

**ACCREDITATION ACTION REPORT
Reaccreditation Review**

The Council on Academic Accreditation in Audiology and Speech-Language Pathology took the following accreditation action at its February 7-9, 2024 meeting, as indicated below.

Name of Program: West Texas A&M University

File #: 269

Professional Area:

<input type="checkbox"/>	Audiology
<input checked="" type="checkbox"/>	Speech-Language Pathology

Modality:

<input checked="" type="checkbox"/>	Residential
<input type="checkbox"/>	Distance Education
<input type="checkbox"/>	Satellite Campus
<input type="checkbox"/>	Contractual Arrangement

Degree Designator(s): MS

Current Accreditation Cycle: 08/01/2015 – 07/31/2023

Action Taken: Continue Accreditation

Effective Date: February 9, 2024

New Accreditation Cycle: 08/01/2023 – 07/31/2031

Next Review: Annual Report due August 1, 2024

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. A program will be placed on probation or accreditation withdrawn after the review of a second consecutive report reveals that issues continue for the same standard(s) and the program remains not in full compliance with all standards (effective January 1, 2021- see [CAA Accreditation Handbook, Chapter XVII](#)).**

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

Requirements for Review:

- The plan identifies long-term goals, specific measurable objectives, strategies for attainment of the goals and objectives, and a schedule for analysis of the plan.
- The plan must include a mechanism for regular evaluation of the plan itself and of progress in meeting the plan's objectives.
- An executive summary of the strategic plan or the strategic plan must be shared with faculty, students, staff, alumni, and other interested parties.

Evidence of Non-Compliance:

The CAA expects that the accredited program develops and implements a long-term strategic plan. In its site visit report, the site visit team stated they were not able to verify evidence of compliance with Standard 1.5. The site visit team noted that the program has a strategic plan; however, the plan does not have long-term goals, specific measurable objectives, strategies for attainment of the goals and objectives, a schedule for analysis of the plan, a mechanism for regular evaluation of the plan and its progress, or an executive summary that is shared with faculty, students, staff, alumni, and other interested parties. The site visit report stated that the program director reported that the strategic plan is discussed at the annual retreat; however, there was no evidence to support this nor data to document progress on the plan's goals. In its response to the site visit report, the program submitted faculty minutes from their retreats over several years, however these documents did not identify strategies for attainment of the goals and objectives included in the strategic plan, a schedule for analysis of the plan, and a mechanism for its evaluation and progress in terms of meeting the objectives.

Steps to Be Taken:

At the time of the next annual report, the program must provide a description of the strategies employed for attainment of the goals and objectives identified in the strategic plan. In addition, the program must demonstrate how the plan includes a mechanism for evaluating how the strategic plan's goals and objectives are being met, and how the plan and progress are shared with stakeholders.

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

Requirement for Review:

- The program must provide evidence that its curriculum and program policies and procedures for admission, internal and external clinical placements, and retention of students reflect a respect for and understanding of cultural, linguistic, and individual diversity.

Evidence of Non-Compliance:

Standard 4.2 requires the program to provide evidence that its curriculum and program policies and procedures for admission, internal and external clinical placements, and retention of students reflected a respect for and understanding of cultural, linguistic, and individual diversity. In its initial observations, the CAA asked the program to provide evidence expanding on this requirement for review. The CAA noted that the program's application response reflects on the diversity of clients, but does not describe how the program makes necessary adaptations for students, when needed. The site visit team was not able to verify compliance with this standard based on a review of documentation provided by the program that did not reflect a respect for and understanding of cultural and individual diversity. In its response to the site visit report, the program explained that they worked with the A&M system lawyers to revise the dress code and provided a copy of it with the response. The CAA determined that this response does not address the concerns and request for evidence of policies and procedures for admission, internal and external clinical placements, and retention of students reflects a respect for and understanding of cultural, linguistic, and individual diversity.

Steps to Be Taken:

At the time of the next annual report, the program must provide evidence that its curriculum and program policies and procedures for admission, internal and external clinical placements, and retention of students reflects a respect for and understanding of cultural, linguistic, and individual diversity. Examples of sources of evidence that the program may be able (based on the [Documentation Guidance](#) program resource developed by the CAA) to provide could be the program website, graduate catalog, clinic handbook, policies and procedures, or course syllabi.

Standard 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.

Requirements for Review:

- The program has policies and procedures for implementing and documenting all forms of intervention used to facilitate each student's success in meeting the program's expectations.
- The program must demonstrate that the policies and procedures are applied consistently across all students who are identified as needing intervention.

Evidence of Non-Compliance:

Standard 4.3 requires the program to have policies and procedures for implementing and documenting all forms of intervention used to facilitate each student's access in meeting the program's expectations. These policies and procedures must be applied consistently across all students who are identified as needing intervention. In the site visit report, the site visitors stated that they were unable to verify evidence to support compliance with this standard. The site visit report stated that the program has policies and procedures for identifying students who

need intervention to meet program expectations for the acquisition of knowledge and skills in the academic and clinical components of the curriculum. However, the site visitors reported that the program's policies and procedures for implementing and documenting all forms of intervention used to facilitate each student's success are informal and inconsistently implemented across all students and faculty.

In its response to the site visit report, the program provided updated copies of the policies and procedures for identifying students who need intervention to meet academic and/or clinical program expectations. The program explained that these items were updated in its handbooks and provided to the students. However, the program did not provide evidence as to the implementation and documentation of all forms of intervention used to facilitate each student's success in meeting the program's expectations, and did not demonstrate that these policies and procedures were consistently applied to all students identified as needing intervention. The program also provided minutes of their faculty retreats where they discussed students' remediation in terms of passing the program's comprehensive exam, but the program did not address the procedures used for consistent implementation and documentation of interventions for all identified students.

Steps to Be Taken:

At the time of the next annual report, the program must present policies and procedures that include the criteria and program expectations for the demonstration of academic knowledge and clinical skills for which a need for intervention would be identified. The program must demonstrate that the criteria in the policies and procedures are applied consistently across all students who are identified as needing intervention.

Standard 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.

Requirements for Review:

- The program must demonstrate its analysis processes to determine whether the program is meeting or exceeding each established CAA threshold.
- The program must demonstrate how it uses the results of these analyses to ensure continuous quality improvement.

Evidence of Non-Compliance:

Standard 5.8 requires the program to demonstrate its analysis processes to determine whether the program is meeting or exceeding each established CAA threshold, and how the results of the analyses is used to ensure continuous quality improvement. The site visit report indicated that the site visitors were unable to verify evidence to meet requirements for compliance with this standard. The site visit report stated that while the program makes publicly available the student outcome data regarding program completion rates and the Praxis Subject Assessment pass rates, there was no evidence of the process utilized to analyze the outcome data and use the results of the analysis to ensure continuous quality improvement.

In its response to the site visit report, the program provided meeting minutes that were voted on by the faculty. The program response indicated that the program has historically had a pass rate exceeding that required by the CAA; however, these minutes did not provide evidence of analyzing or discussing the results of the Praxis Subject Assessment to address continuous quality improvement.

Steps to Be Taken:

At the time of the next annual report, the program must provide evidence of the processes utilized to analyze the outcome data and how the results of the analysis are used to ensure continuous quality improvement.

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.

- **There were no areas for follow-up with the Standards for Accreditation.**

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\(f\)](#)].

Comments/Observations:

<i>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 <u>not</u> in compliance are described earlier in this report in the context of the relevant standard.</i>	
X	Program Completion 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](#)]. 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 provide a written timeline to the program to come into compliance that is reasonable, as determined by the CAA, based on the nature of the finding, the stated mission, and educational objectives of the program. The timeline may include intermediate checkpoints on the way to full compliance and must not exceed three years for programs, regardless of professional area. If the review of a second consecutive report reveals that issues continue for the same standard(s), regardless of which requirements for review were identified, and the program remains not in full compliance with all standards, 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.

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.