

2015-2016 Annual Assessment Report Template

For instructions and guidelines visit our [website](#)
or [contact us](#) for more help.

Report:

Question 1: Program Learning Outcomes

Q1.1.

Which of the following Program Learning Outcomes (PLOs) and Sac State Baccalaureate Learning Goals (BLGs) **did you assess?** [Check all that apply]

- 1. Critical Thinking
- 2. Information Literacy
- 3. Written Communication
- 4. Oral Communication
- 5. Quantitative Literacy
- 6. Inquiry and Analysis
- 7. Creative Thinking
- 8. Reading
- 9. Team Work
- 10. Problem Solving
- 11. Civic Knowledge and Engagement
- 12. Intercultural Knowledge and Competency
- 13. Ethical Reasoning
- 14. Foundations and Skills for Lifelong Learning
- 15. Global Learning
- 16. Integrative and Applied Learning
- 17. Overall Competencies for GE Knowledge
- 18. Overall Competencies in the Major/Discipline
- 19. Other, specify any assessed PLOs not included above:

- a.
- b.
- c.

Q1.2.

Please provide more detailed background information about **EACH PLO** you checked above and other information such as how your specific PLOs are **explicitly** linked to the Sac State BLGs:

Our graduate program has developed ten specific program learning outcomes aligned to the knowledge and skills acquisition outcomes required by our accrediting body, the American Speech-Language-Hearing Association (ASHA) (See assessment plan on file). This year, we assessed PLO 1 (written communication) and we also assessed PLO 2 (critical thinking).

PLO1: Students will communicate effectively in writing in the following formats, genres, and styles of writing used in communication sciences and disorders:

- Grammar
- Clinical Report Writing
- Written Treatment Plans
- Research Literature Reviews
- Self-Evaluation of Clinical Skills
- Professional Letter Writing

PLO2: To demonstrate **skills** in the areas set forth by the American Speech-Language Hearing Association (ASHA) (2014).

Students will demonstrate clinical competence in the areas of Writing, Assessment (Evaluation), Treatment (Intervention), and Professional Behavior (Interaction and Personal Qualities) for required clinical and internship experiences in order to demonstrate skills across the nine major areas delineated by ASHA:

- 1) Articulation
- 2) Fluency
- 3) Voice and Resonance, including respiration and phonation
- 4) Receptive and Expressive language (phonology, morphology, syntax, semantics, pragmatics, prelinguistic communication and paralinguistic communication) in speaking, listening, reading, and writing
- 5) Hearing, including the impact on speech and language
- 6) Swallowing (oral, pharyngeal, esophageal, and related functions, including oral function for feeding, orofacial myology)
- 7) Cognitive aspects of communication (attention, memory, sequencing, problem-solving, executive functioning)
- 8) Social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities)
- 9) Augmentative and alternative communication (AAC) modalities

Q1.2.1.

Do you have rubrics for your PLOs?

1. Yes, for all PLOs
2. Yes, but for some PLOs
3. No rubrics for PLOs
4. N/A
5. Other, specify:

Undo

Q1.3.

Are your PLOs closely aligned with the mission of the university?

1. Yes
2. No
3. Don't know

Undo

Q1.4.

Is your program externally accredited (other than through WASC Senior College and University Commission (WSCUC))?

1. Yes
2. No (skip to **Q1.5**)
3. Don't know (skip to **Q1.5**)

Undo

Q1.4.1.

If the answer to Q1.4 is **yes**, are your PLOs closely aligned with the mission/goals/outcomes of the accreditation agency?

1. Yes
 2. No
 3. Don't know
- Undo

Q1.5.

Did your program use the *Degree Qualification Profile (DQP)* to develop your PLO(s)?

1. Yes
 2. No, but I know what the DQP is
 3. No, I don't know what the DQP is
 4. Don't know
- Undo

Q1.6.

Did you use action verbs to make each PLO measurable?

1. Yes
 2. No
 3. Don't know
- Undo

(Remember: Save your progress)

Question 2: Standard of Performance for the Selected PLO

Q2.1.

Select **ONE(1)** PLO here as an example to illustrate how you conducted assessment (be sure you *checked the correct box* for this PLO in Q1.1):

Critical Thinking

Q2.1.1.

Please provide more background information about the **specific PLO** you've chosen in Q2.1.

See Q1.2. above

Q2.2.

Has the program developed or adopted **explicit** standards of performance for this PLO?

1. Yes
 2. No
 3. Don't know
 4. N/A
- Undo

Q2.3.

Please **provide the rubric(s)** and **standards of performance** that you have developed for this PLO here or in the appendix.

PLO 2 (Critical Thinking)

1. Clinical Competencies:

Tool Description: Our department requires students to complete approximately 32 hours in EACH of five in-house clinics (Speech I, Speech II, Language II, Speech III, Language III), approximately 20 hours in the Language I Clinic, 4 hours in the Assessment Clinic, 4 hours in the Hearing Screenings Clinic, and 200 hours in two internship placements for a total of a minimum of 388 hours of direct client/patient contact. Our graduate program is hierarchical in nature: Each student must have completed coursework related to each disorder before enrolling in the associated clinic. These clinical experiences require the student to apply previously acquired knowledge to real-life situations. Success in these experiences is dependent upon the ability to think critically as the student assesses and treats clients under the supervision of a Clinical Instructor.

The assigned Clinical Instructor completes a clinical competency form for each student in each clinic at midterm and final. Through this process, each clinical experience is assessed formatively and summatively with specific clinical competencies designed to measure critical thinking across the nine skill areas set forth by ASHA divided into four areas: *Writing, Assessment, Treatment, and Professional Behavior*. Specific clinical competency forms are in place for each clinic and internship. Students are provided with the clinical competency evaluations before they begin each clinical experience. Clinical Instructors, who have been trained on the form and its use by the Clinic Coordinator, use this form to provide feedback to students regarding progress.

An example of a rubric maintained for each student, including standards of performance and expectations, is below. A sample competency (Speech 1) is attached. Additionally, as a student meets clinical competency in each clinic, the associated skills are recorded as being met on their ASHA Knowledge and Skills form, maintained electronically by the department.

Standard of Performance: 90% of students will earn an average rating of 80 or better for each of the **4 general** competency categories with no individual line item score of 59 in all of their clinic coursework

Semester	Clinic	Critical Thinking/Skills Area	Standard of Performance/
Semester 1	Speech 1 Language 1	Articulation (PLO2 area 1) Receptive Language (PLO2 area 4)	90% of students v average rating of each of the 4 general competes (<i>Writing, Assessm</i> and <i>Professional Behavior</i>) with no line item score of
Semester 1	Hearing Screenings	Hearing (PLO2 area 5)	Same
Semester 2	Speech 2 Language 2	Fluency/Voice Resonance (PLO2 areas 2 & 3) Receptive/Expressive Language (PLO2 area 4)	Same
Semester 3	Speech 3 Language 3	Social Aspects of Communication/AAC (PLO2 area 8 and 9) Cognitive Aspects of Communication (PLO2 area 7)	Same
Semester 3	Assessment	Articulation (PLO2 areas 1-5 & 7-9) Fluency Voice Resonance Receptive/Expressive Language Hearing Cognitive Aspects of Communication Social Aspects of Communication/AAC	Same
Semester 4	2 Internships	Articulation (PLO2 areas 1-9) Fluency Voice Resonance Receptive/Expressive Language Hearing Cognitive Aspects of Communication Social Aspects of Communication/AAC Swallowing	Same

SCORE	GRADE	DESCRIPTION
93 – 100%	A	<u>Exceeds Performance Expectations</u> (Minimum assistance required) • Clinical skill/behavior well-developed, consistently

		<ul style="list-style-type: none"> • Clinical skill/behavior well developed, consistently demonstrated, and effectively implemented • Demonstrates creative problem solving • Clinical Instructor consults and provides guidance on ideas initiated by student
90 – 92%	A-	
87 – 89%	B+	<u>Meets Performance Expectations</u>
83– 86%	B	(Minimum to moderate assistance required) <ul style="list-style-type: none"> • Clinical skill/behavior is developed/implemented most of the time, but needs continued refinement or consistency • Student can problem solve and self-evaluate adequately in-session • Clinical Instructor acts as a collaborator to plan and suggest possible alternatives
80 – 82%	B-	
77 – 79%	C+	<u>Needs Improvement in Performance</u>
		(Moderate assistance required) <ul style="list-style-type: none"> • Inconsistently demonstrates clinical skill/behavior • Student’s efforts to modify performance result in varying degrees of success • Moderate and ongoing direction and/or support from Clinical Instructor required to perform effectively
73 – 76%	C	
70 – 72%	C-	
67 – 69%	D+	<u>Needs Significant Improvement in Performance</u>
		(Maximum assistance required) <ul style="list-style-type: none"> • Clinical skill/behavior is beginning to emerge, but is inconsistent or inadequate • Student is aware of need to modify behavior, but is unsure of how to do so • Maximum amount of direction and support from clinical Supervisor required to perform effectively.
63 – 66%	D	
60 – 62%	D-	
0 – 59%	F	<u>Unacceptable Performance</u>
		(Maximum assistance is not effective) <ul style="list-style-type: none"> • Clinical skill/behavior is not evident most of the time • Student is unaware of need to modify behavior and requires ongoing direct instruction from Clinical Instructor to do so • Specific direction from Clinical Instructor does not alter unsatisfactory performance

2. Clinical Methods Coursework

Tool Description: Each clinical practicum course is paired with a methods course in which students discuss client profiles, plan assessment and treatment, and complete specific assignments designed to support their developing clinical skills.

support their developing clinical skills.

Standard of Performance: 90% of students will pass all associated methods courses with a grade of B or better


3. Learning Outcomes Assessment


Tool Description: Each year, we distribute a 23-item multiple-choice learning assessment to each student in our program. The items include a focused set of questions in general areas of the curriculum, including specific targets related to the use and interpretation of normative data and basic to higher level distinctions between speech and language. Each question has only one correct answer. The assessment is useful in tracking candidates' mastery of basic knowledge in our major as they progress through the program. It also provides information regarding the development of critical thinking, as 52% of the questions have been designed as "case study" questions that require a higher level of analysis and problem-solving in the style of our national *Praxis* exam.

Standard of Performance: By the fourth semester, 83% of students will answer each of the **critical thinking** questions correctly.

The questions align to the ten specific PLOs in the following manner:

Question	PLOs Assessed	ASHA Knowledge/Skill Outcome Area Assessed	Critical Thinking (CT) Basic Knowledge (BK)
1	2,8,9	IVF, IVG, V	CT
2	5,3,9	IVB, IV(C4), IVG	BK
3	3,4,9	IVA, IV(C3), IV(C4), IVG	BK
4	3, 9	IV(C4), IVG	BK
5	3,5,6,9	IVB, IV(C4), IVD, IVG	BK
6	2,5,6,9	IVB, VB(C4), IVD, IVG	CT
7	2,5,6,9	IVB, VB(C4), IVD, IVG	CT
8	3,4,9	IVA, IV(C3), IVG	BK
9	3,4,9	IVA, IV(C3), IVG	BK
10	2,5,6,9	IVB, VB(C4), IVD, IVG	CT
11	5,6,8,9	IVB, IVD, IVF, IVG	BK
12	3,5,6,9	IVB, IV(C1), IVD, IVG	BK
13	3,4,5,6,9	IVA, IVB, IV(C7), IVD, IVG	BK
14	2,4,5,6,9	IVA, IVB, VB(C7), IVD, IVG	CT
15	2,5,6,9	IVB, VB(C8), IVD, IVG	CT
16	2,5,6,9	IVB, VB(C8), IVD, IVG	CT
17	2,9	VB(C5), IVG	CT
18	3,4,9	IVA, IV(C5), IVG	BK
19	2,4,5,6,9	IVA, IVB, VB(C6), IVD, IVG	CT
20	3,6,9	IV(C2), IVD, IVG	CT
21	2,4,5,6,9	IVA, IVB, VB(C3), IVD, IVG	CT
22	2,4,5,6,9	IVA, IVB, VB(C4), IVD, IVG	CT
23	3,5,6,9	IVB, IV(C9), IVD, IVG	BK

 Click here to attach a file

 Click here to attach a file

Q2.4. PLO **Q2.5. Stdrd** **Q2.6. Rubric** Please indicate where you have published the **PLO**, the **standard** of performance, and the **rubric** that was used to measure the PLO:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. In SOME course syllabi/assignments in the program that address the PLO
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	2. In ALL course syllabi/assignments in the program that address the PLO
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	3. In the student handbook/advising handbook
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	4. In the university catalogue
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. On the academic unit website or in newsletters
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	6. In the assessment or program review reports, plans, resources, or activities
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	7. In new course proposal forms in the department/college/university
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. In the department/college/university's strategic plans and other planning documents

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9. In the department/college/university's budget plans and other resource allocation documents
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10. Other, specify: <input type="text"/>

Question 3: Data Collection Methods and Evaluation of Data Quality for the Selected PLO

Q3.1.

Was assessment data/evidence **collected** for the selected PLO?

1. Yes
2. No (skip to **Q6**)
3. Don't know (skip to **Q6**)
4. N/A (skip to **Q6**)

Undo

Q3.1.1.

How many assessment tools/methods/measures **in total** did you use to assess this PLO?

5

Q3.2.

Was the data **scored/evaluated** for this PLO?

1. Yes
2. No (skip to **Q6**)
3. Don't know (skip to **Q6**)
4. N/A (skip to **Q6**)

Undo

Q3.2.1.

Please describe how you collected the assessment data for the selected PLO. For example, in what course(s) or by what means were data collected:

Direct:

- Clinical Competencies
- Clinical Methods Coursework
- Learning Outcomes Assessment

Indirect:

- National *Praxis* Exam
- Student Survey Feedback
- Biannual Advisory Committee Meeting Feedback

An assigned Clinical Instructor completes a clinical competency form for each student in each clinical course at midterm and final. These are stored electronically by the Clinic Coordinator. As a student meets clinical competency in an area, the required skill is also recorded as being met on their Knowledge and Skills form, maintained electronically by the department.

Methods course instructors file grades for Clinical Methods Courses.

The Learning Outcomes Assessment is distributed in selected course sections. Through this process, it is completed by each student in our program. Each question has one "correct" answer. That data are compiled through survey monkey and analyzed by the Department Chair and Faculty using the alignment table previously provided.

Student results for the National *Praxis* Exam are sent to our department by ETS.

Undergraduate students complete an Undergraduate Experience Exit Survey in a selected class. Graduate students complete a Brief Clinical Experience Survey in one of their methods class. There are sets of evaluative questions on each survey. All of the questions target evaluation of the quality of our program and/or the student experience.

Minutes are taken at biannual advisory committee meetings.

(Remember: Save your progress)

Question 3A: Direct Measures (key assignments, projects, portfolios, etc.)

Q3.3.

Were direct measures (key assignments, projects, portfolios, course work, student tests, etc.) used to assess this PLO?

1. Yes
2. No (skip to **Q3.7**)
3. Don't know (skip to **Q3.7**)

Undo

Q3.3.1.

Which of the following direct measures were used? [**Check all that apply**]

1. Capstone project (e.g. theses, senior theses), courses, or experiences
2. Key assignments from required classes in the program
3. Key assignments from elective classes
4. Classroom based performance assessment such as simulations, comprehensive exams, or critiques
5. External performance assessments such as internships or other community-based projects
6. E-Portfolios
7. Other Portfolios
8. Other, specify:

Q3.3.2.

Please **explain** and **attach** the direct measure you used to collect data:

An assigned Clinical Instructor completes a clinical competency form for each student in each clinical course at midterm and final. These are stored electronically by the Clinic Coordinator. As a student meets clinical competency in an area, the required skill is also recorded as being met on their Knowledge and Skills form, maintained electronically by the department.

Methods course instructors file grades for Clinical Methods Courses.

The Learning Outcomes Assessment is distributed in selected course sections. Through this process, it is completed by each student in our program. Each question has one "correct" answer. That data are compiled through survey monkey and analyzed by the Department Chair and Faculty using the alignment table previously provided.

Please see attached sample Clinical Competency forms and Learning Outcomes Assessment.



Clinical Competency Example.xlsx
20.75 KB



2016 learning_outcome_assesment_questionairre key.docx
29.63 KB

Q3.4.

What tool was used to evaluate the data?

1. **No** rubric is used to interpret the evidence (skip to **Q3.4.4.**)
2. Used rubric developed/modified by the faculty who teaches the class (skip to **Q3.4.2.**)
3. Used rubric developed/modified by a group of faculty (skip to **Q3.4.2.**)
4. Used rubric pilot-tested and refined by a group of faculty (skip to **Q3.4.2.**)
5. The VALUE rubric(s) (skip to **Q3.4.2.**)
6. Modified VALUE rubric(s) (skip to **Q3.4.2.**)
7. Used other means (Answer **Q3.4.1.**)

Undo

Q3.4.1.

If you used other means, which of the following measures was used? [**Check all that apply**]

1. National disciplinary exams or state/professional licensure exams (skip to **Q3.4.4.**)
2. General knowledge and skills measures (e.g. CLA, ETS PP, etc.) (skip to **Q3.4.4.**)
3. Other standardized knowledge and skill exams (e.g. ETC, GRE, etc.) (skip to **Q3.4.4.**)
4. Other, specify: (skip to **Q3.4.4.**)

Q3.4.2.

Was the **rubric** aligned directly and explicitly **with the PLO**?

1. Yes

2. No
 3. Don't know
 4. N/A

Undo

Q3.4.3.

Was the **direct measure** (e.g. assignment, thesis, etc.) aligned directly and explicitly **with the rubric**?

1. Yes
 2. No
 3. Don't know
 4. N/A

Undo

Q3.4.4.

Was the **direct measure** (e.g. assignment, thesis, etc.) aligned directly and explicitly **with the PLO**?

1. Yes
 2. No
 3. Don't know
 4. N/A

Undo

Q3.5.

How many faculty members participated in planning the assessment data **collection** of the selected PLO?

All full and part-time faculty parti

Q3.5.1.

How many faculty members participated in the **evaluation** of the assessment data for the selected PLO?

All full time faculty participate i...

Q3.5.2.

If the data was evaluated by multiple scorers, was there a norming process (a procedure to make sure everyone was scoring similarly)?

1. Yes
 2. No
 3. Don't know
 4. N/A

Undo

Q3.6.

How did you **select** the sample of student work (papers, projects, portfolios, etc.)?

The competency forms are automatically completed for each student at midterm and final.

Methods course grades are on file for each student.

All students complete the Learning Outcomes Assessment. We reviewed all of these.

Q3.6.1.

How did you **decide** how many samples of student work to review?

This year we focused on the competency forms, methods course grades, and Learning Outcome Assessment results for 30 expected program completers (students scheduled to complete fourth semester clinical work and graduate from the program).

Q3.6.2.

How many students were in the class or program?

30 expected completers

84 graduate students total

Q3.6.3.

How many samples of student work did you evaluate?

30 expected completers complete

Learning Assessment Outcomes v

Q3.6.4.

Was the sample size of student work for the direct measure adequate?

1. Yes
 2. No
 3. Don't know

Undo

(Remember: Save your progress)

Question 3B: Indirect Measures (surveys, focus groups, interviews, etc.)

Q3.7.

Were indirect measures used to assess the PLO?

1. Yes
 2. No (skip to **Q3.8**)
 3. Don't Know (skip to **Q3.8**)

Undo

Q3.7.1.

Which of the following indirect measures were used? [Check all that apply]


1. National student surveys (e.g. NSSE)
 2. University conducted student surveys (e.g. OIR)
 3. College/department/program student surveys or focus groups
 4. Alumni surveys, focus groups, or interviews
 5. Employer surveys, focus groups, or interviews
 6. Advisory board surveys, focus groups, or interviews
 7. Other, specify:


Q3.7.1.1.

Please explain and attach the indirect measure you used to collect data:

All students not absent from class on the day the survey was distributed completed the Brief Clinical Experience Survey. All data was analyzed.

While no formal survey is provided to the Community Advisory Board, minutes are taken at each meeting and are reviewed by the faculty at faculty meetings and retreats in order to inform program design.

 [Click here to attach a file](#)

 [Click here to attach a file](#)

Q3.7.2.

If surveys were used, how was the sample size **decided**?

All students not absent from class on the day the survey was distributed completed the Brief Clinical Experience Survey. All data was analyzed.

While no formal survey is provided to the Community Advisory Board, minutes are taken at each meeting and are reviewed by the faculty at faculty meetings and retreats in order to inform program design.

Q3.7.3.

If surveys were used, how did you **select** your sample:

Each of 84 graduate students completed the Brief Clinical Experience Survey.

Our Community Advisory Board, which meets biannually, maintains a system of three cohorts (public schools, hospitals, and private practices) in the community, each with a designated liaison. These cohorts are charged with conducting a caucus prior to the meetings so that an equally-distributed agenda can be created that defines the needs of the group and brings current issues from the field to the direct attention of our faculty. The mission of the committee, which has 19 community members and one student member, is to collaboratively discuss current trends in the fields and to discuss the department's academic and clinical programs so that the department can integrate input from the committee into plans for the ongoing improvement and updating of these programs. While no formal survey was provided to this group in 2015-16, minutes were taken at each meeting and are reviewed by the faculty at faculty meetings and retreats in order to inform program design. Particular attention is paid to the Committee's impression of our graduates and their preparation for clinical practice in the field in the areas outlined in PLO2.

Q3.7.4.

If surveys were used, what was the response rate?

See Q3.7.3

Question 3C: Other Measures (external benchmarking, licensing exams, standardized tests, etc.)

Q3.8.

Were external benchmarking data, such as licensing exams or standardized tests, used to assess the PLO?

1. Yes
2. No (skip to **Q3.8.2**)
3. Don't Know (skip to **Q3.8.2**)

Undo

Q3.8.1.

Which of the following measures was used? [**Check all that apply**]

1. National disciplinary exams or state/professional licensure exams
2. General knowledge and skills measures (e.g. CLA, ETS PP, etc.)
3. Other standardized knowledge and skill exams (e.g. ETC, GRE, etc.)
4. Other, specify:

Q3.8.2.

Were other measures used to assess the PLO?


1. Yes
2. No (skip to **Q4.1**)
3. Don't know (skip to **Q4.1**)


Undo

Q3.8.3.

If other measures were used, please specify:

The *Praxis II* exam in Speech-Language Pathology is required, in addition to the earned Master's Degree and a required professional experience, in order to apply for the American Speech-Language-Hearing Association (ASHA) Certificate of Clinical Competence, the California License in Speech-Language Pathology, and the Clear California Speech-Language Pathology Services Credential with or without the Special Class Authorization. This summative assessment measures candidate's level of preparation for independent practice as a speech-language pathologist in all primary employment settings and is aligned to the knowledge and skills in the 9 areas outlined in PLO2. A pass rate at the national average is threshold for curricular assessment. As of September 2014, *Praxis* Speech-Language Pathology (SLP) test scores are reported on a 100–200 score scale in one-point increments. The required score for ASHA and the state boards of examiners (including the California Speech-Language Pathology and Audiology Licensing Board and the CTC) on the new scale is 162 (equivalent to the required score of 600 or greater on the former 250–990 scale). Initial reports by students and faculty indicate that the new version of the exam highlights critical thinking through the presentation of case studies.

 Click here to attach a file

 Click here to attach a file

(Remember: Save your progress)


Question 4: Data, Findings, and Conclusions


Q4.1.

Please provide simple tables and/or graphs to summarize the assessment data, findings, and conclusions for the selected PLO for **Q2.1**: majority of students report (100% in the "agree" or "strongly agree" categories) that they feel they have been well prepared with theory and knowledge prior to associated clinical experiences.

Indirect Measure 3: Biannual Advisory Committee Meetings

A review of feedback from our advisory committee, which meets biannually, indicates that we are preparing our students well for independent clinical practice. The feedback did highlight a need to bring increased awareness to the prevalence of Autism to our students and increase their ability to think critically about ways to support clients with ASD.

 Click here to attach a file

 Click here to attach a file

Q4.2.

Are students doing well and meeting the program standard? If not, how will the program work to improve student performance of the selected PLO?

A triangulation of the data collected through both direct and indirect measures indicates that our students are exceeding our overall program standards for this PLO (See below). One Direct Measure, our Learning Outcomes Assessment, does provide an opportunity for discussions across our curriculum with regard to specific topics that may require curricular emphasis.

Direct Measure 1: Clinical Competencies (Standard of Performance Exceeded):

During the 2015-16 academic terms, 30 students completed our program on time. All of them well exceeded the program standard of 90% earning an average rating of 80 on each general competency area as 100% of the competency scores were 83 or above in all areas. The faculty recognize that, occasionally, one or two students do not complete our program on time. Because of this, faculty have developed a standardized remediation plan form that corresponds to the clinical competencies form. The form is used as a teaching tool to promote critical thinking in specific competency areas in which a student is demonstrating difficulty and for which the student is at-risk for not reaching moderate to independent level mastery by semester's end. It includes student and Clinical Instructor responsibilities and timelines in the process and requires specification of specific supports to be provided to the student. Any student with a remediation plan in place in two clinics will be provided with a department-level remediation plan specifying specific supports to be provided. The faculty will continue to review the results of the remediation plans developed to determine their effectiveness and to note methodologies that may be of support to future students and Clinical Instructors when a student is demonstrating difficulty in specific areas of clinical skill.

Direct Measure 2: Clinical Methods Course Grades (Standard of Performance Exceeded):

During the 2015-16 academic terms, 30 students completed our program on time. All of them well exceeded our standard of performance of 90% passing all methods courses with a grade of B or better as 100% of them completed all methods courses with a B or better on the first attempt.

Direct Measure 3: Learning Outcomes Assessment (Standard of Performance Partially Met):

During the 2015-16 academic terms, 30 students completed our program on time. These students, however, only

During the 2015-16 academic term, 50 students completed our program on time. These students, however, only partially met the standard of performance set for our Learning Outcomes Assessment on 8 questions (67%). Our goal is for 83% of the students to meet the program standard on 12(100%) of the questions. Questions 10 (Critical thinking/standard scores), 16 (Critical thinking/Autism), 17 (Critical Thinking/Hearing), and 20 (Critical Thinking/fluency) require further analysis to determine if the questions need further development (which affects the validity of this measure) or if curricular modifications or enhancements are appropriate.

Indirect Measure 1: Praxis Exam (Standard of Performance Exceeded)


93% of students taking the *Praxis* exam in 2015-16 passed it on the first attempt, exceeding our program's predetermined standard of performance. Our goal is for 90% of students to pass the exam with a score of 162 or higher. The 2015-16 *Praxis* results indicate that our program has been doing an adequate job of preparing most students for independent practice, but that we realize that we need to attend to the new version of the exam to ensure that our students are prepared for success. We will continue to monitor *praxis* scores to ensure that all of our students are graduating from our program possessing knowledge that is considered by national and state agencies to be essential for independent practice as a speech-language pathologist in all primary employment settings, including schools. Students will be encouraged to take the *Praxis* at the end of the program, after they have had a variety of clinic experiences, including two internships, because the *Praxis* is designed to test both students' knowledge of our field's core content AND their ability to problem solve when given case studies related to practical application. We will continue to test both basic knowledge in our major and critical thinking in our major annually through our Learning Outcomes Assessment in order to ensure development in areas across the curriculum and throughout the program. Dr. Roseberry-McKibbin has addressed faculty on the creation of academic experiences that prepare students for the critical thinking required to pass the newest version of the *Praxis* exam. We plan to have a retreat discussion in fall 2016 regarding our current comprehensive examination structure in an attempt to ensure a case-study format that provides additional preparation for students preparing to take the *Praxis*.


Indirect Measure 2: Brief Clinical Experience Survey (Feedback Exceeds Expectations)

This year, we conducted our Brief Clinical Experience Survey. The results indicate that the majority of students report (100% in the "agree" or "strongly agree" categories) that they feel they have been well prepared with theory and knowledge prior to associated clinical experiences.

Indirect Measure 3: Biannual Advisory Committee Meetings (Feedback Exceeds Expectations)

Feedback from our Community Advisory Committee indicates that we are preparing our students well for independent clinical practice, but that an increased focus increased awareness to the prevalence of Autism Spectrum Disorder to our students and increase their ability to think critically about ways to support clients with ASD would be helpful. We have implemented curriculum discussions in our faculty meetings focusing on particular areas in our curriculum. Through these discussions our faculty determine ways we can cover important concepts, such as ASD. We have hired two new full time tenure track faculty members in the last two years. They have both served as lead teachers for our SPHP 142 ASD class. Their expertise and teaching ability will benefit student learning and critical thinking in this area. We will attend to continued outcomes in this area and expect to see higher levels of critical thinking in this area in future graduating cohorts.

 Click here to attach a file

 Click here to attach a file

Q4.3.

For the selected PLO, the student performance:

- 1. **Exceeded** expectation/standard
- 2. **Met** expectation/standard
- 3. **Partially** met expectation/standard
- 4. Did not meet expectation/standard
- 5. No expectation/standard has been specified
- 6. Don't know

Undo

Question 4A: Alignment and Quality

Q4.4.

Did the data, including the direct measures, from all the different assessment tools/measures/methods directly align with the PLO?

- 1. Yes
- 2. No
- 3. Don't know

Q4.5.

Were **all** the assessment tools/measures/methods that were used good measures of the PLO?

1. Yes
 2. No
 3. Don't know

Question 5: Use of Assessment Data (Closing the Loop)

Q5.1.

As a result of the assessment effort and based on prior feedback from OAPA, do you anticipate *making any changes* for your program (e.g. course structure, course content, or modification of PLOs)?

1. Yes
 2. No (skip to **Q5.2**)
 3. Don't know (skip to **Q5.2**)

Q5.1.1.

Please describe *what changes* you plan to make in your program as a result of your assessment of this PLO. Include a description of how you plan to assess the impact of these changes.

The faculty and Clinic Coordinator will review the results of any remediation plans developed that are aligned to the Clinical Competency forms at the fall 2016 faculty retreat to determine their effectiveness. To date, I can report that three plans were written in 2015-16. These students successfully passed the clinical course for which the plan was written. The competencies, when coupled with the standardized remediation plan, appear to be providing support to students in the acquisition of clinical competency in areas essential for independent practice as a speech-language pathologist, but particularly to those who may be having a difficult time demonstrating competency in specific areas requiring advanced skill sets that require synthesis and application of previously learned information. Reviewing clinical skill development in this manner will continue to provide opportunities for students and Clinical Instructors to set goals for improvement earlier in the clinical sequence and earlier in specific semesters. The faculty will continue to review the results of the remediation plans developed to assess the impact of these changes in our students educational plans and to determine their effectiveness and to note methodologies that may be of support future students and Clinical Instructors when a student is demonstrating difficulty in specific areas of clinical skill.

Learning Outcome questions 10 (Critical thinking/standard scores), 16 (Critical thinking/Autism), 17 (Critical Thinking/Hearing), and 20 (Critical Thinking/fluency) require further analysis to determine if the questions need further development to improve the validity of this measure or if curricular modifications or enhancements are appropriate. The faculty will review the overall results from the Learning Outcomes Assessment, paying particular attention to these questions, at our fall faculty retreat. We will assess the impact of these changes as part of our ongoing cycle of review and revision to this annual measure.

We will continue to monitor *Praxis* scores to ensure that our students are graduating from our program possessing knowledge that is considered by national and state agencies to be essential for contemporary independent practice as a speech-language pathologist in all primary employment settings. Dr. Roseberry-McKibbin, a member of our Curriculum Committee, will continue to address faculty on the creation of academic experiences that prepare students for the critical thinking required to pass the newest version of the *Praxis* exam. We will adjust curriculum, culminating experience, and Learning Outcomes Assessment expectations to support students' preparation for the new version of the exam and following our biannual discussion on the topic at our faculty retreat in fall 2016.

Articulation across the curriculum with the Curriculum Committee's guidance will continue related to the topics of Autism Spectrum Disorder (ASD). A goal for next year is to do a service learning opportunity to provide experience for our students in working with clients with autism. The students will be working in a group with a client with ASD. Students will be required to determine communication strategies to facilitate communication for the child with ASD. Observations in the field will help students have a better understanding of treatment ideas and goals and improve critical thinking across cohorts as information is shared in clinical methods courses. We will assess the impact of these changes through our related questions on the Learning Outcomes Assessment and through ongoing feedback from our Community Advisory Committee.

Q5.1.2.

Do you have a plan to assess the *impact of the changes* that you anticipate making?

1. Yes
 2. No
 3. Don't know

Undo

Q5.2.

How have the assessment data from the last annual assessment been used so far? **[Check all that apply]**

Undo 1-12 Undo 12-23

	1. Very Much	2. Quite a Bit	3. Some	4. Not at All	5. N/A
1. Improving specific courses	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Modifying curriculum	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Improving advising and mentoring	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Revising learning outcomes/goals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Revising rubrics and/or expectations	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Developing/updating assessment plan	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Annual assessment reports	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Program review	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Prospective student and family information	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Alumni communication	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. WSCUC accreditation (regional accreditation)	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Program accreditation	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. External accountability reporting requirement	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Trustee/Governing Board deliberations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
15. Strategic planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
16. Institutional benchmarking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
17. Academic policy development or modifications	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. Institutional improvement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
19. Resource allocation and budgeting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
20. New faculty hiring	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. Professional development for faculty and staff	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. Recruitment of new students	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

23. Other, specify:

Q5.2.1.

Please provide a detailed example of how you used the assessment data above:

The feedback from last year's assessment report helped us begin to better align our annual assessment to our PLOs. We also realized that we needed to update our Assessment Plans. The plans, along with curriculum maps, were successfully updated and have been submitted to the Office of Program Assessment at Sacramento State.

We added new questions in key areas to our Learning Outcomes Assessment as a result of the analysis of data for last year's report because it was clear that we were not assessing the following PLO ASHA areas: A (culture), C2, C5, C6, C9. Questions were added in these areas. We also added new questions in key areas as a result of the assessment data in the report that indicated areas needed more curricular focus: AAC, audiology, and aural rehabilitation. All questions were coded according to which of our 10 PLOs they assess, which of the ASHA Learning outcomes they address, and whether they assess Basic Knowledge or Critical Thinking. The learning assessment results are reviewed each year at our fall faculty retreat when an item analysis is conducted. This item analysis allows us to see our students' mastery of each element of the PLO. The assessment is adjusted annually as needed in order to assess areas of perceived need that may also require pedagogical emphasis.

We also adjusted our culminating experience comprehensive exam question to support students' preparation for the new version of the *Praxis* exam following a robust discussion on the topic at our faculty retreat in fall 2015. In the spirit of the exam, specific questions were designed to highlight critical thinking through the presentation of case studies. Students are required to provide written responses to these questions on the Comprehensive Exam.

We have continued our emphasis on undergraduate audiology mentoring and tracking. In fact, our National Student Speech-Language Hearing Association (NSSLHA) Chapter has developed a focus group for students emphasizing Audiology in our program and we have initiated an annual Audiology orientation for junior-level students who want to investigate the possibility of a career in the field. The event is attended by all of our Audiology part-time faculty and led by the department chair. We have also continued to focus on the development of our adult language disorders strand with didactic instruction spanning the undergraduate and graduate programs. Our program also includes a plethora of opportunities for volunteer work with adult populations at the undergraduate level and required clinical practicum at the graduate level. We have further developed our instruction and opportunities in the areas of AAC and Interprofessional Education (IPE). A specific AAC strand, which moves from undergraduate and graduate educational experiences for all students to specific internship experiences for students interested in pursuing AAC as a specialty, has been developed. Interprofessional education is regularly conducted at the graduate level with the department of Nursing in the area of dysphagia and one of our faculty members has been instrumental in the design and approval of an Interprofessional Education Center on campus that will be developed in the next years and will involve the departments of Nursing, Social Work, Speech Pathology and Audiology, and Physical Therapy.

(Remember: Save your progress)

Additional Assessment Activities

Q6.

Many academic units have collected assessment data on aspect of their program *that are not related to the PLOs* (i.e. impacts of an advising center, etc.). **If** your program/academic unit has collected data on program *elements*, please briefly report your results here:

We also measured:

Question 1: PLO1 Writing

Students will communicate effectively in writing in the following formats, genres, and styles of writing used in communication sciences and disorders:

- • Grammar
- • Clinical Report Writing
- • Written Treatment Plans
- • Research Literature Reviews
- • Self-Evaluation of Clinical Skills
- • Professional Letter Writing

Question 2/3/4 Standard of Performance/Data, Findings, and Conclusions

A triangulation of the data collected through both direct and indirect measures indicates that our students are exceeding our overall program standards for this PLO1 (See below). One Direct Measure, our Learning Outcomes Assessment, does provide an opportunity for discussions across our curriculum with regard to specific topics that may require curricular emphasis.

Direct Methods

1. Graduate Intensive Writing Course (CSAD 242A): 90% of students will earn a grade of B- or better on specific assignments and an overall course grade of B (Standard of Performance Exceeded)

In Fall 2015, 18 students (all first-semester clinic students) were enrolled in the class. 100% of them met the standard of performance above: 10 students obtained a grade of A and 8 students obtained a grade of A-. All students demonstrated competency on the specific assignments by earning a grade of B- or higher.

In Spring 2016, 17 students (all first-semester clinic students) were enrolled in the course. 100% of them met the standard of performance above: 15 students obtained an A and 2 students obtained an A-. All students demonstrated competency on the specific assignments by earning a grade of B- or higher.

*2. Clinical Competencies: 90% of students will earn an average rating of 80 or better for the **writing** competency category in all of their clinical courses. No individual line item score of 59 or less (Program Standard Met)*

In both fall and spring, all students enrolled in all of our clinics met the program standard above.

Indirect Methods

1. National Praxis Exam: 90% of students will score 162 or higher (Standard of Performance Exceeded)

93% of students taking the Praxis exam in 2015-16 passed it on the first attempt. Our goal is for 90% of students to pass the exam.

2. Student Survey Feedback (Feedback Exceeds Expectations)


This year, we conducted our Brief Clinical Experience Survey. The results indicate that the majority of students report (100% in the “agree” or “strongly agree” categories) that they feel they have been well prepared with theory and knowledge prior to associated clinical experiences. They feel they have the tools to be successful in clinical experiences in the areas of *Writing, Assessment, Treatment, and Professional Behavior*.


3. Biannual Advisory Committee Meeting Feedback (Feedback Exceeds Expectations)

Feedback from our Community Advisory Committee indicates that we are preparing our students well for independent clinical practice, but a review of the minutes from the biennial indicates that a focus on professional letter writing would be helpful.

Question 5: Use of Assessment Data (Closing the Loop)

Dr. Thompson will continue to emphasize professional letter writing in Speech-Language Pathology in the Graduate Writing Intensive (GWI) course to ensure that students have experience with this. The course was piloted in Fall 2015 and officially approved for Spring 2016, so it is anticipated that professionals in the field will begin to notice the results with upcoming groups of program completers.

 Click here to attach a file

 Click here to attach a file

Q7.

What PLO(s) do you plan to assess next year? [**Check all that apply**]

- 1. Critical Thinking
- 2. Information Literacy
- 3. Written Communication
- 4. Oral Communication
- 5. Quantitative Literacy
- 6. Inquiry and Analysis
- 7. Creative Thinking
- 8. Reading
- 9. Team Work
- 10. Problem Solving
- 11. Civic Knowledge and Engagement
- 12. Intercultural Knowledge and Competency
- 13. Ethical Reasoning
- 14. Foundations and Skills for Lifelong Learning
- 15. Global Learning
- 16. Integrative and Applied Learning
- 17. Overall Competencies for GE Knowledge
- 18. Overall Competencies in the Major/Discipline
- 19. Other, specify any PLOs not included above:

a.

b.

c.

Q8. Please attach any additional files here:

Q8.1.

Have you attached any files to this form? If yes, please list every attached file here:

2016 learning_outcome_assesment_questionairre key.docx

Clinical Competency Example.xlsx

Departmental Assessment Plan MS and Credential.docx (Curriculum Map embedded in document)

Program Information (Required)

P1.

Program/Concentration Name(s): [by degree]

BS Speech Pathology & Audiology

P1.1.

Program/Concentration Name(s): [by department]

Speech Pathology & Audiology BS

P2.

Report Author(s):

Robert Pieretti, Ph.D., CCC-SLP

P2.1.

Department Chair/Program Director:

Robert Pieretti, Ph.D., CCC-SLP

P2.2.

Assessment Coordinator:

Robert Pieretti, Ph.D., CCC-SLP

P3.

Department/Division/Program of Academic Unit

Speech Pathology & Audio.

P4.

College:

College of Health & Human Services

P5.

Total enrollment for Academic Unit during assessment semester (see Departmental Fact Book):

Undergraduate: 330 Second B

P6.

Program Type:

- 1. Undergraduate baccalaureate major
- 2. Credential
- 3. Master's Degree
- 4. Doctorate (Ph.D./Ed.D./Ed.S./D.P.T./etc.)
- 5. Other, specify: MS and Credential. The Programs are identical. Earning the MS qualifies students for c...

P7. Number of **undergraduate degree programs** the academic unit has?

2

P7.1. List all the names:

Speech Pathology & Audiology

Second Bachelors of Science in Speech Pathology & Audiology (SBSSPA)

P7.2. How many concentrations appear on the diploma for this undergraduate program?

0

P8. Number of **master's degree programs** the academic unit has?

1

P8.1. List all the names:

Speech Pathology

P8.2. How many concentrations appear on the diploma for this master's program?

0

P9. Number of **credential programs** the academic unit has?

1

P9.1. List all the names:

Speech Pathology Services Credential with or without Special Class Authorization

P10. Number of **doctorate degree programs** the academic unit has?

0

P10.1. List all the names:

When was your **assessment plan...**

Undo

	1. Before 2010-11	2. 2011-12	3. 2012-13	4. 2013-14	5. 2014-15	6. No Plan	7. Don't know
P11. developed?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
P11.1. last updated?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

P11.3.

Please attach your latest **assessment plan**:



Departmental Assessment Plan MS and Credential.docx
40.08 KB

P12.

Has your program developed a **curriculum map**?

- 1. Yes
- 2. No
- 3. Don't know

Undo

P12.1.

Please attach your latest **curriculum map**:



Departmental Assessment Plan MS and Credential.docx
40.08 KB

P13.

Has your program indicated in the curriculum map where assessment **of student learning** occurs?

- 1. Yes
- 2. No
- 3. Don't know

Undo

P14.

Does your program have a capstone class?

- 1. Yes, indicate:
- 2. No
- 3. Don't know

Undo

P14.1.

Does your program have **any** capstone project?

- 1. Yes
- 2. No
- 3. Don't know

Undo

(**Remember: Save your progress**)

Direct Measure 1: Clinical Competencies:

In 2015-16, 100% of graduate students completing the program earned an average rating of 80 or better for each of the **4 general** competency categories (*Writing, Assessment, Treatment, and Professional Behavior*) in all of their required clinical courses with no individual line item score of 59 or less.

30 students completed the program in 2015-16 in two cohorts (fall and spring). The tables below include the average results of these students' Speech I Methods (first semester) clinic and their Itinerant Public School Internship (fourth semester) clinic. These tables provide a representative example of the overall performance of this group as they moved through the clinical sequence.

Speech I Clinic	Score Range	Mean	Standard Deviation	Median
Writing	87-100	94.8	4.12	95
Assessment	83-99	93.1	3.92	93
Treatment	83-100	95.4	3.68	95
Professional Behavior	89-100	97.6	2.35	98
Total Overall	85.5-99.8	95.2	3.15	94.5

Itinerant Internship	Score Range	Mean	Standard Deviation	Median
Writing	84-100	95.4	3.93	96
Assessment	87-100	96.2	3.73	97.5
Treatment	87-100	95.7	4.04	96
Professional Behavior	88-100	97.1	3.65	98.5
Total Overall	86.5-100	96.1	3.51	97

Our analysis confirms that the 100% of our 2015-16 completers successfully met the criteria for demonstrating clinical competency independently for each clinical experience in which they were enrolled during their time in the program. Also, there is a general trend of growth noted in critical thinking as they move through the program, as evidenced by overall analysis of clinical competencies across the clinical and internship experiences, particularly in the area of assessment.

Direct Measure 2: Clinical Methods Courses: 100% of our 2015-16 completers passed all methods classes associated with their clinical practicum courses with a grade of B or better on the first attempt.

Direct Measure 3: Learning Outcomes Assessment:

In 2015-16, the data indicates that, by the fourth semester, 83% of students are answering 8 of 12 (67%) of the **critical thinking** questions correctly. The results demonstrate a general trend of acquisition of critical thinking skills as students progress through the program, as most questions show a steady increase in percent answered correctly across semesters 1-4. For example, while only 17% of first semester students meet the fourth semester standard of performance, 67% of 4th semester students meet it. Questions 10, 16, 17, and 20 require further examination both in terms of their general trend of growth across semesters and because 83% of fourth semester students are not able to answer them correctly.

2015-2016												
Cohorts	% of students answering critical thinking questions correctly											
	1	6	7	10	14	15	16	17	19	20	21	22
1 st Semester	64.7	58.8	82.3	41.1	41.1	29.4	52.9	11.7	47.1	17.6	94.1	94
2 nd Semester	90	80	80	55	60	50	40	25	80	25	95	85
3 rd Semester	68.7	81.2	81.2	56.2	81.2	75	43.7	18.7	93.7	12.5	93.7	69
4 th Semester	92.8	85.7	85.7	78.5	85.7	92.8	50	35.7	100	42.8	92.8	100

Indirect Measure 1: Praxis Exam

As of September 2014, *Praxis* Speech-Language Pathology (SLP) test scores are reported on a 100–200 score scale in one-point increments. The required score for ASHA and the state boards of examiners (including the California Speech-Language Pathology and Audiology Licensing Board and the CTC) on the new scale is 162 (equivalent to the required score of 600 or greater on the former 250–990 scale).

In 2015-16, 30 students took the *Praxis* exam. 28 students (93%) passed the exam on the first attempt. One student passed it on the third attempt. One student needs to retake the exam. The mean passing score was 179.

Indirect Measure 2: Brief Clinical Experience Survey

A review of feedback from our Brief Clinical Experience Survey, completed by 84 students, indicates that the majority of students report (100% in the “agree” or “strongly agree” categories) that they feel they have been well prepared with theory and knowledge prior to associated clinical experiences.

Indirect Measure 3: Biannual Advisory Committee Meetings

A review of feedback from our advisory committee, which meets biannually, indicates that we are preparing our students well for independent clinical practice. The feedback did highlight a need to bring increased awareness to the prevalence of Autism to our students and increase their ability to think critically about ways to support clients with ASD.