

DEPARTMENT OF COMMUNICATION DISORDERS
Graduate Program Assessment Yearly Report
M.S. in Communication Disorders
October 2, 2006

I. ASSESSMENT ACTIVITIES

A. Program Goals: Educate professional speech-language pathologists

In keeping with university and college mission statements, the graduate program of the Department of Communication Disorders is committed to:

- a) Providing students with a specific knowledge base in normal and disordered human communication and the ability to apply this knowledge in the diagnosis and treatment of individuals with communication and related disorders.
- b) Providing students with the clinical skills necessary to diagnose, treat, and refer individuals with communication disorders.
- c) Providing students with a thorough understanding of the range of professional issues and responsibilities which are needed to function competently and professionally as speech-language pathologists according to accepted ethical and professional standards.
- d) Providing students with the ethical responsibility for lifelong learning, the skills necessary to act as independent learners, and the ability to develop a personal program of continuing education.
- e) Supporting faculty in their endeavors to transmit knowledge.
- f) Supporting faculty in their endeavors to advance knowledge.
- g) Supporting faculty in their endeavors to apply knowledge.
- h) Assuring the integrity of the curriculum through maintenance of rigorous standards.
- i) Assuring the integrity of the curriculum through maintenance of high expectations for student learning and performance.
- j) Providing a wide variety of services to the community.
- k) Achieving diversity in the student body and faculty.

The faculty of the Department of Communication Disorders completed in the Fall of 2004 its annual review of the program goals relative to students, faculty, and the program and determined that no revisions were warranted. These goals were included in the self-study the department submitted in February 2005 as part of its application for re-accreditation by the Council on Academic Accreditation (CAA) of the American Speech-Language-Hearing Association (ASHA).

The appropriateness of the goals was affirmed by the CAA's again granting full accreditation status to the department in March 2006.

B & C. Learning Outcomes/Data Collection and Results:

For Learner outcomes, see Table A.

For Faculty Development and Curriculum Development outcomes, see Table B.

RESULTS SUMMARY

Internal measures (e.g. course exams, practicum assessments) indicate that the program is highly successful in achieving its stated outcomes. External measures (e.g. student scores on the national certification exam and students' employability) confirm the program's success in achieving the specified outcomes. The graduate program was notified in March 2006, that it again received full accreditation by the Council of Academic Accreditation of the American Speech-Language-Hearing Association. The M.S. program was awarded by the Board of Governors its "Program of Excellence" designation in May 2005.

II. PLANS FOR THE CURRENT YEAR:

We plan to continue our weekly departmental meetings to discuss departmental concerns and to continue to review the academic and clinical programs.

We plan to maintain accreditation by the Council on Academic Accreditation of the American Speech-Language-Hearing Association (ASHA) by maintaining standards and submitting our yearly report documenting compliance.

We plan to maintain our on-going review of the academic and clinical curriculum to ensure compliance with the most recent (2005) ASHA standards.

As a result of a Hedrick Grant awarded to the department last year, we were able to develop specific learner outcomes for every course in our curriculum required for students to meet national (ASHA) certification standards. Each student is responsible for meeting the outcome requirements, and the graduate advisors monitor compliance. As we have just completed our first year of full implementation of this system, we plan to review it thoroughly and make modifications wherever appropriate.

We plan to increase the number of WAC course offerings in the department and to increase the number of WAC certified instructors from 40% to 50% of the faculty.

We plan to offer service-learning designated courses for the first time.

We plan to maintain our emphasis on academic and clinical teaching. We are pleased with our students' satisfaction of our teaching as measured by their evaluation of us. As a department, we received last year mean scores of 1.6 and 1.65 (on a 5 point scale) for the Fall and Spring Semesters respectively on the university-wide evaluation instrument (see Table B), and we plan to maintain or exceed these levels during the coming year.

We plan to continue to support faculty development by: encouraging faculty travel to state and national conferences, by supporting faculty in research efforts and professional presentations, by supporting faculty in their efforts to obtain a terminal degree, and by encouraging faculty to engage in other professional activities. We also plan to fill our vacant tenure-track position with a qualified faculty member.

We plan to continue to expand the clinical services offered in the Marshall University Speech and Hearing Center, the clinical arm of the department. In doing so, we will increase the clinical learning opportunities for our students as well as provide speech and hearing services to the tri-state community. During the period since our last assessment report, our students and faculty have provided over \$130,000.00* worth of pro-bono services to communicatively-impaired individuals through the Marshall University Speech and Hearing Center. With the addition of planned new programs, we hope to exceed this amount next year.

We plan to begin in November 2006 a new program for hearing-impaired children called: *Auditory Beginnings: The Listening, Language, Learning Lab at Marshall*. Funded by a \$240,000 West Virginia Department of Education grant, this program will be the first of its kind in West Virginia and the Tri-state area. The mission of the program is to facilitate auditory and spoken language in children with cochlear implants or aided hearing loss and to provide training for our students in auditory-oral methodologies.

We plan to continue and strengthen our partnership with the Huntington, WV chapter of the Scottish Rite Masons which currently provides the majority of the funding for a clinical staff position in the department.

We plan to complete installation in the department of a \$200,000.00 state-of-the-art clinical monitoring system to replace the previous system which had become non-functional. The new system, using IRIS technology, allows us to supervise student clinicians according to American Speech-Language-Hearing Association standards as well as enable us to provide demonstration therapy and evaluation sessions in laboratory classes. More than 70% of the funding for the monitoring system has come from funds generated by the department.

*This total does not include services provided in external sites.

We plan to use funds generated from student fees to purchase new equipment for the department.

As we take very seriously the designation granted to us by the Board of Governors as a “Program of Excellence,” we plan to maintain high standards for ourselves, our students, and our program.

III. ASSISTANCE NEEDED:

Given the low response rate to departmental surveys and questionnaires to individuals outside the department, data collection is difficult. Any suggestions the UAC could provide to increase response rate would be most welcome.

Because of the low response to alumni surveys, three years ago we initiated exit interviews and surveys of all graduates to gather information of student satisfaction and to apprise graduates of the importance of student/alumni feedback. Because we conduct the exit interviews and surveys prior to graduation, we are able to get a high response rate. We intend to continue this practice with the expectation that the interviews and surveys will yield beneficial feedback about the program and the hope that graduates completing this process will be more likely in the future to understand the importance of returning alumni survey forms.

IV. WHAT ONE MOST IMPORTANT THING HAS THE DEPARTMENT/ PROGRAM LEARNED THROUGH THIS PROCESS?

The program recognized the value of on-going self-study when it first began to prepare for its initial accreditation review over fifteen years ago. The process of self-evaluation provides a dynamic perspective from which a program can more readily identify both areas of strength and those which could benefit from modification.

We have learned that our program, while currently successful, can continue to grow in quality and quantity by admitting quality students, retaining quality faculty, and expanding quality clinical programs.

Key – Table A

The competencies of a well-educated person from the graduate program of the department are:

1. The ability to apply a broad education in the liberal arts including knowledge of multicultural and international issues to the study of human communication disorders.
2. A thorough knowledge of the scientific literature and information base underlying normal and disordered human communication and related areas.
3. The ability to plan and administer in-depth evaluations of persons with communication disorders and, based on the results of these evaluations and the individual needs of each client, develop and administer a program of remediation based on the individual needs of each client.
4. The ability to communicate effectively, in the discourse of the discipline, in both oral and written formats.
5. The ability to think critically, independently, and, in collaborative endeavors, to solve clinical problems.
6. The necessary skills, including computer and information literacy skills, to meet the professional and ethical responsibilities of lifelong learning.

Since one method of assessment may address multiple outcomes, assessment measures are charted in Table A by Outcome number.

TABLE A
Learner Assessment
Communication Disorders
Graduate Program

Outcome	Method of Assessment	Benchmark	Evaluation	Conclusion/Action
1,2,3,4,5,6	National Exam in Speech-Language Pathology (NESPA)-PRAXIS Series	-Score 600 or above (NESPA)	100% achieved (28/28)	Maintain current practice
1,2,3,4,5,6	Master's degree comprehensive exam	-Score 620 or above (NESPA)	100% achieved (28/28)	Increased from 93% previous year - Maintain current practice
		-Score High Pass (NESPA) 700 or above	25% achieved (7/28)	Increased from 16% previous report Maintain current practice
1,2,3,4,5,6	West Virginia State Department of Education Teacher Certification Exam	-Score 600 or above (NESPA)	100% achieved (28/28)	Maintain current practice
1,2,3,5,6	West Virginia Licensure Exam	-Score 600 or above (NESPA)	100% achieved (28/28)	Maintain current practice
1,2,3,4,5,6	Clinical Fellowship Year (CFY)	-Successful completion of (as demonstrated by endorsement of supervisor)	100% eligible	Maintain current practice
		-CFY exit report of supervision	No data available	Find means to secure data
		-Survey of supervision	No data available	
1,2,3,4,5,6	Certificate of Clinical Competence in Speech-Language Pathology (CCC-Sp)	-Awarding of CCC-Sp by ASHA	100% eligible	Maintain current practice
1,2,3,4,5,6	Employability	-Employment rate in field	All who sought positions – Demand exceeds supply	Maintain current practice
1,2,3,4,5,6	GPA	->3.00	100% achieved	Maintain current practice
1,2,3,4,5,6	Employer Survey	-Employer satisfaction	Inadequate sample size	Enlist UAC assistance to increase survey return rate

TABLE A – Learner Assessment – continued

Outcome	Method of Assessment	Benchmark	Evaluation	Conclusion/Action
2,3,4,5,6	Clinical eligibility review	-Receipt of (continued) clinical eligibility. Fall 2005 Spring 2006 Summer 2006	100% eligible, one conditional (60/60) 98% eligible, one ineligible, previous semester's conditional eligibility removed (53/54) 100% eligible, one conditional (43/43)	Maintain current practice
1,5,6	Professional development	-Attendance at state/national conferences -Presentations at state/national conferences	Students attended state conferences, 3 presented; 1 student co-authored presentation at national conference	Maintain current practice Maintain current practice
1,2,3,4,5,6	Plan of study	-Graduate College approval	100% approved (28/28)	Maintain current practice
1,2,3,4,5,6	Professional writing	-Successful completion of clinical practica courses	Not assessed	this year
1,2,3,4,5,6	Essay exams	-Successful completion in CD required academic courses	Not assessed	this year
1,2,3,4,5,6	Objective exams	-Successful completion in CD required academic courses	Not assessed	this year

TABLE A – Learner Assessment – continued

Outcome	Method of Assessment	Benchmark	Evaluation	Conclusion/Action
2,3,4	Quizzes	-Successful completion in CD required academic courses	Not assessed this year	
1,2,3,4,5,6	Authentic assessments	-Successful completion in CD required academic courses	Not assessed this year	
1,2,3,4,5,6	Portfolio assessments	-Successful completion in CD required academic courses	Not assessed this year	
1,2,3,4,5,6	Research projects/papers	-Successful completion in CD required academic courses	Not assessed this year	
1,2,3,4,5,6	Independent readings and analysis	-Successful completion in CD required academic courses	Not assessed this year	
2,3,4,5,6	Presentations	-Successful completion in CD required academic courses	Not assessed this year	
1,2,3,4,5,6	Exit Interview & Survey of all graduates	-Qualitative measure – no benchmark available	83% response rate, (19/23)	-Reviewed by faculty/ referred to appropriate faculty committee -Increase participation rate

Key – Table B

Outcomes for Faculty Development and Curriculum Development – See Table B

Faculty development will be demonstrated by faculty:

1. Engaging in ongoing course development.
2. Participating in professional development activities.
3. Engaging in research, creative, scholarly and clinical activities.
4. Modeling professional and clinical behaviors and skills.

Curriculum development will be demonstrated by the program:

5. Engaging in ongoing self-study.
6. Engaging in curriculum modification and development.
7. Maintaining accreditation by the CCA of ASHA.
8. Providing clinical services both on and off-campus.
9. Providing public education activities both on and off-campus.
10. Following Marshall University non-discrimination policy and affirmative action guidelines.

Since one method of assessment may address multiple outcomes, assessment measures are charted in Table B by Outcome number.

TABLE B
Faculty and Curricular Outcomes Assessment
Communication Disorders
Graduate Program

Outcome	Method of Assessment	Benchmark	Evaluation	Conclusion/Action
5,6,7,8,9,10	External contracts	-Securing of contracts	Six current contracts maintained; New contract with Radical Rehab, executed New clinical position established to meet needs of contracts	Maintain current practice
1,2,3,4	Annual Review of faculty	-Endorsement by appropriate administrators	All faculty recommended for retention	Maintain current practice
1,2,3,4	Tenure and promotion applications	-Awarding of tenure and/or promotion	No applications	N/A
1,2,3,4	Appointment to Graduate Faculty	-Successful review by the Graduate Council	100% eligibility (10/10) (full or assoc)	Maintain current practice
1,4	Student evaluations of faculty	-Quantitative and qualitative evidence	Fall 2005- x=1.6 Spring 2006- x=1.65 (on a 5-point scale, 1 being the highest)	Maintain current practice

TABLE B – Faculty and Curricular Outcomes Assessment – continued

Outcome	Method of Assessment	Benchmark	Evaluation	Conclusion/Action
1,2,3,4	Professional development	<ul style="list-style-type: none"> -Continuing Education Credits -ASHA membership -Maintenance of Certificate of Clinical Competence -West Virginia Licensure -ACE Awards -Attendance at state & national conferences -Presentations -Professional Activities 	<p>100% (10/10) maintained credits, membership, CCC and Licensure</p> <ul style="list-style-type: none"> -Three faculty achieved -Faculty attended seven National & four state conferences -Faculty made five presentations at national conferences & four presentations at state conferences -Faculty served as textbook reviewers, grant reviewers, and conference planners 	Maintain current practices
3,4	Clinical supervision	<ul style="list-style-type: none"> -Participating in community based service programs -Engaging in effective supervisory practices 	<ul style="list-style-type: none"> -Increased on and off-campus services -Provided 	Maintain current practices
1,2,3	Grant writing	<ul style="list-style-type: none"> -Obtaining support for research, creative, scholarly and/or clinical activities 	<ul style="list-style-type: none"> -Received the Hedrick grant -Received \$240,000 from the WV Dept of Ed to develop a pre-school program for hearing-impaired children -Received Writing Project technology Grant and Scottish Rite Grants 	Maintain current practice

TABLE B – Faculty and Curricular Outcomes Assessment – continued

Outcome	Method of Assessment	Benchmark	Evaluation	Conclusion/Action
1,2,3	Faculty Development Grant	-Receipt of grant	Faculty received one Quinlan grant, one Graduate College grant, six INCO grants, three Scottish Rite grants, eight Writing Project grants, and three additional travel grants	Maintain current practice
5,6,7,8,9,10	Ongoing programmatic self-study	-Maintenance of accreditation -Recommendations from Program Advocacy Committee -Achievement of CCC by graduates -Employability of graduates	Maintained CAA re-accreditation 100% achieved 100% employable	Received full accreditation from CAA, March 2006 Maintain current practice Maintain current practice
1,2,3,4,5,6	Exit Interview & Survey of all graduates	-Qualitative measure – no benchmark available	83% response rate, (19/23)	-Reviewed by faculty/ referred to appropriate faculty
1,2,3,4,5,6	Assessment Day Student/faculty focus groups	-Qualitative measure – no benchmark available	93% participation rate (50/54 graduate Students, 10/11 faculty And clinical faculty)	-Recommendations reviewed by faculty for appropriate action -Continue focus groups Annually -Increase participation

