Wichita State University
College of Health Professions
Department of Communication Sciences and Disorders

Graduate Program Assessment Report
Master of Arts in Communication Sciences and Disorders (Speech-Language Pathology)

September 2010

Overview

The **Guiding Program Document for Communication Sciences and Disorders** represents a shared vision among all members of the Communication Sciences and Disorders (CSD) department. Further, this document serves as a guide for on-going programmatic assessment. The document consists of several components, including the: Organizing Themes; Program Belief Statement; Program topics; Program Goals; Student Outcome; Statements of Commitment to Diversity, Technology, Alignment with Professional/State Standards, and Program Assessment. Relevant portions of the Guiding Program Documents are included with this report.

Mission

The mission of the department is consistent with the mission statements for the University and College of Health Professions. Specifically, it states that:

> *The mission of the Wichita State University Department of Communication Sciences and Disorders is to prepare qualified speech-language pathologists and audiologists as scholars/practitioners who are professionally competent to practice in educational and medical settings on behalf of children and adults who have disorders of communication.*

Department Review/Assessment

The Department of Communication Sciences and Disorders regularly engages in self-study in the areas of curriculum review, student success, and strategic planning. In March, 2009, a site visit was held for the review of two of our graduate programs (MA/SLP and AuD) by the Council on Academic Accreditation of the American Speech-Language-Hearing Association (ASHA). Both programs were successfully reaccredited for a period of 8 years (see attached letter).

Following the reaccreditation site visit, department faculty and staff continued to work to evaluate curriculum offerings, clinical assessments, and continue strategic planning. This work occurred during whole Department retreats held each semester and the ongoing work of Department committees and working groups. An annual review of these accredited programs was submitted to ASHA's Higher Education Database (HES) in August, 2010.

Program Assessment Plan

The Communication Sciences and Disorders (CSD) department is evaluated annually, with a site visit every 8 years, by the Council on Academic Accreditation (CAA) of the American Speech-

Language-Hearing Association (ASHA), and every 6 years by the Kansas Board of Regents (KBOR).

In addition, the CSD department functions within the framework of the University, Graduate School, and College of Health Professions (CHP). This department must provide evidence regularly that it is meeting the various mission, goal, and activity statements at each level of assessment, and demonstrate that relevant data have been collected that address community, faculty, staff, student, curricular, clinical, and practicum issues and procedures. To provide data for each level of mandated review, it is necessary that this Department have a functioning Assessment Plan that allows for data collection on a regular basis rather than when a particular review is required.

These data may be obtained by (1) periodic departmental data collection activities, (2) from the Office of Institutional Research (OIR), and (3) from other entities within the university, college, clinic, and community.

Periodic Departmental Data Collection Activities

On-going data collection activities consist of but are not limited to:

1. A *CSD Survey of Recent MA Graduates*, administered every three years.
2. A *Survey of Employers of CSD Graduates*, administered every three years.
3. A *CSD Survey for Current Graduate Students*, administered every two years to MA students.
4. Maintaining and up-dating annually a list of student enrollments, enrollments by program, and enrollments by level.
5. Participation in the SPTE and other assessment instruments designed to provide student appraisal of teaching and clinical experiences
6. Maintaining and updating annually the vitae of all faculty
7. Maintaining a current set of the minutes of all CSD faculty/clinical educator meetings
8. Maintaining a current set of the syllabi of all courses taught through CSD
9. Maintaining a current set of *Faculty Activity Records* or other annual assessment mechanisms for reporting annual accomplishments
10. Maintaining a well-organized and current set of clinical case histories and reports, and maintaining a correct data base of all clients and clinician hours
11. Maintaining client satisfaction surveys from clients/families served by the Evelyn Hendren Cassat Speech-Language-Hearing Clinic collected each semester.
12. Performance based assessments of graduate students. To accomplish this type of assessment, the following will be conducted:

    a. MA: Graduate student performance (knowledge and skills) across their program will be assessed and reported via the Knowledge and Skills Assessment (KASA) form. These competences are tracked each semester using a web-based assessment package, Student Assessment and Management System (SAMS).

    b. MA: In addition, each MA/SLP student is required to complete a thesis or non-thesis research project. Each project includes the requirement for an oral presentation of the

research findings in an appropriate venue (e.g., GRASP, state or national speech-language-hearing association conference, college-based presentation of student research).

The Office Of Institutional Research (OIR)

Indicators of on-going data collection related to department functioning are provided periodically by the OIR, and include but are not limited to:

1. Program Statistical Data, including enrollments at all levels
2. Measures of cost effectiveness as assessed by cost per credit hour, peer comparisons, etc.
3. Analyses of GU/RU/OOE funding
4. Economic indicators of clinic functioning

Other Indicators of Performance

Some examples of other performance indicators are:

1. Data collection from contracted service agencies regarding level of performance and success of service and practicum experiences provided.
2. Formative assessment measures in various academic and clinical courses as included in Faculty Activity Reports (FARs).

Key Performance Indicators

Key Performance Indicators (in conjunction with the College of Health Professions) will include the following, with a minimum of the first 3 posted for public information. The first four items are included in the annual CAA accreditation reports and are included as part of ASHA's Higher Education Database.

- National examination (Praxis) pass rate (first time pass)
- Program completion rate
- Employment rates
- Diversity (Gender, Age, Ethnicity, Disability, and undergraduate degree background)
- External and Internal funding (grants submitted/awarded, contracts, donations)
- Student credit hours
- Student and Faculty Publications and presentations
- Faculty Continuing Education
- Specialized practicum experiences for students (i.e. externships)

Annual Self-Study

The department's Program Review Report is submitted to the Dean of the College of Health Professions and the Council on Academic Accreditation of the American Speech-Language-Hearing Association. It includes but is not limited to:

- Compliance with Accreditation Standards
- The statement of how the program relates to the mission and goals of the university and college
- The statement of the quality of the program as assessed by the qualifications, accomplishments, and academic strengths of the faculty and clinical educators
- The statement of the effectiveness of the curriculum and its impact on students
- Praxis Examination Results
- Graduation/Program Completion Rates
- The statement of employment opportunities, needs, and demands, and attempts by the department to prepare students
- The statement of the service that the program provides to its constituents
- The statement of goal-accomplishment and of goals for the next cycle
- Information concerning the graduate curriculum and any changes that have occurred
- The program assessment process and outcomes

Assessment Plan Results

The Assessment Plan results provide data and impetus for:

1. Assessing annual department/clinic goal statements
2. Measuring and evaluating previous goal accomplishments(?)
3. Adapting the curriculum and individual course content to meet student/discipline/ employment needs
4. Adapting clinic foci to meet community/client/student needs
5. Assisting in periodic review by accrediting agencies
6. Addressing possible concerns or "triggers" by the various review agencies
7. Providing outcomes which then will be re-assessed after appropriate measures have been taken.

Assessment Matrix

Evaluation Area/Methods	Minimum Frequency						Responsibility
	Each Course / Semester	Annually	Every 2-3 Years	After Graduation	Every 5-8 Years	Ongoing	
Students and/or Faculty							
Undergraduate student survey			X				Student Affairs Committee
MA and AuD student surveys			X				Student Affairs Committee
Doctoral student survey			X				Doctoral Committee
SAMS (student competency evaluation)	X						Faculty
Course evaluations	X						Faculty
National certification exam scores				X			Administrative Assistant
Number of student projects presented		X					Faculty to Administrative Assistant
Program							
Student/faculty attrition		X					Administrative Assistant

Employer survey			X				Administrative Assistant
Curriculum/alumni survey			X				Administrative Assistant
Clinical client satisfaction surveys	X						Clinic Director
Number of faculty presentations/ publications		X					FARS to Chair
Number of research grants submitted/ funded		X					FARS to Chair
Number of graduates		X					Administrative Assistant
Curriculum requirements						X	Academic Affairs Committee to Faculty
Internal program review (Graduate School / KBOR)					X		Faculty/Chair
Accreditation review					X	X	Faculty/Chair

Feedback Loop

Student survey data was collected at the end of the Fall, 2009 semester. Data obtained from these surveys was evaluated by the members of the CSD Executive Committee (which serves as the Ad Hoc Assessment Committee), and recommendations for follow-up from these surveys will be directed to appropriate Department Committees for review and implementation.

Program Actions 2009-2010 Academic Year

1. This past year, enrollment in the MA program increased by 33% over the 2006-2007 academic year, and has increased by 27%, 10%, 20%, and 8% for each successive, intervening year. For the 2011 admissions cycle, students will have two options for seeking admission to the MA program: traditionally through the WSU Graduate School admission process and now through the Centralized Application Service on-line (a program used by PA and PT for admission). We continue to have far more applicants to our program than we have seats to fill; most applicants are highly qualified.
2. To accommodate student requests for more opportunities to develop problem-solving skills in clinical settings, a series of problem-based learning experiences were provided during the weekly Colloquium meetings shared by MA and AuD students. These included case studies presented by faculty and diagnostic role-playing scenarios in which faculty simulated patients or family members for the students to work with in team experiences.
3. Continued development of opportunities for interdisciplinary collaboration within the College of Health Professions and within the University:
    a. In Fall 2009, students in CSD and the Physician Assistant (PA) program began participating in a joint Research Methods course. In Fall 2010, students from Nursing joined this course. Discussions are on-going to develop a joint basic neuroscience course for students in CSD and Physical Therapy (PT).

   b. During the 2009-2010 academic year, students and faculty participated again in the CLARION project with students from nursing, PA and the KUMed-W. The team from WSU won third place in this national competition. Students may now enroll in a for-credit course to participate in this collaborative project.
   c. Students have worked with nursing and dental hygiene faculty on research projects. In addition, students from Psychology and Dental Hygiene have participated in activities in our Clinic where they interact with CSD students and clients.
4. Revisions were made in the assessment of thesis/non-thesis research projects. Students are now expected to present their work in a public venue where faculty will provide a structured assessment and feedback. For the 2010-2011 year, we are planning to make this venue available to professionals in the community as well.
5. More students are completing practicum experiences at new sites added in the Wichita area as well as out-of-state. The two required classes for the last semester in the MA program are offered totally on-line so that students will have more options for remote clinical placements for their educational and medical practicum experiences.
6. The audience response system (clickers), purchased with funds allocated from the Academic Affairs for assessment purposes, is used routinely to gather information from student groups regarding formative assessment. Students regularly use the clicker systems in two graduate classes in the MA program (Autism Spectrum Disorders and Motor Speech Disorders). Additionally, the Clicker system is used in Colloquium to gather program feedback and complete required training on HIPPA and other universally applicable topics (e.g., FERPA).
7. Members of the Executive Committee, who work as the assessment team for CSD, have reviewed the assessment matrix and suggested modifications. Attached is a proposed assessment matrix, submitted for consideration and approval by the Graduate School (see attached).

Student Performance Outcomes for Speech-Language Pathology (MA)

Students in the programs are evaluated for their performance on targeted learning outcomes consistent with the accreditation standards of the Council on Academic Accreditation (CAA) of the American Speech-Language-Hearing Association (ASHA). Every student completing the MA program has been verified as having met the competencies through their coursework and practica. Faculty and clinical educators are responsible for verifying that students have met the competencies aligned with each course and clinical experience. The summary form for each student is verification that the competencies have been met. Student's performance is monitored through both formative and summative assessments, and documented throughout the program. Each student's record is maintained electronically in the student's confidential file in the department. The summary form is verification of completion of the program and is the official documentation necessary for obtaining national certification and state licensure.

Graduation rates of 90% over the past three years (see below) are further verification of student learning outcomes. Only those students meeting all of the knowledge and skills defined in the KASA are determined to be eligible for graduation. Further verification of students' learning and clinical performance is validated by performance on the national PRAXIS. Of the 52 students

completing the program over the past three years, 49 have passed the exam prior to completing the MA degree (see below). This exam is one of the criteria established for obtaining licensure at the national level (Certificate of Clinical Competence) from the ASHA. These three factors, performance on the KASA, the PRAXIS, and graduation are a triangulation of indicators of student learning outcomes. The WSU program in CSD exceeds the national performance average (80%) in each of these areas.

National Examination (Praxis) Performance (Re = Residential program at WSU); data reported through August, 2010. Performance exceeds national average.

Program Data (SLP)

Period	# of students taking exam			# of students failed exam			Pass rate (%)		
	Re	DE	S	Re	DE	S	Re	DE	S
Current year	20			1			95.00		
Prior year	23			3			86.96		
3 year average							89.76		

Program Completion Rates (as of August, 2009). Rates exceed national average

The expected completion time is based on the program's standards for length of time to degree. The current year's completion rate is calculated as the number of students who graduate this year divided by the number who began the program at the point in the past specified by the program's expectation for completion time (e.g., 4 academic semesters ago). Previous years are calculated in the same manner.

SLP

Period	# of completed program within expected time frame			# completed later than expected time frame			Number not completing			Completion rate (%)
	Re	DE	S	Re	DE	S	Re	DE	S	
Current year	19				0			0		100
Prior year	28				0			2		93.33
3 year average										95.92

Representative Student Accomplishments:

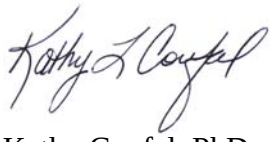
1. One of our August, 2010 MA graduates (Carol Hassebroek) is currently serving as the President of the National Student Speech-Language-Hearing Association.
2. Three of our students (Elizabeth Vogt, Stacey Christopherson, and Rachel McGlashen) participated through the second round of the WSU Student Business Plan Competition.
3. Several students presented (with their faculty members) at the Kansas Speech-Language-Hearing Association annual convention, the American Speech-Language-Hearing Association national convention, and the WSU GRASP competition again this year. One student (Ashley Braeuer) received a fourth place award at GRASP.

Overall Conclusions

The program is on track with regard to program rigor, student performance outcomes, number of faculty and clinical educators, and curriculum review and revisions. There is continued emphasis on securing external funding to support faculty development and graduate student education. Regular program assessment is ongoing in compliance with the multiple requirements of various reporting areas.

Submitted by:

Julie Scherz, PhD
Graduate Coordinator



Kathy Coufal, PhD
Department Chair

Attachments: CAA Accreditation letter
Proposed assessment matrix beginning 2011

COUNCIL ON ACADEMIC ACCREDITATION
AUDIOLOGY | SPEECH-LANGUAGE PATHOLOGY

CERTIFIED RETURN RECEIPT

August 28, 2009

Kathy L. Coufal, PhD
Wichita State University
College of Health Professions
Dept. of Communication Disorders & Science
1845 N Fairmount
Wichita, KS 67260-0075

CAA File #118 – Master's program in speech-language pathology

Dear Dr. Coufal,

I am pleased to inform you that during its meeting on July 29 – August 1, 2009 the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) voted to re-accredit the graduate education program in **speech-language pathology** at Wichita State University for a period of **8** years beginning **June 1, 2009** through **May 31, 2017**.

The issues provided in the attached **Accreditation Action Report** should be addressed in the program's next annual report. Your first annual report will be submitted using the on-line report format via the Higher Education System and according to the revised Annual Report submission date on **August 1, 2010.** Approximately three months prior to the due date of your reports, you will be sent a reminder that the program's next report to the CAA is due for submission.

Notification of Program Changes:
In accordance with Standard 1.5 and 1.7, notification of any change to the program director must be provided in writing to the CAA within 30 days of the change. This notification should include reporting temporary or interim replacements resulting from searches for a new program director and sabbatical leave. Notice of a change should also include a vita for the new/interim director and the program's plan for implementation of the change.

Congratulations to you, the faculty and staff in the program, as well as the administration, on this national distinction.

Sincerely,

Judith L. Page

Judith L. Page, PhD, Chair
Council on Academic Accreditation in Audiology and Speech-Language Pathology

cc: Gary Miller, Provost and Vice President for Academic Affairs & Research
Susan Flesher, ASHA National Office
CAA Members

Council on Academic Accreditation in Audiology and Speech-Language Pathology

ACCREDITATION ACTION REPORT

The Council on Academic Accreditation in Audiology and Speech-Language Pathology took the following accreditation action at its July 2009 meeting regarding the following program:

Name of Program: Wichita State University

File #: 118

Professional Area:

Audiology	☐
Speech-Language Pathology	☒

Residential Program	☒
Distance Education	☐
Satellite Campus	☐
Contractual Arrangement	☐

Degree Designator: MA

Current Accreditation Cycle: 6/1/01-5/31/09

Action Taken: Accredit for a period of 8 years

Effective Date: July 30, 2009

Accreditation Cycle: 6/1/09 – 5/31/17

Next Review: Annual Report

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

- COMPLIANCE EXPECTATIONS
- PUBLIC DISCLOSURE OF ACCREDITATION STATUS

In its comprehensive review, the CAA found the program to be in compliance with all accreditation standards except those noted below.

AREAS OF NON-COMPLIANCE

The program was determined not to be in compliance with the following standards for accreditation. Non-compliance means that the program does not have in place the essential elements necessary to meet the standard. The program should report its progress made toward addressing these concerns in the Prior Concerns section of the next Annual Report or according to the time line specified below. The CAA will indicate in its review of that report whether the program has adequately addressed these areas.

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

AREAS OF PARTIAL COMPLIANCE

The program is in partial compliance with the following standards. Partial compliance means that the program has in place some, but not all, of the essential elements necessary to meet all aspects of the standard. The program should report its progress made toward addressing these concerns in the Prior Concerns section of the next Annual Report or according to the time line specified below. The CAA will indicate in its review of that report whether the program has adequately addressed these areas.

- **There are no areas of partial-compliance with accreditation standards.**

STRENGTHS/COMMENDATIONS

The CAA identified the following strengths and commends the program in these areas:

- **The mission of the CAA is to "promote excellence in graduate education in the discipline of communication sciences and disorders for the professions of audiology and speech-language pathology through a peer review process of establishing and promulgating accreditation standards that encourage continuous quality improvement". Results of the 2009 CAA re-accreditation review of the Department of Communication Sciences and Disorders at Wichita State University *is an example of continuous quality.***
- **Dr. Kathy Coufal's effective leadership skills have been reported as a strength of the program. This program appears to have taken opportunities for growth and future development by the horns and broken into a full sprint. It is apparent that this program is poised to meet its future needs head on. Students, faculty, consumers and other members of this constituency appear to be pleased with the outcome of the department's efforts. Congratulations on this achievement.**

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

PERFORMANCE WITH RESPECT TO STUDENT ACHIEVEMENT

Comments/Observations:

The CAA found the program to meet or exceed the established expectations for student achievement (as described in accreditation standard 5.0-Assessment) in the following areas:

- ☒ *Program Completion Rates*
- ☒ *Employment Rates*
- ☒ *Praxis Examination Rates*

NOTICE TO PROGRAM

CAA's recognition by the United States Department of Education (ED) requires that, if an accrediting agency's review of a program under any standard indicates that the program is not in compliance with that standard, the agency must require the program to take appropriate action to bring itself into compliance with the agency's standards within a time period that must not exceed two years. [34 CFR 602.20(a)(2)(iii)] If, after review of a reaccreditation application or an Annual Report, the program remains out of compliance with any standard and sufficient progress toward compliance has not been demonstrated, CAA may act to place the program on probation in accordance with the policy and procedures outlined in the Accreditation Manual on the CAA Web site. If the program does not bring itself into compliance within the specified period, the accrediting agency must take immediate adverse action. If the program continues to remain out of compliance with any standard at the end of the specified period, CAA will withdraw accreditation, unless the CAA judges the program to be making a good faith effort to come into compliance with the evaluative criteria. In such case the CAA may, for good cause, extend the period for achieving compliance and may determine to continue the accreditation cycle and to monitor the program's progress. CAA defines a "good faith effort" as 1) an appropriate plan for achieving compliance within a reasonable time frame, 2) a detailed timeline for completion of the plan, 3) evidence that the plan has been implemented according to the established timeline, and 4) reasonable assurance that the program can and will achieve compliance as stated in the plan.

PUBLIC DISCLOSURE OF THIS DECISION AND ACCREDITATION STATUS BY THE PROGRAM AND INSTITUTION

The US Department of Education recognition requires all recognized accrediting agencies to provide for the public correction of incorrect or misleading information an accredited or preaccredited institution or program releases about accreditation or preaccreditation status, contents of reports of on-site reviews, and accrediting or preaccrediting actions with respect to the institution or program. [34 CFR 602.23(d) and 602.23(e)] The institution and program must make accurate public disclosure of the accreditation or preaccreditation status awarded to the program. If the institution or program chooses to disclose any additional information within the scope of the ED rule, such disclosure also must be accurate. Any public disclosure of information within the scope of the rule must include the accrediting agency's name, address, and telephone number as described in the Accreditation Manual located on the CAA Web site. If an institution or program misrepresents or distorts any action by the CAA with respect to any aspect of the accreditation process, its accreditation status, the contents of the site visit report, or final CAA accreditation actions or decisions, the CAA will notify the chief executive officer of the institution and the program director, informing them that corrective action must be taken. If corrective action is not taken, the CAA will release a public statement that provides correct information and may invoke other sanctions as may be appropriate. If the Accreditation unit discovers that an institution or program has released incorrect or misleading information within the scope of the ED rule, then it, acting on behalf of CAA, will make public correction, and it reserves the right to disclose this Accreditation Action Report in its entirety for that purpose.

CSD Assessment Matrix

Indicator	**Target** **(Based on CSD Strategic Plan, 2008)**	**Measures and Sources-data collected annually**	**Responsible party**	**Data due to report writer**	**When Obtained/ compiled**	**When due/Where Reported**	**When Presented to Department**
National Exam Scores	At or above national average	Praxis (1st time taken)	Grad coordinator	June 1	Ongoing from Aug to July	• ASHA- July 1 • KPI/CHP-July 1 • Grad Assmnt rpt.- Oct. 1	Spring and Fall Dept. meetings
Graduation rates- MA/AuD	95%	Percentage within one year of cohort graduation date- MA/ AuD	Grad coordinators	June 1	Ongoing from Aug to July	• ASHA- July 1 • KPI/CHP -July 1 • Grad Assmnt rpt.- Oct. 1	Spring and Fall Dept. meetings
Student progress toward degree/ credentialing	100%	• SAMS	Academic Affairs Comm & Clinic Director	June 1	Ongoing from August to July	ASHA – July 1	Spring and Fall Dept. meetings
		• Plan of Study	Graduate Coordinators	May 15			
Graduation rates- PhD	95%	Percentage within six years of admission/ PhD	Grad coordinators	Aug 15	Ongoing from Aug to July	Grad Assmnt rpt.- Oct. 1, (KBOR rpt.in Nov)	Spring and Fall Dept. meetings
Graduation rates- BA	95%	Percentage within six years of admission/ BA	UG coordinator	Aug 15	Ongoing from Aug to July	UG Assmnt rpt.- Sept. 1	Spring and Fall Dept. meetings
Faculty/Student Scholarship- refereed publications and presentations, theses and dissertations	Increase pubs by 20% and presentations by 50%; increase # of theses	Strategic plan goals- 5.1, 5.4, 5.5	Academic Affairs	Jan 30	Ongoing from Jan to Dec	• KPI/CHP – July 1 • Strategic plan- March 1	Spring and Fall Dept. meetings
		# of student presentations	Academic Affairs	Jan 30			

Last updated: 03/09/2010

CSD Assessment Matrix

Diversity/ Globalization- students, faculty, staff	Increase 3% each year for 3 years across all grad programs	Strategic plan goal- 3.1: students, faculty, and staff, program application (optional data)	Admissions	Jan 30 + May 15	Ongoing from August to July	• KPI/CHP – July 1 • Grad School report – Oct 1 • Strategic plan- March 1	Spring and fall Dept meetings
			Administrative Assistant	Jan 30 + May 15			
			Clinic Director	Jan 30 + May 15			
		Strategic Plan 7.1	?	Jan 30 + May 15			
		FAR	TPFR	Jan 30		• Strategic plan- March 1	
External funding- grants and contracts, outright giving, faculty/staff giving	Increase by 50%	ORA	Chair	Jan 30 + May 15	Ongoing January to December	• KPI/CHP – July 1 • Strategic plan- March 1	Spring Dept meeting
		Foundation	Chair	Jan 30 + May 15			
		Strategic plan goals- 5.2a, 5.3	Academic Affairs	Jan 30		• Strategic plan- March 1	
Internal grant funding	Increase by 50%	ORA	Chair	Jan 30	Ongoing January to December	Strategic plan- March 1	Spring Dept meeting
		Foundation	Chair	Jan 30			
		Strategic plan goals 5.2b	Academic Affairs	Jan 30			
Engagement- Dept., college, university, community *This needs to be fleshed out --- what are we actually measuring?*	*100%??*	FAR	TPFR	Jan 30	Ongoing January to December	• Strategic plan- March 1	Spring and fall Dept meetings
		# of clinical agencies	Clinic director	June 1		• KPI/CHP – July 1 • ASHA – July 1 • Grad School report – Oct 1	
		WSUSSHLA activities	WSUSSHLA advisors	June 1			
		Faculty, staff and student awards	FSS committee; Doctoral committee	June 1			
		Leadership activities	FSS committee; Chair	June 1			
		CHP engagement survey	Chair	June 1			

Last updated: 03/09/2010

CSD Assessment Matrix

		Strategic plan goals- 1.1, 1.2, 2.7, 6.1, 6.2, 6.7	FSS committee	June 1			
Scholarship funding- rates, value of endowments	Annual increases	# of students receiving scholarship/ fellowships	Chair	June1	Onging August to July	KPI/CHP report – July 1	fall Dept meetings
		# of new scholarship/ fellowships	Chair	June1			
		endowment values	Chair	June1			
		Set calendar dates for scholarship applications	CSD F/S/S Comm	June 1			
Student satisfaction scores	Rating scale (Muma): 4.5 or better	Dept. (UG, Gr, PhD)	UG, Grad, Doc. Coordinators	June 1	Ongoing from August to July	• ASHA – July 1 • Grad School report – Oct 1 • KPI/CHP report – July 1	Spring meetings
		College (UG?)	Chair	June 1			
		Grad school student surveys (MA, AuD)	Grad Coordinators	June 1			
Student credit hours	Stable or annual increase	# student credit hours	Chair	June 1	Ongoing from August to July	KPI/CHP report – July 1	Spring and fall Dept meetings
Student/ faculty ratios	Stable	ASHA formula Student/faculty attrition	Chair	June 1	Ongoing from August to July	• ASHA report – July 1 • KPI/CHP report – July 1	Spring Dept meetings
Qualified college personnel	Stable	Administrative evaluations Student course evaluations	Chair	June 1	Ongoing from August to July	• ASHA report – July 1 • KPI/CHP report – July 1	Spring Dept meetings
		FAR	TPFR	Jan 30			
Pre-professional students	Stable or annual increase	# of pre-majors	UG Coordinator and Chair	June 1	Ongoing from August to July	KPI/CHP report – July 1	Spring and fall Dept meetings

Last updated: 03/09/2010

CSD Assessment Matrix

Ongoing and systematic formative and summative assessment of program	Documented review 4.0 + on 5.0 scale	Curriculum/syllabus review (Strategic plan 2.3, 2.4	Academic Affairs	Jan 30 + June 1	Ongoing August to July	• ASHA Report – July 1 • Grad School report • KBOR report • Strategic plan- March 1	Spring Dept meetings
		Alumni survey	Chair	Jan 30 + June 1			
		Clinic/client surveys	Clinic Director	Jan 30 + June 1			