California State University, Fresno: 2007-2008
Section A-1
Contextual Information

Speech Pathology
Department of Communicative Disorders and Deaf Studies

The faculty in the Department of Communicative Disorders and Deaf Studies have developed three goals which serve as practical guidelines for our speech pathology program. First, we want to be recognized as a premier, interactive department where students are trained to become effective speech-language pathologists. Second, we want to have a curriculum that provides a deep understanding of communicative disorders and prepares students for professional careers in a variety of work settings and with populations demonstrating linguistic and cultural diversity. Third, we strive to maintain our student-training partnerships with private and public agencies, so as to provide varied and realistic clinical experiences for our students.

These three goals provide direction for the following curricular objectives:
- To prepare students for passing the PRAXIS exam, acquiring national certification, school credentialing, and state licensing.
- To prepare students for pursuit of doctoral degrees.
- To prepare students to complete a minimum of 36 hours of graduate coursework, including a course in research methods and application.
- To prepare students for completion of an acceptable master's thesis, graduate project, or written comprehensive examination.
- To enable speech-language pathology students to complete 400 clinical clock hours of practicum preparing them for clinical positions in private practice, rehabilitative centers, skilled nursing facilities, public schools, and other professional settings.

All graduating MA-level speech pathology students complete the academic and clinical requirements for the clear Speech-Language Pathology Services Credential as a normal part of our program. In the 2007-08 academic year, we admitted 29 students into the speech pathology graduate program. Fourteen students graduated from the program during that academic year. Two students were disqualified for academic reasons, and one student withdrew.

Changes Since Commission Approval of Current Program Document	Date
1. A new speech-language clinic director was hired.	2008
2. Addition of off-campus practicum sites.	Ongoing

Speech Pathology
Department of Communicative Disorders and Deaf Studies

A. Candidate Assessments the program uses to and through recommending credential.

List 4-6 Key Assessments (not admissions data)

1. *Praxis II Speech-Language Pathology Test* scores
2. Speech pathology graduate students exit interviews
3. SLPS Disposition Evaluation
4. SLPS Evaluation of Candidate Performance in Field Placement

Summary of Data

Praxis II Speech-Language Pathology Test scores--In California, Assembly Bill 2837 requires candidates for the clear Speech-Language Pathology Services Credential to pass the *Praxis II Speech-Language Pathology Test*. Nearly all speech pathology graduate students in our program take this test near the end of their graduate studies. The content of this test is listed in Table 2. In 2007, 15 students in our speech pathology graduate students reported Praxis scores to the department. All obtained passing scores. Between January and July 2008, 13 students have reported Praxis scores to the department. All obtained passing scores.

Speech pathology graduate student exit interviews—During the final week prior to graduation, all graduate students are asked to participate in exit interviews. These sessions are held in small groups of 3-4 students and conducted every year. The results of these interviews are shared with faculty during faculty meetings. Potential changes to the program are discussed based on the data.

Table 1. Speech Pathology Exit Interview Results

Question	Responses	# of students
1. Which undergraduate experiences most prepared you for graduate school?	• 107/110: hands on experiences and observations; good transition into clinical work	13
	• 102: anatomy class	5
	• professional writing class	1
	• required observation hours	1
	• 101: phonetics	1
	• 95: language development class	2
2. Which graduate area of study prepared you most for your student	• 209: student teaching class	10
	• 220: TBI & dysphagia class for externships	10

teaching?	• all prepared me in some way • Motor speech • Aphasia • Voice class • phonologic preschool: was good preparation for student teaching and working with groups • Language	1 3 8 1 5 5
3. For which areas of your field do you feel most prepared?	• report writing • assessment and treatment in the schools • I feel equally prepared for both educational and hospital settings • Working with kids – assessment and treatment of language and artic • medical setting: aphasia, motor speech, swallowing, TBI • anatomy • voice because of the speech science lab	1 6 3 6 8 2 4
4. In what areas do you feel you are lacking skills?	• progressive diseases such as Parkinson's, ALS. • counseling • I only had one fluency client • assessment: selection of tools and interpretation • autism and other school-based issues – probably because I was less interested in this • assessment and treatment in hospitals • practical experience working with voice and TBI • working with DHH students in the schools, including aural rehab • treatment strategies for the school setting • working with students who have other disabilities in addition to speech and language problems • language disorders in children • lack of knowledge about different settings in the medical field – externships are limited to one area • limited exposure to a variety of professionals in the field as supervisors • TBI and aphasia • voice • severe artic, phonology and apraxia • working with autism, non-verbal, or minimally verbal children	1 5 1 1 1 1 1 6 1 1 5 1 1 1 2 2 2
5. What was your most valuable learning experience overall (undergrad and grad)?	• clinical experiences on campus • student teaching • externship at FCH – great hands on experience and good supervisors • all clinical experiences increase our skills and confidence because we get to practice what we learned in class • internship and clinical practicum overall • case studies – when actual cases are discussed in class • report writing in the clinic • observations and observation reports helped transition from undergrad to grad	4 1 1 1 3 5 5 4
6. Which areas of study best prepared you to communicate with parents, professionals and pupils?	• parent interviews – sometimes it is difficult to ask parents questions about their experiences. Rapport building is a helpful part of the curriculum.	2

	• clinical experience	3
	• counseling class "over-addressed" this, but only in terms of disabled children	2
	• 107/110 and practice interviewing	2
	• communication in externships	7
	• IEP experience in the schools – also interacting with teachers, parents and kids in the schools	3
	• collaborating with patients and families in the medical setting	4
	• on-campus clinic included a lot of contact with parents	2
	• many of our professors addressed this within their classes	4
	• 209	1
7. What setting do you plan to work in?	• both schools and hospitals	2
	• medical setting: outpatient, rehab., or acute care	6
	• schools	3
	• undecided	2
8. Which culminating experience did you select? Why? Would you do the same again?	One student selected the thesis option and stated she would do it again. Reasons given were: • I couldn't imagine doing comps • I wanted to invest in one research area and get an in depth knowledge of it • I wanted to publish • the challenge of writing something so extensive • it was an achievement Twelve students took comprehensive exams and all said they would do it again. Reasons given were: • not interested in research • it helped prepare me for PRAXIS • I have a better grasp of everything after studying • I looked into a thesis but there were not enough doctoral staff available • I'm not a strong writer • I wanted to do a thesis but didn't have a good topic	10 12 10 1 3 1
9. Are you planning to pursue a doctoral degree?	• YES = 4 • NO = 7 • I'm not sure – maybe later. = 2	
10. Other comments:	• Consider 25 hours of observation as a prerequisite to 110/107. • Increase clinical experience as undergrads • Consider a separate 1-unit class to go along with the medical externship like 209 goes along with 257. • I never saw an IEP before student teaching. • Divide swallowing and TBI into 2 classes. • Counseling class needs to increase the discussion of issues facing SLPs in the medical setting. • Classes that rely on student presentations to present information are not as helpful. • Try to include at least one adult client for our on-campus clinical experience. Increase the support during initial clinic experience. We need more input, structure, and contact. • Getting experience in both the educational and medical settings is a strong characteristic of the program. • Inconsistency across clinical supervision is an issue.	

	• Craniofacial anomalies was a very enjoyable and interesting class but this is a very limited population and the time could be better spent elsewhere. Could this be combined with another class? It didn't really help with the PRAXIS either because it asked for more detailed information than we got. • Overall, a good learning experience. • A good program overall. Very challenging but I feel well prepared – more than people I know at other Universities.

SLPS Candidate Dispositions – An existing clinical practicum evaluation tool was utilized to evaluate candidate acquisition of professional dispositions. This data will be collected at the end of every semester that candidates are enrolled in their SLPS educational field placement and will assist us in evaluating our program outcomes. Candidate demonstration of each disposition is rated by the field instructor on a scale of 1-5, with "1" representing *inadequate* and "5" representing *excellent*. A rating of "4" represents *good* and is considered to be the benchmark for meeting program requirements. The data for fall 2007 and spring 2008 are depicted in Table 2.

Table 2: 2007-2008 Evaluation of Candidate Dispositions at Program Completion

Rating Scale: N/A = Not Applicable/Not addressed yet
                1   = Needs 100% Assistance/Feedback: Inadequate (Inability to make changes).
                2   = Needs 75% Assistance/Feedback: Nominal (regularly needs specific direction/demonstration).
                3   = Needs 50% Assistance/Feedback: Adequate (often needs some general direction/demonstration).
                4   = Needs 25% Assistance/Feedback: Good (needs occasional direction/demonstration).
                5   = Independent with Minimal Assistance/Feedback: Excellent (takes initiative and performs effectively)

Disposition	Possible Rating Scale Points	Range	Mean	% Meeting Benchmark
Values Diversity	1-5	4-5	4.95	100%
Communicates Effectively	1-5	4-5	4.95	100%
Collaborative	1-5	4-5	4.95	100%
Ethical	1-5	4-5	4.9	100%
Confidential	1-5	5	5.0	100%
OVERALL	**1-5**	**4-5**	**4.95**	**100%**

SLPS Evaluation of Candidate Performance in Field Placement – An existing clinical practicum evaluation tool is utilized to evaluate each candidate's overall acquisition of knowledge and skills. The evaluation addresses: (a) academic knowledge and clinical knowledge base, (b) diagnostic skills, (c) treatment skills, (d) writing skills, (e) practicum as a learning experience, and (f) professionalism and ethics. Candidate performance is rated on a scale of 1-5, with "1" representing *inadequate*, "2" representing *nominal*, "3" representing *adequate*, "4" representing *good*, and "5" representing *excellent*. A rating of "4" is considered to be the benchmark for meeting program requirements. Table 5 depicts the outcome data for candidate performance in educational field placement for fall 2007 and spring 2008.

Table 3: 2007-2008 Evaluation of Candidate in SLPS

Educational Field Placement at Program Completion

Rating Scale: N/A = Not Applicable/Not addressed yet
                      1 = Needs 100% Assistance/Feedback: Inadequate (Inability to make changes).
                      2 = Needs 75% Assistance/Feedback: Nominal (regularly needs specific direction/demonstration).
                      3 = Needs 50% Assistance/Feedback: Adequate (often needs some general direction/demonstration).
                      4 = Needs 25% Assistance/Feedback: Good (needs occasional direction/demonstration).
                      5 = Independent with Minimal Assistance/Feedback: Excellent (takes initiative and performs effectively)

Skill Area	Possible Rating Scale Points	Range	Mean	% Meeting Benchmark
Academic and Clinical Knowledge Base:				
Applies current coursework in the clinical setting.	1-5	4-5	4.95	100%
Understands nature of disorders.	1-5	4-5	4.9	100%
Seeks to add to academic knowledge in order to develop an effective treatment program.	1-5	4-5	4.95	100%
Demonstrates increased clinical insight.	1-5	4-5	4.95	100%
Continually seeks to deepen understanding of professional issues.	1-5	4-5	4.95	100%
Diagnostic Skills:				
Conducts a thorough file review and client interview.	1-5	4-5	4.95	100%
Utilizes appropriate diagnostic instruments.	1-5	4-5	4.95	100%
Effectively administers and records tests according to published guidelines.	1-5	4-5	4.95	100%
Accurately interprets test results.	1-5	4-5	4.9	100%
Makes appropriate prognosis and recommendations based on diagnostic results.	1-5	3-5	4.86	95%
Effectively shares results and recommendations and answers questions appropriately.	1-5	4-5	4.9	100%
Administers informal diagnostic instrument if published tests are not appropriate.	1-5	4-5	4.9	100%
Incorporates multiple measures to establish reliability of results.	1-5	4-5	4.95	100%
Quickly learns and				

incorporates new tests or procedures suggested by the supervisor.	1-5	5	5.0	100%
Demonstrates on-going evaluation of client's skills, tasks, and materials.	1-5	4-5	4.95	100%
Treatment Skills:				
Develops and writes appropriate short and long-term objectives.	1-5	3-5	4.76	95%
Sequences treatment to meet the client's needs and maximize the client's performance.	1-5	4-5	4.93	100%
Utilizes a variety of appropriate materials.	1-5	4-5	5.0	100%
Utilizes a variety of appropriate treatment techniques and tasks that are clearly related to the goals.	1-5	4-5	4.9	100%
Effectively manages treatment contingencies (e.g., reinforcement) and behavior.	1-5	4-5	4.9	100%
Accurately and appropriately uses data collection methods.	1-5	4-5	4.9	100%
Provides consistent and appropriate feedback to clients regarding results of treatment sessions and overall progress.	1-5	3-5	4.95	100%
Actively involves clients in treatment by training self-charting, providing regular home assignments, etc.	1-5	4-5	4.81	100%
Adapts treatment methods based on ongoing assessment of client's needs and adjusts pacing when needed.	1-5	4-5	4.86	100%
Respects scheduling restrictions by beginning and ending treatment on time.	1-5	4-5	4.86	100%
Writing Skills:				
Maintains accurate and appropriate progress notes.	1-5	4-5	4.95	100%
Prepares complete, well-organized reports.	1-5	3-5	4.9	95%
Submits written assignments in a timely manner.	1-5	3-5	4.9	95%
Uses correct and				

appropriate grammar, form, style, and spelling in written reports.	1-5	5	5.0	100%
Uses language that is understood by client and family.	1-5	4-5	4.9	100%
Practicum as a Learning Experience:				
Implements recommendations quickly.	1-5	4-5	4.95	100%
Seeks clarification when in doubt.	1-5	4-5	4.95	100%
Develops original and/or appropriate solutions to clinical problems.	1-5	4-5	4.86	100%
Generalizes information to other clients and situations.	1-5	5	5.0	100%
Improves and learns as a result of experience and from supervisory suggestions.	1-5	5	5.0	100%
Demonstrates careful planning & consideration of consequences.	1-5	4-5	4.9	100%
Receives constructive suggestions without resistance.	1-5	5	5.0	100%
Conducts on-going self-analysis to meet personal goals.	1-5	4-5	4.95	100%
Demonstrates appropriate organization skills.	1-5	4-5	4.95	100%
Identifies areas of competencies and areas that need improvement (e.g. self-awareness).	1-5	4-5	4.9	100%
Professionalism & Ethics:				
Communicates effectively using appropriate levels with a variety of individuals (e.g., parents, clients/patients, supervisors).	1-5	4-5	4.9	100%
Establishes and maintains rapport with clients and professionals.	1-5	4-5	4.95	100%
Complies with established clinic or on-site procedures.	1-5	4-5	4.95	100%
Demonstrates knowledge of ASHA's Code of Ethics by applying ethical	1-5	4-5	4.95	100%

standards in all professional relationships.				
Maintains a professional appearance.	1-5	5	5.0	100%
Attends and is on time for all meetings.	1-5	3-5	4.86	95%
Treats all people with respect and safeguards confidentiality.	1-5	5	5.0	100%
Conducts sessions effectively with confidence.	1-5	4-5	4.95	100%
Demonstrates careful planning and consideration of consequences.	1-5	4-5	4.9	100%
Maintains professional focus on client's needs (including physical, psychological, and spiritual).	1-5	4-5	4.9	100%
OVERALL:	**1-5**	**3-5**	**4.93**	**100%**

B. Additional information collected on completer performance and program effectiveness.

1. *Clinic and Student Teaching Evaluation.* Each semester, supervisors and master teachers complete an evaluation of students under their supervision. Those items reflecting on student performances are averaged (per item) and tracked across semesters.
2. *Employer Survey.* With the approval of each alumnus, a survey is sent to his or her employer. The results for each item on the numeric scale are averaged.
3. *Alumni Survey.* Each alumnus is sent a survey. The results for each item on the numeric scale are averaged.
4. *Minutes of Advisory Committee.* Professionals from Fresno County are members of the Deaf Education and Speech Pathology Advisory Committee. This committee meets to provide feedback regarding program development in the Department. The minutes of these committees' meetings are analyzed and areas of strength or needed change will be noted and summarized. Final recommendations are presented to the faculty for consideration.
5. *Graduate Writing Requirement Results.* The percent of students passing the graduate level writing requirement is calculated each year. Major reasons for fails are noted for program review. This information is presented to the faculty.
6. *Comprehensive Examination Results.* These data include number of (a) students passing, (b) passing in oral examinations, and (c) failing the comprehensive examination per academic year.

California State University, Fresno (07-08)
Section A-3
Use of Assessment Results to Improve Candidate and Program Performance

Speech-Language Pathology Services

The assessment data presented in the prior sections of this report indicate that the program is successfully preparing students for employment as speech pathologists in the public schools. They are passing the national examination for speech pathologists at a very high rate, and they also are successfully completing the SLPS Educational Field Placement assessment at nearly 100% for all items. The following list shows our analysis of the data:

Program Strengths:

- A significant number of students demonstrate strong academic and clinical skills in diagnostics, treatment, writing, and ethics during their educational field placements.
- All graduating students met the program's indicators for demonstration of professional dispositions.
- All students met the program's benchmarks for mastery of speech pathology academic content based on final course grades.

Areas for Improvement:

- Counseling skills and working with DHH students are two areas where a number of our graduates do not feel competent.
- The department should examine the content of certain courses to determine if they are meeting the students' needs. For example, is treatment for autistic children covered in sufficient detail in CDDS 215?
- Students should have experiences with more disorders during their on-campus clinic practicum.

California State University, Fresno (07-08)
Section A-4
Use of Assessment Results to Improve Candidate and Program Performance

Speech-Language Pathology Services

Data Source	Data Focus	Action(s)	Contact Person	Timeline
Student Outcomes Assessment Plan (SOAP)	Proficiency with knowledge of academic, clinical, and research learning theory and practices.	• *Exit Interview.* Graduate students will be individually interviewed by members of the Department's Outcomes Assessment Committee.	Fran Pomaville	2009-2010
		• *PRAXIS Results -* The number of graduate students passing or not passing the *PRAXIS Examination in Speech Pathology and Audiology (PRAXIS)* will be summed for the academic year.	Fran Pomaville	2009-2010
		• *Graduate Writing Requirement Results.* The percent of students passing the graduate level writing requirement each year. Major reasons for fails will be noted for program review.	Fran Pomaville	2009-2010

Data Source	Data Focus	Action(s)	Contact Person	Timeline
Student Practicum Evaluation (CDDS 257 – Educational Fieldwork)	Proficiency with professional and ethical aspects of the educational setting related to speech pathology.	• Incorporate discussion of current professional issues in CDDS 209 seminar.	Sharon Inouye	December 2008
		• Consult with educational fieldwork supervisors to obtain specific information regarding SLPS candidates strengths weaknesses	Sharon Inouye	June 2009