The mission of Texas A&M University-Kingsville is to develop well-rounded leaders and critical thinkers who can solve problems in an increasingly complex, dynamic and global society. Located in South Texas, the university is a teaching, research and service institution that provides access to higher education in an ethnically and culturally diverse region of the nation. Texas A&M-Kingsville offers an extensive array of baccalaureate and master's degrees, and selected doctoral and professional degrees in an academically challenging, learner-centered and caring environment where all employees contribute to student success.

College of Arts and Sciences
Mission Statement-

The College of Arts and Sciences is unique in offering students a broad-based, liberal arts education transmitting a core of knowledge and cultural values. The College provides the service courses required by all university academic degree programs and specialized courses that may lead to employment or post-baccalaureate studies.

The College is committed to providing a humanistic and analytical education through a student-focused educational environment. Its faculty excel in teaching, scholarship, and service. The curriculum and its orientation are responsive to the cultural diversity of the students and to the entire South Texas region. In this way, the College helps to expand the academic, social, and cultural horizons and expectations of the people it serves.

Through teaching, scholarship, and service, the College provides students with a core of cultural knowledge and understanding necessary to function as global citizens and with the life skills and judgment essential to contribute fully to society. The College provides oral and written communication skills and computer literacy required for all disciplines, and helps students attain general professional competency in the area of their major. Fulfilling its mission, the College fosters lifelong learning.
TAMUK STRATEGIC PLAN 2013-2015: PREPARING FOR THE FUTURE

- Initiative #1 - Enhance excellence in teaching and learning, research, scholarship, creative work, and service
- Initiative #2 - Improve faculty and staff compensation, recognition, and support
- Initiative #3 - Increase undergraduate and graduate enrollment
- Initiative #4 - Develop a learner-centered environment
- Initiative #5 - Create new learning opportunities through additional interdisciplinary, international, service learning, and civic engagement experiences
- Initiative #6 - Increase the visibility of the university through marketing initiatives

Program of Communication Sciences and Disorders

VISION:
The Speech-Language Pathology Program at Texas A & M University - Kingsville will be recognized nationally for the superior academic and clinical training of Speech/Language Pathologists, and regionally as a provider of outstanding clinical services to persons with communication and swallowing disorders. The program will meet or exceed required guidelines of accreditation bodies, licensure requirements, and certification standards.

MISSION:
The mission of the Speech-Language Pathology Program is to prepare knowledgeable professionals committed to meeting the communicative needs of persons with varied communication disorders thereby improving their quality of life. To meet this mission, the Program emphasizes the importance of scientific study, critical thinking skills, interdisciplinary collaboration, ethical principles, the responsibility to educate the public about communicative disorders, and the importance of continued professional development throughout one’s career.

SPEECH-LANGUAGE PATHOLOGY CORE VALUES AND STRATEGIC PLAN

To meet this mission, the following ASHA CAA ACCREDITATION STANDARDS will guide the creation of core values for the program and the development of the following strategic plan:

1. ADMINISTRATIVE STRUCTURE AND GOVERNANCE (Standard 1.0)

   - 1A: Demonstration of clear autonomy within the College of Arts and Sciences.
   - **Strategy:** 1) The autonomy of program within the department will be ensured by the program faculty being given authority for the overall responsibility for oversight of the program and its everyday functions. 2) The faculty, under the supervision of the Program Director, will evaluate all aspects of the program including:
     - Faculty evaluation of program director,
     - Program director evaluation of faculty
Independent curriculum development (decided only by SLP faculty and then submitted to curriculum committee),
- Teaching/course evaluations review (by program director)
- Independence in decisions re: purchases made using speech and hearing clinic funds (without need for approval from outside the program)

Who: Program Director/Chair of Department
When: Started in Fall of 2013, ongoing
Resources: Meetings with department chair and SLP Faculty, Forms used for faculty and program director evaluation (completed annually).
Outcome Measures:
1) With the coming year, a proposed new department will assure that the program director will have administrative and evaluative responsibility for the program faculty and staff. The faculty and the program director must demonstrate that the program is fully implemented in line with both ASHA and university guidelines.
2) Create specific forms able to measure these things (for program director evaluation, faculty evaluation, for course evaluations-create a rubric containing all faculty and instructors mean and median scores for courses taught each semester...) For the rubric, use the graph that is created for our online course evaluations. We are also now being evaluated by the students we supervise. This is a digital evaluation on our website that the students can access and fill out anonymously.

1B: Demonstration of clear lines of authority that are consistently used to promote the highest standards of cooperation between faculty and staff members.
- Strategy: 1) Adherence to administrative tree (see form at end of document) outlining the lines of authority and 2) regular faculty meetings with pre-determined agendas and input from all faculty prior to and during the meetings.
- Person Responsible: Program Director
- When: Initiated in Fall, 2013 and ongoing
- Resources: Administrative chain of command diagram and faculty meeting agendas and minutes, job descriptions approved and provided to secretaries
- Outcome Measures: Increased efficiency and decreased ambiguity regarding what duties fall under what staff member’s job description. Clearer lines of communication between faculty and program director. New job descriptions have been created to better define the role of the program secretary vs. the role of the clinic secretary. Job descriptions have also been created for the work-study student (clinic oriented) and for our graduate assistants (academic faculty support and research oriented).

STANDARD 2.0-FACULTY
- 2A: Ensure that adequate resources are made available for faculty use as needed to challenge students both academically and clinically.
- Strategy: The university and college strategic plans outline specific actions and funding to meet university, college, departmental and program strategic plans. They
have committed to carrying out these actions to ensure the continued provision of adequate resources for our program.

- **Person Responsible:** Program Director/Department Chair
- **When:** Ongoing
- **Resources:** Faculty, Physical facilities (clinic rooms, offices, labs...)
- **Outcome Measures:** Adequate faculty, adequate resources to meet the ASHA standards. Adequate graduate student workroom space, number of computers, etc.

**CONTINUING:** Use of course enhancement funds to purchase, maintain and accumulate adequate holdings of diagnostic and therapy materials. As possible grant funds will be used to increase this capacity.

**Clinic resources:** Reasonably adequate assessment and therapy for diagnostic and therapeutic management of clinic population.

**Academic resources:** Interactive software used to supplement A & P content found in many courses, 3 major 3-D anatomical models, supplementary materials for courses (both hardware and software), DVDs, etc.

- **2B:** Plan for an academic and clinical faculty that can and will expand to meet the needs of a growing dynamic program.
  - **Strategy:** In the face of economic challenges and legislative shortfalls, the program will continue to be proactive with administration to search for faculty and funds to meet ongoing program needs.
  - **Person Responsible:** Department Chair and Program Director
  - **When:** Ongoing
  - **Resources:** Adequate budget to meet expansion needs.
  - **Outcome Measures:** Hiring of 3 new FTEs (one research, one clinical and one academic), 20% increase in operations and maintenance funds. Research fte search is underway, clinical and academic lines are being requested.

**STANDARD 3.0**

**ACADEMIC AND CLINICAL EDUCATION IN SPEECH-LANGUAGE PATHOLOGY** (Standard 3.0-Curriculum)

**ACADEMIC:**

- **3A:** Completion of constant and continuing review of our SLP curriculum.
  - **Strategy:** Increase integration and synthesis of current evidenced-based practices into both the academic and clinical courses and clinical practicums, and use of research that guides curriculum modifications and advancements to best meet the clinical and instructional needs of our students and community.
  - **Person Responsible:** The Program Director (with input from Faculty)
  - **When:** Annually (minimally)
  - **Resources:** Using a variety of program review resources (e.g. curriculum committee, alumni and employer surveys, among others), the currency, relevancy, and completeness of the academic preparation will be measured. These reviews and measurements will be an ongoing process and are documented and available to students and faculty. The purpose of these reviews is to continually improve and refine the academic preparation of our students. Changes in academic preparation will always be linked to and supported by this review process and supported and guided by ASHA best practices and requirements.
- **Outcome Measures:** New courses and/or course modifications successfully proposed, accepted, and integrated into the existing curriculum plan.

- **3B:** Provision of theoretical and research-based information regarding normal aspects and development of human communication and swallowing across the lifespan.
  - **Strategy:** Ensure these topics are covered at both the undergraduate and graduate level through course content (emphasis at the undergraduate level) through review of course syllabi and pre-post instructional surveys completed by students
  - **Person Responsible:** Graduate and Clinical Instructor Faculty members
  - **When:** Current and ongoing
  - **Resources:** Syllabi that fully integrate this information into student learning outcomes, projects, exams
    - Undergraduate: all courses-total of 36 hours
    - Graduate: all courses-total of 45 hours
  - **Outcome Measures:**
    1) Graduate students will answer questions about normal development and function on our comprehensive exam with passing accuracy and will receive at least a passing score on the national certification exam. The comps coordinator and program secretary can confirm the scores of these.

- **3C:** Provision of information regarding the etiology, diagnosis, and treatment of disordered human communication and swallowing to all students.
  - **Strategy:** Ensure these topics are covered at both the undergraduate and graduate level through course content (emphasis at the graduate level)
  - **Person Responsible:** Graduate and Clinical Instructor Faculty members
  - **When:** Current and ongoing
  - **Resources:** At the conclusion of the required 75 academic hours and 400 clinical hours, students will have covered all required informational topics.

3D: Emphasis of the importance of scientific study, critical thinking skills, interdisciplinary collaboration, and ethical principles.

  - **Strategy:** To expose graduate students to scientific approaches and research methods earlier in the graduate school program to encourage master’s theses and integrate evidence-based approaches into treatment and management of clients. **Person Responsible:** Faculty teaching research methods courses and clinic class courses, All clinical supervisors
  - **When:** Proposed course scheduling changes made in Fall, 2013; going into effect in Spring of 2014.
  - **Resources:** Materials provided to students in these courses, required projects
  - **Outcome Measures:**
    1) Research methods course.
    2) Critical review of research studies taught in these courses and in other content specific courses (e.g. voice disorders).
    3) Ethical principles covered in content specific courses.
    4) Successful integration of evidence-based practice principles into clinical practicums (per supervisor reports).
• 3E: Increased awareness of the importance of fostering respect and support for cultural and linguistic diversity in an ever-growing multicultural population comprised of different ethnic and racial groups.
  
  **Strategy:** 1) Integrate multicultural information into individual content courses and provide a class specifically focused on this topic (CSDO 5330). 1) All academic and clinical faculty (monitored annually by Program Director with assistance from program secretary)
  
  **When:** 1) Throughout the graduate degree through course content and in the class component of CSDO 5330 every year
  
  **Resources:** Multicultural Issues section of the Clinic lecture (CSDO 4325 and CADO 5330) and materials presented in other content courses

  **Outcome Measures:** 1) Completion of CSDO 5330.

• 3F: Provision of coursework which reflects the 1) current scope of practice, 2) incorporates emerging technologies, and 3) prepares students for the profession in a culturally and linguistically diverse society.
  
  **Strategy:** Increased acquisition and use of technology in assessment of voice and speech and swallowing disorders (both in academic courses and clinical practicums). Continued inclusion of AAC course with yearly updating for technological advances. Multicultural Issues and Specific Disorders components of the Clinic lecture (504) (two of four semesters).
  
  **Person Responsible:** Program Director (for overall verification and as instructor of AAC and some portions of seminar), relevant academic and clinical faculty
  
  **When:** Annually (to begin in Spring, 2013)
  
  **Resources:** Speakers and demonstrations from our new alternative/augmentative communication lab
  
  **Outcome Measures:**
  1) Passing for all students on the program's comprehensive examination. This can be verified by the program secretary
  2) Purchase and integration of hardware and software for instrumental assessment of a variety of etiologies with application to both clinical practicums (with patients) AND in graduate courses (projects...)

• 3G: Provision of information regarding research methods, as well as experience in evaluating both research literature and clinical effectiveness.
  
  **Strategy:** 1) A formal research methodology course. Courses to include both statistical methods and SLP-specific research methodology and applications. Inclusion in all major content courses of required reviewing/critiquing of evidence-based journal articles.
  
  **Person Responsible:** Graduate Faculty, Clinical Faculty and Program Director
  
  **When:** Change in scheduling of these courses effective in Spring, 2013.
  
  **Resources:** Agreement by respective professors to teach these courses to first year graduate students rather than second year students (received). Assignments of literature review in graduate level courses.
  
  **Outcome Measures:** Demonstrated competency through:
1) The designing and critiquing of evidence-based research and in knowledge of basic statistical concepts as evidenced by completion of a research course
2) A minimum of passing accuracy in responses to these sections of questions on the program’s comprehensive exam and a passing score on the national PRAXIS exam. Can be verified by program secretary.

- 3H: Preparation of students to exceed the academic requirements for 1) ASHA certification, 2) successful CFY, and 3) Texas Licensure.
  - Strategy: 1) Review the progress towards completion of the KASA requirements per ASHA regulations and requirements for Texas licensure with individual students each semester 2) Incorporation of KASA objectives and requirements into all academic and clinical course syllabi,
  - Person Responsible: Program Director and all faculty members involved in academic and clinical preparation
  - When: At the end of each semester
  - Resources: Individualized KASA document for each student
  - Outcome Measures:
    1) 100% completion of all KASA requirements prior to graduation. 90% pass rate (not a score of 90%, but rather 90% of our students will pass it) on national praxis exam (required by ASHA) Can be verified by program secretary.
    2) Obtaining a Texas SLP license (if plan is to practice in Texas). Can be verified by program secretary.
    3) Evaluation/survey of competencies demonstrated by our students completed by CF supervisors every year and returned to us for use in program evaluation procedures.

CLINICAL:
- 3I: Preparation of students for clinical experiences through observation of a variety of types and severities of human communication and swallowing disorders.
  - Strategy: Observation hours required by undergraduate courses to include a variety of disorders and populations.
  - Person Responsible: Clinic Director and Program Director
  - When: During undergraduate degree program (in designated courses)
  - Resources: Clinic secretary assisting students in signing up for observation hours and notifying potential observers of any changes or cancellations in the schedule for that day, Observation hours record form
  - Outcome Measures: All undergraduate students will complete the minimum 25 observation hours prior to graduation with their bachelor’s degree; these records will be kept in individual student files.

- 3J: Provision of supervised experience in the assessment and treatment of children and adults with a variety of types and severities of human communication and swallowing disorders in a variety of settings.
  - Strategy: 1) Ensure the minimum required amount of clinical practicum hours for each of the primary disorder areas through both the clinic housed in our program
and externships. 2) Ensure minimal requirements regarding supervision are being met or exceeded. 3) Ensure that the variety and types of clinical experiences best meets the needs of the students and fully represents expected types of clients/patients in our field.

- **Person Responsible:** Clinic Director and Clinic Secretary
- **When:** 1 and 2) Recorded each semester (at the end of the semester), weekly totals kept in individual supervisors’ offices
- **Resources:** Clinical Practicum database records (records % of time in the clinical practicums spent under the supervision of licensed SLP, separated into assessment and treatment time), Monthly summary sheets completed by supervisors, University supervisors, e-mails, phone calls between supervisors and students.
- **Outcome Measures:** 1) Meet or exceed ASHA standards for all areas of clinical assessment and treatment in terms of types and severities of disorders. 2) Meet or exceed ASHA requirements for amount of supervision of student clinicians (50% for assessments, 25% for treatments).

1) Students are being exposed to a larger variety of clients, both children and adults, and are assessing and treating a large variety of etiologies than in recent years.

- **3K:** Development of an understanding of professionalism, accountability, leadership, and ethical conduct.
  - **Strategy:** Provide students with information on ethical conduct in our field. Completion of the areas within Clinical Methodologies and each class regarding these issues.
  - **Person Responsible:** Academic and Clinical faculty (monitored by Program Director)
  - **When:** 1) During the semesters of both graduate years, 2) In content specific courses such as medical procedures and school procedures
  - **Resources:** Assessments/projects in seminar course, surveys completed post-graduation by alumni (within one year of graduation). Guest speakers for clinic orientation and clinical practicum lectures (SPH 504).
  - **Outcome Measures:** Successful completion of projects and assignments in this course (and a grade of “B” or better).

- **3L:** Increased coordination and collaboration between the supervisors of clinical sites and the clinical faculty at TAMUK.
  - **Strategy:**
    - Provide each clinical supervisor with a Clinical Manual which includes clinic practicum requirements for student and supervisor; forms, faculty and staff contact information, attendance policy and forms, remediation/probation protocol, etc.
    - Require each clinical supervisor to complete the Clinical Practicum Evaluation Form for each student for each semester.
    - Provide each clinical supervisor with any future paperwork changes or with any additional information as needed.
    - Maintain contact information for each supervisor and site.
  - **Who:** Clinic Director, clinical supervisors, clinic secretary
  - **When:** Spring 2013-14 and ongoing (annual review of clinic manual)
  - **Resources:** Clinical Manual, Clinical Practicum Evaluation Form, program website including online information and forms
  - **Outcome Measures:**
1) 90% (or more) completion and return of all Clinical Practicum Evaluation Forms each semester;
2) 90% or better accuracy in maintenance of supervisor contact information, licensure and certification;
3) revisions of clinic manual each year (as needed) 1) and 2) are already being done by Clinic Director

- **3M**: Provision of opportunities to relate theory to clinical practice using the most current and appropriate tools and techniques.
  - **Strategy:**
    1) Use of evidence-based practice to guide the purchasing and maintenance of the best possible clinical assessment and treatment materials.
    2) Integration and repeated exposure of students to methods of combining the research or theory into the clinical practice with expectations of increased independence in this process.
  - **Person Responsible**: Clinic Director, Program Director, and all clinical supervisors
  - **When**: At least annually
  - **Resources**: Emphasis on critical review of evidence-based practice articles throughout the content-specific academic and clinical courses

- **Outcome Measures**: Successful integration of new and innovative methods of assessment and treatment into a variety of age groups and etiologies of our patient populations. Successful critiquing of current evidence-based articles required as a component of all content courses.

- **3N**: Preparation of students for independent practice and to exceed the clinical educational requirements for ASHA certification and CF and Texas licensure.
  - **Strategy**: 1) Provide students with information regarding TX licensure and ASHA certification. 2) Provide information specific to the different types of professional work settings in our field (e.g. schools vs. medical vs. private practice).
  - **Person Responsible**: Program Director (verification) and Academic and Clinical faculty
  - **When**: in CSDO 5326-Clinic lectures on professional issues, at time of exit interviews and final advising sessions
  - **Resources**: ASHA, TSHA (Texas Speech and Hearing Association), TX Board of Professional Licensing, websites, and professional brochures.
  - **Outcome Measures**: Achieve 90% employment rate within one year of graduation from the program

### 4. STUDENTS (Standard 4.0)

- **4A**: Demonstration of consistent and creative recruitment, mentoring, and graduating of students who are creative and exemplary professionals and who will be recruited by a variety of employers and employment settings as a result of positive experiences with previous graduates from our program.
  - **Strategy**: 1) Proposal submitted (and follow-up to be completed) to provost in September of 2014 for increased graduate student enrollment with the condition of additional clinical supervisory faculty as a prerequisite. The program has a waiting list of highly qualified undergraduate students who
could benefit from this increase in enrollment, and it would address the current national and state-wide shortage of SLPs as well as generate increased revenue for the university.

2) One component of this recruitment would include the attempts to recruit students interested in becoming bilingual SLPs.

- **Person Responsible:** Program Director and Department Chair, Program Secretary
- **When:** Initiated in Fall, 2013, ongoing
- **Resources:** 1) Approval by provost for the recruiting and hiring of new faculty (clinical and adjuncts), 2) Employer surveys and reports on the success of our graduate students at their facilities and workplace settings
- **Outcome Measures:**
  1) Addition of at least one full-time clinical faculty to our program within one year from now (by 2014).
  2) Increased graduate student enrollment to 25 new students per year.

- **4B:** Increased emphasis on the importance of positively affecting persons with communication or swallowing disorders within the 1) educational systems, 2) healthcare facilities, and 3) the community.
  - **Strategy:** 1) Integration of academic and clinical coursework into externship clinical placements (off-site school settings) 2) Integration of academic and clinical coursework into externship clinical placements (off-site medical settings).
  - **Person Responsible:** 1) All faculty and externship supervisors, 2) Clinical supervisors and program director
  - **When:** Current and ongoing
  - **Resources:** Brochures, Website links, Course content
  - **Outcome Measures:**
    1) and 2) Externship supervisors’ surveys: a form needs to be created. I will look for one or create one as well as Patient and Client surveys. These were mailed with progress reports.

- **4C:** Increased assurance that all graduates of this program will enter the field as competent professionals.
  - **Strategy:** Use a variety of program review sources to measure student learning outcomes, to include:
    1) Successful completion of KASA document reviewed each semester by faculty advisor (program director) and graduate students
    2) Student performance on comprehensive examination and PRAXIS completed during last semester of graduate study
    3) Course evaluations (for assessment of faculty/instructor effectiveness)
    4) Student performance in externships-determined by preparation for site(s)
    5) Survey information from employers and alumni surveys in a three-year cycle
  - **Person Responsible:** Program Director, Secretary, and faculty advisors (within the program)
  - **When:** End of each semester, Internal annual review, external review on a 3-year cycle beginning 2013
  - **Resources:** 1) Tracking student performance through interviews/surveys, questionnaires and surveys, and success rates from examinations, 2) Syllabi that reflect KASA objectives and course-specific student-learning outcomes, 3) Pre and
post-course evaluations of successful learning of specific intended content (completed by students) 4) ClinPrac record-keeping program for clinical experiences

- **Outcome Measures:**
  1. KASA document 100% completed by end of graduate degree
  2. 90% pass rate (90% of students pass) on comprehensive exam and PRAXIS
  3. Course Evaluations of all faculty and instructors: Mean rating at or above 3.5
  4. Favorable surveys (completed by supervisors) evaluating level of preparedness of our graduates during externships
  5. Favorable reports from current and previous employers of graduate students and alumni,
  6. Employment in the profession within one year of graduation (employment rate exceeding 90% of graduates).
  7. Successful completion of clinical practicum requirements reviewed by clinical supervisors, students, and clinic director
  8. Average GPA of 3.0 throughout degree plan

- **4D:** The responsibility to educate the public about communication and swallowing disorders.
  - **Strategy:**
    1. Place educational brochures and information on the website, parent and/or adult client and clinician conferences,
    2. Develop support groups for specific types of disorders (e.g. aphasia support group, autism or PDD support group, etc.),
    3. Provide community health fairs on a variety of special topics,
    4. Complete speech and hearing screenings in surrounding geographical area

- **Person Responsible:** Program Director and Clinic Director, Clinical supervisors

- **When:** Ongoing (kept in full supply in clinic waiting room and updated on website at least once annually as needed)

- **Resources:** Published/printed brochures on a variety of SLP-related topics, website links with educational information as well as links to additional related sites

- **Outcome Measures:**
  1. Surveys completed by parent and/or adult client at the end of each semester re: knowledge of their etiology(ies) and progress made in that semester as well as future goals,
  2. Creation and continuation of support groups with goal to continue to form groups as needed or appropriate (based upon our patient population and demand).
  3. See 4B outcome #4 above

- **4E:** The importance of continued professional development as a life-long learner.
  - **Strategy:**
    1. Encourage faculty-mentored research for graduate and/or undergraduate students.
    2. Expect all students to be competent reviewers of professional literature and evidence-based practice studies.
    3. Demonstrate the value of attending professional conferences through faculty example and
    4. Provide financial support for student attendance as available.

- **Person Responsible:**
  1. Program Director, 2) and 3) All faculty, 4) Dept. Chair and NSSLHA sponsor (fundraisers, etc.)

- **When:** Review of all strategies each semester and progress towards achieving them during faculty meetings, etc.

- **Resources:** Internal or External Grants for Research, Possible course reductions for faculty mentors pending approval from program director and department chair

- **Outcome Measures:**
1) Student research projects (faculty mentored) presented to peers and/or at state conventions, or published in state journal (TSHA),
2) Measured in clinical practicum “clinical protocol” activity and in various graduate courses (that require critical review of relevant research studies/articles)
3) Attendance of at least one professional conference per year by 75% of our faculty and instructional staff
4) Attendance at state or national conventions by at least 50% of our graduate students initially, work towards 90% attendance goal. Our students receive stipends for TSHA if they were involved with NSSLHA.

5. **ASSESSMENT** (Standard 5.0)
   - **5A:** Demonstrate constant, measurable, and clearly documented assessment of student learning using both formative and summative systems.
     - **Strategy:** 1) Incorporation of all university, departmental, program-specific, and ASHA-guided student learning outcomes into each individual syllabi, as they relate to that content area. Completion of pre and post-course surveys by students to measure successful learning of intended outcomes. 2) Discussion of the clinical and academic learning objectives from KASA that were addressed during the semester’s academic courses and clinical practicum experiences (Program Director and each graduate student) 3) Student interviews about KASA learning objectives 4) Success rates/performance on the Program’s Comprehensive Exam completed by every second-year graduate student in the program. 5) Success rates on the National Exam/Praxis.
   - **Person Responsible:** Program Director (verification), All faculty, program secretary
   - **When:** 1) Every semester (reviewed by program director) 2), 3), 4) Annually
   - **Resources:** Centralize digital versions of all course syllabi and digital copies of post-course surveys, National PRAXIS exam database/spreadsheet, program secretary is responsible.
   - **Outcome Measures:**
     1) Achievement of at least 90% of intended course student learning outcomes, verified by students in pre vs. post-course surveys and in spreadsheet formats [all faculty and instructors need to create these for all of our courses] 2) and 3) Students will increase confidence in and comprehension of KASA document and what their status is at all times (in terms of completion); and completion of 100% of KASA requirements for all graduate students at the time of graduation-DONE AND ONGOING 4) and 5) 90% pass rate overall, no single section or area completed with less than 70% accuracy by any student

   - **5B:** Constant, measurable, and clearly documented assessment of all faculty using self-evaluation, peer-evaluation, and student evaluation systems.
     - **Strategy:**
       1) Assessment of Program director: Assessed by the chair of the department and the faculty of the speech-language pathology program (in addition to student evaluations).
2) Assessment of individual faculty members: Evaluated by the program director and student evaluations
3) Merit review (peer assessment and faculty annual reports)
   - **Person Responsible:** 1) Department Chair and faculty and students, 2) Program Director and students (other faculty), and students
   - **When:** Annually
   - **Resources:** Promotion and Tenure documents and protocols (for tenure-track faculty), faculty annual report forms,
   - **Outcome Measures:**
     1) Satisfactory performance by Chair and 80% of faculty
     2) Satisfactory performance by program director and satisfactory on course evaluations done by students
     3) Satisfactory merit review assessment tool form for 80% of faculty

5C: Incorporation of student learning objectives that support the goals and objectives of the Department, the College, and the University, and the KASA document.
   - **Strategy:** All syllabi will include SLOs (student learning objectives) that conform to ASHA requirements and PLOs (program learning objectives) that conform to data kept for the SACS (Southwest Accreditation of Colleges and Schools) requirements as well as the goals and learning outcomes prescribed by the University, the COE, and the Dept. of Human Services
   - **Person Responsible:** Faculty who teach graduate courses, verified/monitored by the program director.
   - **When:** Every semester (all syllabi checked by program director)
   - **Resources:** Annual distribution of all PLOs and SLOs along with the syllabi template required by the university to all faculty
   - **Outcome Measures:** 100% compliance with inclusion of these PLOs and SLOs in all graduate (and undergraduate) courses syllabi--send to program director for final review before posting

5D: Positive responses when externship supervisors and employers of our graduates asked if the students’ academic preparation was sufficient for clinical externship sites or employment settings.
   - **Strategy:** 1) Supervisor evaluations of the graduate student clinicians with the Clinical Practicum Evaluation form found in the Clinical Education Manual 2) Gather specific information in no less than a 3-year cycle through Alumni and Employer questionnaires and use of “Survey Monkey”
   - **Person Responsible:** Program Director, Externship Director, externship clinical supervisors, and program secretary
   - **When:** Mid-semester and at the end of each semester
   - **Resources:** 1) Clinical Practicum Evaluation forms completed by supervisors and face-to-face, phone, and/or e-mail contact with the supervisors 2) Use of the “Survey Monkey” website and program
   - **Outcome Measures:**
     1) Consistently positive and strong evaluations of our students by current externship clinical supervisors
2) “Acceptable” or “Superior” satisfaction ratings completed by alumni and employers of alumni. Mailed by program secretary
3) 90% percent of our graduates employed within 1 year of graduation. This can be done by program secretary.

5E: Outside reviews completed by individuals or groups of individuals who are either alumni of our program and/or are currently teaching in an ASHA accredited program in Speech-Language Pathology.

- **Strategy:** Host outside review teams made up of individuals who are either alumni of our program and/or are teaching in an ASHA accredited program in Speech-Language Pathology. These reviewers may address specific academic topics suggested by the faculty or take a more global approach. A formal report of the findings of the visit will be presented to the Faculty, Program Director, Department Chair and Dean.
- **Person Responsible:** Program Director to set up the reviewers’ visit. All faculty and students will participate in the review.
- **When:** The visits will be scheduled as deemed appropriate by the Program Director (no less than every 5 years) with input regarding content and membership from the faculty.
- **Resources:** ASHA annual report standards and questions to be used as a framework, Alumni and/or teachers from ASHA accredited programs
- **Outcome Measures:** A formal report of the results of these visits to be presented to the Program Director, Faculty, Department Chair, and Dean. Need to find/determine who to invite for an outside review, if they will be paid, etc. This was done prior to the ASHA review. Gil was able to invite people to come in.

5F: Measurement of the currency, relevancy and completeness of clinical preparation will be completed using a variety of program review resources and an ongoing documentation process.

- **Strategy:** The Clinic Director will conduct an EXIT meeting with each graduating student to calculate the clinical practicum hours, to confirm completion of ASHA and SFA clinical practicum requirements, to discuss the state licensing and Clinical Fellowship procedures, and to organize and finalize the graduate student’s file.
- **Person Responsible:** Clinic Director, Program Director, and clinical supervisors, and students
- **When:** Mid-semester and/or at end of each semester, final semester prior to graduation
- **Resources:** 1) Clinical Practicum Evaluation form, 2) Face-to-face, phone, and e-mail interviews with supervisors and graduate student clinicians concerning clinical performance and exposure needed to meet TAMUK and ASHA requirements, 3) Candidacy meetings held with each graduate student at the completion of 9 graduate semester hours to determine full acceptance into the program and ability to continue and areas of relative strengths/weaknesses 4) Clinical Practicum record of clinical practicum experiences, 5) Forms used for Evaluation of Clinical Supervisor, 6) Forms used for Evaluation of Clinical Externship, 7) KASA documentation, 8) Employer Satisfaction Rating forms from employers of our recent graduates
- **Outcome Measures:**
1) Improvement noted on the Clinical Practicum Evaluation forms (completed by patients/clients) during their clinical experiences within the Stanley Speech and Hearing Clinic [need to make/modify this form and consistently use it...]
2) Exit interview and completion of KASA requirements as reviewed at least annually by the Program Director and each student
3) NEW FORMS used this semester-feedback/suggestion? We are using the new forms.
4) Success/positive feedback in clinical externships as reported by supervisors when asked if the students’ clinical preparation was sufficient for that site

5G: Expansion of the clinical externships by type of practice site and location to best meet the needs of the students’ clinical preparation.

- **Strategy:** 1) Maintain and post list of externship possibilities by type of practice and location, 2) Maintain record of past graduates’ employment for future externship possibilities, 3) Use local and state resources to locate and expand externship affiliation contracts, 4) Maintain affiliation contracts by updating contracts at least every two years, 5) Externship postings in student workroom, 6) employment log updated upon receipt of surveys,
- **Person Responsible:** Clinic Director, clinic secretary, program secretary
- **When:** Ongoing; at least every two years
- **Resources:** ASHA, TSHA websites and postings; face-to-face, phone, and e-mail contacts with past graduates, clinical supervisors, and facilities; Employer surveys and reports (possibly using “survey monkey” program/website)
- **Outcome Measures:**
  1) This is done by Externship Director
  2) This can be done by program secretary
  3) This is being done by Clinic Director
  4) Clinical affiliation contracts renewed after two years
  5) Done by Clinic Director
  6) Can be done by program secretary

6. **PROGRAM RESOURCES** (Standard 6.0)

- **6A:** Diligent and collegial review of holdings in the Speech/Language Pathology Program Library and holdings at TAMUK Library of books, periodicals and other academic resources for students.

  - **Strategy:** 1) Diligent and collegial review of holdings in the Speech/Language Pathology Program Library and holdings at the TAMUK Library of books, periodicals and other academic resources for students. 2) Training on database search for research articles/publication to be provided to all graduate students.
  - **Person Responsible:** Clinic Director, Program Director, Librarians (main library)
  - **When:** Every Fall in clinic orientation we will schedule database training with the TAMUK librarian. Every 2 years we will review and update our holdings as needed.
  - **Resources:** Bernice Wright, TAMUK librarians
  - **Outcome Measures:**
    1) Report compiled by Bernice Wright on the review of library holdings
2) Feedback from the students and all faculty on students’ knowledge of database searching for research and/or evidence-based practice articles and books (rubric to be created for feedback portion of this outcome measure, this is to be done by all graduate course professors.)

- **6B: Diligent and collegial review of clinical tools and equipment available for teaching and clinical practice at the Speech and Hearing Clinic at TAMUK.**
  - **Strategy:** 1) Maintain accurate record of all clinical materials, 2) Creation of new database and/or electronic system (e.g. bar coding) of all clinical assessments and treatment materials in addition to centrally held supplementary teaching materials (e.g. DVDs/CDs/Books), 3) Training of work-study student each semester (preferably by previous semester’s work-study student) to facilitate accurate inventory of clinical materials
  - **Person Responsible:** Clinic Director, clinic secretary, work-study student, graduate assistants (as needed)
  - **When:** Reviewed at the beginning and end of each semester
  - **Resources:** Clinic inventory log/spreadsheet, designated funds in program and department to achieve these goals, material check-out system, new bar coding system and software package
  - **Outcome Measures:**
    1) and 2) 90% accuracy at all times of inventory of all materials. This should be updated by the semester. NEW LABELS AND SPREADSHEET COMPLETED
    Other ideas: Academic materials and supplies inventory: maybe for each professor done by work-study students and then shared with other professors...
    3) Work-study students and/or GAs have been working on this

- **6C: Adequate financial and funding resources needed to expand clinical and academic growth and research so that TAMUK will continue to be one of the strongest SLP programs in Texas.**
  - **Strategy:** Develop a plan for continued growth and development through 2015
  - **Person Responsible:** Program Director and Department Chair
  - **When:** Annually
  - **Resources:** Annual Budget Request, HEAF Fund proposals
  - **Outcome Measures:**
    1) Create a detailed longitudinal plan (through 2015) for better use of available funding
    2) Separate what will come out of our course fees account (we have one of our own now!), our department’s O & M funds, and our Clinic Accounts.

- **6D: Adequate and consistent support from the department chair and the dean in response to additional faculty or equipment/supplies needs.**
  - **Strategy:** Maintain faculty and Operation and Maintenance funding for the program
  - **Person Responsible:** Department Chair, Program Director
  - **When:** Annually, by semester
  - **Resources:** Funded Requests
- **Outcome Measures:** Review of Annual Budget and verification of equitable distribution of all available funds between all programs in the department and between all departments.

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