

FY2013 DEPARTMENTAL ANNUAL REPORT OF CONTINUOUS IMPROVEMENT

Department of Communication Disorders Fort Hays State University

2012-2013
ACADEMIC YEAR

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I. DEPARTMENTAL OVERVIEW

The Department of Communication Disorders at Fort Hays State University was established in 1951. The department has both an undergraduate program that focuses on pre-professional education and a graduate program that provides professional education in speech-language pathology which is accredited through the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) of the American Speech-Language-Hearing Association (ASHA). The Department applied for reaccreditation during 2012 and the CAA site visit occurred on March 25-26, 2013. The results of the CAA site visit will be discussed in the section on **Department Productivity and Distinctive Accomplishments**.

The undergraduate program is a pre-professional degree, which provides the foundation courses for the master's degree. Several of the general education courses are required for this pre-professional degree since they are part of the standards for certification. These courses include a biological and physical science, elements of statistics, and psychology. In addition, the Department requires a course on diversity, one education course focusing on children with exceptional needs, and either an education or psychology course on development. The undergraduate curriculum provides guided observation during the junior year and observation and limited participation in the fall of the senior year. Then, seniors may apply to participate in an undergraduate clinical practicum course during the spring semester of the senior year. The faculty members believe that the guided participation in the fall and more independent work in the spring will facilitate the undergraduate's clinical experience. During the 2011-2012 academic year, the faculty members developed a curricular map with specific learning outcomes for the undergraduate program. The Departmental faculty members have been collecting data and refining these learning outcomes during the 2012-2013 academic year (**See Affinity Diagram for the B.S. Program, Appendix A.1**).

The master's degree is the entry-level degree for the profession of speech-language pathology requiring both academic knowledge and clinical skills; therefore the department provides the traditional academic program with a clinical education component. The clinical education component is achieved through a variety of clinical settings, including the following: (a) Herndon Speech-Language-Hearing Clinic on campus; (b) Tiger Tots Nurture Center on campus; (c) variety of community affiliations, including Holy Family Elementary School, Head Start, and Good Samaritan Society of Hays; and (d) externship sites primarily in Kansas, Colorado, Nebraska and Missouri with a few sites in other parts of the United States and Canada.

The master's degree program prepares individuals so that they meet entry-level requirements for the profession of speech-language pathology (i.e., Certificate of Clinical Competence in Speech-Language Pathology) as outlined in the Council for Clinical Certification in Audiology and Speech-Language Pathology of the ASHA. In addition, the candidates also meet the professional licensure requirements as established by the Kansas Department of Health and Environment. Graduate students are encouraged to review the licensure requirements in the state in which they hope to work if they are moving to another state. Most states align their licensure requirements with the Certificate of Clinical Competence (CCC) in Speech-Language Pathology.

Both formative and summative assessments are used to ensure that students meet the learning outcomes developed by the department to meet the standards of the profession. The assessments for the graduate program have been occurring for the past 9 years. During the 2011-2012 academic year, the faculty members reviewed the learning outcomes for the graduate program and revised many of these. A curricular map was also developed for the graduate program learning outcomes to help

organize and plan assessments. Data from the learning outcomes from graduate students have been reported for the past 10 years (**See Affinity Diagram for the M.S. Program, Appendix A.2**).

A. Departmental Mission and Vision Statements

The department approved its strategic plan in September 2008 and the mission and vision statements were developed at this time. The Department reviewed and revised the strategic plan during 2010-2011 and approved the plan in August 2011. The mission and vision statements were reviewed and no changes were made. The full strategic plan may be found in **Appendix D.1**

Mission Statement

The department provides a quality academic and clinical **educational** program in an environment that **embraces diversity and effective performance** with the goal of preparing students to meet current professional standards. These activities will allow the department to serve as the resource for communication disorders throughout western Kansas.

Vision Statement

The Department of Communication Disorders will be recognized as a dynamic regional leader **in communication sciences and disorders**.

B. Departmental Goals, Objectives, and Strategic Priorities

The goals and strategic priorities for the 2012-2013 academic year are discussed in more detail in the *FY 2012 Quality Initiatives and Results* later and are supported through the strategic plan (**Appendix D.1**). The strategic plan will be further reviewed and discussed during fall 2012 since the faculty will be planning a major review of the undergraduate and graduate curriculum. The proposed strategic plan beginning during the 2013-2014 academic year will include the following goals:

- a. **Goal 1-Recruitment:** Continue to focus on recruitment through a variety of activities including increasing freshmen and transfer enrollments, retention of declared majors, updating the web site related to the undergraduate and graduate programs and continued use of Facebook. In addition, the Department has actively participated in all recruiting activities on campus as well as utilizing YouTube and other video testimonials to recruit and respond to potential students.
- b. **Goal 2-Scholarly Activity:** Continue the focus on scholarly activity in both the undergraduate and graduate program with an emphasis on evidence-based practice, increasing opportunities for dissemination of research by faculty and graduate students, creating opportunities for undergraduate research, and collaboration of clinical and doctoral faculty in the completion of clinical research. The Department faculty will be participating in an ASHA pilot program *Academic Program Self-Assessment: Quality Indicators for Integrating Research and Clinical Practice in Communication Sciences and Disorders (CSD) Programs* and the results of this pilot program may help guide some of the activities in this area.
- c. **Goal 3-Doctoral and Master Level Faculty:** The Department will have four doctoral level faculty beginning fall 2013 with one master's level instructor who will be working on her doctoral degree. This goal should be modified to focus on increasing one of the part-time clinical supervision positions to full-time and exploring new methods (e.g., telepractice, outside sites, and/or simulation) to provide graduate students clinical practicum experiences prior to externship.

- d. **Goal 4-Collaborative Partnerships:** The focus of collaborative partnerships have resulted in graduate students observing cleft clinics at the University of Kansas Medical Center in Kansas City, KS as well as laryngectomy support meetings in Wichita, KS. These activities will be continued during the 2014 academic year.
- e. **Goal 5:** Increasing application of technology in academic and clinical settings: A variety of technology continues to be used both in academic and clinical courses, including transcription and analysis of speech and language samples, assistive technology, augmentative-alternative communication devices, videostroboscopy and vital stimulation. These technologies will continue to be used even though this goal has been met and it is being recommended that this goal be discontinued.
- f. **Goal 6-Curriculum Review:** *The undergraduate affinity diagram has been completed and data is now being gathered from the specified courses to document student learning. The graduate affinity diagram has been updated as well. However, the previous program (i.e., SAMS) that was used to document student outcomes has been discontinued and new methods are being evaluated. In regards to syllabi, all courses within the department are presently utilizing a standard format that was adapted from the Virtual College. It is being recommended that this goal be modified to address the review of undergraduate and graduate coursework as proposed by the Council on Academic Accreditation for Speech-Language Pathology site review committee during the spring of 2013. The Department will be focusing on the graduate curriculum and how the graduate curriculum articulates with the undergraduate curriculum. Learning outcomes in both programs will be reviewed with possible revisions. The faculty members will use the *Practice and Curriculum Analysis for the Profession of Speech-Language Pathology*, related to knowledge and skills as well as practice guidelines in each of the areas of the scope of practice and how the academic and clinical education reflects the preparation of graduates for present and future clinical practice environments. In addition, as mentioned under Goal 2 the program will be participating in an ASHA pilot program, *Academic Program Self-Assessment: Quality Indicators for Integrating Research and Clinical Practice in Communication Sciences and Disorders (CSD) Programs* and the results of this pilot program may help guide some of the decisions in the curriculum area.*

C. Department Productivity and Distinctive Accomplishments

The Department has had a productive academic year in several areas. These areas include: (a) scholarly activity of faculty members and graduate students; (b) faculty awards; (c) number of applications reviewed for the graduate program; and (d) completion of the CAA reaccreditation application and CAA site visit.

Faculty and graduate students worked collaboratively on research projects which have resulted in both refereed and nonrefereed presentations. Even with our small number of Ph.D. faculty during the 2012-2013 school year, the department had 12 refereed presentations/publications and 11 nonrefereed presentations (**Appendix C.1, C.2**).

Several of the faculty have received awards during this academic year. In October Amy Finch, Ph.D. received the Honors of the Association for the Kansas Speech-Language-Hearing Association and also received a Faculty Academic Advising Award from the National Academic Advising Association (NACADA). Jayne Brandel, Ph.D. earned the *Language, Speech, and Hearing Services in Schools* 2011 Editors' Award for her research article, Program Intensity and Service Delivery Models in the

Schools: SLP Survey Results (November , 2012). Then, in May, Fred Britten, Ph.D. and Jeff Burnett, Ph.D. received the College of Health and Life Sciences Scholarship award. Phillip Sechtem had the best “award” by completing his doctoral degree in May from Wichita State University.

The Department also had an accreditation site visit by the Council of Academic Accreditation for Audiology and Speech-Language Pathology in March 2013. Three site visitors and one trainee arrived on campus on March 24 and completed file reviews and interviews with all faculty members, graduate students, and public meetings with former alumni, clients and families, and other members of the community. The Department has received the CAA Site Visitors’ Report and Dr. Finch, Dr. Britten, and Dr. Brandel have responded to the report. The Department’s application, Site Visit Report and our response will be reviewed by the CAA during the summer. It is hoped that we will receive notification from CAA sometime in the early fall.

II. DEPARTMENTAL PERFORMANCE METRICS

A. Department Performance Indicators

Key Performance Indicator	FY2009	FY2010	FY2011	FY2012	FY2013
Freshmen [20 TH DAY FALL SEMESTER, HEADCOUNT]	8	7	6	11	7
Transfer Students [20 TH DAY FALL SEMESTER, HEADCOUNT]	6	2	5	6	6
Undergraduate (first majors/second majors) [20 TH DAY FALL SEMESTER, HEADCOUNT OF FIRST MAJORS, HEADCOUNT OF SECOND MAJORS]	57/0	47/2	45/0	52/0	51/3
Graduate Majors [20 TH DAY FALL SEMESTER, HEADCOUNT]	30	33	36	40	39
MLS Majors [20 TH DAY FALL SEMESTER, HEADCOUNT OF ADVISEES WITH 120-4901]	0	0	0	0	0
Major Retention [20 TH DAY FALL SEMESTER, PERCENT OF FR MAJORS RETURNING TO UNIVERSITY]	87.50%	85.71%	85.71%	50.00%	63.64%
Undergraduate Student Credit Hours [TOTAL UNDERGRAD SCH]	865	862	844	1031	965
Graduate Student Credit Hours [TOTAL GRAD SCH]	1151	1185	1271	1480	1342
Tenured or Tenure-track Faculty (Headcount) [FTE OCCUPIED FROM POSITION CONTROL]	3	4	4	4	3
Non Tenure-Track Faculty (Headcount) [FTE OCCUPIED FROM POSITION CONTROL]	6	5	5	4	3.5
Undergraduate Degrees [UNDERGRAD DEGREES AWARDED]	15	15	16	13	15
Graduate Degrees [GRAD DEGREES AWARDED, NOT MLS]	10	19	12	20	18

Key Performance Indicator	FY2009	FY2010	FY2011	FY2012	FY2013
<p>Briefly note 2-3 improvements over the last year prompted from the above enrollment indicators.</p> <ol style="list-style-type: none"> The Department has remained above the 50 headcount for undergraduate majors with three students who have speech-language pathology as their second major. Although not counted in this headcount, the Department also had 3 to 5 students who were listed as SP. These were students who have completed a Bachelor's Degree in another major or from another school and are completing leveling courses and/or additional courses in the major prior to applying to graduate school. The Department maintained the increase in graduate students (40 in 2012 and 39 in 2013). The graduate credit hours continued to be above 1200. 					
Number of books, book chapters, and refereed articles/presentations published [TOTAL NUMBER PUBLISHED]	1	3	3	4	12
Percent of faculty publishing refereed books, chapters, or articles/presentations [PERCENT OF FACULTY PUBLISHING FOR FY2008 (FACULTY PUBLISHING/TOTAL FACULTY)]	30%	13%	33%	33%	50%
Number of non-refereed articles and presentations [TOTAL NUMBER COMPLETED]	10	6	5	13	11
Percent of faculty publishing non-refereed articles or presentations [PERCENT OF FACULTY COMPLETING (FACULTY PUBLISHING/TOTAL FACULTY)]	38%	44%	22%	22%	37.5%
Number of scholarly performances and other creative activities [TOTAL NUMBER OF CREATIVE PERFORMANCES]	0	0	0	0	0
Percent of faculty in scholarly performances or other creative activities [PERCENT OF FACULTY IN CREATIVE SCHOLARSHIP (FACULTY PERFORMING CREATIVE ACTIVITY/ TOTAL FACULTY)]	0%	0%	0%	0%	0%
Total number of external grant applications submitted/percent of faculty submitting [TOTAL NUMBER OF EXTERNAL GRANT APPLICATIONS/PERCENT FUNDED]	0/0%	1/11%	1/11%	0/0%	0/0%
Total number of funded external grants/percent of faculty funded [DOLLAR AMOUNT OF EXTERNAL GRANT APPLICATIONS, PERCENT OF FACULTY FUNDED]	0/0%	0/0%	0/0%	0/0%	0/0%
Total number students successfully completing an undergraduate research/creative project [TOTAL NUMBER OF UNDERGRAD STUDENTS COMPLETING, CONTRIBUTING TO, OR PRESENTING A CREATIVE OR SCHOLARLY PROJECT]	0	0	0	2	2
<p>Briefly note 2-3 improvements over the last year prompted from the above scholarly/creative activities indicators.</p> <ol style="list-style-type: none"> The Department continued to focus on graduate student-faculty presentations at the Kansas Speech-Language-Hearing Association with 11 presentations at the state conference and 6 national presentations at the American Speech-Language-Hearing Association annual conference. There was an increase in the percentage of faculty involved in refereed articles/presentations during this 					

Key Performance Indicator	FY2009	FY2010	FY2011	FY2012	FY2013
academic year.					
[NOTE: Each department MUST report at least two direct measures of student learning outcomes and two indirect measures. Examples of direct measures include: first-time pass rate or average scores on standard exit exam, number of students successfully completing reviewed portfolios. Indirect measures would include student satisfaction, alumni and employer data, or any other perception based data.]					
Direct Measures of Learning Outcomes for Program	FY 2009	FY2010	FY2011	FY2012	FY2013
Direct Outcome 1 First-time pass rate on national examination: <ul style="list-style-type: none"> • Percentage pass • Mean score 	100% 694	89% 660 Note: student passed on 2 nd attempt	93% 657 Note: student passed on 3 rd attempt	95% 680.5 Note: student passed on 2 nd attempt	100% 681.1
Direct Outcome 2 Percentage of graduates accepting positions in the profession.	100%	94%	100%	100%	88% 2 students interviewing
Indirect Indicator Evaluation of Knowledge by Externship Supervisors. Department began using this survey FY 2008. (Ratings from 1-Strongly Disagree to 5-Strongly Agree)	N=9	N= 14	N=13	N=20	N=18
<ul style="list-style-type: none"> • Adequate Knowledge of Communication Disorders for Educational Settings <ul style="list-style-type: none"> ○ Basic Physiological Processes ○ Basic Linguistic Processes ○ Normal Development of Communication across Life Span ○ Articulation/Phonological Disorders ○ Language Disorders ○ Voice Disorders ○ Fluency Disorders ○ Neurological Communication Disorders ○ Auditory Disorders/Aural Rehabilitation ○ Dysphagia ○ Reading Disorders ○ Augmentative-Alternative Communication ○ Counseling ○ School Regulations & Procedures 	4.56	4.36	4.25	4.63	4.88
	4.44	4.43	4.14	4.6	4.85
	4.43	4.29	4.25	4.68	4.91
	4.67	4.21	4.1	4.4	4.65
	4.56	4.43	4.7	4.6	4.88
	4.25	4.83	3.8	4.4	3.83
	4.6	4.67	4.45	4.54	4.42
	4.44	4.38	4.15	4.57	4.42
	4.45	4.56	3.5	4.58	4.29
	4.33	4.0	5.0	4.0	3.67
	4.17	3.9	3.5	3.94	4.0
	4.75	4.75	4.3	4.58	4.61
	4.0	4.0	3.7	4.0	3.95
	3.88	3.88	4.5	4.42	4.72
<ul style="list-style-type: none"> • Adequate Knowledge of Communication 	N = 9	N=14	N = 13	N=18	N=17

Key Performance Indicator	FY2009	FY2010	FY2011	FY2012	FY2013
Disorders for Medical Settings					
○ Basic Physiological Processes	4.58	4.79	4.35	4.55	4.82
○ Basic Linguistic Processes	4.67	4.42	4.45	4.53	4.79
○ Normal Development of Communication across Life Span	4.67	4.84	4.8	4.5	4.75
○ Articulation/Phonological Disorders	4.58	4.87	4.95	4.57	4.59
○ Language Disorders	4.5	4.53	4.7	4.58	4.63
○ Voice Disorders	4.0	4.4	3.8	4.19	4.2
○ Fluency Disorders	4.57	4.5	3.75	4.5	5.0
○ Neurological Communication Disorders	4.71	4.64	4.3	4.32	4.48
○ Auditory Disorders/Aural Rehabilitation	4.57	4.8	4.0	4.44	5.0
○ Dysphagia	4.0	4.14	3.9	3.79	4.25
○ Reading Disorders	3.77	4.6	4.7	4.31	5.0
○ Augmentative-Alternative Communication	4.33	5.0	3.8	4.54	4.65
○ Counseling	4.36	4.36	4.35	4.05	4.41
○ Healthcare Regulations & Procedures	4.42	4.42	3.8	4.33	4.59
Indirect Indicator 2					
Percentage of Undergraduate Students who Successfully Apply to Graduate School				N=10 80%	N = 9 60%
Dept senior students' Level of Academic Challenge [FHSU LAC SCORE, DEPT LAC SCORE]	54.65 59.16	55.9 62.21	56.4 59.57	56.2 57.36	58.5 64.74
Dept senior students' Active and Collaborative Learning [FHSU ACL SCORE, DEPT ACL SCORE]	45.34 52.38	46.1 55.29	43.9 46.91	44.5 41.67	45.1 61.90
Dept senior students' Student-Faculty Interaction [FHSU SFI SCORE, DEPT SFI SCORE, N, %]	45.34 40.00	41.0 51.57	38.5 46.91	38.4 44.17	38.6 57.78
Dept senior students' Enriching Educational Experiences [FHSU EEE SCORE, DEPT EEE SCORE, N, %]	34.72 31.75	34.0 39.19	32.9 30.69	32.7 22.77	34.0 47.63
Dept senior students' Supportive Campus Environment [FHSU SCE SCORE, DEPT SCE SCORE, N, %]	59.57 51.85	60.3 59.49	60.8 70.37	59.8 58.68	61.9 64.35
Number of NSSE participants [NUMBER OF DEPT SR STUDENTS, PERCENT]	3 16%	12 67%	9 69.2%	8 57.14%	6 66.7%
<p>Briefly note 2-3 improvements over the last year prompted from the above student learning/engagement indicators.</p> <ol style="list-style-type: none"> 1. The graduate students continued to demonstrate mastery of their knowledge and skills on both the national and exam and during their externships as evaluated by their site supervisors. 2. The ability of the graduate students to find employment continues to be high and is expected to be at 100% by the end of the summer. 					

Key Performance Indicator	FY2009	FY2010	FY2011	FY2012	FY2013
[NOTE: Departments may pick up to three key performance indicators they currently measure but are not captured above. These measures could be used to track departmental results on specific yearly goals. Examples might include: number of SRPs attended, number of new freshmen contacted. (These will vary by department based on goals.)]					
Outcome/Indicator 1	FY 2009	FY 2010	FY 2011	FY2012	FY2013
<p>Master of Science program:</p> <ul style="list-style-type: none"> ➤ Demonstrate a combined mean rating between 4.0 and 5.0 on the Clinical Competency Rating Scale as rated by supervisors on educational and medical externships (CCRS) (Appendix D.2) <ul style="list-style-type: none"> ○ Percentage meeting this goal ○ Mean rating 	100%	100%	83%	100%	100%
	4.70	4.72	4.45	4.68	4.69
Outcome/Indicator 2 (new outcome/indicator)					
<ul style="list-style-type: none"> ➤ Demonstrate knowledge acquisition as specified by national certification standards on student learning outcomes at the graduate level in 15 academic courses with an average of 2.5 or higher on a scale of 1 to 3 (1 = emerging, 2 = approaching, and 3 = standard met) <ul style="list-style-type: none"> ○ Percentage of graduate students meeting the average score of 2.5 or higher ○ Average score for the graduate class 					100%
					2.68
Outcome/Indicator 3					
<p>Herndon Speech-Language-Hearing Clinic</p> <ul style="list-style-type: none"> ➤ Majority of ratings between 4 and 5 on a 5-point Likert Scale by clients for the following item on the Client Survey: "clinical staff was prepared for my appointments" (Fall semester) Appendix D.4) 	N = 63 96.8% M = 4.54	N = 49 98% M = 4.89	N = 58 98% M = 4.89	N = 47 98% M = 4.89	N=47 100% M= 4.94
<p>Briefly note 2-3 improvements over the last year prompted from the above indicators.</p> <ul style="list-style-type: none"> • The rating of our graduate students during their externship by external supervisors continues to be between 4.0 and 5.0. The mean for the current academic year was 4.69. • The Department has begun tracking a more specific goal related to the graduate student learning outcomes across 15 academic courses. The initial assessment of this goal showed that 100% of the graduate students had an average rating of 2.5 or higher on a 3 point scale and that the mean was 2.68. • The rating by consumers related to whether the clinical staff was prepared for appointments with individuals being seen in the Herndon Clinic continued to be very high. 					

C. Department Quality Initiatives and Results

FY2013 Quality Initiatives	Results
<p>Program and Student Learning Outcomes: The Department will work on further delineating assessments for the program and student learning outcomes developed in FY 2012. In addition, the development of a monitoring program will be a high priority.</p>	<p>Faculty members who have identified academic and/or clinical educational experiences within the B.S. and M.S. curricular maps assessed performance on the student learning. The faculty members responsible for collecting assessment data submitted initial results of their assessments for both the fall and spring semester 2012-2013 and these are reported in the affinity diagrams for the B. S. and M.S. programs (Appendix A.1 and A.2).</p>
<p>Transition new faculty members into the academic, clinical, and assessment environment and move toward advertising, interviewing, and hiring a new Chair.</p>	<p>The two new faculty members hired for the 2012-2013 academic year were provided training on the academic and clinical assessment procedures and processes. During the academic year, a new monitoring system (CALIPSO) was purchased for the Department and all faculty members have begun to be trained on the documentation process for assessing graduate students' clinical skills. During the 2013-2014 academic year, all faculty will be provided with further instructions for monitoring the learning outcomes for the academic program using CALIPSO and the current Team-Managed Assessment of Knowledge and Skills (T-MAKS) documents.</p>

FY2014 Quality Initiatives	Responsible Party, Resources, and Plan
<p>Training of new faculty as well as transitioning faculty members in regards to the academic, clinical, assessment and advising responsibilities.</p>	<p>The Department will have two new faculty members and a new Chair for the 2013-2014 academic year. In addition, one faculty member, who completed his Ph.D. in May 2013, will be making the transition from instructor to tenure track faculty and the new responsibilities associated with this change. Furthermore, academic and clinical assignments for many faculty members within the Department are changing, thus training on the responsibilities of faculty members will continue.</p>
<p>Review of academic program for both the B.S. and M.S. degrees with a focus on the demands of the workforce.</p>	<p>As a result of the Department's CAA site visit report, the faculty will be reviewing both the undergraduate and graduate academic programs. The program will be using the <i>Practice and Curriculum Analysis for the Profession of Speech-Language Pathology</i>, that was co-sponsored by the CAA and CFCC in 2010 and ASHA policy documents. This practice analysis will assist the faculty members in the review of the curriculum and guide the decisions about the scope and level of the academic and clinical education components of the FHSU program and its consistency with the current scope of practice for the profession. In addition, the Departmental faculty members will be participating in an ASHA pilot project beginning Summer 2013 for the <i>Academic Program Self-Assessment: Quality Indicators for Integrating Research and Clinical Practice in Communication Sciences and Disorders (CSD) Programs</i>. The faculty members believe that a continued focus on the integration of research and clinical practice along with a review of the knowledge and skills outlined in the SLP scope of practice will provide the next step of ensuring that the curricula prepares our students to meet the demands of the current and future work environments.</p> <p>This review of the academic program will continue to integrate the student learning outcomes and assessment of these outcomes. Any changes to the current student learning outcomes and/or assessment procedures will be updated in the Affinity Diagrams for the B.S. and M.S. programs.</p>

	<p>Resources: Time continues to be one of the main resources required for several retreat days and subcommittee meetings as well as for individual faculty to review both the graduate and undergraduate programs and develop recommendations. The Department has purchased two copies of <i>Practice and Curriculum Analysis for the Profession of Speech-Language Pathology</i> and has begun a review of the CAA programs. These programs as well as a summary will be placed in the department Blackboard course for faculty members to review.</p> <p>Specific Measurement/Implementation Plan: August to September: orientation of faculty to gathered data related to other graduate programs in speech-language pathology. Assignment of faculty to either the BS or MS curriculum review committee. October: subcommittees will review and develop preliminary suggestions for curriculum November: reports to faculty from subcommittees December to early February: subcommittees will review suggestions and make revisions. February: present revised curriculum to faculty for feedback March to early April: subcommittees will review suggestions and make revisions. Mid-April: final recommendations submitted to Chair. May: faculty will vote using Survey Monkey. Final curricular changes based on faculty input will be presented to faculty during the final meeting of the academic year.</p>
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D. Institutional Quality Results

FY2013 University Initiatives	Department Activities/Results
Align Programs and Services with North Central Kansas Technical College (NCKTC)	This initiative is not part of our Department’s programs or services.
Increase Enrollment	The Department has maintained larger number of graduate students, 39 to 40 total graduate students. The Department had a total of 18 graduate students receive degrees during the 2012-2013 academic year. The undergraduate program has been maintained around 50 undergraduate students with 15 seniors receiving degrees during the current academic year. Since the entry level degree into the profession is the master’s degree, the Department believes that that the current number of undergraduate students is appropriate given the competitive nature of graduate education in speech-language pathology and audiology.
Improve Persistence and Retention	The Department had its third Communication Connection during spring 2013, which is a Departmental picnic focusing on the undergraduate and graduate majors for speech-language pathology. This event has lunch provided and an opportunity for causal interaction among faculty and students. In addition, the National Student Speech-Language-Hearing Association (NSSLHA) members were involved in recruitment and retention activities by writing to newly admitted students welcoming them to the Department and FHSU as well as providing information about our Facebook

	<p>page and other activities. Students also assisted with retention by calling and encouraging students to attend the NSSLHA meetings. During the upcoming year, graduate students will be offering study/tutoring sessions for undergraduate courses offered within the department in the evenings.</p>
Improve Student Learning	<p>The Department has established learning outcomes with accompanying learning activities and assessments for several of its undergraduate courses. This has helped the Department track the level of student learning in the undergraduate courses. The faculty will be reviewing this data in the fall to assist in making revisions in instruction and/or assessment. The Department also hopes that the study/tutoring program (see goal above) will provide extra support for undergraduate students.</p> <p>The graduate program has a well- established set of learning outcomes and assessment procedures. In addition, the faculty members who teach graduate level course work understand the need to provide additional instruction and/or activities to students who have not met a learning outcome.</p>

III. FY2013 STRATEGY AND OPPORTUNITIES FOR IMPROVEMENT

A. Departmental Reflection of Strengths, Needs, Opportunities, and Threats

The Department met on September 10 and 26, 2010 and completed the SWOT analysis. Each faculty member independently completed their own analyses and then the faculty as a group reviewed and synthesized the results.

Current Strengths	Current Needs
Excellent support at all levels including Dept., College, and University	Sometimes our willingness to give students a chance results in "labor intensive" work with a few students
Recognition of excellence by various levels of administration (service award, research award, Pilot award, etc.)	Departmental meetings – perhaps have more that are shorter in duration.
Due to proximity, lines of communication within the department are open among faculty	Limited interaction with other disciplines.
Variety of clinical sites available for students both on campus and within the community.	Problems with the sequencing of some courses (e.g., public schools, language disorders-early childhood); faculty need to review the full curriculum including the scheduling issues between academic and clinical course work. (Faculty identified this as a high priority for the 2011-2012 academic year.) (curriculum)
Dedication of faculty to provide a quality program	Workload continues to be a problem and seems to be increasing.
Larger pool of graduate applicants from more geographically diverse universities	No time for sabbatical due to specialization of faculty.
Variety of sites available for research.	It may be nice to add more social activities such as more lunches together. Lunch at the end of the semester is a start.
At this point in time the clinic does not have a waiting list as an effort goes in to making sure all client needs are met.	No time for grand rounds or research forum.
Compassion for students having difficulty and giving students a "chance" to succeed.	Need time to discuss and share issues related to sharing what is and is not working related to teaching, clinical supervision.
Relevant resources include our well-kept and managed clinical facilities and equipment support a warm friendly environment.	Develop information literacy skills sooner rather than later. Grad orientation tried to address this.
Infusing EBP into clinical and academic courses has become a priority and is beginning to be a reality.	Not enough storage capacity (for hard copy files and equipment)
Continued emphasis on student research and brainstorm ways to include undergraduate research.	Students have lack of experience with cultural diversity, except for some interactions with the accent modification program; need more of an emphasis in academic courses especially as it relates to individuals with disabilities.

	<p>Weaknesses (continued):</p> <p>Lack of research space and time for individual faculty to complete research.</p> <p>Funding for travel is tight.</p> <p>Administration needs to decide if we are a “teaching” or “research” university.</p> <p>Limited time for recruitment although the recruitment committee has been more active this year and the department has participated in a variety of university sponsored activities. (recruitment)</p>
<p>Future Opportunities</p>	<p>Future Threats</p>
<p>Creation of online leveling courses may increase our “virtual presence” as well as provide a possible recruitment tool. (curriculum)</p> <p>Opportunity to do more peer review of teaching.</p> <p>Opportunity for telehealth services.</p> <p>Investigate personnel preparation grants.</p> <p>Reputation of department may provide an opportunity for recruitment of graduate students as well as undergraduate students. (recruitment)</p> <p>Opportunities for recruiting using “career exploration” class, community college, etc. (recruitment)</p> <p>Clinical opportunities within the community, such as Good Samaritan Society of Hays, schools, and using community SLPs for supervision.</p>	<p>Funding for equipment and other activities may be dwindling.(equipment)</p> <p>Too much to do and not enough time – need to keep workloads manageable and need to determine strategies to maintain balance between work and outside world, stress, burnout</p> <p>Attitudes of students; no filtering of personal information</p> <p>Faculty needs – We may possibly be facing another shortage of PhDs in the future given realistic retirement possibilities. Perhaps we need to grow more PhDs? (faculty)</p> <p>Many hospitals are unwilling to take students for externships.</p> <p>Economic problems of state and how it will affect higher education in Kansas</p> <p>Economic problems affecting client abilities to pay for services</p>

B. Opportunities for Improvement

On the basis of the Council of Academic Accreditation site visit, the Strategic Plan (approved 08-17-11) will be updated in the Fall 2013. The recommended updates are provided in **Appendix D.1** and is pending approval by the faculty as a whole. The primary opportunities for improvement for 2013-2014 will focus on the curriculum review for both the undergraduate and graduate programs. It is planned that this review and revision course work will be completed by the 2015-2016 academic year. The faculty will be working on making suggestions for the new curriculum during the 2013-2014 academic year with updating syllabi and completing the required paperwork for changes to the program during the 2014-2015 academic year.

Opportunity for Improvement	Resources Required	Expected Result and Completion Date
Curriculum review for the undergraduate degree	Resource for a system for managing student learning outcomes at the undergraduate level Time for faculty to gather, analyze data; add faculty data retreats to schedule Assign specific faculty to monitor and manage assessment data	<ul style="list-style-type: none"> • 2013-2014: Approval of new curriculum by departmental faculty and assignments for updating/creating syllabi and course management paperwork during 2014-2015 • Finalize learning outcomes (both direct and indirect) and assessment monitoring procedures.
Curriculum review for the graduate degree	Continue training and work with CALIPSO for both academic and clinical learning outcomes. Time for faculty to gather, analyze data; add faculty data retreats to schedule Assign specific faculty to monitor and manage assessment data.	<ul style="list-style-type: none"> • 2013-2014: Approval of new curriculum by departmental faculty and assignments for updating/creating syllabi and course management paperwork for 2014-2015 • Finalize learning outcomes (both direct and indirect) and assessment monitoring procedures.

IV. SUPPORTING MATERIALS

A. Department Degree Program Affinity Diagram(s)

[ATTACH A CURRENT AFFINITY DIAGRAM FOR EACH DEGREE PROGRAM IN THE DEPARTMENT]

B. Department Staffing Plan

[ATTACH DEPARTMENT STAFFING PLAN]

C. Bibliography of Departmental Scholarly Activity

[ATTACH BIBLIOGRAPHY INCLUDING ALL SCHOLARSHIP/CREATIVE ACTIVITY COMPILED UNDER SECTION II COMPLETED BY DEPARTMENTAL FACULTY]

D. Department Program Assessment Results

[ENCLOSE MORE COMPLETE ASSESSMENT RESULTS. THIS DATA MIGHT BE IN SOME OTHER SYNTHESIZED FORMAT THAT CAN BE ATTACHED (SURVEY, TRACKING TEMPLATE, ETC.)]

E. Other Departmental Information

[ENCLOSE ADDITIONAL INFORMATION, ACCREDITATION, AWARDS, ETC]

V. SUPPORTING MATERIALS

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Appendix A.1

Affinity Diagram for the Bachelor of Science Degree

**Department of Communication Disorders
Affinity Diagram for Bachelors of Science in Speech-Language Pathology Program
Proposed 2012-2013**

Characteristics of Speech-Language Pathology B.S. Program	Expected Learning Outcomes	Curriculum	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
<p>An individual who graduates with a B.S. degree in speech-language pathology:</p> <p>Remembers and Understands:</p> <ul style="list-style-type: none"> ◆ basic processes, anatomy and physiology of human communication. ◆ normal developmental sequences for speech and language and how this information is used to make clinical decisions. ◆ basic standardized and nonstandardized assessment procedures for articulation/phonological disorders and language disorders (birth to 5) ◆ basic interventions for articulation/phonological disorders and language disorders (birth to 5) ◆ disorders related to hearing and common screening procedures. <p>Applies</p> <ul style="list-style-type: none"> ◆ normal developmental sequences to make clinical decisions in articulation/phonological disorders and language disorders (birth to 5) 	<p>Goal #1 <i>Completes</i> general education courses in the area of biological and physical sciences, statistics, social/behavioral science, multiculturalism and intensive writing with a C or better.</p> <p>Goal #2 <i>Identifies, describes, and uses</i> basic knowledge of the human communication processes in the area of speech.</p>	<p>General Education Courses Social/Behavioral Science Biological Science Physical Science (select from University chemistry, physics or physical science) Course related to multiculturalism Statistics course Intensive writing course</p> <p>Professional Education Cognates Education or psychology course related to human development TESP 302 Educating Exceptional Students</p> <p>Core Curriculum: Identification-Description of Basic Processes Underlying Human Communication SLP 160 Introduction to Communication Disorders Or SLP 600 Normal and Pathological Communication SLP 303 Speech & Hearing Science SLP 412 Observation / Participation in Clinical Proc. SLP 402 Clinical Phonetics</p>	<p>Goal #1</p> <ul style="list-style-type: none"> ◆ Transcript review for General Education and Professional Education Cognates <p>Goal #2 SLP303</p> <ul style="list-style-type: none"> ◆ Demonstrates ability to define parameters of a sound wave at 80% or higher. (exams and homework) ◆ Demonstrates ability to explain psychoacoustic properties of sound at 880% or higher. (exams and homework) 	<p>Goal #1 Transcript review: B.S. graduates = 15 General Education Biological = 100% Physical = 100% Statistics = 100% Social/Behavioral (Psychology) = 100% Next 2 courses not mandated by ASHA Multiculturalism = 90% Linguistics = 30% Communication Processes Speech-Hearing Science = 100% Anatomy-Physiology = 100% Clinical Phonetics = 100%</p> <p>Goal #2 SLP303</p> <ul style="list-style-type: none"> ◆ Average for class was 88.91% <ul style="list-style-type: none"> ◆ 92% of students met learning outcome with 80% or higher ◆ Average for class was 80.1% <ul style="list-style-type: none"> ◆ 68% of students met learning outcome with 80% or higher 	<p>No curricular changes at this time. During the fall 2013 semester, faculty will:</p> <ul style="list-style-type: none"> ◆ Review undergraduate assessment results. ◆ Revise and/or develop new monitoring procedures. ◆ Identify and implement methods for indirectly assessing student knowledge of learning outcomes.

Characteristics of Speech-Language Pathology B.S. Program	Expected Learning Outcomes	Curriculum	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
<p><i>Applies (continued)</i></p> <ul style="list-style-type: none"> ◆ terminology in speech-language pathology in oral and written contexts. <p><i>Analyzes and Evaluates Information</i></p> <ul style="list-style-type: none"> ◆ in order to make comparisons and contrasts related to etiologies associated with articulation/phonological disorders, language disorders (birth to 5), and hearing disorders. ◆ to differentiate communication differences from disorders. ◆ to select appropriate assessment and intervention approaches for articulation/phonological and language disorders (birth to 5). ◆ to demonstrate basic procedures related to hearing screening. 		<p>SLP 661 Language Development</p> <p><i>Elective Courses: Extend Identification- Description of Basic Processes Underlying Human Communication</i></p> <p>SLP 305 Anatomy and Physiology: Speech and Hearing Mechanism SLP 414 Independent Study in Communication Disorders ENG 680 Introduction to Linguistic Science</p> <p><i>Elective Courses: Applying, Analyzing, and Evaluating Information to Communication Disorders and Differences</i></p> <p>SLP 212 Survey of the Discipline SLP 412 Observation / Participation in Clinical Proc. SLP 615 Introduction to Clinical Procedures SLP 617 Clinical Procedures in Public Schools SLP 626 Clinical Practicum SLP 653/653L Articulation / Phonological Disorders/Lab SLP 658 Audiology SLP 662 Language Disorders: Early Childhood SLP 664 Hearing Loss in Older Adults SLP 665 Communication and Aging</p>	<p>SLP305</p> <ul style="list-style-type: none"> ◆ Demonstrates ability to describe basic processes, anatomy and physiology of speech ◆ Demonstrates ability to identify and describes CNS and PNS structures and functions in relation to speech at 80% or higher. <p>SLP402</p> <ul style="list-style-type: none"> ◆ Demonstrates ability to define basic phonological patterns at 80% or higher. ◆ Demonstrates ability to identify place, manner, and voicing of speech sounds at 80% or higher. (exam) ◆ Demonstrates ability to recognize and describe dialectical differences in native and non-native speakers. (exam) ◆ Demonstrates ability to transcribe speech samples using IPA at 80% or higher. 	<p>SLP 305</p> <ul style="list-style-type: none"> ◆ Average for class was 83% ◆ 77% of students met learning outcome with 80% or higher ◆ No data available this year. <p>SLP402</p> <ul style="list-style-type: none"> ◆ Average for class was 99.3% ◆ 100% of students met learning outcome with 80% or higher ◆ Average for class was 96.4% ◆ 95% of students met learning outcome with 80% or higher ◆ Average for class was 79% ◆ 55% of students met learning outcome with 80% or higher. ◆ Average for class was 85.6% ◆ 85% of students met learning outcome with 80% or higher 	

Characteristics of Speech-Language Pathology B.S. Program	Expected Learning Outcomes	Curriculum	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
	<p>Goal #3 <i>Describes and uses</i> basic knowledge of the human communication processes related to language, <i>differentiates</i> between language and communication and <i>recognizes</i> cultural variables influencing these processes.</p>	<p>SLP 672 Problems in Speech-Language Pathology SLP 681 Diagnostic Procedures in Speech and Language SLP 682 Readings in Speech-Language Pathology</p>	<p>SLP653/653L</p> <ul style="list-style-type: none"> ◆ Demonstrates ability to describe basic processes, anatomy and physiology of speech sound production. ◆ Demonstrates ability to transcribe speech samples using the International Phonetic Alphabet with 80% or higher accuracy. (exam) ◆ Demonstrates ability to complete oral peripheral examination by identifying appropriate structures and functions (Checklist) <p>Goal #3 SLP305</p> <ul style="list-style-type: none"> ◆ Demonstrates ability to identify and describe CNS and PNS structures and functions related to language at 80% or higher. (exams and homework) <p>SLP661</p> <ul style="list-style-type: none"> ◆ Demonstrates ability to describe 5 linguistic rule systems at 80% or higher. (exams) 	<p>SLP653/653L</p> <ul style="list-style-type: none"> ◆ Average for class was 89.6% <ul style="list-style-type: none"> ◆ 87.5% of students met learning outcome with 80% or higher ◆ Average for class was 84.1% <ul style="list-style-type: none"> ◆ 68.75% of students met learning outcome with 80% or higher ◆ Average for class was 97.7% <ul style="list-style-type: none"> ◆ 100% of students met learning outcome with 80% or higher <p>Goal #3 SLP305</p> <ul style="list-style-type: none"> ◆ No data available this year. <p>SLP661</p> <ul style="list-style-type: none"> ◆ Average for class was 85.7% <ul style="list-style-type: none"> ◆ 72% of students met learning outcome with 80% or higher 	

Characteristics of Speech-Language Pathology B.S. Program	Expected Learning Outcomes	Curriculum	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
			<ul style="list-style-type: none"> ◆ Demonstrates ability to differentiate language and communication at 80% or better. (exams) ◆ Demonstrates ability to identify common cultural variables influencing language (exams) SLP662 ◆ Demonstrates appropriate use of the Systematic Analysis of Language Transcripts (SALT) to analyze a normal language sample and identifies developmental level with 80% accuracy or higher. ◆ Interprets standardized and non-standardized test results to diagnose/describe language with 80% accuracy or higher. ◆ Identifies common cultural variables influencing language and communication with 80% accuracy or higher. ◆ Differentiates between language differences versus language disorder with 80% accuracy or higher. 	<ul style="list-style-type: none"> ◆ Average for class was 81.5% <ul style="list-style-type: none"> ◆ 77.8% of students met learning outcome with 80% or higher ◆ Average for class was 98.2% <ul style="list-style-type: none"> ◆ 100% of students met learning outcome with 80% or higher SLP662 ◆ Average for class was 92.88% <ul style="list-style-type: none"> ◆ 100% of students met learning outcome with 80% or higher ◆ Average for class was 89.9% <ul style="list-style-type: none"> ◆ 100% of students met learning outcome with 80% or higher ◆ This was not assessed this year due to lack of time during the semester to cover the topic. ◆ Average for class was 85% <ul style="list-style-type: none"> ◆ 75% of students met learning outcome with 80% or higher 	

Characteristics of Speech-Language Pathology B.S. Program	Expected Learning Outcomes	Curriculum	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
	<p>Goal #4 <i>Identifies, describes, and uses basic knowledge of the human communication processes related to hearing.</i></p>		<p>Goal #4 SLP305</p> <ul style="list-style-type: none"> ◆ Demonstrates ability to identify basic anatomy of the ear and physiology of hearing at 80% or higher <p>SLP658</p> <ul style="list-style-type: none"> ◆ Demonstrates 80% or higher on selected items embedded on examinations throughout semester or on post-test examination of selected items. ◆ Demonstrates 80% or higher on audiology lab projects related to hearing screening. (Bloom's: applying, analyzing, evaluating) 	<p>Goal #4 SLP305</p> <ul style="list-style-type: none"> ◆ Average for class was 86.5% on lab assignments <ul style="list-style-type: none"> ◆ 87.5% of students met learning outcome with 80% or higher ◆ Average for class was 74.6% on exams <ul style="list-style-type: none"> ◆ 30.77% of students met learning outcome with 80% or higher ◆ Average for class was 83.68% on essay <ul style="list-style-type: none"> ◆ 76.9% of students met learning outcome with 80% or higher <p>SLP658</p> <ul style="list-style-type: none"> ◆ Average for class was 86.5% <ul style="list-style-type: none"> ◆ 87.5% of students met learning outcome with 80% or higher ◆ Average for class was 79.5% <ul style="list-style-type: none"> ◆ 50% of students met learning outcome with 80% or higher 	

Characteristics of Speech-Language Pathology B.S. Program	Expected Learning Outcomes	Curriculum	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
	<p>Goal #5 <i>Recognizes and provides examples of developmental milestones of speech and language and uses this information to determine appropriateness for age level.</i></p> <p>Goal #6 <i>Recognizes and describes common etiologies, assessment, and interventions associated with articulation and phonological disorders and begins to differentiate assessment and intervention procedures appropriate for these disorders.</i></p>		<p>Goal #5 SLP653</p> <ul style="list-style-type: none"> ◆ Demonstrates 80% or higher on selected items embedded on exams regarding knowledge of phonological development ◆ Describes typical speech sound acquisition and factors that influence typical development. <p>SLP661</p> <ul style="list-style-type: none"> ◆ Identifies speech-language stages of development with 80% accuracy. <p>Goal #6 SLP653/653L</p> <ul style="list-style-type: none"> ◆ Demonstrates an understanding of the normal aspects of speech sounds (language structure, articulatory phonetics, co-articulation, sensory information, phonology). ◆ Identifies a variety of etiologies related to speech sound disorders with 80% accuracy or better. 	<p>Goal #5 SLP653</p> <ul style="list-style-type: none"> ◆ Average for class was 91.1% ◆ 93.75% of students met learning outcome with 80% or higher ◆ Average for class was 91.1% ◆ 93.75% of students met learning outcome with 80% or higher <p>SLP661</p> <ul style="list-style-type: none"> ◆ Average for class was 89.5% ◆ 89% of students met learning outcome with 80% or higher <p>Goal #6 SLP653/653L</p> <ul style="list-style-type: none"> ◆ Average for class was 87.3% ◆ 93.75% of students met learning outcome with 80% or higher ◆ Average for class was 79.5% ◆ 66.67% of students met learning outcome with 80% or higher 	

Characteristics of Speech-Language Pathology B.S. Program	Expected Learning Outcomes	Curriculum	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
	<p>Goal #7 <i>Use knowledge of disordered and differences in aspects of language and identifies, provides examples and differentiates among assessment and intervention procedures appropriate for language disorders (birth to 5).</i></p>		<ul style="list-style-type: none"> ◆ Compare and contrast standardized and non-standardized articulation and phonological assessment procedures with 80% accuracy or better. ◆ Identifies and explains remediation/intervention strategies and methods for measuring clinical change in articulation vs. phonological disorders with 80% accuracy or better. ◆ Designs treatment plans including appropriate goals and objectives for a variety of speech sound differences/delays /disorders using various treatment approaches with 80% accuracy or higher. <p>Goal #7 SLP662</p> <ul style="list-style-type: none"> ◆ Demonstrates understanding of 80% or higher on selected items regarding varying etiologies of language disorders. ◆ Compares and contrasts standardized versus non-standardized assessments at 80% or higher level. (exam) 	<ul style="list-style-type: none"> ◆ Average for class was 87.5% <ul style="list-style-type: none"> ◆ 87.5% of students met learning outcome with 80% or higher ◆ Average for class was 83.9% <ul style="list-style-type: none"> ◆ 75% of students met learning outcome with 80% or higher ◆ Average for class was 88.8% <ul style="list-style-type: none"> ◆ 81.25% of students met learning outcome with 80% or higher <p>Goal #7 SLP662</p> <ul style="list-style-type: none"> ◆ Average for class was 77% <ul style="list-style-type: none"> ◆ 50% of students met learning outcome with 80% or higher ◆ Average for class was 89.9% <ul style="list-style-type: none"> ◆ 100% of students met learning outcome with 80% or higher 	

Characteristics of Speech-Language Pathology B.S. Program	Expected Learning Outcomes	Curriculum	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
	<p>Goal #8 <i>Identifies and describes</i> aspects of disordered aspects of hearing and <i>uses</i> common screening procedures and <i>makes</i> appropriate referrals.</p>		<ul style="list-style-type: none"> ◆ Composes appropriate goals with 80% or higher accuracy. ◆ Correctly identifies appropriate intervention strategies with 80% or higher accuracy. ◆ Demonstrates 80% or higher ability to differentiate between a language difference and language disorder. <p>Goal #8: SLP658</p> <ul style="list-style-type: none"> ◆ Demonstrates 80% or higher on selected items embedded on examinations throughout semester or on post-test examination of selected items. <ul style="list-style-type: none"> ◆ See specific learning outcomes on curricular map document for content of items and range of levels of assessment on Bloom's Taxonomy ◆ Writes a term paper on an etiology of disorders of hearing with oral presentations during class discussion related to term paper (Bloom's: remembering 	<ul style="list-style-type: none"> ◆ Average for class was 88% <ul style="list-style-type: none"> ◆ 100% of students met learning outcome with 80% or higher ◆ Average for class was 82.23% <ul style="list-style-type: none"> ◆ 62.5% of students met learning outcome with 80% or higher ◆ Average for class was 85% <ul style="list-style-type: none"> ◆ 75% of students met learning outcome with 80% or higher <p>Goal #8 SLP658</p> <ul style="list-style-type: none"> ◆ Average for class was 84.8% on labs and exams <ul style="list-style-type: none"> ◆ 62.5% of students met learning outcome with 80% or higher ◆ Average for class was 86.8% <ul style="list-style-type: none"> ◆ 90% of students met learning outcome with 80% or higher 	

Characteristics of Speech-Language Pathology B.S. Program	Expected Learning Outcomes	Curriculum	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
	<p>Goal #9 <i>Recognizes, defines and appropriately uses terminology in communication sciences and disorders in oral and written language.</i></p> <p>Goal #10 <i>Demonstrates the ability to evaluate and integrates research findings in the areas of selecting appropriate assessment procedures and beginning to justify selection of intervention strategies for the early stages of language disorders.</i></p>		<p>to analyzing)</p> <p>Goal #9</p> <ul style="list-style-type: none"> ◆ Demonstrates 80% or higher on selected vocabulary items embedded on examinations throughout semester or on post-test examination of selected items. <ul style="list-style-type: none"> ◆ See specific vocabulary for each area of speech-language pathology on curricular map ◆ Additional assessments include creating a personal dictionary with vocabulary categorized by area/topic with some comparison-contrast where appropriate and/or creating loop-writer activities using vocabulary and demonstrating activity in class presentation (Bloom’s taxonomy: remembering to evaluating) Develop rubric for assessment <p>Goal #10 SLP662</p> <ul style="list-style-type: none"> ◆ Demonstrates ability to provide an EBP rationale at 80% or higher. 	<p>Goal #9</p> <ul style="list-style-type: none"> ◆ SLP303: Student average was 92.1%. 96% of students had 80% or higher ◆ SLP653: Student average was 87.3%. 93.75% of students had 80% or higher ◆ SLP661: Student average was 83.3%. 67% of students had 80% or higher ◆ SLP662: Student average was 86.4%. 75% of students had 80% or higher ◆ SLP681: Student average was 84.67%. 81.8% of students had 80% or higher <p>Goal #10 SLP662</p> <ul style="list-style-type: none"> ◆ Average for class was 89.7% ◆ 100% of students met learning outcome with 80% or higher 	

Characteristics of Speech-Language Pathology B.S. Program	Expected Learning Outcomes	Curriculum	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
	<p>Goal #11 <i>Demonstrates basic proficiency in written communication skills.</i></p> <p>Program Goal <i>70% of students will be accepted into a graduate program in speech-language pathology.</i></p>		<p>Goal #11 SLP681</p> <ul style="list-style-type: none"> ◆ Writes culminating project: Diagnostic report Develop Rubric for Assessment 	<p>Goal #11 SLP681</p> <p>Diagnostic Report:</p> <ul style="list-style-type: none"> ◆ 11/12 (90.91%) students met 80% criterion on identifying information and statement of problem ◆ 10/12 (83.3%) students met 80 % criterion on above information + evaluation procedures ◆ 12/12 (100%) students met 80% criterion on the above two components + conclusions <p>Program Goal</p> <ul style="list-style-type: none"> ◆ 9/15 (60%) Spring 2012 undergraduate students accepted into a graduate program in SLP 	

Appendix A.2

Affinity Diagram for the Master of Science Degree

**Department of Communication Disorders
Affinity Diagram for Masters of Science in Speech-Language Pathology Program
Updated June 2013**

Characteristics of Speech-Language Pathology M.S. Program	Expected Learning Outcomes for Entry Level Professionals	Curriculum	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
<p>Knowledgeable</p> <ul style="list-style-type: none"> Describes the uniqueness of human communication and the effects of disorders on the personal and social well-being of individuals. Identifies and differentiates various etiologies for communication disorders. Recognizes communication and its disorders for culturally diverse populations across the life span. Recognizes various assessment and intervention approaches appropriate for a variety of communication disorders. <p>Analyzes, Evaluates, and Creates Appropriate Assessment and Intervention Plans</p> <ul style="list-style-type: none"> Compares, contrasts, and critically evaluates human communication and its disorders and relates this information to individuals being served. 	<p>Learning Outcome #1</p> <ul style="list-style-type: none"> Recognizes and explains biological, neurological, acoustic, psychological, developmental, linguistic, and cultural bases of communication, speech, swallowing, language, and hearing processes 	<p>Core courses are required unless a student can demonstrate academic and clinical proficiency within a core course area. This curriculum assumes an undergraduate preparation in speech-language pathology. If not a number of leveling courses could be added to the student's program of study.</p> <p align="center"><u>Academic Core Curriculum</u> <u>(Total Hours 31)</u></p> <p>SLP 810 Topics in Communication Disorders SLP 813 Evaluation and Assessment SLP 817 Research in Health Professions SLP 834 Dysphagia and Ventilator Dependence SLP 835 Augmentative / Alternative Communication SLP 840 Seminar: Speech Sound Disorders SLP 855/855L Fluency Disorders/Lab SLP 856 Voice Disorders SLP 857 Aural Rehabilitation SLP 862 Language Disorders: Kindergarten through Adolescence</p>	<p>Learning Outcomes #1</p> <p>Direct Assessment</p> <ul style="list-style-type: none"> Transcript Review of UG coursework <p>T-MAKS: Knowledge Demonstrates a rating between approaching and standard met in neurological basis of communication</p>	<p>Learning Outcomes #1</p> <p>Data based on 14 M.S. students who graduated Spring 2013</p> <p>Learning Outcome #1 SAMS data for General Education of students who met criteria (standard met rating = 3) Biological = 100% Physical = 100% Statistics = 100% Social/Behavioral (Psychology) = 100% Next 2 courses not mandated by ASHA Multiculturalism = 86% Linguistics = 86% Communication Processes Speech-Hearing Science = 100% Anatomy-Physiology = 100% Clinical Phonetics = 100%</p> <p>T-MAKS Knowledge</p> <ul style="list-style-type: none"> Average rating = 2.54 	<p>Learning Outcomes #1</p> <ul style="list-style-type: none"> No changes at this time <p>T-MAKS Knowledge</p> <ul style="list-style-type: none"> No changes at this time

Characteristics of Speech-Language Pathology M.S. Program	Expected Learning Outcomes for Entry Level Professionals	Curriculum	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
<p>(continued)</p> <ul style="list-style-type: none"> ◆ <i>Interprets and evaluates</i> information in case histories and interviews in order to plan and implement appropriate assessment and interventions ◆ <i>Analyzes and evaluates</i> evidence based on clinical knowledge and skills, research findings and preferences of individuals being served in order to provide appropriate assessments and interventions <p>Independent Professionals</p> <ul style="list-style-type: none"> ◆ <i>Demonstrates the ability to accept and fulfill</i> responsibilities and commitments. ◆ <i>Demonstrates the ability to understand the perspective of others and collaborates</i> with families, individuals, and other professionals. ◆ <i>Recognizes and describes</i> the clinical, teaching, administrative, supervisory, and research roles of speech-language pathologists as independent professionals. ◆ <i>Recognizes</i> the importance of life-long learning and maintaining professional credentials. <p>Ethical</p> <ul style="list-style-type: none"> ◆ <i>Demonstrates</i> personal and 	<p>Learning Outcomes #2</p> <ul style="list-style-type: none"> ◆ <i>Identifies and summarizes</i> risk factors, etiologies and their effects on communication, speech, swallowing, language and hearing 	<p>SLP 889 Neurologic Bases of Communication SLP 890 Aphasia & Dementia SLP 891 Cognitive Disorders: Assessment & Intervention SLP 892 Motor Speech Disorders</p> <p><u>Clinical Curriculum</u> <u>(Total Hours Range from 23 to 27)</u></p> <p>SLP 811 Advanced Practicum: Various Clinics SLP 811 Advanced Practicum: Healthcare SLP 811 Advanced Practicum: Evaluation SLP 816 Clinical Practicum in Audiology SLP 857 Aural Rehab Practicum EAC 879 Practicum in Schools: SLP SLP 811 Advanced Practicum: Healthcare Externship</p> <p><u>Electives</u> <u>(Total Hours Range from 5 to 15)</u></p> <p>SLP 814 Independent Study: Research Development SLP 814: Independent Study: Research Project SLP 836 Pediatric Audiology SLP 882 Seminar: Counseling in Communication Disorders SLP 899 Thesis in Speech-Language Pathology</p>	<p>3-point scale 1 = emerging 2 = approaching 3 = standard met</p> <ul style="list-style-type: none"> ◆ Passes the Comprehensive Examination <p>Indirect Assessment:</p> <ul style="list-style-type: none"> ◆ Spring 2013 Ratings by external supervisors for graduate students Post self-assessment of knowledge and skills <p>Learning Outcome #2 Direct Assessment</p> <ul style="list-style-type: none"> ◆ T-MAKS: Knowledge Demonstrates a rating between approaching and standard met in the 8 areas on 1 learning outcome within each 	<ul style="list-style-type: none"> ◆ Comprehensive Exam (Spring 2013 graduates): 12/14 passed comprehensive exam on first administration 2 students passed comprehensive exam on 2nd administration <p>Indirect Assessment: Average ratings on 5 point scale (1 = strongly disagree, 5 = strongly agree) by healthcare and educational external supervisors of knowledge/skills of graduate students:</p> <ul style="list-style-type: none"> ◆ Basic Physiological Processes = 4.80 ◆ Basic Linguistic Processes = 4.76 ◆ Normal Development of Communication across Life Span = 4.78 <p>Learning Outcome #2</p> <ul style="list-style-type: none"> ◆ T-MAKS: Average rating = 2.9 	<ul style="list-style-type: none"> ◆ Comprehensive Examination: Identify individual items related to the processes underlying swallowing, speech, language and hearing processes <p>Indirect Assessment: Continue to have external supervisors rate knowledge of graduate students</p> <p>Learning Outcomes #2</p> <ul style="list-style-type: none"> ◆ No changes at this time

Characteristics of Speech-Language Pathology M.S. Program	Expected Learning Outcomes for Entry Level Professionals	Curriculum	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
professional ethics.	<p>Learning Outcomes #3</p> <ul style="list-style-type: none"> ◆ Analyzes client information, including basic processes, risk factors, and etiologies then <i>plans, selects,</i> and <i>justifies</i> rational for assessment procedures for a variety of communication disorders across diverse populations across the life span <p>Learning Outcome #4</p> <ul style="list-style-type: none"> ◆ <i>Interprets</i> assessment results, <i>makes</i> recommendation 		<p>area 3-point scale 1 = emerging 2 = approaching 3 = standard met</p> <ul style="list-style-type: none"> ◆ Passes the Comprehensive Examination <p>Learning Outcomes #3 and #4</p> <p>Direct Assessment T-MAKS: Knowledge Demonstrates a rating between approaching and standard met analyzing, planning assessment across 11 disorder areas 3-point scale 1 = emerging 2 = approaching 3 = standard met</p> <ul style="list-style-type: none"> ◆ Passes the Comprehensive Examination 	<ul style="list-style-type: none"> ◆ Comprehensive Exam (Spring 2013 graduates): 12/14 passed comprehensive exam on first administration 2 students passed comprehensive exam on 2nd administration <p>Learning Outcome-Knowledge #3and #4</p> <ul style="list-style-type: none"> ◆ T-MAKS: Average ratings on items related to assessment = 2.53 <ul style="list-style-type: none"> ◆ Comprehensive Exam (Spring 2013 graduates): 12/14 passed comprehensive exam on first administration 2 students passed comprehensive exam on 2nd 	<ul style="list-style-type: none"> ◆ Comprehensive Examination: Identify individual items related risk factors, etiologies and their effect on communication, speech, swallowing, language, and hearing <p>Learning Outcome-Knowledge #3 and #4</p> <ul style="list-style-type: none"> ◆ No change at this time <ul style="list-style-type: none"> ◆ Comprehensive Examination: Identify individual items related to assessment processes

Characteristics of Speech-Language Pathology M.S. Program	Expected Learning Outcomes for Entry Level Professionals	Curriculum	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
	<p>Learning Outcome #5</p> <ul style="list-style-type: none"> Plans, implements and justifies rational for intervention programs for a variety of communication disorders across diverse populations across the life span. 		<p>Indirect Assessment:</p> <ul style="list-style-type: none"> Spring 2013 Ratings by external supervisors for graduate students Post self-assessment of knowledge and skills <p>Learning Outcomes #5-6</p> <p>Direct Assessments</p> <p>T-MAKS: Knowledge</p> <p>Demonstrates a rating between approaching and standard met on 1 to 3 items across 10 disorder areas 3-point scale</p>	<p>administration</p> <p>Indirect Assessment:</p> <p>Average ratings on 5 point scale (1 = strongly disagree, 5 = strongly agree) by healthcare and educational external supervisors of knowledge/skills of graduate students:</p> <ul style="list-style-type: none"> Dysphagia = 3.84 Aphasia-Dementia-Motor Speech Disorders = 4.40 Cognitive Disorders = 4.30 AAC = 4.26 Articulation & Phonological Disorders – 4.44 Fluency Disorders = 4.67 Voice Disorders = 4.12 Language Disorders = 4.12 Hearing Disorders = 4.79 <p>Learning Outcome-Knowledge #5 and 6</p> <ul style="list-style-type: none"> T-MAKS: Average rating on items related to intervention = 2.65 	<p>Indirect Assessment</p> <ul style="list-style-type: none"> Identify assessment and intervention under each of the disorder areas <p>Learning Outcome-Knowledge #4</p> <ul style="list-style-type: none"> No change at this time

Characteristics of Speech-Language Pathology M.S. Program	Expected Learning Outcomes for Entry Level Professionals	Curriculum	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
	<p>Learning Outcome #6</p> <ul style="list-style-type: none"> Evaluates progress and modifies intervention programs for a variety of communication disorders across diverse populations across the life span. 		<p>1 = emerging 2 = approaching 3 = standard met</p> <ul style="list-style-type: none"> T-MAKS: Skills Demonstrates a rating between 4.0 and 5.0 on the Clinical Competency Rating Scale in areas of intervention a/d/e/as rated by supervisors external to the campus program (i.e., externship supervisors) Passes Comprehensive Examination <p>Indirect Assessment:</p> <ul style="list-style-type: none"> Spring 2013 Ratings by external supervisors for graduate students Post self-assessment of knowledge and skills 	<ul style="list-style-type: none"> T-MAKS: 100% of students met this criterion Average rating = 4.69 Comprehensive Exam (Spring 2013 graduates): 12/14 passed comprehensive exam on first administration 2 students passed comprehensive exam on 2nd administration <p>Indirect Assessment: Average ratings on 5 point scale (1 = strongly disagree, 5 = strongly agree) by healthcare and educational external supervisors of knowledge/skills of graduate students:</p> <ul style="list-style-type: none"> Dysphagia = 3.84 Aphasia-Dementia-Motor Speech Disorders = 4.40 Cognitive 	<ul style="list-style-type: none"> No change at this time Comprehensive Examination: Examination: Identify individual items related to assessment processes <p>Indirect Assessment</p> <ul style="list-style-type: none"> Identify assessment and intervention under each of the disorder areas

Characteristics of Speech-Language Pathology M.S. Program	Expected Learning Outcomes for Entry Level Professionals	Curriculum	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
	<p>Learning Outcome #7</p> <ul style="list-style-type: none"> ◆ <i>Critiques</i> the research base and <i>applies</i> this information in problem solving as a clinical investigator and consumer of research literature. 		<p>Learning Outcome #7 Direct Assessments</p> <ul style="list-style-type: none"> ◆ T-MAKS: Knowledge Demonstrates a rating between approaching and standard met on all learning outcomes for the research course 3-point scale 1 = emerging 2 = approaching 3 = standard met learning outcomes in the research course ◆ T-MAKS: Knowledge Completes original research (Rubric-based assessment) ◆ T-MAKS: Knowledge Completes EBP form and rationale for assessment and treatment plans <p>Learning Outcome #8-9 Direct Measure: (rubric-based</p>	<p>Disorders = 4.30</p> <ul style="list-style-type: none"> ◆ AAC = 4.26 ◆ Articulation & Phonological Disorders – 4.44 ◆ Fluency Disorders = 4.67 ◆ Voice Disorders = 4.12 ◆ Language Disorders = 4.12 ◆ Hearing Disorders = 4.79 <p>Learning Outcome-Skills #7</p> <ul style="list-style-type: none"> ◆ T-MAKS: Average rating = 2.75 ◆ T-MAKS: Average rating for original research paper = 2.79 ◆ T-MAKS: Average rating for EBP form and rationale for assessment/ treatment plans = 2.6 <p>Learning Outcome-</p>	

Characteristics of Speech-Language Pathology M.S. Program	Expected Learning Outcomes for Entry Level Professionals	Curriculum	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
	<p>Learning Outcome #8</p> <ul style="list-style-type: none"> ◆ <i>Demonstrates</i> the ability to complete appropriate administrative and clinical responsibilities, including personal and professional ethics. <p>Learning Outcome #9</p> <ul style="list-style-type: none"> ◆ <i>Demonstrates</i> appropriate oral and written communication skills. <p>Program Outcomes: Maintain accreditation standards related to documenting acquisition of knowledge and skills through formative assessment measures as demonstrated by:</p> <ul style="list-style-type: none"> ◆ Demonstrate knowledge acquisition by receiving a rating between 4 and 5 on the knowledge areas rated by external supervisors during educational and medical externships. ◆ Demonstrate skills acquisition by receiving a rating between 4 and 5 on the skills acquisition as rated by external supervisors during educational and medical externships ◆ Demonstrate knowledge and skills acquisition by 		<p>assessment)</p> <ul style="list-style-type: none"> ◆ T-MAKS: Skills Demonstrates a rating between 4.0 and 5.0 on the Clinical Competency Rating Scale on administrative responsibilities for intervention and communicating effectively as rated by external supervisors for the medical externship <p>Program Outcomes</p> <ul style="list-style-type: none"> ◆ External supervisors completed rating of 14 knowledge areas based on student's performance in externship setting (5 point rating scale) ◆ Clinical Competency Rating Scale (CCRS) ratings between 4 and 5 for each externship ◆ First-time pass rate on the PRAXIS national examination in speech-language pathology: -Percentage pass 	<p>Skills #8 and #9</p> <ul style="list-style-type: none"> ◆ Average rating for administrative responsibilities = 4.88 ◆ Average rating for communicates effectively with clients and other professionals = 4.93 <p>Program Outcomes: Average rating of knowledge areas</p> <ul style="list-style-type: none"> ◆ Educational: 4.34 ◆ Medical: 4.57 <p>CCRS average ratings (5-point scale) by external supervisors of total skills of graduate students:</p> <ul style="list-style-type: none"> ◆ Educational: 4.71 ◆ Medical: 4.65 ◆ Percentage pass rate = 100% ◆ Mean score = 	

Characteristics of Speech-Language Pathology M.S. Program	Expected Learning Outcomes for Entry Level Professionals	Curriculum	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
	<p>maintaining a first-time pass rate for each graduating class by passing the national examination (PRAXIS).</p> <ul style="list-style-type: none"> ◆ Annual success rate of placement of graduates in employment 		<p>-Mean score</p> <ul style="list-style-type: none"> ◆ Percentage for each graduating class with professional employment in SLP. 	<p>681.1</p> <ul style="list-style-type: none"> ◆ 93% 1 student is in the process of interviewing for SLP position 	

Appendix A.3

Affinity Diagram for the Herndon Clinic

Characteristics of Geneva Herndon Clinic	Unit Outcomes	Strategies to Achieve Goals	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
<p>Excellence in Service</p>	<p>Goal #2: To provide excellence in service to clients with a range of communication disorders from infants to the elderly and their families.</p> <p>Goal #3: To increase functional communication skills of those served by the clinic, as well as to improve academic outcomes of FHSU students served by the clinic.</p>	<ul style="list-style-type: none"> ◆ Use of nationally certified and state-licensed professionals in the fields of speech-language pathology and audiology. ◆ Use of current technologies and resources within the field of communication disorders. ◆ Careful selection of strategies in various areas of communication disorders to develop the best individualized assessment and intervention possible. 	<ul style="list-style-type: none"> ◆ All faculty members will exceed KDHE and ASHA requirements for continuing education. 	<ul style="list-style-type: none"> ◆ All faculty have completed necessary CEUs for both Kansas licensure and ASHA certification <ul style="list-style-type: none"> • Total number of CEU activities: 24 activities/8 faculty members = average of 3 per person • Range: 1 to 5 per faculty member ◆ Supervisors developed 9 case studies that encompassed a variety of clinical skills (e.g., writing functional goals, progress monitoring, evidence based practice, writing professional goals, etc.) <ul style="list-style-type: none"> --Articulation/phonology --Dysphagia --Early intervention --Dementia --School aged language --Childhood apraxia --Motor speech disorders --Cognitive-communication --Child fluency 	<ul style="list-style-type: none"> ◆ CEU activities reported on Annual Statement of Responsibility updates provided to Chair ◆ Continue to present some case studies but divide these between the fall and spring semester

Characteristics of Geneva Herndon Clinic	Unit Outcomes	Strategies to Achieve Goals	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
Professionalism	<p>Goal #4 To exude professionalism in all matters relating to services performed at the clinic from phone-based intake information to final discharge from services and follow-up.</p>	<ul style="list-style-type: none"> ◆ Provide a protocol of office procedures to effectively handle inquiries, billing, scheduling, and other service related issues. 	<ul style="list-style-type: none"> ◆ Client satisfaction surveys, as well as staff/faculty assessment and feedback of performance regarding clinical services. ◆ Require assessment and treatment plans for all clinical services in speech-language pathology. 	<ul style="list-style-type: none"> ◆ All categories of questions were rated 4 or higher by at least 80% of the clients responding . <ul style="list-style-type: none"> • Lowest item rated was “parking was available and convenient ◆ “Clinical staff were prepared” was rated 4 or higher by 100% of the clients responding (M = 4.94). ◆ All assessment teams prepared assessment plans under supervision of clinical instructors. ◆ All treatment sessions prepared treatment plans under supervision of clinical instructors. 	<ul style="list-style-type: none"> ◆ Continue with survey during the 2013-2014 year. Clinical coordinator will review survey. ◆ Continue to require undergraduate and graduate student clinicians to develop assessment and treatment plans to ensure that they are well prepared for clinical sessions.
Accessibility	<p>Goal #5 To make available any speech-language-hearing service deemed necessary to those in need without regard to cause of communication disorder, ability to pay, physical disability, ethnic/national/racial background, age, or sexual orientation.</p>	<ul style="list-style-type: none"> ◆ Variety of payment options available to accommodate all clients. ◆ Physically accessible facility situated on the ground floor for those with limited mobility. ◆ Non-discriminatory clinical service environment 	<ul style="list-style-type: none"> ◆ Systematic gathering of data regarding client demographics such as age, source of referral, etiology of communication disorder, economic status, and special needs 	<ul style="list-style-type: none"> ◆ Analysis of Client Services reviewed each semester. <ul style="list-style-type: none"> • 273 clients served • Variety of referral sources • Age Range: Birth to adults with the majority being children of school age and adults 	<ul style="list-style-type: none"> ◆ No changes needed at this time.

Characteristics of Geneva Herndon Clinic	Unit Outcomes	Strategies to Achieve Goals	Assessment Approach and Methods	Results	Curricular and/or Pedagogical Changes
<p>Clinical Education</p>	<p>Goal #6 To serve as a practicum site to students within the department for development of clinical skills in speech-language pathology.</p>	<ul style="list-style-type: none"> ◆ Maintain a varied client base with sufficient practicum opportunities for clinical education. ◆ Provide adequate ratio of faculty to student ratio to insure quality of clinical education 	<ul style="list-style-type: none"> ◆ Systematic gathering of data regarding number of clinical hours graduate students receive within each of the major categories: articulation/phonological disorders, language disorders, voice, fluency, swallowing, communication modalities, cognitive, social areas and hearing 	<ul style="list-style-type: none"> ◆ Review of database of graduate hours for current graduates (Spring 2013) showed that the hours obtained by students met 2005 standards. <ul style="list-style-type: none"> • Average number of Hours = 446.58 • Range: 400.36 to 604.61 ◆ Slight increase in fluency and voice; but no change in cognitive-social areas 	<ul style="list-style-type: none"> ◆ Monitor hours; continue to discuss categories with graduate students ◆ Graduate advisors review hours prior to first externship and following externships.

Appendix B.1
Departmental Staffing Plan

**Department of Communication Disorders
Staffing Plan
2013-2014**

Budget Line	Anticipated Department Needs	Faculty Member	Faculty Expertise	Assigned Instructional FTE	Rank/ Current Date	Degree Completed	Track
001	Chair, Speech-Language Academic	Brandel, J.	Language development & Disorders Reading	1.0	Assistant Professor	Ph.D.	Tenure Track 5 th year
002	Audiology, Academic	Britten, C.F.	Audiology, Aural Rehab Research	1.0	Professor	Ph.D.	Tenured
003	Speech-Language Academic	Sechtem, P.	Adult Neurogenics, Dysphagia, Motor Speech Disorders, Voice Disorders Healthcare	1.0	Instructor Will apply for Assistant Professor Fall 2014	Ph.D.	Temporary
004	Speech-Language Clinical	Fisher, C.	Clinical Procedures Child Speech-Language, AAC, Autism; Autism Assessment and Intervention	1.0	Instructor	M.S.	Temporary
005	Speech-Language Academic	Porter, K.	Counseling Clinical Procedures/Schools Evaluation & Assessment Language Dev.	1.0	Instructor	M.S. ABD	Temporary
006	Speech-Language Clinical	Vacant	Holy Family Supervisor/ Preschool-School Age Children	0.5	Instructor	M.S.	Temporary
007	Clinical Coordinator Speech-Language	Staab, M.	Infant-Toddler Coordinator of all clinical assignments Coordinator of Externships Accent Modification	1.0	Program Specialist	M.S.	
008	Speech-Language Academic	Ellis, Carol	Childhood Language Disorders Speech-Hearing Science Language Development	1.0	Assistant Professor	Ph.D.	Tenure Track 2 nd Year
009	Speech-Language Clinical	Jacobs, J.	AAC, Adult Neurogenic, Fluency Disorders Diagnostics, Intro Communication Disorders, Clinical Topics	1.0	Program Specialist	M.S.	

Appendix C.1

Refereed Books, Chapters or Articles

Refereed Books, Chapters, Articles, Presentations

Faculty Member	Publication
Jayne Brandel, Ph.D.	<p>Brandel, J., Spencer, T., & Petersen, D.B. (2012). Response to intervention: Early evidence of a multi-tiered language intervention. Poster presented at the American Speech-Language-Hearing Association Conference, November. <i>2012 ASHA Convention Program Book</i>, 159.</p> <p>Critchfield, V., & Brandel, J. (2012). Opinions of SLPs regarding the purpose of school-based services. Poster presented at the American Speech-Language-Hearing Association Conference, November. <i>2012 ASHA Convention Program Book</i>, 167.</p> <p>Marsaglia, M., & Brandel, J. (2012). Oral narrative production in two conditions: Barrier vs. no barrier. Poster presented at the American Speech-Language-Hearing Association Conference, November. <i>2012 ASHA Convention Program Book</i>, 167.</p> <p>Schoendaler, J., & Brandel, J. (2012). Collaboration in the public schools: A survey. Poster presented at the American Speech-Language-Hearing Association Conference, November. <i>2012 ASHA Convention Program Book</i>, 189.</p>
Fred Britten, Ph.D.	<p>Britten, F., Maguire, J., & O'Rourke, C. (2012) Plenary session: Issues surrounding the challenging student. 2012 Proceedings of the Annual Conference and Global Summit. Available from: http://www.capcsd.org/proceedings/2012/toc2012.html</p> <p>Britten, F., et al (2012, November). <i>Ethical Dilemmas for Professionals and Students</i>. Invited Seminar presented to American Speech-Language-Hearing Association. <i>2012 ASHA Convention Program Book</i>, 80.</p> <p>Burnett, J, Yoder, A, Britten, F, Peak, K, & Tietjen-Smith, T. (2012). Earphone volume of cardiovascular entertainment systems may be harmful to hearing health, <i>Focus on Colleges, Universities, and Schools</i>, 6(1). Available from: www.nationalforum.com.health.</p> <p>Martin, K. & Britten, F. (2012, November). <i>Identification of Supported Conversation for Adults with Aphasia: An SLP Survey</i>. Poster presented at the American Speech-Language-Hearing Association. <i>2012 ASHA Convention Program Book</i>, 193.</p>

Faculty Member	Publication
Amy Finch, Ph.D.	<p data-bbox="492 226 1375 359">Baker, C. & Finch, A., (2012). Autism disorder and oral reading comprehension: A Case Study. Poster presented at the American Speech-Language-Hearing Association Conference, November. <i>2012 ASHA Convention Program Book</i>, 158.</p> <p data-bbox="492 394 1375 495">Dutton, L., Scherz, J., Finch, A., Gosnell, J. (in press). iPads and other tablets as AAC devices: Needs, issues, and research. <i>Proceedings for the ISAAC Research Symposium 2012</i>, Pittsburg, PA.</p> <p data-bbox="492 531 1375 632">Wiegmann, C. & Finch, A. (2012). Increasing communication using pragmatically organized dynamic displays (PODD). <i>2012 ASHA Convention Program Book</i>, 189.</p>
Phillip Sechtem, M.S.	<p data-bbox="492 699 1375 863">Sechtem, P. (2012, November). Communication partner variables that influence supported communication outcomes in aphasia. Poster session presented at the American Speech-Language-Hearing Association (ASHA) National Convention. <i>2012 ASHA Convention Program Book</i>, 174</p>

Appendix C.2

Non-Refereed Articles and Presentations

Non-Refereed Articles and Presentations

Faculty Member	Publication/Presentation with Published Abstract
Jayne Brandel, Ph.D.	<p>Brandel, J., & Loeb, D. (2012). Service delivery in schools: A national survey. <i>ASHA Leader online, January 17, 2012.</i></p> <p>Brandel, J., Spencer, T., & Petersen, D.B. (2012). <i>Response to intervention: Early evidence of a multi-tiered language intervention.</i> Presentation at the Kansas Speech-Language-Hearing Association Conference, Wichita, September.</p> <p>Critchfield, V., & Brandel, J. (2012). <i>Opinions of SLPs regarding the purpose of school-based services.</i> Poster presented at the Kansas Speech-Language-Hearing Association Conference, Wichita, September.</p> <p>Marsaglia, M., & Brandel, J. (2012). <i>Oral narrative production in two conditions: Barrier vs. no barrier.</i> Poster presented at the Kansas Speech-Language-Hearing Association Conference, Wichita, September.</p> <p>Schoendaler, J., & Brandel, J. (2012). <i>Collaboration in the public schools: A survey.</i> Poster presented at the American Speech-Language-Hearing Association Conference, Wichita, September.</p> <p>Wood, J., & Brandel, J. (2012). <i>Education majors and knowledge of speech and language development.</i> Poster presented at the Kansas Speech-Language-Hearing Association Conference, Wichita, September.</p>
Amy Finch, Ph.D.	<p>Jongsma, R. & Finch, A. (2012). <i>iPad App and Traditional Articulation/Phonological Test: Comparison of Results.</i> Poster Presentation at the Kansas Speech-Language-Hearing Association, Wichita, KS, September.</p> <p>Dominguez, O. & Finch, A. (2012). <i>Monolingual and Bilingual Parents' Perception of Strategies for Facilitating Fluency.</i> Poster Presentation at the Kansas Speech-Language-Hearing Association, Wichita, KS, September.</p> <p>Petersen, B. & Finch, A (2012). <i>Effects of Different Modalities to Assess Narrative Retells in Kindergarteners.</i> Poster Presentation at the Kansas Speech-Language-Hearing Association, Wichita, KS, September.</p> <p>Truong, L. & Finch, A. (2012). <i>Feature Matching for iPad AAC Applications.</i> Poster Presentation at the Kansas Speech-Language-Hearing Association, Wichita, KS, September.</p>

Appendix D.1

**Departmental Strategic Plan
Updated and Pending Approval**

FHSU Department of Communication Disorders Strategic Planning Session

Pending Approval

On Friday August 31, 2007, faculty of the Department of Communication Disorders convened to engage in facilitated strategic planning that would accomplish the following three planning stages: Mission and Vision articulation, analysis of strengths and weaknesses/opportunities and threats, and identification of priority goals. Discussion was facilitated by Dr. Brett Zollinger, Director of the Docking Institute of Public Affairs. Faculty continued to work on the goals and objectives and corresponding strategic action steps, responsibilities and timelines and completed this process September 5, 2008.

The Strategic Plan has been updated each year with these updates becoming a part of the Department's Annual Report for the University. During September 10 and 26, 2010, the faculty engaged in a new SWOT analysis and then reviewed the Strategic Plan in relation to that SWOT analysis throughout the FY 2011 year. The revised Strategic Plan for the Department was approved on August 17, 2011. Currently, the Strategic Plan is being revised and will be finalized during the fall 2013 semester.

Mission Statement

The department provides a quality academic and clinical *educational* program in an environment that *embraces diversity and effective performance* with the goal of preparing students to meet current professional standards. These activities will allow the department to serve as the resource for communication disorders throughout western Kansas.

Vision Statement

The Department of Communication Disorders will be recognized as a dynamic regional leader *in communication sciences and disorders*.

To be discussed and reviewed fall 2013

Jayne Brandel, Chair	Marla Staab, M.S.	New Clinical Supervisor
Fred Britten, Ph.D.	Jacque Jacobs, M.S.	
Carol Elli, Ph.D.	Marcy Beougher, M.S.	
Phil Sechtem, Ph.D.	Celina Fisher, M.S.	

Priority Goals	Objectives and Action Steps
<p>Goal 1: Increase number of freshmen, transfer students, and graduate students from other universities</p> <p><i>Update: The recruitment committee met twice during the 2012-13 year to plan social events for undergraduate students (i.e.),. In addition, the department has been able to add 4 Graduate Assistant positions annually to assist in the recruitment and retention of graduate students. Student and faculty recognitions have been posted on the department Facebook page as well as shared with the Kansas state association.</i></p> <p><i>Recommendation: It is recommended that this goal continue with a focus on the recruitment of transfer students and high school seniors utilizing technology (e.g., YouTube videos about the department at FHSU).</i></p>	<p>Objective 1a: Increase Freshmen enrollment by 25% over the next five years</p> <ul style="list-style-type: none"> ➤ Action step 1a1: continue high school visitation by current students <ul style="list-style-type: none"> ○ Responsibilities: new recruitment committee, (to include one graduate student, one undergraduate student, Marla Staab, Anne Bemis, Jacque Jacobs) ○ Timeline: committee meets by October 1 for each academic year with visits beginning in mid October. ➤ Action step 1a2: Participation in the FHSU SRPs with awards for freshman <ul style="list-style-type: none"> ○ Responsibilities: Chair ○ Timeline: AOE awards will be awarded on the basis on the University timeline which is initiated during Spring semester <p>Objective 1cb: increase awareness of student and faculty recognition and accomplishments</p> <ul style="list-style-type: none"> ➤ Action step 1c1: use FHSU university relations to publicize in local newspaper <ul style="list-style-type: none"> ○ Responsibilities: send information to university relations regarding ASHA presentations (Jacque Jacobs is the contact person) ○ Timeline: November 1 each year ➤ Action step 1c2: advertise scholarship winners by short interest story and picture <ul style="list-style-type: none"> ○ Responsibilities: chair will contact university relations ○ Timeline: Ongoing <p>Objective 1d: increasing the number and/or levels of scholarships for students and graduate assistantships</p> <ul style="list-style-type: none"> ➤ Action step 1d: investigate resources from state of Kansas, ASHA, national personnel preparation grant <ul style="list-style-type: none"> ○ Responsibilities: Assigned Faculty ○ Timeline: Ongoing monitoring of scholarships

<p>Goal 2: Increase scholarly activity</p> <p><i>Update: The faculty have continued to increase their use of research publications in coursework as well as within clinic through the use of assignments (e.g., PICO papers in class and clinic) as well as student research projects. Faculty and students have become more active in presenting at the state and national level with 11 presentations at the 2012 state convention and more than 6 at the national convention.</i></p> <p><i>Recommendation: It is recommended that this goal be modified to focus on the collaboration of clinical and doctoral faculty along with students to complete clinical research.</i></p>	<p>Objective 2a: increase knowledge of scholarly activity as demonstrated by reviewing, reading and sharing information from professional journals and web sites.</p> <ul style="list-style-type: none"> ➤ Action step 2a: all faculty members will review the Faculty, Researchers and Ph.D. web site related to curricular activities in the area of teaching /clinical education or scholarly assignments and share their findings with other faculty and /or will read articles in selected professional journals and share the information with other faculty. <p>Responsibilities:</p> <ul style="list-style-type: none"> • Each faculty member will review and share information that supports the teaching/clinical and scholarly assignments and interests with other faculty during group discussions. This will be an ongoing activity. • Timeline: Ongoing <p>Objective 2b: increase scholarly activity throughout the curriculum including both academic and clinical components by increasing faculty member's use of EBP</p> <ul style="list-style-type: none"> ➤ Action step 2b: Evidence based practice will be infused within the clinical seminar for graduate students in the Fall and graduate and seniors in the Spring. <ul style="list-style-type: none"> ○ Responsibilities: The clinical supervisors will select case studies as well as other topics critical to the use of EBP. ○ Time Line: A clinical seminar calendar will be created each year with specific topics. A review of the case study approach during FY2013 will be reviewed during summer 2013. <p>Objective 2c: increase number of referred presentations and publications by faculty. This will be an ongoing activity.</p> <ul style="list-style-type: none"> • Action step 2c: establish teams of faculty and students with mutual research interests and set up time in work schedules to meet to develop ideas for research. <ul style="list-style-type: none"> ○ Responsibilities: The graduate students who are currently enrolled in the research course will meet with faculty and select a graduate faculty member who will become their mentor for the student's research project. Depending on the type of research project selected, master level faculty may be members of this team. ○ Timeline: Students will select graduate faculty members by the 20th day of each semester Fall-Spring FY 2013, Fall-Spring FY2014, Fall-Spring FY2015. <p>Objective 2d: increase opportunities for faculty and graduate students to disseminate research interests and findings.</p> <ul style="list-style-type: none"> • Action step 2d: faculty will work with graduate students in order to develop their papers for the research seminar within the department each semester and then will work on developing submission for poster presentations for the state and/or national speech-language-hearing association conventions. <ul style="list-style-type: none"> ○ Responsibilities: Graduate faculty will work with graduate students on submission. For some topics master level faculty may also be involved in this process. ○ Timeline: Dates for research seminars and submission dates for KSHA and ASHA will be identified each year and this will be ongoing.
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<p>Goal 3: Increase doctoral level faculty and increase some 0.5 FTE positions</p> <p><i>Update: Beginning in the fall of 2013, there will be 4 doctoral level faculty and 1 faculty member who is completing the dissertation. In addition, 3 full-time clinical faculty and 2 part-time clinical faculty will be teaching and supervising.</i></p> <p><i>Recommendation: Currently, the goal for doctoral level faculty is met. Therefore, this portion of the goal should be eliminated. This goal should be modified to focus on increasing one of the part-time clinical supervision positions to full-time and exploring new ways (e.g., telepractice, outside sites, and/or simulation) to provide graduate students clinical practicum experiences prior to externship.</i></p>	<p>Objective 3a: Continue plan for support of faculty working on their Ph.D. in SLP.</p> <ul style="list-style-type: none"> ➤ Action step 3a1: Administrative facilitation to enable implementation <ul style="list-style-type: none"> ○ Responsibilities: Chair and Dean work with upper administration to continue funding for tuition and travel expenses ○ Timeline: Ongoing monitoring of current faculty with continued provision of support for master’s level faculty seeking doctoral degrees ➤ Action step 3a2: Develop recruitment plan which may include campus visits, ASHA recruitment, and recruitment through advertising. <ul style="list-style-type: none"> ○ Responsibilities: Chair and Dean will work with upper administration to develop possible funding opportunities for individuals who are ABD and funding for faculty travel to visit programs to meet with doctoral students ○ Timeline: Ongoing monitoring of current faculty with continued provision of support for master’s level faculty seeking doctoral degrees. ➤ Action step 3a3: Discuss plan to create a “new temporary position” in which Ph.D. candidates could come to campus and teach courses in area of interest, engage in clinical supervision, and work on research for a year or two as a transition into a tenure line position being vacated by faculty retiring. <ul style="list-style-type: none"> ○ Responsibilities: Chair and Dean will work with upper administration to create a temporary position. Once line is created, Chair will contact local university Ph.D. programs in order to determine interest of Ph.D. candidates moving into this temporary position. Possible candidates will be asked to come to campus to make a presentation and interact with faculty prior to offering the temporary position ○ Timeline: Ongoing with temporary position opening one to two years prior to retirement of current faculty. <p>Objective 3b: Brainstorm ideas for increasing the number of clinical faculty.</p>
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Priority Goals	Objectives and Action Steps
<p>Goal 4: Continue to develop and enhance collaborative partnerships</p> <p><i>Update: Students have begun to participate in observations of cleft clinics at the University of Kansas Medical Center in Kansas City, KS as well as laryngectomy support meetings in Wichita, KS. These activities are scheduled to continue and additional opportunities are being evaluated.</i></p> <p><i>Recommendation: Based on progress in this area and student feedback, it is recommended that this goal be discontinued.</i></p>	<p>Objective 4a: Maintain and enhance clinical opportunities for our students</p> <ul style="list-style-type: none"> ➤ Action step 4a: develop and maintain collaborative partnerships related to clinical practicum for our students <ul style="list-style-type: none"> • Responsibilities: Department will develop a list of collaborative clinical relationships available for clinical experience for graduate students • Timeline: Ongoing and updated on an annual basis ➤ Action step 4a2: develop and maintain collaborative partnerships with professionals <ul style="list-style-type: none"> ○ Responsibilities: All faculty will develop and maintain a list of current collaborative partnerships ○ Timeline: Ongoing and monitored on an annual basis

<p>Goal 5: Increasing application of technology in academic and clinical settings</p> <p><i>Update: Videostroboscopy and vital stimulation have become part of both class and clinical experiences for graduate students through the use of tutorial activities in healthcare clinic, assignments in class, and clients.</i></p> <p><i>Recommendation: It is recommended that this goal be discontinued as it has been met.</i></p>	<p>Objective 5a: Continued integration of videostroboscopy and vital stimulation in voice and neurogenic academic and clinical settings</p> <ul style="list-style-type: none"> ➤ Action step 5a1: Develop lecture and lab curriculum to include videostroboscopy and vital stimulation technologies <ul style="list-style-type: none"> ○ Responsibilities: Phil Sechtem will work on developing the curriculum work on integration into clinical setting. ○ Timeline: Ongoing monitoring ➤ Action step 5a2: Provide funding for further training of these technologies for clinical staff <ul style="list-style-type: none"> ○ Responsibilities: Chair to work with clinical faculty in finding appropriate workshops and trainings; Chair to provide funding for travel and expenses ○ Timeline: Ongoing <p>Objective 5b: Integrate technology into academic and clinical settings</p> <ul style="list-style-type: none"> ➤ Action step 5b: Faculty continue to develop and incorporate technology <ul style="list-style-type: none"> ○ Responsibilities: All faculty will keep a list of activities in which technology has been used ○ Timeline: Updated the end of each semester
<p>Goal 6: Curriculum Review</p> <p><i>Update: The undergraduate affinity diagram has been completed and data is now being gathered from the specified courses to document student learning. The graduate affinity diagram has been updated as well. However, the previous program (i.e., SAMS) that was used to document student outcomes has been discontinued and new methods are being evaluated. In regards to syllabi, all courses within the department are presently utilizing a standard format that was adapted from the Virtual College.</i></p>	<p>Objective 6a: Update Affinity Diagram for the Undergraduate Program</p> <p>Add step for review of undergraduate curriculum and 120 hour program</p> <ul style="list-style-type: none"> ➤ Action step 6a1: Develop 10 program learning outcomes <ul style="list-style-type: none"> ● Responsibilities: Department will review the undergraduate program and write 10 program learning outcomes; the 10 program learning outcomes; Chair will be update the Affinity Diagram for the Undergraduate Program reflecting the newly developed learning outcomes ● Timeline: Ongoing review , data collection and analyses throughout FY2013, FY2014, and FY2015 ➤ Action step 6a2: Create two direct measures of assessment for each program learning outcome and implement the assessment measures <ul style="list-style-type: none"> ○ Responsibilities: Department will develop two direct measures of assessment and assign a faculty member(s) to monitor the implementation of the measure(s) (i.e., collection of data and analysis); faculty member(s) responsible will present analysis during the assessment review meeting designated by the department. ○ Timeline: Ongoing review , data collection and analyses throughout FY2013, FY2014, and FY2015 ➤ Action step 6a3: Create at least one indirect measure of assessment for each program learning outcome and implement the assessment measure <ul style="list-style-type: none"> ○ Responsibilities: Department will develop one indirect measure of assessment and assign a faculty member(s) to monitor the implementation of the measure(s) (i.e., collection of data and analysis); faculty member(s) responsible will present analysis during the assessment review meeting designated by the department. ○ Timeline: Ongoing review , data collection and analyses throughout FY2013, FY2014, and FY2015

Recommendation: It is suggested that this goal be modified to address the review of undergraduate and graduate coursework as proposed by the Council on Academic Accreditation for Speech-Language Pathology site review committee during the spring of 2013. The updates to both the Affinity Diagram for the Undergraduate Program and the Affinity Diagram for the Graduate Program will be revised as appropriate for the new curriculum.

Objective 6b: Update Affinity Diagram for the Graduate Program

Add review of graduate curriculum the TMAKS

- **Action step 6b1:** Develop 10 program learning outcomes
 - **Responsibilities:** Department will review the graduate program and write 10 program learning outcomes; the 10 program learning outcomes; Chair will be update the Affinity Diagram for the Graduate Program reflecting the newly developed learning outcomes
 - **Timeline:** Ongoing review , data collection and analyses throughout FY2013, FY2014, and FY2015
- **Action step 6b2:** Create two direct measures of assessment for each program learning outcome and implement the assessment measures
 - **Responsibilities:** Department will develop two direct measures of assessment and assign a faculty member(s) to monitor the implementation of the measure(s) (i.e., collection of data and analysis); faculty member(s) responsible will present analysis during the assessment review meeting designated by the department.
 - **Timeline:** Ongoing review , data collection and analyses throughout FY2013, FY2014, and FY2015
- **Action step 6b3:** Create at least one indirect measure of assessment for each program learning outcome and implement the assessment measure
 - **Responsibilities:** Department will develop at least one direct measure of assessment and assign a faculty member(s) to monitor the implementation of the measure(s) (i.e., collection of data and analysis); faculty member(s) responsible will present analysis during the assessment review meeting designated by the department.
 - **Timeline:** Ongoing review , data collection and analyses throughout FY2013, FY2014, and FY2015

Objective 6c: Develop standard form for syllabi within the department and review and update all syllabi in the undergraduate and graduate program

- **Action step 6c:** Review new syllabi format (CTELT).
 - **Responsibilities:** Review and revise form to fit need of department including learning outcomes for each course which are being monitored on the B.S. and M.S. Affinity Diagram.
 - **Timeline:** Implement use of new syllabi format for FY 2013.

Appendix D.2

**Formative Assessment: Neurogenic Sequence
Comparison 2006-2013**

**Neurological Sequence:
SLP 890 Aphasia-Dementia (1st Semester)
SLP 892 Motor Speech Disorders (2nd Semester)
Medical Externship (4th Semester)**

**SAMS Ratings Neurogenic Sequence-Knowledge and Skills
2006 through 2013**

SLO for Aphasia and Dementia Rating: 1 = Emerging, 2 = Approaching, 3 = Standard Met	Average Rating 2006	Average Rating 2007	Average Rating 2008	Average Rating 2009
1. Identifies risk factors and preventive influences for aphasia and dementia	3.0	2.92	2.06	2.9
2. Describes and differentiates between the classical aphasia syndromes and their associated site of lesion	3.0	2.92	2.83	2.8
3. Describes and differentiates between the cortical, subcortical and mixed dementias	3.0	2.98	2.61	2.8
4. Specifies standardized and nonstandardized measures for assessment of acquired disorders of language and communication	3.0	3.0	3.0	3.0
5. Demonstrates principles and techniques for maximizing communication in individuals with neurogenic communication disorders, including relevant evidence-based practices.	3	2.83	2.06	2.6
6. characteristics of cognitive-communicative disorders	2.63	2.75	2.11	2.8
7. Identifies and selects a variety of standardized and nonstandardized procedures for the assessment of cognitive-communication disorders	2.5	2.58	2.22	2.0
8. Develops appropriate intervention plans for cognitive-communication disorders	2.84	2.84	2.06	2.0

SLO for Aphasia and Dementia Rating: 1 = Emerging, 2 = Approaching, 3 = Standard Met	Average Rating 2010	Average Rating 2011	Average Rating 2012	Average Rating 2013
1. Identifies risk factors and preventive influences for aphasia and dementia	3.0	3.0	3.0	3.0
2. Recognizes and differentiates between the classical aphasia syndromes and their associated site of lesion	2.84	2.15	2.89	3.0
3. Recognizes and differentiates dementia syndromes according to their outward cognitive-linguistic, behavioral and psychosocial manifestations. pathologies (e.g., cortical, subcortical, and mixed dementia)	2.78	2.23	2.89	2.94
4. Specifies standardized and nonstandardized measures for assessment of acquired disorders of language and communication	2.31	2.08	2.0	2.56
5. Demonstrates principles and techniques for maximizing communication in individuals with neurogenic communication disorders, including relevant evidence-based practices.	2.21	2.08	2.0	2.17
6. Identifies and describes the neurological correlates and characteristics of cognitive communication disorders.	2.31	2.5	2.0	2.5
7. Identifies and selects a variety of standardized and nonstandardized procedures for the assessment of cognitive-communication disorders	2.1	2.5	2.0	2.0
8. Develops appropriate intervention plans for cognitive-communication disorders	2.0	2.5	2.0	2.0

*Change in Student Learning Outcomes for 2012-2013 academic year affecting data for 2014 graduates

SLO for Motor Speech Disorders Rating: 1 = Emerging, 2 = Approaching, 3 = Standard Met	Average Rating 2006	Average Rating 2007	Average Rating 2008	Average Rating 2009
1. Differentiates among the motor speech disorders on the basis of etiology, site of lesion, and speech characteristics	3.0	3.0	2.56	2.1
2. Identifies characteristics from the examination of the oral mechanism to help differentiate among the motor speech disorders	3.0	2.75	2.06	2.8
3. Outlines an appropriate assessment for motor speech disorders using a variety of standardized and nonstandardized procedures	3.0	2.92	2.33	2.6
4. Identifies appropriate intervention plans for motor speech disorders	2.88	2.75	2.28	2.0

SLO for Motor Speech Disorders Rating: 1 = Emerging, 2 = Approaching, 3 = Standard Met	Average Rating 2010	Average Rating 2011	Average Rating 2012
1. Differentiates among the motor speech disorders on the basis of etiology, site of lesion, and speech characteristics	2.0	2.62	2.0
2. Identifies characteristics from the examination of the oral mechanism to help differentiate among the motor speech disorders	2.1	2.0	2.8
3. Outlines an appropriate assessment for motor speech disorders using a variety of standardized and nonstandardized procedures	2.37	2.62	2.0
4. Identifies appropriate intervention plans for motor speech disorders	2.1	2.0	2.0

*Change in Student Learning Outcomes affecting the ratings for 2013

SLO for Motor Speech Disorders Rating: 1 = Emerging, 2 = Approaching, 3 = Standard Met	Average Rating 2013	Average Rating 2014	Average Rating 2015	Average Rating 2016
1. Recognizes and differentiates types of motor speech disorders based on the underlying etiologies and sites of lesions	2.89			
2. Recognizes and differentiates types of motor speech disorders based on salient speech patterns and characteristics, and associated confirmatory.	2.83			
3. Plans, organizes, and completes a thorough motor speech examination using standardized and nonstandardized procedures appropriate intervention materials tailored to the diagnosis and level of severity	2.06			
4. Judges, interprets, and differentially diagnoses motor speech disorders based on case by case information, observations, and assessments	2.07			
5. Judges, interprets, and differentially diagnoses motor speech disorders based on case by case information, observations, and assessments	2.93			
6. . Recognizes, differentiates, and describes types of intervention materials and activities as they relate to the various levels of the International Classification of Functioning, Disability and Health (ICF) (World Health Organization, 2001)	3.0			
7. Selects, analyzes, interprets, and summarizes evidence-based practice research literature regarding various types of motor speech intervention	3.0			

SLO for Medical Externship		Average Rating 2006	Average Rating 2007	Average Rating 2008	Average Rating 2009*
Rating Scale: 1 = Not Evident, 2 = Emerging, Developing, 4=Refining, 5 = Independent	3=				
1. Develop setting-appropriate intervention plans with measurable and achievable goals that meet client or patient needs. Collaborate with clients or patients and relevant others in the planning process **					4.7
2. Implement intervention plans (involve clients/patients and relevant others in the intervention process)					4.9
• Explains/instructs with clarity (2005-2008)	4.5	4.58	4.61		
• Gives appropriate feedback (encouragement, reinforcement, consequences) (2005-2008)	4.5	4.83	4.72		
• Elicits adequate number of responses & participation on part of client (2005-2008)	4.75	4.83	4.72		
• Uses behavior management techniques as appropriate	4.75	4.58	4.80		
3. Selects or develops and uses appropriate materials and instrumentation for prevention and treatment	4.88	4.83	4.83		4.7
4. Measure and evaluate client or patient performance and progress					
• Accurately judges and records responses; evaluates client's performance and progress	4.88	4.83	4.78		5.0
•					
5. Modify intervention plans, strategies, materials, or instrumentation as appropriate to meet the needs of clients/patients					
• Follows lesson plans; recognizes and adjusts treatment to performance data	4.88	4.73	4.72		4.8
6. Complete administrative and reporting functions necessary to support intervention**					4.7
7. Identifies the need and refers clients to other professionals as appropriate	4.6	4.6	4.67		4.6

*Student learning outcomes changed slightly from previous years. Only 7 student learning outcomes are rated beginning 2009.

**Student learning outcomes #1 and #6 are new for 2009. Student learning outcomes #2 focuses on the broad area of intervention plans rather than the specific areas that were used from 2005-2008.

SLO for Medical Externship Rating Scale: 1 = Not Evident, 2 = Emerging, Developing, 4=Refining, 5 = Independent	3=	Average Rating 2010	Average Rating 2011	Average Rating 2012	Average Rating 2013
1. Develop setting-appropriate intervention plans with measurable and achievable goals that meet client or patient needs. Collaborate with clients or patients and relevant others in the planning process **		4.63	4.15	4.5	4.1
2. Implement intervention plans (involve clients/patients and relevant others in the intervention process)		4.89	4.3	4.8	4.9
3. Select or develop and use appropriate materials and instrumentation for prevention and treatment		4.89	4.2	4.7	4.8
4. Measure and evaluate client or patient performance and progress		4.6	4.4	4.8	4.8
5. Modify intervention plans, strategies, materials, or instrumentation as appropriate to meet the needs of clients/patients		4.5	4.2	4.7	4.8
6. Complete administrative and reporting functions necessary to support intervention**		4.84	4.2	4.9	4.9
7. Identifies the need and refers clients to other professionals as appropriate		4.68	4.5	4.6	4.8

Appendix D.3

**Average Ratings on the Clinical Competency Rating Scale (CCRS)
Provided by Externship Clinical Supervisors for Students
Completing Externships during Spring 2013**

Spring 2013 Externships School and Healthcare CCRS			
Student	School	Healthcare	Average Skills
Student 1	5.00	4.57	4.79
Student 2	5.00	4.79	4.90
Student 3	5.00	4.64	4.82
Student 4	4.64	4.96	4.80
Student 5	4.70	4.70	4.70
Student 6	3.92	4.76	4.34
Student 7	5.00	4.95	4.98
Student 8	5.00	4.70	4.85
Student 9	4.71	4.263	4.49
Student 10	4.54	4.25	4.40
Student 11	4.80	4.75	4.78
Student 12	5.00	5.00	5.00
Student 13	4.72	5.00	4.86
Student 14	4.60	5.00	4.80

Appendix D.4

Average Ratings of Content Knowledge Provided by Externship Supervisors for Students Completing Externships During FY2013

Department of Communication Disorders
College of Health and Life Sciences
Fort Hays State University

SPRING 2013 Health Care
EVALUATION OF FHSU STUDENTS DURING THEIR EXTERNSHIP

(5) Strongly Agree (4) Agree (3) Neutral (2) Disagree (1) Strongly Disagree (0) Not Applicable

Knowledge of Communication Disorders and Clinical Skills

I felt that my extern student had the knowledge base and ability to apply information relating to the following concepts and/or procedures

	<i>Average</i>	<i>N</i>
A) Basic physiological processes underlying communication	4.85	13
B) Linguistic processes underlying communication	4.83	12
C) Normal development of communication thru the life span	4.75	12
D) Articulation/phonological disorders	4.50	10
E) Language disorders	4.50	12
F) Voice disorders	4.40	10
G) Fluency disorders	5.00	3
H) Neurogenic communication disorders	4.46	13
I) Hearing disorders	5.00	4
J) Dysphagia	4.00	13
K) Cognitive aspects of communication	4.31	13
L) Social aspects of communication	4.60	5
M) Augmentative-Alternative Communication (AAC)	4.30	10
N) Counseling	4.31	13
O) Regulations and/or procedures	4.67	12

Comments

Spring 2013 Health Care

Strengths:

- ~Did well with interaction with patients & families. Interaction with kids great! Knowledge of resources/actually using knowledge learned was good: A lot is hands on & wait & see as "textbook" cases are rare for me.
- ~Hard worker. Is creative in using her skills in cognitive therapy to use material that are interesting and functional to her patients.
- ~(Beginning of experience) Speech and Language Knowledge
- ~I felt my student entered the externship with the knowledge base I would expect in the hospital setting. ~Good rapport with patients. Student does a great job predicting patient's deficits based on their diagnosis. Excellent documentation skills. Good clinical judgement for dysphagia/swallow evaluations. ~Student seemed to have a solid foundation of neurological impairments reports. She had some practical experience before she got here.
- ~Ability to apply classroom knowledge to individual needs of patients.
- ~Student displayed good knowledge of language disorders and AAC as well as knowledge of anatomy & physiology.
- ~Interpersonal skills & documentation.
- ~Really knew anatomy & physiology well! Had a great foundation for treatment of neurological disorders. Came with a lot of great experiences and knowledge of different treatment strategies.
- ~Willingness to try anything. Had good knowledge of disorders/physiology/etc. Communication with patients/caregivers/professionals was appropriate/fluent.

Weaknesses:

~ Videoswallow (These are hard and I think most students are nervous about videos). Part A vs Part B regulation/rules (This is hard for anyone, so understandable). I think the Insurance regs/Medicare/Medicaid regs change a lot but general understanding of differences & where to go to find out and just understanding this exists (which I didn't when I was a student).

~Tends to be too hard on herself. Occasionally looks to others for confirmation that she's doing fine-- I've told her "don't worry--you've got it"

~Dysphagia knowledge

~No specific weaknesses, just continue to work on demonstrating confidence in yourself & your abilities when working with patients & other professionals.

~Knowledge & comfort with swallowing disorders. How to treat cognitive disorders.

~The only suggestion is regarding counseling though this skill primarily comes with experience and time.

~Bedside swallow exam procedures. Treatment approaches for phonological disorders (she had not hear of cycles approach or feature awareness activities). How to address and effectively treat cognitive comm aspects of speech/language disorders.

~Bedside swallow tests/treatment. Behavior modifications with children with autism. Play therapy and targeting specific sounds with toys.

Department of Communication Disorders
 College of Health and Life Sciences
 Fort Hays State University

SPRING 2013 School
 EVALUATION OF FHSU STUDENTS DURING THEIR EXTERNSHIP

(5) Strongly Agree (4) Agree (3) Neutral (2) Disagree (1) Strongly Disagree (0) Not Applicable

Knowledge of Communication Disorders and Clinical Skills

I felt that my extern student had the knowledge base and ability to apply information relating to the following concepts and/or procedures

	Average	N
A) Basic physiological processes underlying communication	4.75	16
B) Linguistic processes underlying communication	4.69	16
C) Normal development of communication thru the life span	4.81	16
D) Articulation/phonological disorders	4.38	16
E) Language disorders	4.75	16
F) Voice disorders	3.83	6
G) Fluency disorders	4.33	12
H) Neurogenic communication disorders	4.33	9
I) Hearing disorders	4.58	12
J) Dysphagia	3.67	3
K) Cognitive aspects of communication	4.29	14
L) Social aspects of communication	4.10	10
M) Augmentative-Alternative Communication (AAC)	4.22	9
N) Counseling	3.88	16
O) Regulations and/or procedures	4.44	16

Comments

Spring 2013 School

Strengths:

Strengths: ~Adapting treatment session to meet child's current need/state of participation/etc.
 ~Asks questions, organized, score and analyze assessments, establish rapport easily and from the beginning, handling other staff, handling conflict, good intuition, picks up on things quickly, good report writing, talks to parents well, accepted criticism well, student centered therapy, made adjustments as needed, planned well focusing on goals.
 ~Student had strengths in the area of language, fluency, hearing, and communication overall. She also came in with lots of AAC knowledge, but unfortunately, we were not able to use it often.
 ~Student has a great overall knowledge base that she is able to use to meet students' needs. She has the knowledge of where to go to find additional information when needed.
 ~Student is eager to learn. She is open to suggestion and tries to implement new strategies. She has good time management skills. She appears to be eager to begin her "new life" as an SLP.
 ~Hard working, punctual, prepared, creative, easily built rapport with students, willing to try new things, accepted suggestions and did her best to incorporate them. She dressed professionally and was mindful of confidential information.
 ~I feel that the student has a strong knowledge base that she will continue to improve as she gains additional experience in the field.
 ~See clinical rating scale--very strong knowledge base/clinical experience.
 ~Excellent communication skills; good rapport with students, staff, & parents; good planning/appropriate for therapy sessions & student's abilities; good time management; dependable, reliable, organized, understands very well the profession of Speech Language Pathologists.
 ~Student interacted well with the students. She was very reliable & always on time. When given the task of planning on her own, she gathered materials that were age appropriate. If she felt that the material was too difficult, she made changes as needed.
 ~Evaluation process, great data keeping, good time management, good understanding of how IEP's & goals work.
 ~This student is such a strong student in all areas. We spend(t) much time talking & her knowledge is exceptional for a new student.
 ~Good, solid knowledge base. Flexible, willing to try new things, therapy skills have continued to grow through the 8 weeks.
 ~She came with a solid foundation to be ready for exposure and development. She was also a natural with interactions, which cannot really be taught.
 ~Student has a good understanding of speech-language disorders and is developing a knowledge of practical intervention strategies which I think is typical for a grad student.
 ~Student had no difficulty understanding the student's different communication disorders and treating appropriately. She gained a lot of experience working with children with social language disorders and limited/no verbal skills. She excelled with providing effective therapy and made significant progress on goals and objectives. She did a wonderful job.

Weaknesses:

- ~Ability to change explanation of communication disabilities to lay terminology depending on target audience.
- ~Needs more confidence when speaking to adults--she has the knowledge!
- ~She learned A LOT about articulation/phonology during her externship, but came in with a small knowledge base. I know it's hard to find artic/phon. clients at the clinic, but I believe she would have benefited from more exposure before her externship.
- ~No glaring weaknesses that we have observed. She is just ready for more opportunities to hone her skills.
- ~Student does not always appear confident in herself and her abilities. She has limited experience with articulation therapy, but is eager to learn. She also needs additional practice/time with discipline strategies.
- ~Lack of confidence, afraid to ask for assistance, organized herself to a point of being disorganized (unnecessarily recreated materials, too many steps/materials to keep track of, etc.)
- ~none noted--challenges that may have existed at the start of the externship were addressed & no longer were present a few weeks into the externship.
- ~The only "weakness" was her being too nice. She grew in this area with some of our "behavior" kids. She became more stern with them as we progressed!
- ~Student needs to remember to develop a relationship with clients first. After she had developed relationships, sessions were more fun and more productive.
- ~Large group "crowd control" is the only issue I observed that she even has a relative weakness.
- ~Little knowledge in the area of other assessment tools (non-standardized).
- ~Would like to see more background in literacy treatment.
- ~None

Appendix D.5

**Client Survey of Services for the Herndon Speech-Language Hearing Clinic
Fall 2012**

Herndon Speech Language Hearing Clinic

**Fort Hays State University
600 Park Street
Hays, KS 67601**

*Client Survey Summary
All Services
FALL 2012*

KEY 5 = Excellent 4 = Good 3 = Average 2 = Fair 1 = Poor NA = Not Applicable

47 Surveys returned 105 Surveys mailed 44.76% Return rate

Question	5	%	4	%	3	%	2	%	1	%	N/A	%
1. Services were provided in a timely manner.	43	91.49%	4	8.51%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
2. The office staff was courteous and helpful.	44	93.62%	3	6.38%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
3. The clinical staff was prepared for my appointment.	44	93.62%	3	6.38%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
4. Procedures were explained and my questions were answered.	40	85.11%	7	14.89%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
5. Parking was available and convenient.	34	72.34%	5	10.64%	3	6.38%	1	2.13%	1	2.13%	3	6.38%
6. The environment was clean and pleasant.	45	95.74%	2	4.26%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
7. The building and treatment areas were accessible.	43	91.49%	4	8.51%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
8. The length of the appointment(s) was appropriate.	44	93.62%	3	6.38%	0	0.00%	0	0.00%	0	0.00%	0	0.00%

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9. The frequency of the appointments was appropriate.	41	87.23%	3	6.38%	0	0.00%	0	0.00%	0	0.00%	3	6.38%
10. If needed, I would seek services from the Herndon Clinic.	46	97.87%	1	2.13%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
11. I would recommend the Herndon Clinic to others.	46	97.87%	1	2.13%	0	0.00%	0	0.00%	0	0.00%	0	0.00%

Appendix D.6

**Analysis of Client Services for the Herndon Speech-Language Hearing Clinic
Fall 2012**

**FHSU - Herndon Speech-Language-Hearing Clinic
Analysis of Client Services - Fall 2012**

Type of Client Service		
<i>Client Service</i>		
Audiology	34	32.4%
Speech/Language-child	28	26.7%
Speech/Language-adult	31	29.5%
Voice	10	9.5%
Swallowing		0.0%
Vitalstim		0.0%
Strobe	2	1.9%
Total	105	100.0%

Economic Status		
<i>Type of Payment</i>		%
Insurance	57	49.1%
Private Pay	8	6.9%
Medicare	3	2.6%
Medicaid	3	2.6%
FHSU Student	4	3.4%
Sliding Scale	6	5.2%
Professional Courtesy	3	2.6%
Scholarship	0	0.0%
Semester Package	14	12.1%
Scottish Rite	18	15.5%
Total	116	100.0%

Referral Source		
<i>Referral Type</i>		%
Physician	43	41.0%
Self	18	17.1%
Parent	18	17.1%
School	9	8.6%
SLP	8	7.6%
Agency	7	6.7%
Other	2	1.9%
Total	105	100.0%

Diagnostic Codes			
Code	Audiology Description		%
388.10	Noise effects on inner ear, unspec		0.0%
388.11	Acoustic trauma to ear		0.0%
388.12	Noise-induced hearing loss	1	0.9%
388.2	Sudden hearing loss, unspec		0.0%
388.40	Abn. auditory perception, unspec		0.0%
388.43	Impairment of aud. discrimination		0.0%
388.45	Acquired auditory processing disorder		0.0%
389.00	Conductive hearing loss, unspecified		0.0%
389.01	Conductive hearing loss, external ear		0.0%
389.02	Conductive hearing loss, tympanic membrane		0.0%
389.03	Conductive hearing loss, middle ear		0.0%
389.04	Conductive hearing loss, inner ear		0.0%
389.05	Conductive hearing loss, unilateral		0.0%
389.06	Conductive hearing loss, bilateral		0.0%
389.08	Conductive hearing loss, combined types		0.0%
389.10	Sensorineural hearing loss, unspec.	3	2.7%
389.11	Sensory hearing loss, bilateral		0.0%
389.12	Neural hearing loss, bilateral		0.0%
389.13	Neural hearing loss, unilateral		0.0%
389.14	Central hearing loss		0.0%
389.15	Sensor. hear. loss, unilateral		0.0%
389.16	Sensor. hear. loss, asymmetrical		0.0%
389.17	Sensory hearing loss, unilateral		0.0%
389.18	Sensor. hear. loss - bilateral		0.0%
389.20	Mixed hearing loss, unspecified	1	0.9%
389.21	Mixed hearing loss, unilateral		0.0%
389.22	Mixed hearing loss, bilateral		0.0%
389.7	Deaf mutism, not elsewhere class.		0.0%
389.8	Other specif. forms of hear. loss deafness	2	1.8%
389.9	Unspecified hearing loss	27	24.1%
V72.11	Hearing exam after failed hearing screening	1	0.9%
V72.12	Hearing exam-conservation and treatment		0.0%
V72.19	Other exam of ears and hearing		0.0%
Code	Speech/Language Description		
307.00	Adult onset fluency disorder		0.0%
315.00	Reading disorder, unspecified	2	1.8%
315.02	Developmental dyslexia	1	0.9%
315.09	Other (specific spelling difficulty)		0.0%
315.31	Expressive language disorder	16	14.3%

Type of Client Service

Type of Visit		
Type		%
Evaluation	51	48.6%
Ongoing	54	51.4%
Total	105	100.0%

Special Needs

Special Needs		
Client's Need		%
Wheelchair	5	23.8%
Walker/Cane	5	23.8%
AAC-Verbal/Written	8	38.1%
Visual-Blind/Reading/Writing	2	9.5%
Auditory - Deaf	1	4.8%
Total	21	100.0%

Age at Appointment

Age at Appointment		
Client's Age		%
Birth to Toddler (0-2.11 yrs old)	13	12.4%
Preschool (3-4.11 yrs old)	8	7.6%
School (5-17.11 yrs old)	33	31.4%
Adult (18+ yrs old)	51	48.6%
Total	105	100.0%

Diagnostic Codes

Code	Speech/Language Description (con't)		
315.32	Mixed receptive-expressive language disorder	13	11.6%
315.34	S/L developmental delay due to hearing loss		0.0%
315.35	Childhood onset fluency disorder (stutter, cluttering)	3	2.7%
315.39	Other-Dev. Artic disorder (phonological dis., dyslalia)	6	5.4%
478.75	Laryngeal Spasm	5	4.5%
784.3	Aphasia	10	8.9%
784.4	Voice and resonance disorders	1	0.9%
784.40	Voice and resonance disorder-unspecified		0.0%
784.41	Aphonia, loss of voice	1	0.9%
784.42	Dysphonia, Hoarseness	3	2.7%
784.43	Hypernasality		0.0%
784.44	Hyponasality		0.0%
784.49	Other voice and resonance disorders (chg in voice)		0.0%
784.51	Dysarthria	2	1.8%
784.59	Other speech disturbance - NOS	5	4.5%
784.60	Symbolic dysfunction, unspecified	1	0.9%
784.61	Alexia and dyslexia	1	0.9%
784.69	Other (apraxia, acalculia, agnosia, agraphia)		0.0%
787.20	Dysphagia, unspecified	1	0.9%
787.21	Dysphagia, oral phase		0.0%
787.22	Dysphagia, oropharyngeal phase		0.0%
787.23	Dysphagia, pharyngeal phase		0.0%
787.24	Dysphagia, pharyngoesophageal phase		0.0%
787.29	Other Dysphagia (cervical, neurogenic)		0.0%
799.51	Cog. Disorders-Attention or concentration deficit		0.0%
799.52	Cog. Disorders-Cognitive communication deficit	5	4.5%
799.53	Cog. Disorders-Visuospatial deficit		0.0%
799.54	Cog. Disorders- Psychomotor deficit		0.0%
799.55	Cog. Disorders-Frontal lobe and exec. func. deficit	1	0.9%
799.59	Cog. Disorders-Other signs/symp. Involving cog.		0.0%
	Total	112	100%

General Parameters

1. No more than 20 pages, excluding appendix information.
2. Report submitted electronically to Dean, Assistant Provost for Quality Management, and Provost.
3. Note deadlines attached below.

Annual Timeline for Department Annual Report

April 1	Final template and Directions distributed to Department Chairs. Selected enrollment data (fall
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	20 th day counts) distributed to Chairs and Deans in the departmental template.
June 1	Student system information (graduates, SCH) delivered to Chairs. Final cutoff date for elements to be considered in the Department's Annual Report.
June 30	Complete Department Annual Report due to Deans, Assistant Provost for Quality Management, and Provost. Submit electronically.
August 15	Completed College Annual Report due to Assistant Provost for Quality Management and Provost.