ACCREDITATION ACTION REPORT

Re-Accreditation Review

The Council on Academic Accreditation in Audiology and Speech-Language Pathology took the following accreditation action at its July 17-20, 2019 meeting, as indicated below.

Name of Program: Tennessee State University

File #: 174

Professional Area:

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

Modality:

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

Degree Designator(s): M.S.

Current Accreditation Cycle: 7/01/2011 – 6/30/2019

Action Taken: Continue Accreditation

Effective Date: July 20, 2019

New Accreditation Cycle: 7/01/2019 – 6/30/2027

Next Review: Annual Report due August 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 timeline 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 1.4:** The program faculty must regularly evaluate the congruence of program and institutional missions and the extent to which the goals are achieved.

**Evidence of non-compliance:**
The program is expected to systematically evaluate its progress toward fulfillment of its mission and goals. The program reports the variety of outcomes and survey data that they collect to evaluate the programs mission and goals; however, it is not evident from the site visit report and in the program’s response to the site visit report as to how the program then uses that information, and what systems or mechanisms are in place to evaluate its progress toward fulfillment of its mission and goals.

**Steps to be taken:**
At the time of the annual report, explain how the program systematically evaluates its progress toward fulfillment of its mission and goals.

**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 1.1:** The sponsoring institution of higher education holds current regional accreditation.

**Evidence of Concern:**
The institution of higher education within which the audiology and/or speech-language pathology program is housed must hold regional accreditation from one of the regional accrediting bodies. The university was placed on probation by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC), however the current accreditation status statement of the university indicates that the university remains accredited while on probation for the next 12 months.

**Steps to be taken:**
At the time of the annual report, provide an update regarding the status of regional accreditation for the university.

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

**Evidence of concern:**
The program must demonstrate the procedures used to verify that students obtain knowledge in the basic sciences and statistics; basic science skills (e.g., scientific methods, critical thinking); and the basics of communication sciences (e.g., acoustics, linguistics, and neurological processes of speech, language, and hearing). The site visit report indicated that there was no clear evidence of consistent tracking of the acquisition of basic sciences, basic skills and the basics of communication sciences as outline in the standard. The program was found to reference the standards of the Council for Clinical Certification (CFCC); however, CFCC standards are specific to certification of the individual. CAA Standard 3.5B is specific to the curriculum and delivery of that curriculum by the program. The program must be able to demonstrate the procedures used to verify that each student obtains knowledge as referenced in the standard prior to and during the degree program. In response to the site visit report, the program reported that it now has a tracking checklist in place in each student’s folder that demonstrates a process and procedure to verify that students obtain knowledge as referenced in this standard.

**Steps to be taken:**
At the time of the annual report, provide an update on the implementation of the tracking checklist.
Standard 4.7: The program documents student progress toward completion of the graduate degree and professional credentialing requirements.

Evidence of concern:
- The program must maintain complete and accurate records of all students’ progress during the entire time of their matriculation in the program;
- The records for each student must include documentation that can demonstrate that the student has met all the academic, clinical, and other requirements for the degree and the credential(s) that are identified by the program in its mission and goals.

The program reported that documentation to demonstrate the student has met all the academic, clinical, and other requirements for the degree and the credential(s) that are identified by the program in its mission and goals are kept across numerous locations, files and databases. In response to the site visit report, the program outlined the areas and methods to ensure complete and accurate records of each student’s progress across their degree program. The department recognizes this as an oversight and immediately updated the process to ensure that all verified data is transferred to the form. In addition, a summative form has been developed to help meet this requirement.

Steps to be taken:
At the time of the annual report, provide an update on the process implemented to maintain student records and demonstrate that the program is maintaining complete and accurate records of each student’s progress throughout the course of the degree, meeting all academic, clinical, and other requirements.

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 |

The CAA assessed the program’s performance with respect to student achievement and found the program to meet or exceed the established CAA expectations (as described in accreditation standard 5.0-Assessment) in the following checked areas. Details regarding any of these areas found to be not in compliance are described earlier in this report in the context of the relevant standard.
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.