DOCUMENTATION GUIDANCE

Standards for Accreditation of Graduate Education Programs in Audiology and Speech-Language Pathology

Effective January 1, 2023

The CAA has developed this Documentation Guidance to provide directions or suggestions to programs on how to document compliance with the 2017 Standards for Accreditation, for which revisions go into effect on **January 1, 2023**. These guidance elements are here as a companion resource to the 2017-Revised Standards for Accreditation. The CAA also has identified sources of evidence for programs and site visitors to consider when preparing for and conducting a site visit.

The Standards for Accreditation include the standard and bulleted Requirements for Review that provide interpretations or explanations of the standard. A Glossary is also available with definitions to assist in interpreting the accreditation standards in the Standards document.

Resource Last Updated: August 2022

Standard 1.0 Administrative Structure and Governance

1.1 The sponsoring institution of higher education holds current institutional accreditation.

Documentation Guidance:
- Provide an official letter from the accreditor indicating that the sponsoring institution holds current accreditation *or* a link to the institutional accrediting body's directory.
- For programs with components located outside the region of the home campus, verify that all locations in which its academic components are housed, including satellite campuses outside of the United States, the institution that houses those components hold institutional accreditation.

Sources of Evidence:
- Provost or Dean
- Official letter/press release
- University catalog
- Regional accreditor website

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

Documentation Guidance:
- Provide a letter of attestation from a state agency that has authority for higher education or other authorized entity that has authority for programs of study at the sponsoring institution, or
- Provide a letter of attestation from the sponsoring institution's board of regents or from a recognized board or panel with this authority. If the program is part of a consortium, provide the appropriate attestation for each entity within the consortium, if different.
- Note: Although approvals may be needed by the institutional accreditor to start offering the program, that approval does not satisfy the degree granting authority approval to comply with this standard.

Sources of Evidence:
- State higher education authority or board of regents website
- Official letter/press release
- Provost or Dean

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

Documentation Guidance:
- Provide the mission statement 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, if different.
- Describe how the program uses the mission and goals statements to guide decision making to prepare students for entry into professional practice.

Sources of Evidence:
- Program handbooks
- University catalog
- Program website
- Administrators, academic and clinical faculty, staff, program director, students

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

Documentation Guidance:
- Provide meeting minutes or other evidence that documents regular discussion of the congruence of the program mission and goals with that of the sponsoring institution.
- Provide meeting minutes or other evidence that documents regular review and discussion of the mission and goals, expected outcomes, strategies, and evaluation of progress toward fulfillment of the mission.

Sources of Evidence:
- Program handbooks
- University catalog
- Program and university websites
- Meeting minutes
- Administrators, academic and clinical faculty, staff, program director, students

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

Documentation Guidance:
- Provide a copy of the strategic plan or the executive summary of the strategic plan. The plan should identify long-term goals, specific measurable objectives, strategies for attainment of the goals and objectives, and a schedule for analysis of the plan.
- Describe the methods used to ensure congruence between the strategic plan and the mission and goals of the program.
- Describe the methods used to ensure that the strategic plan has the support of the institutional administration.
- Describe the methods used to ensure that the strategic plan reflects the role of the program within its community.
- Describe the process and timelines for creating, implementing, and evaluating the strategic plan.
- Describe the process for disseminating the strategic plan or executive summary of the strategic plan to faculty, students, staff, alumni, and other interested parties.

General Guidance:
- The program should describe how the processes of development, implementation, and evaluation of the plan are documented, how the results of the evaluation are used to improve the program, and how the plan is shared with stakeholders. The focus of this standard is to ensure that all critical components of the strategic plan are included in a program's long-term strategic plan, as defined in the Glossary appended to the Standards, rather than on the specific content of the plan.

Sources of Evidence:
- Program and university websites
- Faculty meeting minutes
- Program director, academic and clinical faculty, staff, administrators, students, alumni
- Program handbooks
- University catalog
- Strategic plan or executive summary of plan

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

Documentation Guidance:

- Provide an organizational chart that demonstrates how the program fits into the administrative structure of the institution.
- For programs without independent departmental status, articulate the organizational structure and describe how the program maintains authority and responsibility for the program.
- Describe how program faculty and instructional staff have authority and responsibility to initiate, implement, and evaluate substantive decisions affecting all aspects of the professional education program, including the curriculum.
- Describe how the faculty accesses higher levels of administration.

Sources of Evidence:

- Organizational chart
- Faculty meeting minutes
- Program and university websites
- Program director, academic and clinical faculty, staff, administrators, students, alumni
- Program handbooks
- University catalog

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

Documentation Guidance:

- Provide documentation that the individual designated as program director holds the appropriate degree.
- Provide documentation that the individual designated as program director holds a full-time appointment at the institution.
- In cases where the department chair and program director are different individuals, describe how the program director exercises responsibility for the program of professional education.

Sources of Evidence:

- Vita
- Organizational chart
- Faculty meeting minutes
- Program and university websites
- Program director, academic and clinical faculty, staff, administrators, students, alumni

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

Documentation Guidance:

- Describe how information regarding equitable treatment is communicated to students.
- Describe how information regarding equitable treatment is communicated to faculty and staff.
- Describe how information regarding equitable treatment is communicated to persons served in the clinic.
- Provide links to handbooks, websites, and/or other appropriate documents to demonstrate the institutional expectations regarding compliance with all nondiscrimination statutes.
- Describe the method used by the program to maintain a record of complaints that were initiated within the university, in accordance with program or university grievance procedures, and those initiated outside of the university, charges, and litigation alleging violations of such policies and procedures and verification that appropriate action was taken to address the complaints.
- For programs that are housed in institutions that may qualify for exemption from any federal antidiscrimination requirements (such as those contained in Title IX) based on the institution's religious tenets, provide documentation of any exemption requests the institution has made to the U.S. Department of Education (USDE). This must include all documents the program provided to the USDE and the response received. If a program believes that it is entitled to an exemption from a non-discrimination policy requirement in the CAA accreditation standards but has not submitted a request for an exemption to the USDE, then the program must submit a written statement detailing why it believes it should be exempt from the antidiscrimination requirement based on the religious tenets of the institution.

Sources of Evidence:

- Program and university websites
- Program handbooks (faculty, student, clinic, etc.)
- University catalog
- Faculty meeting minutes
- Tour of facilities
- Program and/or institutional policy and procedures
- Documentation of exemptions
- Program director, academic and clinical faculty, staff, administrators, students, alumni, clients

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

Documentation Guidance:

- Indicate how public information about the program is accessed.
- Indicate when information about the program is updated.
- Indicate where the program's statement of accreditation status is publicly posted.
- Describe the process for maintaining the currency and accuracy of information.
- Indicate who (e.g., program director, staff, information technology) is responsible for ensuring that information about the program and the institution is accurate.
- Indicate who/what (e.g., program director, faculty, staff) is responsible for ensuring that information about the program and the institution is available to students and to the public.
- Indicate where the program completion rates are publicly posted.

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- Indicate where the *Praxis*® Subject Assessment examination pass rates are publicly posted.
- Provide links to the program's information and student outcome measures.
- If the program has a distance education component or a satellite campus, indicate where the reports for each of the two student outcome measures are publicly posted.

General Guidance

- **Accreditation Statement** - A program must use the applicable accreditation statement in its entirety on its website as articulated in CAA's Public Notice of Accreditation Status policy (see *Accreditation Handbook,* Chapter XII.C). Additional references to the program's accreditation status on the website must be accurate but need not include all components of the accreditation statement. This includes publishing all modalities (e.g., residential, distance education, and satellite campuses) that have been approved as part of the program's accreditation status.

- **Student Outcome Measures** – Student outcome measures must be labeled "Student Achievement Data" or "Student Outcome Data" on the program's website. Separate tables must be presented for each professional area and for each component (i.e. distance education, residential, satellite campus). For additional guidance, please review the CAA's webpage on Presenting Student Achievement Data.

Sources of Evidence:

- Program and university websites
- Program handbooks (faculty, student, clinic, etc.)
- University catalog
- Faculty meeting minutes
- Printed brochures; stationary
- Facility tour
- Program director, academic and clinical faculty, staff, administrators, students, alumni, clients

Standard 2.0 Faculty

2.1 The number and composition of the program faculty (academic doctoral, clinical doctoral, other) are sufficient to deliver a program of study that:

> **2.1.1 allows students to acquire the knowledge and skills required in Standard 3.0,**
> **2.1.2 allows students to acquire the scientific and research fundamentals of the discipline,**
> **2.1.3 allows students to meet the program's established goals and objectives,**
> **2.1.4 meets the expectations set forth in the program's mission and goals,**
> **2.1.5 is offered on a regular basis so that it will allow the students to complete the program within the published time frame.**

Documentation Guidance:
- Describe the methods used to ensure that the number of individuals in and composition of the group that delivers the program of study are sufficient to allow students to:
  - acquire the knowledge and skills required in Standard 3.0;
  - acquire the scientific and research fundamentals of the profession;
  - meet the program's established learning goals and objectives, along with other expectations set forth in the program's mission and goals;
  - complete the program within the published time frame.
- Document the distribution of faculty in terms of the number of full-time and part-time individuals who hold academic doctoral degrees, clinical doctoral degrees, and master's degrees.

Sources of Evidence:
- Vita
- Program website
- Program handbooks
- University catalog
- Student/alumni records
- Course syllabi
- Academic and clinical faculty, staff, program director, administrators, students, alumni, on- and off-campus clinical supervisors/preceptors

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

Documentation Guidance:
- Describe the methods used to ensure that faculty who have responsibility in the graduate program and have obligations to provide teaching, research, and service as part of their workload
  - are accessible to students;
  - have sufficient time to advise students (if required);
  - have sufficient time to pursue scholarly and creative activities, advise students, and participate in faculty governance and other activities that are consistent with the expectations of the sponsoring institution.
- Describe the methods used to ensure that faculty who have responsibility in the graduate program and have obligations to provide clinical education and service as part of their workload
  - are accessible to students,
  - have sufficient time to advise students (if required),
  - have sufficient time for other activities that are consistent with the expectations of the sponsoring institution.

- Describe the processes used by the program to ensure that tenure-eligible faculty have the opportunity to meet the criteria for tenure of the sponsoring institution.
- Describe the processes used by the program to ensure that faculty who are eligible for promotion have the opportunity to meet the criteria for promotion of the sponsoring institution.
- Describe the processes used by the program to ensure that faculty who are eligible for continuing employment have the opportunity to meet the criteria for continued employment of the sponsoring institution.

Sources of Evidence:
- Vita
- University catalog
- Tenure/promotion policies and procedures
- Program website
- Program handbooks
- Student/alumni records
- Academic and clinical faculty, staff, program director, administrators, students, alumni, on- and off-campus clinical supervisors/preceptors

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

Documentation Guidance:
- Provide detailed information regarding initial academic preparation (including degrees held and areas of study for each degree), contributions to the development of new knowledge, and pursuit of relevant continuing professional development for all full-time and part-time academic and clinical faculty members and adjuncts.
- Provide detailed information, which can include, but is not limited to, research activities, publications, and presentations.
- Provide detailed information regarding initial academic preparation and pursuit of relevant continuing clinical education for all full-time and part-time clinical faculty members and adjuncts. Detailed information about continuing education can include, but is not limited to, continuing education transcripts and records of professional development.
- Provide detailed licensing and certification information (as appropriate) for all full-time and part-time academic and clinical faculty members and adjuncts and the process used to verify all necessary credentials.
- Provide academic rank and tenure-track status for all full-time and part-time academic and clinical faculty members and adjuncts.
- Provide documentation that the individuals delivering the program are qualified to teach the assigned academic classes or provide the assigned clinical education.
- Provide documentation that the majority of academic content (greater than 50% of courses, as defined by number of credit hours) is taught by doctoral faculty who hold the appropriate terminal academic degree (PhD, EdD).

General Guidance:
- The program should assess all academic and clinical educators as qualified and competent to fulfill their assignments and responsibilities. When making assignments for academic courses, the program should consider an individual's areas of expertise, degrees, research or practice background, and other variables relevant to the program and institution to ensure compliance with university expectations.
- Doctoral level faculty applies only to the graduate curriculum and faculty.

- A form is available on the CAA website to support the program collecting the needed data for each faculty member.

Sources of Evidence:
- Vita
- University catalog
- Program handbooks
- Course syllabi
- Academic and clinical faculty, staff, program director, administrators, students, alumni, on- and off-campus clinical supervisors/preceptors

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

Documentation Guidance:
- Provide documentation of professional development activities for each individual who has responsibility to deliver academic and clinical components of the graduate program. Continuing competence can be demonstrated in a variety of ways, including:
  - participation in professional development activities,
  - publication or presentation of research,
  - publication or presentation on scholarship of teaching and learning,
  - publication or presentation on clinical methods and professional issues,
  - maintenance of credentials.
- Provide documentation that all individuals who have responsibility to deliver the graduate program have a pattern of participating in professional development activates. This pattern can be demonstrated by participation in the above-mentioned ways over the individual's history at the sponsoring institution.

Sources of Evidence:
- Vita
- University catalog
- Tenure/promotion policies and procedures
- Course syllabi
- Budget
- Academic and clinical faculty, staff, program director, administrators, students, alumni, on- and off-campus clinical supervisors/preceptors
- Other evidence

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

3.1A An effective entry-level professional audiology program allows each student to acquire knowledge and skills in sufficient breadth and depth to enable the student to function as an effective, well-educated, and competent clinical audiologist (i.e., one who can practice within the full scope of practice of audiology). The education program is designed to afford each student with opportunities to meet the expectations of the program that are consistent with the program's mission and goals and that prepare each student for independent professional practice as an audiologist.

Documentation Guidance – Standard 3.1A:

- Provide evidence that the program

    o   has established goals, objectives, and measures of the extent to which student learning outcomes have been met;
    o   enables students to meet its expectations, which are consistent with its mission and goals;
    o   offers opportunities for students to acquire and integrate the knowledge and skills needed for entry into independent professional practice in audiology across the scope of practice in audiology and across the range of practice settings;
    o   **offers a high quality learning environment that is centered on the student's** acquisition of knowledge and skills and on assessment.

- Provide evidence that the curriculum will allow each student to demonstrate

    o   professional practice competencies;
    o   knowledge of the foundations of audiology practice;
    o   knowledge and skills in the identification and prevention of hearing loss, tinnitus, and vestibular disorders;
    o   knowledge and skills in assessment of structure and function of the auditory and vestibular systems;
    o   knowledge and skills in assessment of the impact of changes in structure and function of the auditory and vestibular systems;
    o   knowledge and skills in intervention to minimize the impact of changes in structure **and function of the auditory and vestibular systems on an individual's ability to** participate in his or her environment;
    o   General knowledge and skills applicable to professional practice.

- Provide evidence that the curriculum offers courses and clinical experiences on a regular basis and enables students to qualify for current state and national credentials that are required for entry into independent professional practice

Sources of Evidence:
- Audiology curriculum
- Mission and goal statements
- Student files
- Course syllabi
- Website, catalogs (e.g., for information about course numbering, prerequisites)
- Academic and clinical faculty, program director, students
- On- and off-campus clinical supervisors/preceptors

General Guidance:

- Forms are available on the CAA website to support the program's collection of the data needed about each course and the knowledge and skills covered in the curriculum.

3.2A An effective audiology program is characterized by planning and organization, is reviewed systematically and on a regular basis, and is consistent with current knowledge and practice guidelines of the profession.

Documentation Guidance:
- Provide evidence of the curriculum planning processes used by the program.
- Provide evidence of the use of literature and other guiding documents to facilitate curriculum planning.
- Provide a description of the pedagogical approaches used to deliver the curriculum.
- Provide evidence of the schedule used to review the program curriculum.
- Provide evidence of the review processes used by the program to ensure that the curriculum reflects current audiology practice and education expectations.

Sources of Evidence:
- Course syllabi
- Meeting minutes, e.g., faculty, curriculum committee, etc.
- Institutional program evaluation
- Exit interviews
- Alumni, employer input
- Faculty administrative input about student performance, outcomes
- Academic and clinical faculty, program director, students, alumni, on- and off-campus clinical supervisors/preceptors

3.3A An effective audiology program is planned and delivered in an organized, sequential, and integrated manner to allow each student to meet the program's established learning goals and objectives and develop into an independent, competent audiologist.

Documentation Guidance:
- Describe the method(s) used to organize, sequence, and provide opportunities for integration across all elements of the content.
- Provide examples of sequential and integrated learning opportunities.
- Describe how the organization, sequential nature, and opportunities for integration allow each student to meet the program's established learning goals and objectives.

Sources of Evidence:
- Course syllabi
- Website, catalogs (e.g., for information about prerequisites, course descriptions, program of study)
- Meeting minutes, e.g., faculty, curriculum committee, etc.
- Student records
- Academic and clinical faculty, program director, students, on- and off-campus clinical supervisors/preceptors

3.4A An effective audiology program is organized and delivered in such a manner that the diversity, equity, and inclusion are reflected in the program and throughout the academic and clinical education.

Documentation Guidance:

- Describe how and provide evidence to support that diversity, equity, and inclusion are incorporated throughout the academic and clinical program in theory and in practice.
- Describe how and provide evidence to support that students are given opportunities to identify and acknowledge approaches to addressing culture and language that include cultural humility, cultural responsiveness, and cultural competence in service delivery
- Describe how and provide evidence to support that students are given opportunities to identify and acknowledge the impact of both implicit and explicit bias on clinical service delivery, and actively explore individual biases and how they relate to clinical services.
- Describe how and provide evidence to support that students are given opportunities to recognize that cultural and linguistic diversity exists among various groups, including among d/Deaf and hard of hearing individuals, and foster the acquisition and use of all languages (verbal and nonverbal), in accordance with individual priorities and needs.
- Describe how and provide evidence to support that students are given opportunities to identify and acknowledge:
    - the impact of how their own cultural and linguistic variables affect patient/client/student care;
    - the impact of cultural and linguistic variables of the individual served may have on delivery of effective care;
    - the interaction of cultural and linguistic variables between the caregivers and the individual served;
    - the social determinants of health and environmental factors for individuals served;
    - the impact of multiple languages and ability to explore approaches to addressing bilingual/multilingual individuals requiring services.

Sources of Evidence:

- Course syllabi
- Student records
- Documentation of student performance from academic and clinical faculty, program director, alumni, on- and off-campus clinical supervisors/preceptors, and student reflections.
- Programmatic data analysis and self-reflections
- Programmatic records demonstrating:
    - changes to course syllabi;
    - changes to polices for student recruitment and retention;
    - workshops and professional development opportunities for academic and clinical faculty, program directors, on- and off-campus clinical supervisors/ preceptors, and students;
    - use of teaching materials, standardized testing materials, and clinical outcomes for diverse populations.

3.5A An effective audiology program is organized so that the scientific and research foundations of the profession are evident.

Documentation Guidance:

- Describe the methods used to ensure that each student obtains knowledge in the basic sciences, basic science skills, and the basics of communication sciences.
- Describe the methods used to ensure that each student can understand and apply the scientific bases of the profession.
- Describe the methods used to ensure that each student can understand and apply research methodology.
- Describe the methods used to ensure that all students have opportunities to become knowledgeable consumers of research literature.
- Describe the methods used to ensure that there are opportunities for each student to become knowledgeable about the fundamentals of evidence-based practice.

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

Sources of Evidence:
- Student records
- Course syllabi
- Vita
- Catalogs
- Academic and clinical faculty, program director, students, alumni, administrators

3.6A The clinical education component of an effective entry-level audiology program is planned for each student so that there is access to a base of individuals who may be served that is sufficient to achieve the program's stated mission and goals. That base includes a variety of clinical settings, populations, and age groups. The comprehensive clinical experiences must include direct contact with individuals seeking services, consultation, recordkeeping, and administrative duties relevant to professional service delivery in audiology.

Documentation Guidance:
- Describe the methods used to ensure that the plan of clinical education for each student includes
    - experiences that represent the breadth and depth of audiology clinical practice;
    - opportunities to work with individuals across the life span and the continuum of care;
    - opportunities to work with individuals from culturally and linguistically diverse backgrounds;
    - experiences with individuals who express various types and severities of changes in structure and function of the auditory and vestibular systems and related disorders;
    - opportunities to obtain experiences with appropriate equipment and resources;
    - exposure to the business aspects of the practice of audiology (e.g., reimbursement requirements, insurance and billing procedures, scheduling).
- Provide information about the size and diversity of the potential base of individuals who may be served and the clinical populations available in the facilities where students are placed.

Sources of Evidence:
- Student records
- Tour of facilities
- Academic and clinical faculty, program director, students, alumni
- On- and off-campus clinical supervisors/preceptors
- Contact with off-campus sites

3.7A An effective audiology program ensures that clinical education is provided in a manner that supports student development so that each student is prepared to enter independent professional practice. The type and structure of the clinical education are commensurate with the development of knowledge and skills of each student.

Documentation Guidance:
- Provide documentation of written 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 will allow each student to acquire the independence to enter independent professional practice.

Sources of Evidence:
- Student records
- Tour of facilities
- Catalogs
- Policies and procedures
- Academic and clinical faculty, program director, students, alumni, clinical coordinator
- On- and off-campus clinical supervisors/preceptors
- Contact with off-campus sites

3.8A Clinical education is provided in a manner that ensures that the welfare of each person served by a student and clinical educator team is protected and in accordance with recognized standards of ethical practice and relevant federal and state regulations.

Documentation Guidance:
- Provide documentation of written policies and procedures that ensure that the amount of supervision provided to each student is adjusted to ensure that the specific needs are met for each individual who is receiving services.
- Provide documentation that describes the consultation between the student and the clinical educator in the planning and provision of services.
- Provide documentation of written policies and procedures that ensure that the welfare of each individual who is served is protected.
- Provide documentation of written policies and procedures that describe how the care that is delivered by the student and clinical educator team is in accordance with current, recognized standards of ethical practice and relevant state and federal regulations.
- Provide evidence of the current ethical practice requirements being followed in the relevant published materials provided by the program.
- Provide evidence of written policies that address how the program provides the opportunity for students to understand and practice the principles of universal precautions to prevent the spread of infectious and contagious diseases.
- Provide documentation of student use and adherence to universal precautions.

Sources of Evidence:
- Student records
- Tour of facilities
- Catalogs
- Policies and procedures
- Academic and clinical faculty, program director, students, alumni, clinical coordinator, clients/caregivers
- On- and off-campus clinical supervisors/preceptors
- Contact with off-campus sites

3.9A Clinical education obtained in external placements is governed by agreements between the program and the external facility and is monitored by program faculty.

Documentation Guidance:
- Provide evidence of valid agreements (written or electronic) with all active external facilities in which students are placed for clinical practicum experiences.

- Provide documentation of the written policies regarding the role of students in the selection of externship sites and the placement of students in the sites.
- Provide documentation of the written policies that describe the processes used by the program to select and place students in external facilities.
- Provide documentation of its due diligence to ensure that each clinical site has the clinical population and personnel to meet the educational needs of each student assigned to that site.
- Provide documentation of the written policies and procedures that are used to evaluate the effectiveness of the educational opportunities provided at each active site.
- Provide documentation of the processes used to ensure that the clinical education in external facilities is monitored by the program.
- Provide documentation of the processes used by the program to verify that educational objectives of each active site are met.

Sources of Evidence:
- Agreements/contracts
- Policies (re. identification and ongoing evaluation of external facilities)
- Procedures (selection and placement of students, protocol for monitoring students, evaluation)
- Catalogs
- Students, alumni, clinical coordinator, off-campus clinical supervisors/preceptors
- Contact with off-campus sites

3.10A An effective entry-level audiology program ensures that its students know the expectations regarding their exercise of the highest level of academic and clinical integrity during all aspects of their education.

Documentation Guidance:
- Provide documentation of the written policies and procedures that are pertinent to expectations of student academic and clinical conduct.
- Provide documentation of the written policies and procedures that are used to address violations of expectations regarding academic and clinical conduct.

Sources of Evidence:
- Catalogs, policies and procedures
- Academic and clinical faculty, program director, students, clinical coordinator
- On- and off-campus clinical supervisors/preceptor

Standard 3.0B Curriculum (Academic and Clinical Education) in Speech-Language Pathology

3.1B An effective entry-level professional speech-language pathology program allows each student to acquire knowledge and skills in sufficient breadth and depth to function as an effective, well-educated, and competent clinical speech-language pathologist (i.e., one who can practice within the full scope of practice of speech-language pathology). The education program is designed to afford each student with opportunities to meet the expectations of the program that are consistent with the program's mission and goals and that prepare each student for professional practice in speech-language pathology.

Documentation Guidance – Standard 3.1B:

- Provide evidence that the program
  - has established goals, objectives, and measures of the extent to which student learning outcomes have been met;
  - enables students to meet its expectations that are consistent with its mission and goals;
  - offers opportunities for students to acquire and integrate the knowledge and each skill needed for entry into professional practice in speech-language pathology across the current scope of practice and across the range of practice settings;
  - offers a high-quality learning environment that is centered on the student's acquisition of knowledge and skills and on assessment.
- Provide evidence that the curriculum will allow each student to demonstrate

  - professional practice competencies;
  - knowledge of the foundations of practice in speech-language pathology;
  - knowledge and skills in the identification of speech, language, and swallowing disorders and differences;
  - knowledge and skills in the identification and prevention of speech, language, and swallowing disorders;
  - knowledge and skills in the evaluation of speech, language, and swallowing disorders;
  - knowledge and skills in intervention to minimize the effects of changes in the speech, language, and swallowing mechanisms;
  - general knowledge and skills applicable to professional practice.

- Provide evidence that the program offers the courses and clinical experiences on a regular basis and enables students to qualify for current state and national credentials that are required for entry into professional practice.

Sources of Evidence:
- Speech-language pathology curriculum
- Mission and goal statements
- Student files
- Course syllabi
- Website, catalogs (e.g., for information about course numbering, prerequisites)
- Academic and clinical faculty, program director, students
- On- and off-campus clinical supervisors/preceptors

General Guidance:
- Forms are available on the CAA website to support the program's collection of the data needed about each course and the knowledge and skills covered in the curriculum.

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

Documentation Guidance:
- Provide evidence of the curriculum planning processes used by the program.
- Provide evidence of the use of literature and other guiding documents to facilitate curriculum planning.
- Provide a description of the pedagogical approaches used to deliver the curriculum.
- Provide evidence of the schedule used to review the program curriculum.
- Provide evidence of the review processes used by the program to ensure that the curriculum reflects current speech-language pathology practice and education expectations.

Sources of Evidence:
- Course syllabi
- Meeting minutes, e.g., faculty, curriculum committee, etc.
- Institutional program evaluation
- Exit interviews
- Alumni, employer input
- Faculty administrative input about student performance, outcomes
- Academic and clinical faculty, program director, students, alumni, on- and off-campus clinical supervisors/preceptors

3.3B An effective speech-language pathology program is planned and delivered in an organized, sequential, and integrated manner to allow each student to meet the program's established learning goals and objectives and develop into a competent speech-language pathologist.

Documentation Guidance:
- Describe the method(s) used to organize, sequence, and provide opportunities for integration across all elements of the content.
- Provide examples of sequential and integrated learning opportunities.
- Describe how the organization, sequential nature, and opportunities for integration allow each student to meet the program's established learning goals and objectives.

Sources of Evidence:
- Course syllabi
- Website, catalogs (e.g., for information about prerequisites, course descriptions, program of study)
- Meeting minutes, e.g., faculty, curriculum committee, etc.
- Student records
- Academic and clinical faculty, program director, students, on- and off-campus clinical supervisors/preceptors

3.4B An effective speech-language pathology program is organized and delivered in such a manner that the diversity, equity, and inclusion are reflected in the program and throughout the academic and clinical education.

Documentation Guidance:
- Describe how and provide evidence to support that diversity, equity, and inclusion are incorporated throughout the academic and clinical program in theory and in practice.

- Describe how and provide evidence to support that students are given opportunities to identify and acknowledge approaches to addressing culture and language that include cultural humility, cultural responsiveness, and cultural competence in service delivery
- Describe how and provide evidence to support that students are given opportunities to identify and acknowledge the impact of both implicit and explicit bias on clinical service delivery, and actively explore individual biases and how they relate to clinical services.
- Describe how and provide evidence to support that students are given opportunities to recognize that cultural and linguistic diversity exists among various groups, including among d/Deaf and hard of hearing individuals, and foster the acquisition and use of all languages (verbal and nonverbal), in accordance with individual priorities and needs.
- Describe how and provide evidence to support that students are given opportunities to identify and acknowledge:
    - the impact of how their own cultural and linguistic variables affect patient/client/student care;
    - the impact of cultural and linguistic variables of the individual served may have on delivery of effective care;
    - the interaction of cultural and linguistic variables between the caregivers and the individual served;
    - the social determinants of health and environmental factors for individuals served;
    - the impact of multiple languages and ability to explore approaches to addressing bilingual/multilingual individuals requiring services.

Sources of Evidence:

- Course syllabi
- Student records
- Documentation of student performance from academic and clinical faculty, program director, alumni, on- and off-campus clinical supervisors/preceptors, and student reflections.
- Programmatic data analysis and self-reflections
- Programmatic records demonstrating:
    - changes to course syllabi;
    - changes to polices for student recruitment and retention;
    - workshops and professional development opportunities for academic and clinical faculty, program directors, on- and off-campus clinical supervisors/ preceptors, and students;
    - use of teaching materials, standardized testing materials, and clinical outcomes for diverse populations.

3.5B An effective speech-language pathology program is organized so that the scientific and research foundations of the profession are evident.

Documentation Guidance:

- Describe the methods used to ensure that each student obtains knowledge in the basic sciences, basic science skills, and basic communication sciences.
- Describe the methods used to ensure that each student can understand and apply the scientific bases of the profession.
- Describe the methods used to ensure that each student can understand and apply research methodology.
- Describe the methods used to ensure there are opportunities for all students to become knowledgeable consumers of research literature.
- Describe the methods used to ensure that there are opportunities for each student to become knowledgeable about the fundamentals of evidence-based practice.

- Describe the methods used to ensure that there are opportunities for each student to apply the scientific bases and research principles to clinical populations.
- Describe the methods used to ensure that there are opportunities for students to participate in research and scholarship that are consistent with the mission and goals of the program.

Sources of Evidence:
- Student records
- Course syllabi
- Vita
- Catalogs
- Academic and clinical faculty, program director, students, alumni, administrators

3.6B The clinical education component of an effective entry-level speech-language pathology program is planned for each student so that there is access to a base of individuals who may be served that is sufficient to achieve the program's stated mission and goals and includes a variety of clinical settings, populations, and age groups. The comprehensive clinical experiences must include direct contact with individuals seeking service, consultation, recordkeeping, and administrative duties relevant to professional service delivery in speech-language pathology.

Documentation Guidance:
- Describe the methods used to ensure that the plan of clinical education for each student includes
  - experiences that represent the depth and breadth of speech-language pathology clinical practice;
  - opportunities to work with individuals across the life span and the continuum of care;
  - opportunities to work with individuals from culturally and linguistically diverse backgrounds;
  - experiences with individuals who express various types and severities of changes in structure and function of the speech and swallowing mechanisms;
  - exposure to the business aspects of the practice of speech-language pathology and swallowing (e.g., reimbursement requirements, insurance and billing procedures, scheduling).
- Provide information about the size and diversity of the potential base of individuals who may be served and the clinical populations available in the facilities where students are placed.

Sources of Evidence:
- Student records
- Tour of facilities
- Academic and clinical faculty, program director, students, alumni
- On- and off-campus clinical supervisors/preceptors
- Contact with off-campus sites

3.7B An effective speech-language pathology program ensures that clinical education is provided in a manner that supports student development so that each student is prepared to enter professional practice. The type and structure of the clinical education is commensurate with the development of knowledge and skills of each student.

Documentation Guidance:
- Provide documentation of written 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 will allow each student to acquire the independence to enter professional practice.

Sources of Evidence:
- Student records
- Tour of facilities
- Catalogs
- Policies and procedures
- Academic and clinical faculty, program director, students, alumni, clinical coordinator
- On- and off-campus clinical supervisors/preceptors
- Contact with off-campus sites

3.8B Clinical education is provided in a manner that ensures that the welfare of each person served by a student and clinical educator team is protected and in accordance with recognized standards of ethical practice and relevant federal and state regulations.

Documentation Guidance:
- Provide documentation of written policies and procedures that ensure that the amount of supervision provided to each student is adjusted to ensure that the specific needs are met for each individual receiving services.
- Provide documentation that describes the consultation between the student and the clinical educator in the planning and provision of services.
- Provide documentation of written policies and procedures that ensure that the welfare of each individual served is protected.
- Provide documentation of written policies and procedures that describe how the care that is delivered by the student and clinical educator team is in accordance with current, recognized standards of ethical practice and relevant state and federal regulations.
- Provide evidence of the current ethical practice requirements being followed in the relevant published materials provided by the program.
- Provide evidence of written policies that address how the program provides the opportunity for students to understand and practice the principles of universal precautions to prevent the spread of infectious and contagious diseases.
- Provide documentation of student use and adherence to universal precautions.

Sources of Evidence:
- Student records
- Tour of facilities
- Catalogs
- Policies and procedures
- Academic and clinical faculty, program director, students, alumni, clinical coordinator, clients/caregivers
- On- and off-campus clinical supervisors/preceptors
- Contact with off-campus sites

3.9B Clinical education obtained in external placements is governed by agreements between the program and the external facility and is monitored by program faculty.

Documentation Guidance:
- Provide evidence of valid agreements (written or electronic) with active external facilities in which students are placed for clinical practicum experiences.
- Provide documentation of the written policies regarding the role of students in the selection of externship sites and the placement of students in the sites.
- Provide documentation of the written policies that describe the processes used by the program to select and place students in external facilities.
- Provide documentation of its due diligence to ensure that each clinical site has the clinical population and personnel to meet the educational needs of each student assigned to that site.
- Provide documentation of the written policies and procedures that are used to evaluate the effectiveness of the educational opportunities provided at each active site.
- Provide documentation of the processes used to ensure that the clinical education in external facilities is monitored by the program.
- Provide documentation of the processes used by the program to verify that educational objectives of each active site are met.

Sources of Evidence:
- Agreements/contracts
- Policies (re. identification and ongoing evaluation of external facilities)
- Procedures (selection and placement of students, protocol for monitoring students, evaluation)
- Catalogs
- Students, alumni, clinical coordinator, off-campus clinical supervisors/preceptors
- Contact with off-campus sites

3.10B An effective entry-level speech-language pathology program ensures that its students know the expectations regarding their exercise of the highest level of academic and clinical integrity during all aspects of their education.

Documentation Guidance:
- Provide documentation of the written policies and procedures that are pertinent to expectations of student academic and clinical conduct.
- Provide documentation of the written policies and procedures that are used to address violations of expectations regarding academic conduct.

Sources of Evidence:
- Catalogs, policies and procedures
- Academic and clinical faculty, program director, students, clinical coordinator
- On- and off-campus clinical supervisors/preceptors

Standard 4.0 Students

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

Documentation Guidance:
- Describe the program's and institution's criteria for admission.
- Describe the admissions standards of the program and of the institution and provide a rationale for any differences between the two sets of criteria.
- Provide program policies regarding the use of exceptions to the admissions policies.

Sources of Evidence:
- Websites (program, university)
- Catalogs
- Brochures
- Academic calendars
- Advertisements
- Admission policies and procedures
- Program director, students

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

Documentation Guidance:
- Describe how the program's curriculum and program policies and procedures for admission, internal and external clinical placements, and retention of students reflect a respect for and an understanding of cultural, linguistic, and individual diversity.
- Provide the program's policy regarding proficiency in English and/or other languages.
- Provide documentation to support that the language proficiency policy is applied consistently.
- Provide the program's policy regarding the processes used to determine the need for and the provision of accommodations for students with reported disabilities.

Sources of Evidence:
- Website
- Graduate catalog
- Clinic handbook
- Policies and procedures
- Course syllabi
- Students, program director, academic and clinical faculty, clinical supervisors, administrators

4.3 The program has policies and procedures for identifying the need to provide intervention for each student who does not meet program expectations for the acquisition of knowledge and skills in the academic and clinical components of the program.

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

- Describe the program's policies and procedures to ensure that intervention plans are implemented and documented.
- Provide examples of the development, implementation, and documentation of intervention plans.
- Provide evidence that the policy is applied consistently across all students who are identified as needing intervention.

General Guidance:
- Intervention processes and opportunities should be available for not only summative assessments, but for all forms of assessments.

Sources of Evidence:
- Policies and procedures
- Course syllabi
- Faculty meeting minutes
- Student records
- Documentation of tracking and evaluation system
- Program director, academic and clinical faculty, clinical supervisors, students, alumni

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

Documentation Guidance:
- Provide documentation of the methods used to inform students of its policies and procedures regarding academic integrity and honesty, ethical practice, degree requirements of the program, and requirements for professional credentialing.

Sources of Evidence:
- Graduate catalog
- Clinic handbook
- Policies and procedures
- Course syllabi
- Specific documents (degree requirements, current certification requirements, current licensure requirements, current ethical practice requirements)
- Program director, academic and clinical faculty, clinical supervisors, students, alumni

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

Documentation Guidance:
- Describe how the program provides information to its students about filing a complaint against the program.
- 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.
- Describe the manner in which students are informed to contact the CAA to file a complaint regarding the program's compliance with standards of accreditation.

Sources of Evidence:

- Graduate catalog
- Clinic handbook
- Policies & procedures (University student complaint; CAA complaint)
- Website
- Student complaint files
- Program director, academic and clinical faculty, clinical supervisors, students, administrators

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

Documentation Guidance:

- Describe the student advisement processes, including the timelines for advising.
- Describe the mechanisms for documenting the advisement that pertains to academic and clinical progress.
- Describe the processes for identifying students who may not meet program requirements, including language proficiency.
- Describe the processes for documenting concerns about a student's performance in meeting all program requirements and for ensuring those concerns are addressed with the student.

Sources of Evidence:

- Graduate catalog
- Clinic handbook
- Policies & procedures
- Student files
- Databases or other tracking mechanisms
- Students, alumni, academic and clinical faculty, program director

4.7 The program documents student progress toward completion of the graduate degree and professional credentialing requirements.

Documentation Guidance:

- Describe the processes for development and maintenance of documentation of each student's records for the entire time of his or her matriculation in the program.
- Describe the mechanisms used by the program to ensure that the documentation is used to track student progress toward meeting the academic, clinical, and other requirements for the degree and the program identified credential(s) for which it is preparing its students.

Sources of Evidence:

- Policies & procedures
- Student files
- Databases or other tracking mechanisms
- Students, alumni, academic and clinical faculty, program director, administrative staff

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

Documentation Guidance:
- Describe the processes that are used by the program to provide access to student records that are requested by the student and program graduates or those who attended the program but did not graduate.
- Describe the policy for retention of student records.

Sources of Evidence:
- Graduate catalog
- Policies & procedures
- Student files
- Databases or other tracking mechanisms
- Current and former students, alumni, academic and clinical faculty, program director, administrative staff

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

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

Sources of Evidence:
- Catalogs/handbooks
- Websites
- Students, alumni, academic and clinical faculty, program director, administrators

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

Documentation Guidance:
- Describe the institutional policies regarding verification of student identity as well as how this process is implemented and applied. If the institution does not have specific policies, describe the program's policies regarding verification of student identity as well as how this process is implemented and applied by the program.
  - Acceptable mechanisms may include, but are not limited to, secure login and pass code or other technologies or practices that are effective for verifying student identification.
  - Provide the policies regarding the protection of student identity for those students studying within a distance modality.
  - Provide policies that include notification to students upon enrollment of any fees associated with verification of identity for distance education purposes.

Sources of Evidence:
- University catalogs
- Student handbooks
- Websites
- Policies and procedures

- Student files
- Students, alumni, academic and clinical faculty, program director, administrators

Standard 5.0 Assessment

5.1 The program regularly assesses student learning.

Documentation Guidance:

- Describe the processes used to assess the achievement of student learning outcomes.
- Describe the processes used to assess the acquisition of the expected knowledge and skills.
- Describe the processes used to provide consistent feedback to each student.

Sources of Evidence:

- Policies and procedures
- Course syllabi
- Student files
- Documentation of tracking and evaluation system
- Graduate and employer surveys
- Graduate exit interviews
- Students, alumni, academic and clinical faculty, program director, on- and off-campus supervisors/preceptors

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

Documentation Guidance:

- Describe the assessment plan that is used throughout the program to assess performance of its students, including the timelines for administration of the elements of the assessment plan.
- Describe processes used 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.
- Describe the student learning goals that address the acquisition of knowledge and skills, aptitudes, and abilities, including professionalism and professional behaviors.
- Describe how the goals, objectives, and student success in meeting the learning goals are aligned with the mission of the program.
- Describe the protocols for administering the assessment plan, including the use of multiple academic and clinical faculty.
- Describe the use of the assessment measures to evaluate and enhance student progress and how the assessment measures are applied consistently and systematically. Note: As of 1/1/2023, the Praxis examination series can no longer be used as the program's only form of summative assessment.

Sources of Evidence:

- Policies and procedures
- Program student learning goals
- Course syllabi
- Student files
- Documentation of tracking and evaluation system
- Students, alumni, academic and clinical faculty, program director, on- and off-campus supervisors/preceptors

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

Documentation Guidance:
- Describe the benchmarks or thresholds used to evaluate the quality of the program.
- Describe the procedures used to evaluate the quality, currency, and effectiveness of the program and each program component.
- Describe the processes by which the program engages in systematic self-study.
- Describe the mechanisms used to evaluate each program component.
- Demonstrate how the results of the assessment processes are used to improve the program.
- Provide the schedule on which the evaluations are conducted and the results are analyzed.
- Describe the mechanisms used to include evaluations of the academic and clinical aspects of the program by students.
- Describe the processes used to monitor the alignment between the stated program goals and objectives and the measured student learning outcomes.

Sources of Evidence:
- Policies and procedures
- Faculty meeting minutes
- Student, graduate, and program assessment documents, e.g., graduate and employer surveys, feedback from external clinical facilities, client/caregiver feedback, community input
- Student evaluations
- Documentation of tracking and evaluation systems
- Outcome measures, such as program completion rate, Praxis examination data, employment rate
- Academic and clinical faculty, program director, on- and off-campus supervisors/preceptors, students, alumni, clients/caregivers

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

Documentation Guidance:
- Describe the procedures followed to use the results of the assessments to plan and implement program improvements that ensure continuous quality improvement.
- Describe the processes used to ensure that any program changes are consistent with the program's stated mission and goals.

Sources of Evidence:
- Policies and procedures
- Faculty meeting minutes
- Academic and clinical faculty, program director, administrators

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

Documentation Guidance:
- Describe the mechanisms used to keep records of the number of students enrolled on the first census day of the program.
- Describe the processes used by the program to compare each student's time to degree in light of the terms (consecutive or non-consecutive) established by the program.

Describe the mechanisms used to keep records of the numbers of students who continue to graduation, take an approved leave of absence, take longer or leave the program for reasons unrelated to program quality (e.g., personal, financial, relocation), and those students who take longer or leave the program for reasons related to academic or clinical progress (e.g., insufficient course offerings, remediation, academic integrity, dismissal).
● Provide an explanation and a plan for improvement if the program's 3-year average for completion rate does not meet or exceed the CAA's established threshold.

Sources of Evidence:
- Policies and procedures
- University catalog
- Faculty meeting minutes
- Outcome measure summaries for program completion rate
- Academic and clinical faculty, program director, students, alumni

General Guidance:
- A form is available on the CAA website to support the program in documenting students completing the program.
- Information is available on the CAA website about Calculating Program Completion Rates.

5.6 The percentage of test-takers who pass the *Praxis*® Subject Assessments in audiology or speech-language pathology meets or exceeds the CAA's established threshold.

Documentation Guidance:
● Describe the mechanisms used by the program to determine the number of test-takers who take the *Praxis*® Subject Assessment exam each year.
● Describe the mechanisms used by the program to determine how many individuals who took the Praxis® Subject Assessment exam each year passed the exam in that year.
● Provide an explanation and a plan for improvement if the program's 3-year average for exam pass rate does not meet or exceed the CAA's established threshold.

Sources of Evidence:
- Policies and procedures
- Faculty meeting minutes
- Outcome measure summaries for Praxis examination pass rate
- Academic and clinical faculty, program director, students, alumni

5.7 – Reserved

- This standard has been reserved and is no longer required under the 2017-Revised Standards.

5.8 The program demonstrates how it uses the results of its analyses of success in meeting the established CAA thresholds for program completion rate and Praxis® Subject Assessments pass rate for continuous quality improvement at the programmatic level.

Documentation Guidance:
- Describe the analysis processes used by the program to evaluate the results of program completion rate and *Praxis*® Subject Assessment pass rate to facilitate continuous quality improvement.

Sources of Evidence:
- Policies and procedures
- Faculty meeting minutes
- Outcome measures for program completion rate, Praxis examination data
- Academic and clinical faculty, program director

5.9 The program regularly evaluates and documents the results of the assessment of all faculty and staff to determine their effectiveness in delivering a thorough and current program.

Documentation Guidance:
- Describe the mechanisms used by the program to evaluate the effectiveness of the faculty and staff to deliver a high-quality program.
- Describe the processes of the evaluation procedures, including a timeline for such procedures and the safeguards that are in place to ensure that the processes are fair.
- Describe the mechanisms used to evaluate how the effectiveness of the delivery of the program is consistent with institutional policies and procedures.

Sources of Evidence:
- Policies and procedures
- University catalog/website
- Faculty meeting minutes
- Student, graduate and program assessments
- Academic and clinical faculty, program director, administrators, students

5.10 The faculty and staff involved in delivering the program to students use the results of the evaluation of their performance to guide continuous professional development that facilitates the delivery of a high-quality program.

Documentation Guidance:
- Describe the mechanisms used to assess how the faculty and staff evaluation processes result in continuous professional development.
- Describe the mechanisms used by the program to determine whether continuous professional development facilitates delivery of a high-quality program.

Sources of Evidence:
- Policies and procedures
- Faculty meeting minutes
- Academic and clinical faculty, program director, administrators

5.11 The individual responsible for the program of professional education seeking accreditation effectively leads and administers the program.

Documentation Guidance:
- Describe how the individual responsible for the program of professional education effectively leads and administers the program.
- Describe how the program director's effectiveness in leadership and administration of the program is evaluated and indicate the frequency of this evaluation.
- Demonstrate how the plan for review of the program director's effectiveness is clearly documented and shared with faculty.

Sources of Evidence:
- Vita
- Organizational chart
- Faculty meeting minutes
- Program director, academic and clinical faculty, administrators, administrative staff

Standard 6.0 Program Resources

6.1 The institution provides adequate financial support to the program so that it can achieve its stated mission and goals.

Documentation Guidance:
- Describe the budgeting process for the program and submit a copy of the approved budget for the current year.
- 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.
- Provide verification that the budget is sufficient to meet the program's mission and goals.
- Describe how the program determines that there is sufficient support for the specific areas of personnel, equipment, educational and clinical materials, and research.
- Identify any budget insufficiencies and describe how these insufficiencies will affect the program in the near term and long term.
- If there are insufficiencies in the budget, describe how the program will address the impact of these insufficiencies on the program.
- 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.

Sources of Evidence:
- Budget
- Program mission and goals statements
- Program director, administrators

6.2 The institution provides adequate support to the program so that its faculty and staff have the opportunities to maintain continuing competence.

Documentation Guidance:
- Provide documentation of the institutional support for continuing professional development. Examples of evidence for institutional support for faculty development may include:
  - release time for research and professional development,
  - support for professional travel,
  - professional development opportunities on campus.
- Describe how the program provides sufficient support for the faculty and staff to maintain continuing competence.

Sources of Evidence:
- Budget
- Program director, academic and clinical faculty, administrators

6.3 The program has adequate physical facilities (classrooms, offices, clinical space, research laboratories) that are accessible, appropriate, safe, and sufficient to achieve the program's mission and goals.

Documentation Guidance
- Describe the processes used and the results of those processes to determine the adequacy of the facility to deliver a high-quality program.
- Describe the processes used and the results of those processes to determine that the facilities meet contemporary standards of access and use.

Sources of Evidence:
- Tour of facilities
- Program director, academic and clinical faculty, administrators, students, clients/caregivers

6.4 The program's equipment and educational and clinical materials are appropriate and sufficient to achieve the program's mission and goals.

Documentation Guidance:
- Describe the processes used to evaluate the quantity, quality, currency, and accessibility of the materials and equipment used by the program to determine whether they are sufficient to meet the mission and goals of the program.
- Describe the mechanisms used to determine whether the equipment is in good working order and, where appropriate, meets standards established by ANSI or other standards-setting bodies.

Sources of Evidence:
- Tour of facilities
- Equipment calibration records
- Inventories of major equipment and materials
- Program director, academic and clinical faculty, clinical supervisors, administrators, students, clients/caregivers

6.5 The program has access to an adequate technical infrastructure to support the work of the students, faculty, and staff. The technical infrastructure includes access to the Internet, the online and physical resources of the library, and any streaming or videoconferencing facilities needed for the program to meet its mission and goals.

Documentation Guidance
- Describe the processes used to evaluate the adequacy of the infrastructure to support the work of the program students, faculty, and staff.
- Describe how access to the infrastructure allows the program to meet its mission and goals.
- Demonstrate access by faculty and students to appropriate and sufficient resources, such as library resources, interlibrary loan services, access to the Internet, computer and laboratory facilities, and support personnel.
- Describe how the adequacy of support is evaluated and how these resources are addressed in the program's strategic plan.

Sources of Evidence:
- Tour of facilities

- Program director, academic and clinical faculty, clinical supervisors, administrators, students, clients/caregivers, administrative staff

6.6 The program has access to clerical and technical staff that is appropriate and sufficient to support the work of the students, faculty, and staff. The access is appropriate and sufficient for the program to meet its mission and goals.

Documentation Guidance:
- Describe the processes used to evaluate the adequacy of access to clerical and technical staff to support the work of the program students, faculty, and staff.
- Describe how access to clerical and technical staff allows the program to meet its mission and goals.

Sources of Evidence:
- Tour of facilities
- Program director, academic and clinical faculty, clinical supervisors, administrators, students, alumni, administrative and technical staff