

CAA UPDATE: Revised Accreditation Standards

Amy Wohlert, University of New Mexico, CAA Chair

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CAA Members

Executive Committee: Amy Wohlert (Chair) – SLP Academic

Colleen O'Rourke (Vice-Chair) -- Audiology Academic

Jennifer Watson (Vice-Chair) – SLP Academic

Mary Anne Hanner (Chair-Elect) – SLP Academic

Members: Fred Britten – Audiology Academic

Arlene Carney – Audiology Academic

Kris Fawson – Public Member

Ellayne Ganzfried – SLP Practitioner

Lee Ann Golper – SLP Academic

Stacey Matson -- Audiology Practitioner

George Purvis – Audiology Practitioner

Susan Snover – SLP Practitioner

Wayne Swisher – SLP Academic

Richard Talbott – Audiology Academic

Patti Tice – ASHA Ex Officio

CAA 2006 Priorities

Higher Education System

- One Web-based system that integrates 7 survey and reporting instruments (e.g., Graduate Guide, Doctoral Guide, CAPCSD Demographic survey, Salary survey, Accreditation application, etc.)
- Features ease in data collection, extraction, reporting features, and data analysis
- CAPCSD Contact: Mikael D.Z. Kimelman

Improving Operations – (responding to program feedback)

- Streamlined Application and Annual Report Forms
- Standardized Schedule for Accreditation Decisions (following Winter and Summer CAA meetings) – giving programs better estimates of response time
- Annual Reports – Now up-to-date
- External Consultants have reviewed internal office and CAA operations and procedures

Accreditation Standards Review

- CAA Standing Subcommittee

CAA Chair, 2 Audiologists, 2 Speech-language pathologists, Public Member

- Ongoing review of standards (calibration among CAA reviewers, site visitors, etc.)
- Comprehensive Review - required every 5-7 years

Last Revision - October 1997

Implemented January 1999

Proposed Time Line for Revision of Accreditation Standards

April 2005	Preliminary draft discussed with CAPCSD
May 2005	Subcommittee submits draft revision of standards to CAA
July 2005	CAA approves draft
Aug-Oct. 05	Draft distributed for widespread on-line peer review
Oct.-Dec. 05	Analysis of data and comments
March 2006	Subcommittee presents revised draft to CAA, CAA decides to send Std. 3 for additional peer review
July 2006	Final approval by CAA
Aug-Sept 06	Final standards published and distributed to programs
January 08	Proposed implementation of new standards

Areas of Major Changes

- Adding new standard category – “Assessment”

- Dividing Curriculum into 2 components:

3.0A Audiology

3.0B Speech-Language Pathology

- Miscellaneous edits for clarification

Standard 1.0 – Administrative Structure and Governance

Std.1.2 - Program's mission, goals, and objectives are consistent with "CAA" (rather than "ASHA recognized") standards for entry into practice

New Std.1.3 – "The program develops and implements a long-term strategic plan"

Std. 1.5 – Program director holds "graduate" degree in profession

Changed it back from "doctoral" degree in response to peer input

Adding regular evaluation process to document effective leadership

Original Std. 1.6 and 1.7 – Moved to new section 6.0 on Assessment

Standard 2.0 - Faculty

"Faculty" Definition – includes faculty members (tenure-track and non-tenure track), lecturers, clinical supervisors, and all other instructional staff members who are employees of the university/program

Std. 2.1 – All faculty, including all individuals providing clinical supervision, are qualified to provide assigned academic and clinical education

Both on-site and off-site supervisors must hold appropriate professional credentials (rather than only CCC) in professional area

For doctoral programs, doctoral faculty must teach academic content of program

Removed minimum supervisor experience & continued professional development language from earlier draft, based on peer input

Std. 2.2 – Sufficient core of full-time doctoral faculty, including research-qualified faculty (e.g., PhD)

Std. 2.3 – Institutional commitment - Sufficient number of full-time doctoral-level faculty

Std. 2.4 – Faculty can demonstrate continuing competence in variety of ways, including course and curricular development, professional development, and research activities

Standard 3.0A – Audiology: For additional peer review

Std. 3.1A – Curriculum prepares students in full breadth and depth of scope of practice in Audiology (rather than “sufficient to permit students to meet ASHA-recognized national standards for entry into professional practice”)

Must include sufficient didactic coursework . . . typically requires 4 years of graduate education.

Clinical experiences must comprise at least 25% of the program, and a minimum of 12 months FTE, interspersed

Program responsible for designing, administering, and evaluating all clinical education for each student

New Std. 3.9A – All Curriculum standards must be met, regardless of mode of delivery (e.g., distance education)

Non-traditional modes of delivery must ensure course work and clinical practicum are equivalent to existing program, including # of credits, availability, sequence, supervision, coordination of placements, diversity of client population, etc.

Standard 3.0B – SLP: For additional peer review

Std. 3.1B – Curriculum prepares students in full breadth and depth of scope of practice in SLP (rather than “sufficient to permit students to meet ASHA-recognized national standards for entry into professional practice”)

Must include sufficient program of study to achieve knowledge and skills outcomes . . . Typically two years of graduate education.

Adding knowledge and skills outcomes from skills validation study

Program responsible for designing, administering, and evaluating all clinical education for each student.

New Std. 3.9B – All Curriculum standards must be met, regardless of mode of delivery (e.g., distance education)

Non-traditional modes of delivery must ensure course work and clinical practicum are equivalent to existing program, including # of credits, availability, sequence, supervision, coordination of placements, diversity of client population, etc.

Standard 4.0 - Students

Std. 4.1 – Admissions criteria must meet or exceed institution's and be appropriate for degree being offered

Std. 4.2 – Reasonable adaptations

Program should provide policy regarding proficiency in English and/or other languages of service delivery and other performance requirements for clinical practice

New Std. 4.5 – All Student standards must be met, regardless of mode of curriculum delivery

Students in distance education, etc. are held to equivalent standards and afforded equivalent access to advising, support services, and resources

Standard 5.0 - New Standard Section - Assessment

Std. 5.1 – Program conducts ongoing and systematic formative and summative assessment of performance of current students (original Std. 1.6)

Std. 5.2 – Program documents student progress (original Std. 1.7)

Std. 5.3 – Program conducts regular and ongoing assessments of program effectiveness

Std. 5.4 – Program regularly evaluates all faculty members and use results for continuous improvement

Standard 6.0 – Program Resources

No substantive changes

Questions?

Additional peer review

Implementation schedule