Background

As mandated by Standard V of the 2005 Standards for Certification, set forth by the American Speech-Language-Hearing Association, programs in communication disorders must design and implement plans for formative (Standard V-A) and summative (Standard V-B) assessment of the student’s acquisition of the knowledge and skills outcomes in Standard III (knowledge outcomes) and IV (skills outcomes). The goal of formative assessment is to collect critical information for monitoring a student’s progress toward acquisition of knowledge and skills. Formative assessment is an on-going process. The goal of summative assessment is to determine the cumulative body of knowledge and skills a student as acquired over the course of their professional preparation. Although ASHA standards mandate assessment only at the graduate level, the Department of Communication Disorders recognizes that some knowledge and outcomes are integrated into the undergraduate and graduate programs. Thus, this student assessment plan describes the assessment process at both levels of study.

When a student enters the graduate program, the student’s advisor will consult with the student regarding courses taken at the undergraduate level to determine which basic knowledge objectives have been met at the undergraduate level. It is assumed that this will apply mainly to basic sciences and basic human communication sciences. Knowledge outcomes for communication disorders are expected to be primarily acquired through coursework taken while the student is enrolled in the graduate program.

Formative Assessment

Knowledge Acquisition

The primary means of knowledge acquisition is through didactic coursework throughout the student’s undergraduate and graduate study. All assessments conducted within the course framework is considered formative in that it allows the student to document whether or not they have acquired a particular set of knowledge outcomes associated with a given course. However, the exact assessment methods within a course are the purview of the faculty instructor. These methods may include, but are not limited to:

- quizzes and examinations
- laboratory practica
- research papers and/or other written assignments
- oral presentations
- problem-based projects
- case study assignments

It is the faculty instructor’s responsibility to determine and verify the specific knowledge outcomes that are addressed in a given course. They should indicate these knowledge outcomes within the course syllabus. In addition, they should provide the student with a checklist of the knowledge outcomes for a given course that will document whether or not the student achieved the outcomes addressed in that course.

If a student achieves a grade of “A” in a course, then the student has met all knowledge outcomes for that course, unless a particular outcome is addressed through a combination of courses. In this case, it will be noted which courses the student must successfully complete in order to achieve the knowledge outcome. This should be clear in the KASA checklist for each course.

If a student achieves a grade of “C” or lower in a course, then the student has not achieved any knowledge objectives for that course. Even though a “C” may be deemed passing for the purposes of achieving the undergraduate or graduate degree, it implies that only a minimal level of understanding toward knowledge outcomes was demonstrated. The student, in consultation with the instructor and academic advisor, must develop a “Student Assistance Plan” to address the knowledge deficiencies.

If a student achieves a grade of “B” in a course, then the student may have achieved some knowledge outcomes but not necessarily all objectives. The instructor will indicate on the KASA checklist for the course which objectives have been achieved.
If a student has failed to achieve any outcomes, it must be determined whether the student will have an opportunity in a later course to satisfactorily achieve a knowledge outcome or whether a “Student Assistance Plan” must be developed (the Student Assistance Plan is addressed in a separate document).

Skills Acquisition

The primary means of skills acquisition is through the clinical practica. The majority of these experiences occur at the graduate level of study. While it is desired that most skills outcomes are obtained via actual client contact experiences, there are other possible mechanisms by which a student may acquire and demonstrate clinical skills. These typically involve problem-based experiences that require the student to utilize clinical skills even though an actual client is not participating. Skills obtained in this manner must be documented on the KASA Course Checklist for the course in which the skill was demonstrated.

In each clinical practicum, students are evaluated at least twice, once at mid-term and once at the conclusion of the academic semester. These evaluations are conducted using department-approved forms which yield ratings of performance in key skill outcome areas. In addition, students are required to conduct self-evaluations of clinical performance using department-approved instruments. A similar process is completed during the two required externship experiences as well.

As with knowledge outcomes, skills outcomes are documented and progress is monitored. However, unlike courses which are typically taken only once during a student’s academic career, clinic practica or externship experiences are offered each semester of graduate study. This provides the student with multiple opportunities to develop the basic set of skills outcomes and then demonstrate them within each of the required focus areas as designated by the ASHA standards. Although progress is essentially monitored in an on-going basis in each semester, there are three key monitoring points that are utilized to determine if sufficient progress is being made on skills outcomes or whether a Student Assistance Plan is required. The first key monitoring point is at the end of the third, on-campus clinical experience and the clinical coordinator conducts the review at this juncture. The second monitoring point is at the conclusion of the first externship experience and this review is conducted by the externship coordinator. The final monitoring point is the final scheduled meeting with the externship coordinator at the conclusion of the final externship experience. It is at this meeting that final verification of the skills outcomes occurs. A Student Assistance Plan may be deemed necessary at any point of the student’s clinical practica if a student has failed to make progress toward achievement of objectives or has unachieved objectives at the conclusion of the final externship experience.

Summative Assessment

There are three components of summative assessment completed toward the end of the student’s graduate program of study. These include completion of the final externship experience with a grade of “B” or higher; completion of a capstone research project; and completion of a final comprehensive examination (written for nonthesis students and oral for thesis students). The procedures for the capstone research and the comprehensive examination are described in a separate department guideline.

Failure to successfully complete any of these summative assessments requires that a “Student Assistance Plan” be developed in order to assist the student in addressing any deficiencies seen in the summative assessment process. The student’s academic advisor will coordinate the development of the Student Assistant Plan in these cases.