ACCREDITATION ACTION REPORT

Re-Accreditation Review

The Council on Academic Accreditation in Audiology and Speech-Language Pathology took the following accreditation action at its February 27 – March 2, 2019 meeting, as indicated below.

Name of Program: University of Redlands

File #: 136

Professional Area:

- [X] Audiology
- [ ] Speech-Language Pathology

Modality:

- [X] Residential
- [ ] Distance Education
- [ ] Satellite Campus
- [ ] Contractual Arrangement

Degree Designator(s): M.S.

Current Accreditation Cycle: 11/1/2010 - 10/31/2018

Action Taken: Continue Accreditation

Effective Date: March 2, 2019

New Accreditation Cycle: 11/1/2018 – 10/31/2026

Next Review: Annual Report due February 1, 2020

Notices: The program is advised to adhere to the following notices that are appended to this report.

- PROGRAM COMPLIANCE EXPECTATIONS
- PUBLIC DISCLOSURE OF DECISION AND ACCREDITATION STATUS
In the context of the institutional and program mission statements and in consideration of the credentials for which the program is preparing students, the CAA conducted its comprehensive review and found the program to be in compliance with the Standards for Accreditation of Graduate Education Programs in Audiology and Speech-Language Pathology, except as noted below.

**AREAS OF NON-COMPLIANCE**

The CAA found the program to be not in compliance with the following Standards for Accreditation. Non-compliance means that the program does not have in place the essential elements necessary to meet the standard. The program must demonstrate its compliance with these standards when responding to prior concerns in the next annual report or reaccreditation application or by the time line specified below. The CAA will indicate in its review of that report whether the program has addressed these areas sufficiently to achieve compliance. **Failure to demonstrate compliance with the standards may jeopardize the program’s accreditation status or require the CAA to place the program on probation.**

- There are no areas of non-compliance with accreditation standards.

**AREAS OF PARTIAL COMPLIANCE**

The CAA found the program to be in partial compliance with the following Standards for Accreditation. Partial compliance means that the program has in place some, but not all, of the essential elements necessary to meet all aspects of the standard. The program must demonstrate its compliance with these standards when responding to prior concerns in the next annual report or reaccreditation application or by the time line specified below. The CAA will indicate in its review of that report whether the program has addressed these areas sufficiently to achieve compliance. **Failure to demonstrate compliance with the standards may jeopardize the program’s accreditation status or require the CAA to place the program on probation.**

**Standard 2.1 Faculty Sufficiency – Overall Program**

**Evidence of partial compliance:**

The program must document how the faculty composition is sufficient to allow students to acquire the knowledge and skills required in Standard 3.0. The CAA initial observations and site visit report noted that the program relied heavily on adjunct faculty. In response the program indicated that the faculty composition is sufficient to allow students to acquire the knowledge and skills required in Standard 3.0B, however there is a heavy reliance on adjunct clinical faculty and one visiting professor to provide supervision in the clinic and free-up time for full-time faculty to provide academic and clinical coursework. Furthermore, the program hopes to have hired a new assistant professor by September 2019. The program has launched a search for an assistant professor to complement the teaching and supervisory needs of the department and reports a pool of applicants of which at least three to four finalists will be invited to interview by the Search Committee.
**Steps to be Taken:**

In the next annual report, the program should report on the outcome of this faculty search. Describe how it ensures a faculty composition that is sufficient to allow students to acquire the knowledge and skills required in Standard 3.0.

**AREAS FOR FOLLOW-UP (clarification/verification)**

The CAA did not find the program to be out of compliance with the following Standards for Accreditation at this time. However, the program must provide additional information or an update in the program’s next annual report or reaccreditation application for clarification or verification of these issues, in order to monitor the program’s continued compliance in the stated areas.

**Standard 3.8B Clinical Education-Client Welfare**

**Evidence of concern:**

The program must demonstrate that the services provided by the student and clinical educator team are in accordance with recognized standards of ethical practice and relevant federal and state regulations. There is concern about confidentiality in that parents, caregivers, and students are able to look into adjacent clinic rooms, thus violating confidentiality of clients receiving services. The program reported that an investigation would be conducted of university qualifications for HIPAA participation regarding waiting room and observer regulations. If it is determined that the clinic qualifies as a HIPAA compliant clinic, the Clinic Manager will attend HIPAA training specific to university training programs. The program also indicated that discussions have been initiated for new shared clinical space for which the Clinic Director expects to have outcomes and a feasibility study plan by September 2019.

**Steps to be Taken:**

In the next annual report, report on the outcome of the HIPAA participation investigation and related HIPAA training, and outcomes of the new shared clinical space feasibility plan.

**Standard 5.4 Ongoing Program Improvement**

**Evidence of concern:**

The program must describe how it uses programmatic assessment data to promote continuous quality improvement of the program and processes used to evaluate program improvements for congruence with its stated mission and goals. Although the program collects assessment data via student exit surveys, alumni and employer surveys, the site visitors were unable to verify evidence of incidences when the data was used to improve the program. In response, the program indicated that they often discuss survey data during faculty meetings and that a feedback loop is present during advisory board meetings in that stakeholders report what they observe in the students and recent graduates. However, discussions are not documented such that it informs the process to ensure ongoing program improvement. The program indicated that the faculty meeting agenda will include a programmatic assessment feedback loop to be discussed regularly throughout the year and that the department’s strategic plan will be reviewed to
ensure the program is incorporating ongoing programmatic assessment needs and the highest possible response rate from various surveys from stakeholders.

Steps to be Taken:

In the next annual report, provide an update on the implementation of steps to formalize discussions during faculty meetings and update the strategic plan to incorporate programmatic assessment needs.

PERFORMANCE WITH RESPECT TO STUDENT ACHIEVEMENT

The CAA has evaluated this program regarding its performance with respect to student achievement and provides the following report, required as an accrediting agency recognized by the US Secretary of Education [34 CFR 602.17(f)(2)].

Comments/Observations:

| X | Program Completion Rates |
| X | Employment Rates |
| X | Praxis Examination Rates |

PROGRAM COMPLIANCE EXPECTATIONS

As an accrediting agency recognized by the U.S. Secretary of Education, the CAA must comply with Criterion §602.20 [34 CFR 602.20(a)(2)(iii)]. This criterion requires that if an accrediting agency’s review of a program indicates that the program is not in compliance with any standard, the CAA must establish timelines for programs that are not in full compliance “to take appropriate action to bring itself into compliance with the agency’s standards”. As the programs that the CAA accredits are at least two years in length, the maximum time allowed under this criterion is two years. If, after review of a required report, the program remains out of full compliance with any standard and sufficient progress toward compliance has not been demonstrated, the CAA may act to place the program on probation or withdraw its accreditation status in accordance with the policy and procedures outlined in the Accreditation Handbook. The CAA may place a program on probation or withdraw accreditation from a program prior to this time when there is clear evidence of circumstances that jeopardize the capability of the program to provide acceptable educational experiences for the students, as noted above. However, a program will be placed on probation or accreditation withdrawn after the review of a third consecutive report reveals that issues continue for the same standard(s) and the program remains not in full compliance with all standards.
PUBLIC DISCLOSURE OF THIS DECISION AND ACCREDITATION STATUS

The CAA publishes a notice of final accreditation actions on its website after comprehensive reviews are completed in accordance with its published policies. In the event an adverse action is taken and becomes final (i.e., withdrawal or withholding of an accreditation status), the CAA is required to publish a brief statement summarizing the reasons for withholding or withdrawing the accreditation status of a program, together with the comments, if any, that the affected program may wish to make.

The Criteria for Recognition by the U.S. Secretary of Education requires all recognized accrediting agencies to provide for the public correction of incorrect or misleading information an accredited or preaccredited program releases about accreditation or preaccreditation status, contents of site visit reports, and accrediting or preaccrediting actions with respect to the program. [34 CFR 602.23(d) and 602.23(e)] The program must make accurate public disclosure of the accreditation or preaccreditation status awarded to the program, using the language provided in the Accreditation Handbook (see Chapter XII Informing the Public) on the academic accreditation website. If the program chooses to disclose any additional information within the scope of the ED rule, such disclosure also must be accurate. Any public disclosure of information within the scope of the rule must include the CAA’s name, address, and telephone number as described in the Accreditation Handbook. If an institution or program misrepresents or distorts any action by the CAA with respect to any aspect of the accreditation process, its accreditation status, the contents of the site visit report, or final CAA accreditation actions or decisions, the CAA will inform the chief executive officer of the institution and the program director that corrective action must be taken. If corrective action is not taken, the CAA will release a public statement that provides correct information and may invoke other sanctions as may be appropriate.