in Augmentative and Alternative Communication
Swallowing	COMD 543	Seminar in Dysphagia
Voice	COMD 573	Seminar in Voice Disorders

The instructor administers the KASA course exams during the 14th week of class. Students who miss the exam due to documented emergencies (written documentation to the Graduate Adviser for approval) must wait until the next KASA administration to test.

4. Two KASA exams (Cognitive, Social) have multiple graduate course prerequisites. These are called KASA cumulative exams. They are typically taken toward the end of the M.A. program, when a student has 1) completed the required **course prerequisites**, 2) completed 6 out of **8 (75%) of the KASA course exams**, and 3) is **not currently on academic probation** and received a GPA of 3.0 and above on graduate study plan.

KASA Cumulative Exam	Course Prerequisites	
Cognitive	COMD 542	Neurologic and Clinical Aspects of Speech, Language, and Cognition
	COMD 577	Seminar in Child Language Disorders
Social	COMD 576	Seminar in Augmentative and Alternative Communication
	COMD 577	Seminar in Child Language Disorders

KASA cumulative exams are administered during department comprehensive exam periods: 1) the fourth week in **September**, and 2) the fourth week in **February**.

5. Students must apply to take their KASA cumulative exam(s) at least 30 days before the examination week, and return the application form (available in the Speech and Hearing Clinic) with attached unofficial transcripts displaying a grade for each prerequisite course to the department office by the deadline date.
6. A 2-1/2 hour writing period is allowed for each KASA exam. Student's names are removed from examination papers before reading and evaluation by professors. Each student is given an identification number for the examination paper.
7. Faculty members score questions anonymously and determine if all individual competencies within each KASA exam are met. Second opinions are requested when an individual competency is failed. Disagreements are negotiated between the two faculty members involved. Final decisions are submitted in writing.

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.

Graduate students are informed regarding their academic and clinical progress monitoring during the COMD 501, Seminar in Speech-Language Pathology. The department chair serves as a guest speaker to inform the students about their responsibility in monitoring their own eKASA file periodically (at least at the beginning and end of each semester). If they notice any information has not been updated, then they should contact the graduate adviser, department chair, and/or academic adviser to begin the communication and have the issue resolved.

- During the advising meeting with their academic adviser each semester, they review both academic and clinical progress throughout their graduate study.
- In the first week of their final semester, the department chair and students together review their academic and clinical progress, and the department chair identifies and advises students about the areas to focus on in their last semester.
- The department chair checks if all requirements have been met, finalizes the efile, and prints the KASA summary form for certification in speech-language pathology in preparation for the chair to sign off on graduates' license and ASHA CCC applications.

Please provide any additional clarifying information regarding the program's compliance with Standard 5.1

At the retreat in January 2016, a faculty member expressed concern regarding the current KASA exam methods and proposed modified methods of assessment (portfolio). The faculty members in the program supported the implementation of modified KASA methods, infusing the KASA questions in mid-term and final exams in COMD 574, 571, 542, 543. In COMD 576, a portfolio was used instead of an exam.

Standard 5.2 Program Assessment of Students

If there were areas of non-compliance, partial 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

Describe the assessment plan that the program will use to assess performance of students, including the timelines for administering the elements of the assessment plan.

- Academic knowledge of assessment and treatment across different communication disorders are evaluated in each seminar. We assess their academic competencies in the 14th week of each semester each semester. However, some students have expressed that it is difficult to take two to three exams in the same week while doing clinical practicum. Additionally, two recently hired faculty members expressed their desire to modify past administration methods. The program faculty discussed their concerns at the faculty retreat and established modified administration methods. The competencies are assessed in mid-term and final exams, as well as from assigned projects in COMD 574, COMD 571, COMD 543, and COMD 542 seminars. The competencies are assessed in the 14th week of the semester in COMD 577, COMD 573, and COMD 568. The competencies are assessed in a portfolio at the end of the semester in COMD 576. Competencies in Cognitive and Social aspects are assessed outside of the seminar after students complete prerequisite seminars. Students submit an application to take Cognitive and Social aspects comprehensive exams that are administered in September and February each year. Their responses are graded by a designated primary and secondary faculty readers.
 - Clinical competencies are assessed at the midterm and final of the semester using the clinic skills rating form. The practicum supervisors evaluate their clinical competencies and review it with students.
-

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.

As the students complete their academic knowledge and skills exam (KASA), the results are updated in their KASA files (Calipso from fall 2016 on admits) by the clinic administrative assistant, who updates the information. Any student who failed any competencies remediates the competencies with the course professor, who then completes the failed KASA competency form and sends it to the graduate adviser, who will then update the KASA file.

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.

	Description	How it's related to the Program Mission
Graduate Learning Outcome 1	Will demonstrate knowledge of the neuro-anatomy and physiology involved in cognitive aspects of communication (attention, memory, sequencing, problem-solving, and executive functioning).	We provide our graduates with essential knowledge and skills to become professional practitioners in speech-language pathology who are capable of serving in community centers, hospitals, and private practice.
Graduate Learning Outcome 2	Will demonstrate knowledge and ability to interpret results from formal and informal voice and resonance assessment measures, taking developmental, linguistic and/or cultural differences into account.	We provide our graduates the ability to handle normal and disordered human communication across the life span and across culturally/linguistically diverse populations.
Graduate Learning Outcome 3	Will demonstrate ability to formulate appropriate goals, objectives and methods for individuals with receptive and/or expressive developmental language disorders based on assessment results	We provide our graduates with essential knowledge and skills to become professional practitioners in speech-language pathology who are capable of serving in schools, community centers, hospitals, and private practice across and life span and across culturally/linguistically diverse populations.

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

Code of Ethics (Effective March 1, 2016)

Academic Formative Assessment	Completion of competencies in all nine areas (articulation, language, voice, AAC, fluency, swallowing, hearing, cognitive, social)
Academic Summative Assessment	Passing the competencies in all nine areas (articulation, language, voice, AAC, fluency, swallowing, hearing, cognitive, social) Passing the Praxis exam
Clinical Formative Assessment	Practicum supervisors evaluate clinical skills on the rating form at the mid- and final-term. Clinic administrative assistant enter the ratings in students' KASA clinical skills rating in the practicum course.
Clinical Summative Assessment	Completion of the minimum 400 clock hours including observation hours Completion of skills ratings in all nine areas (articulation, language, voice, AAC, fluency, swallowing, hearing, cognitive, social)

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

KASAs that are administered in the 14th week of the semester and two comprehensive KASAs (Cognitive and Social) packets are prepared by the clinical services coordinator and clinic administrative assistant. They keep the master list with students' name and their identification number. The academic knowledge and skills (KASA) assessment is administered by the course professor. The prepared KASA boxes include packets with ID number that contain blank note pads, exam questions, and addresses to mail the results.

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

The results of the academic KASAs are pass/fail. The failed competencies have to be remediated with the course professor. Once they are remediated, the results are updated. The graduate adviser monitors the completion of any failed KASA remediation and sends the reminder to faculty and students before their final semester. In the first week of their final semester, the department chair reviews the students' KASA files during the exit interview and reminds them to complete any KASA remediation as soon as they can.

Please provide any additional clarifying information regarding the program's compliance with Standard 5.2

None

Standard 5.3 Ongoing Program Assessment

If there were areas of non-compliance, partial 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

Describe the benchmarks or threshold that the program uses to evaluate program quality.

- the feedback from community partners at medical and public school sites.
 - Annual Advisory Board's feedback
 - graduates' and employers' annual survey responses.
 - graduate's employment rates, passing rate of the Praxis exam, and timely graduation rate.
-

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

We evaluate our program quality, currency, and effectiveness based on the feedback from community partners at medical and public school sites as well as input from our faculty at monthly faculty meetings and spring and fall retreats. We also use the employer survey responses. Additionally, we evaluate graduates' employment rates, passing rate of the Praxis exam, and timely graduation rate.

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

We evaluate our program strategic plan and our guiding principles at least annually at the spring retreat, identify met/unmet goals and objectives based on the strategies, and develop plans to improve unmet goals and objectives.

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

For academic training, our faculty evaluate our KASA exams' implementation methods and timing in various seminars as student learning outcomes at spring and/or fall retreats. Through discussion, we reach a consensus on any modifications of the current methods. We often pilot with one seminar and discuss the outcome before we finalize the any changes. Additionally, during the semester, the graduate adviser and the chair often discuss any issues and bring them to the monthly faculty meetings and retreats.

For clinical training, most issues are discussed initially at the clinical service committee meetings, then the discussions are brought to the monthly faculty meetings. Any issues needing in-depth discussions are handled at the retreats.

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

The results will be used in increasing the efficiency of running the program, decreasing faculty workloads, and promoting students' optimal learning environment.

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

Code of Ethics (Effective March 1, 2016)

Type of Program Assessment	Frequency
Advisory committee review	Annually
Curriculum review committee	Greater than every 4 years
Employer surveys	Annually
Supervisor/preceptor evaluations	More often than annually
Program annual reports	Annually
Program staff/faculty meetings and retreats	More often than annually
University reviews	Greater than every 4 years
Other - please describe the type of assessment and frequency	No Response Provided

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	No assessment
Student surveys	No assessment
Other - please describe the assessment and frequency	graduates' survey annually

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	More often than annually
Other - please describe the type of assessment and frequency	No Response Provided

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

We used to do KASA exams in phonology, voice, fluency, dysphagia, developmental and acquired language, hearing, and AAC seminars in the 14th week of each semester. Students expressed having difficulty handling multiple KASAs in the same week and that it has had a negative impact on their clinical practicum performance. Additionally, two recently hired faculty members expressed their interest of modifying the methods from exam to portfolio and matrices. The rest of faculty supported them to pilot the new methods and approved the changes. Also, we had primary and secondary readers of all KASA exams, which added to faculty work loads that are already full with a heavy teaching load. Again, through discussions, we streamlined the process by not having second readers in most of in-class KASAs when there is one tenure-track faculty who teaches the seminar. Currently, COMD 573 is taught by a part-time faculty member since Kenneth Tom retired in spring 2017. We are currently searching for a tenure-track faculty who will teach the COMD 573. A tenure-track faculty member serves as the second reader of the voice disorders KASA exam that is administered in the 14th week.

We had clinical skills ratings that consisted of 52 items on 7-point scale. Supervisors at preceptors shared that there are too many items to rate for midterm and final evaluations of clinical skills ratings, and they asked us to transition to an online program as some other programs who use Calipso. Based on these feedback, our program streamlined our clinical skills rating and adopted Calipso for the fall 2016 admits. Currently, we have students who are using our own graduate progress tracking system on an excel file until we completely transition to Calipso.

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

- We have a failed academic KASA remediation procedure for any failed competencies in each seminar. The remediation methods varies from rewriting to clarifying any missing points in their answers verbally. All students complete the failed competency remediation prior to completing their graduate study.
 - Occasionally, we have students who need to remediate their clinical competencies during their in-house practicum course. When any clinical ratings are lower than 3 out of 7 points, then the supervisor informs the clinical services coordinator, clinic director, graduate adviser, and the chair and calls for a meeting with all involved and the student. Then they develop remediation plans for the student and reconvene after the final evaluation. One student in summer 2017 who needed to remediate repeated the adult clinic in fall 2017 because summer clinic was short, and she did not have time to complete the remediation.
-

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

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

At the spring 2017 and 2018 retreats, we reviewed our strategic plan that includes missions, goals, and objectives and identified met and unmet goals and objectives.

(b) the measured student learning outcomes

Frequently failed KASA questions in several KASA exams were writing goals and objectives based on a given clinical case. This was discussed at our retreat, and activities involving writing goals and objectives have been infused in various seminars.

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

In our Calipso clinical ratings evaluation, the student performance evaluation has a section called preparedness, interaction and personal qualities. This section allows us to measure professional practice competencies (e.g., collaborates with other professionals in case management, possesses knowledge of contemporary professional issues, and advocacy).

Please provide any additional clarifying information regarding the program's compliance with Standard 5.3

None

Standard 5.4 Ongoing Program Improvement

If there were areas of non-compliance, partial 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

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.

Feedback about our students' performance from supervisors at public schools and medical sites are shared by the faculty members who coordinate public school and advanced practica. These feedback are discussed at the faculty meetings, and if there are any concerns from the preceptors, we develop plans to improve the issue in our academic and clinical training.

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

Our strategic plan serves as our guiding principles, and when we review our strategic plan annually, we review the changes within the strategic plan.

Please provide any additional clarifying information regarding the program's compliance with Standard 5.4

None

Standard 5.5 Program Completion Rate

If there were areas of non-compliance, partial 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

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.

The university provides the census data for both undergraduate and graduate students. Also, our Institutional Research Office provides program-related data upon request.

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.

It is very rare for our graduate students to take nonconsecutive courses. Recently, one student took a semester off due to the delivery of a child.

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.

The above-mentioned student submitted paperwork for a leave of absence to the Graduate Study Office with the guidance of the graduate adviser. The department chair keep records of the students who complete the graduate study as she signs off on their temporary license and ASHA CCC application paperwork. Since 2013, there was one student who did not complete the program due to substance abuse and plagiarism.

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	2.5-3 yeears
Full-time without CSD undergraduate major	n/a
Part-time with CSD undergraduate major	3-4 years
Part-time without CSD undergraduate major	n/a

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 campuses), please complete the additional tabs in the excel workbook with this data.

[Program-Completion-Rate-Calculator-Worksheet.xlsx](#)

Provide the program completion rate for graduation cohorts in the residential program for the most recently completed academic years (based on enrollment data).

Code of Ethics (Effective March 1, 2016)

Period	Number completing on time	Number completing later than on-time	Number not completing	Total
Recent Year	27	2	0	
1 Year Prior	23	2	0	
2 Years Prior	23	0	0	
3 Year Average				94.8052

3 year average program completion rate average for all modalities

94.8052

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%

Please 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

If there were areas of non-compliance, partial 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

Describe the mechanisms that the program uses to determine the number of test-takers who take the Praxis Subject Assessment exam each year.

At the exit interview (first week of the final semester of the graduate study), the department chair asks each student if they took the Praxis exams. Most of our students take it in the final semester or the semester before the final semester.

When the chair updates the students' outcome data on the website, she reviews the ETS site information.

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.

When the chair updates the students' outcome data on the website, she reviews the ETS site information.

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	25	24	
1 Year Prior	30	30	
2 Years Prior	21	20	
3-year average			97.3684

3 year Praxis pass rate average for all modalities:

97.3684

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%

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 5.6.

None

Standard 5.7 Employment Rate

If there were areas of non-compliance, partial compliance or follow-up regarding Employment 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 Employment Rates listed in the last Accreditation Action Report

Describe the mechanism that the program uses to determine the number of individuals who are employed in the CSD professions within 1 year of graduation.

The department chair maintains a record of the graduates' employment as she signs off on the temporary license and/or ASHA CCC application paperwork.

Describe the mechanism that the program uses to determine the number of individuals who are pursuing further education in the CSD professions.

It is via faculty communication when anyone knows about our graduates who pursue their doctoral degree. In the past 11 years that I have been a faculty member in the department, one student began her doctoral degree in fall 2017.

Provide the number of graduates in your residential program that are employed in the profession or pursuing further education in the profession within 1 year of graduation. Starting with students that graduated at least 1 year ago, provide 3 years worth of data.

Academic Year	Number of Graduates Employed	Number of graduates not employed	Total
1 Year Prior	29	1	
2 Year Prior	25	0	
3 Years Prior	24	0	
3-Year Average			98.7342

3 year Employment rate average for all modalities

98.7342

Provide an explanation and a plan that will be used for improvement if the program's 3-year average for employment does not meet or exceed the CAA's established (80%) threshold. Include a timeline for implementing and assessing these steps.

3-year average employment rate was above 80%

Please provide any additional clarifying information regarding the program's compliance with Standard 5.7.

One student who is reported as not having a job moved to a different state due to her husband's medical school rotation, and she was pregnant at the time of graduation.

Standard 5.8 Program Improvement – Student Outcomes

If there were areas of non-compliance, partial 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

Describe the analysis processes that the program uses to evaluate the results of graduation rate, Praxis Subject Assessment pass rate, and employment rate to facilitate continuous quality improvement.

The department chair maintains the data of graduation rate, Praxis pass rate, and employment rate as the person who handles the completion of academic and clinical requirement for ASHA certification and licensure. As she signs off on the ASHA CCC and license application, she keeps records of their employment and sends out graduate and employer surveys. She maintains an electronic master list with a graduate database.

Please provide any additional clarifying information regarding the program's compliance with Standard 5.8.

It has been rare for our graduate students to not complete their degree. We want to identify any weak students as early as possible through communication among course instructors, the graduate adviser, academic advisers, and the chair and provide assistance for their successful completion. One student in fall 2017 has been identified as having difficulty handling the course load due to personal issues, along with a long commute and a disability. We advised him to drop a graduate seminar and paired him with a classmate for tutoring. At the end of this first semester, all parties met with the student and dean of students to discuss/monitor his progress and advised him to register at Disability Support Services (DSS) so that he will obtain accommodations.

Standard 5.9 Evaluation of Faculty

If there were areas of non-compliance, partial 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

Describe the institutional policy and guidelines for regular evaluation of the faculty by program leadership.

Faculty Affairs and Records, <http://www.fullerton.edu/far/>, in the Division of Academic Affairs provides evaluation procedures for tenure-track faculty. Faculty Personnel Policy and Procedures (UPS 210.000) explicitly describes the timelines and procedures. Within the department, there is a personnel committee that consists of three tenured faculty members who review the submitted files annually (alternation of full and periodic review during the probationary period of six years). The department chair evaluates the file independently. Subsequently, the review file and the reviews are submitted to the dean and provost.

Describe the mechanisms that the program uses to evaluate how the effectiveness of the program's delivery is consistent with institutional policies and procedures.

The departmental personnel guidelines are aligned to the Faculty Personnel Policy Procedures (UPS 210.000).

Indicate the mechanisms through which students will have an opportunity to evaluate academic and clinical faculty on an ongoing and regular basis.

Course evaluations, Supervisor evaluations, Informal feedback provided in classes, Informal feedback provided in clinical experiences

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.

Review by personnel committee	Annually
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	Every academic term
Promotion and tenure review	Greater than every 2 years
Post-tenure review	Greater than every 2 years
Maintenance of certification	Annually
Maintenance of state credentials	Annually
Other - please specify mechanism and frequency	No Response Provided

Describe the processes, timelines, and safeguards of the evaluation procedures that the program has in place to ensure that the processes are fair.

Submitted files are reviewed by the department personnel committee and chair independently. Both reviews are presented to the faculty by the department chair. The faculty has an opportunity to submit a rebuttal for any disagreement regarding the chair and/or the committee evaluation. Faculty Affairs and Records send out file submission, review, and rebuttal time lines each year to all involved. Additionally, the Unit 3 Bargaining Agreement (California Faculty Association) is in place.

Please provide any additional clarifying information regarding the program's compliance with Standard 5.9.

When we became a department in fall 2017, we submitted our own personnel guide to the dean and provost. It was approved effective in Fall 2018.

Standard 5.10 Faculty Improvement

If there were areas of non-compliance, partial 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

Describe the mechanisms that the program uses to assess how the faculty and staff evaluation processes result in continuous professional growth and development.

All faculty members receive Student Opinion Questionnaire (SOQ) statistical summaries and comments each semester. This information is used for each faculty member to improve his/her teaching. SOQs are one of the measures for teaching in the tenure/promotion process.

Our Faculty Development Center (FDC) provides workshops for faculty members on various topics including teaching. Not only the SOQ statistical summary and comments but peer teaching evaluations and percentage of A and B ratings (the two highest rating categories) are taken into consideration when we evaluate faculty members' teaching. In our tenure/promotion portfolio, the faculty member who submits a file reflects on his/her teaching in terms of SOQ statistics and comments, a peer review letter, the percentage of A and B ratings, and class grade distribution.

Describe how the program will communication evaluation results to the faculty and how the faculty will use this feedback to improve their performance.

The Department Personnel Committee consists of three tenured faculty members, and they review tenure/promotion files. The committee and the department chair independently write their evaluation letters regarding teaching, scholarship, and service. The committee submits its signed evaluation letter to the chair, who will then present the committee and chair's evaluation letters to the faculty member. The faculty member then can use the information for his/her improvement in the following review if there are any concerns.

Describe the mechanisms that the program uses to determine whether continuous professional development facilitates delivery of a high-quality program.

We provide professional development funds for our faculty to maintain the currency of their knowledge by presenting/participating in ASHA and/or California Speech-Language-Hearing Association (CSHA) annual conventions as well as focused research conferences (e.g., motor speech conference, child phonology conferences, International meeting for Autism Research, etc.). Our faculty members' attendance to ASHA, CSHA conventions are critical for them to bring current information to their academic and clinical training. Most of our faculty actively participate in national and state conventions. Additionally, if our faculty present at these conferences, their presentations are connected to their teaching.

Please provide any additional clarifying information regarding the program's compliance with Standard 5.10.

None

Standard 5.11 Effective Leadership

If there were areas of non-compliance, partial 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

How does the program or institution evaluate the effectiveness of the program director? (Select all that apply.)

Evaluation by program faculty

How often does evaluation of the program director occur?

Once a year

Please provide any additional clarifying information regarding the program's compliance with Standard 5.11.

We became a department in fall 2017. In the past, it was led by the communicative disorders program coordinator, and program faculty evaluated him or her annually. Since the department chair works closely with the dean and associate dean, we may consider having the dean evaluate the department chair's leadership as well.

Standard 6.1 Institutional Financial Support

If there were areas of non-compliance, partial 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

Describe the budgeting process for the program.

The clinic had a separate budget that was based on client fee income and donations (e.g., NSSHLA fund raising and other donations). It was managed by the clinic director until fall 2017. Our clinic will have a donation-only budget model starting in spring 2018, and it will have budget implications. We will monitor how it works and plan to communicate with the dean's office if we need additional budget allocations to cover clinic expenses.

Report the total budget for the accredited program. Enter "0" where none and do not use a comma (e.g. use 10540 and NOT 10,540).

Sources of Support	Prior Year (Amount in \$)	Current Year (Amount in \$)	% increase/decrease
Faculty/Staff Salaries	1065591.5200	1177750.5100	10.5255
Supplies & Expenses (non-capital/non-salary expenses)	38846.5100	34904.0000	-10.1489
Capital Equipment	0.0000	0.0000	0.0000
Institutional Support Sub-Total	1104438.0300	1212654.5100	9.7983
Grants/contracts	13907.0000	24241.0000	74.3079
Clinic Fees	39447.0000	35980.0000	-8.7890
Other Funding	4511.0500	7373.9900	63.4650
Non-Institutional Support Sub-Total	57865.0500	67594.9899	16.8149
Total Budget	1162303.0800	1280249.5000	10.1476
% of budget represented by non-institutional support	4.9785	5.2798	6.0520

If you included funding in the "Other Funding" line in the table above, please describe the source(s).

Gifts and NSSHLA fundraising.

For variances in any budget category that differ from the previous academic year by 10% or more, explain the reasons and the impact of any differences.

Supplies and expenses in the current year are based on 30% FTEs when we divided into two departments. In the previous year, 50% of the expense in the HCOM budget was reported.

Other funding includes NSSHLA fundraising and personal donations. We had a very successful Speakeasy fund-raising gala in November 2017. A total of \$11803 was raised and will be split between our clinic and the Center for Children Who Stutter (CCWS) that is housed in our clinic.

Which of the following indicators of institutional commitment to the accredited program are currently being employed?

Support for professional development, New faculty lines, Student support (graduate assistantships, scholarships, etc.)

Describe how the program determines that there is sufficient support for the specific areas of personnel, equipment, educational and clinical materials, and research.

Our clinic recording equipment in the observation rooms needs to be updated from analog to digital system. Since spring 2016, we have been exploring options along with the dean's office. With the college and campus IT support, we have updated the recording system gradually.

Clinical materials (i.e., standardized tests, computers) have been updated with the funds NSSHLA donated from their fund raising and clinic funds generated from client fees.

When we became a department in fall 2017, the same office staff continued to assist both our new department and Human Communication Studies. Currently we have student assistants who are assisting the department chair, faculty, and students under the supervision of the office staff. We would like to hire our own office staff ultimately.

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.

Our current budget was proportionally based on the FTEs from the Dept. of Human Communication Studies where we were housed previously. It is anticipated to be sufficient to manage departmental needs and will be monitored over time.

As of January 2018, our clinic will be changing its funding model to rely on voluntary donations made by clients and community members. This move allows us to broaden our outreach to the community, while making our clinical services accessible to all and continuing our tradition of providing exceptional clinical service. This may require more institutional financial support.

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.

- Other funding includes NSSHLA fundraising and personal donations. Our NSSHLA has done fund-raising events consistently and has donated the funds to our clinic and the Center for Children who Stutter (CCWS). We had a very successful Speakeasy fund-raising gala in November 2017. A total of \$11803 was raised and will be split between our clinic and the Center for Children Who Stutter (CCWS) that is housed in our clinic.
-

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.1.

We now have our own budget as an independent department since fall 2017. The new budget was based on the FTEs.

Standard 6.2 Support for Faculty Continuing Competence

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

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,

Other

Support for professional travel, sabbatical leave

Describe how the program provides sufficient support for the faculty and staff to maintain continuing competence.

Our tenure-track faculty received travel funds to attend conferences, including the ASHA convention, when faculty presented when we were in the Department of Human Communication Studies. Our tenure-track faculty and clinical service coordinator who are not presenting at the ASHA and CSHA conventions will receive some travel support for their CEUs.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.2.

None

Standard 6.3 Physical Facilities

If there were areas of non-compliance, partial 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

Describe the processes the program uses – and the results of those processes – to determine the facility's adequacy in delivering a high-quality program.

We communicate the faculty's needs for research at our faculty meetings and retreat. Currently, research labs meet our needs. As we hire new faculty members, we may need to readjust current lab space. Clinic space is shared with the Center for Children Who Stutter (CCWS), mostly on weekends and non-peak times.

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.

We communicate the faculty's needs for contemporary access at faculty meetings and retreats and consult with the college and university IT support. We have an excellent IT support and Faculty Development Center (FDC) who also provide access to technology.

Please 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

If there were areas of non-compliance, partial 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

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.

The Clinical Service Committee (CSC) that consists of the clinic director, clinical services coordinator, clinic administrative assistant, graduate adviser, and the department chair meets regularly and discusses any needs for equipment and tests update. Once the needs are identified, they then consult with the college IT (and campus IT as needed) along with the dean's office regarding budgetary issues. we have been successful in meeting our update needs within these constraints. We bring the updated issues to all faculty at the scheduled monthly faculty meetings and retreat.

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 audiometers are calibrated periodically. Our audiology equipment needs to be updated. This is an area we need to improve by identifying the updated needs and available budget. Recently, the dean's office requested update needs for each department to be considered for future opportunities. We typically identify update needs and submit requests to the college and/or university when funds are available.

Indicate the individual(s) responsible to ensure proper equipment calibration (Select all that apply).

Administrative assistant, Clinical director, Clinic coordinator

Indicate how often equipment is calibrated.

Annually

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.)

Administrative assistant, Clinical director or coordinator

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.4.

None

Standard 6.5 Technical Infrastructure

If there were areas of non-compliance, partial 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

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.

We have excellent IT support at the college and university for internet and library access through student, faculty, and staff portals. IT help desk services are available via email and phone. The university provides Zoom conference and technical support at the Academic Technology Center that is located at the library. The library provides interlibrary loan services for any resources unavailable on campus. The university provided laptops and iPads to faculty.

Describe how access to the infrastructure will allow the program to meet its mission and goals.

The access to the infrastructure allows us to combine excellence in teaching, research, and clinical practice for students in and out of the classroom.

Positioned within a comprehensive, regional university with a global outlook in Southern California, our faculty expertise and diversity provide a distinctive opportunity for exploring, understanding, and developing an appreciation for normal and disordered human communication across the life span and across culturally/linguistically diverse populations. In our university, where learning is preeminent, graduates represent our aspirations to combine the best of current theory with contemporary clinical practices across the broad areas within our profession.

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.

We have excellent IT support at the college and university for internet and library access through student, faculty, and staff portals, <http://library.fullerton.edu/>. IT help desk is available via email and phone services. The university provides Zoom conference and technical support at the Academic Technology Center that is located at the library. The library provides interlibrary loan services for any resources unavailable on campus.

Referenced Documents

[St 6.5.docx](#)

Describe how the adequacy of support is evaluated and how these resources are addressed in the program's strategic plan.

The adequacy of support has been primarily discussed and assessed by the Clinical Services Committee before the issues are shared at the department faculty meetings and program retreats. We have communicated with the dean's office, and we include the college IT team and the university IT team, as their input is needed. Our Goal 9, "increase revenue through fundraising, entrepreneurial activities, grants, and contracts" includes a strategy to implement a comprehensive development plan that moves the program toward increased stakeholder engagement and fundraising.

How frequently does the program evaluate the adequacy of resources?

Less than every 2 years

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.5

Technical infrastructure has been periodically discussed with the Dean's office by our Clinical Services Committee that consists of the clinical director, graduate adviser, clinical services coordinator, and the chair. The dean's office has been supportive of our technology upgrades within its budget constraints.

Standard 6.6 Clerical and Technical Staff Support

If there were areas of non-compliance, partial 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

Describe how clerical and technical staff and support services are adequate and sufficient to meet the program's mission and goals.

Two student assistants serve the department office by answering phone calls, responding to students who visits the department office, making copies for faculty and the chair as needed, and assisting the department chair.

We have a coordinator who assists mostly in course scheduling and budgetary assistance. She assists both our department and our former department, Human Communication Studies.

We also have a staff member who assists in textbook orders and travel requests and travel reimbursement. Again, she assists both departments.

Our clinic has a clinic administrative assistant who handles observation hours, keeps track of supervisors CCC and license, students clinical files, clients' files, clinic material purchasing, and billing. He also supervises front desk student assistants who take intake interviews and answer phones.

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.

It is discussed at the Clinical Service Committee meetings, department faculty meetings, and retreat.

Please describe any additional clarifying information you wish to provide regarding the program's compliance with Standard 6.6

None

Unreferenced Documents

[authorization of accreditation.pdf](#)

[Coll_Comm_Org_Chart_2018_Spring.pdf](#)

[Program-Completion-Rate-Calculator-Worksheet.xlsx](#)

[SLP-Knowledge-and-Skills-within-the-Curriculum.doc](#)