
2003-2004 ANNUAL REPORT FORMAT

Council on Academic Accreditation in Audiology and Speech-Language Pathology

DATE:	November 24, 2003	
CAA FILE # :	ANNUAL REPORT #: 159	
INSTITUTION:	University of Wisconsin - Whitewater	
SCHOOL, COLLEGE, DIVISION:	Education	
DEPARTMENT /PROGRAM:	Communicative Disorders	
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DATE OF LAST ACCREDITATION REVIEW BY CAA/ASHA:	Site Visit October 2001	
AREAS OF ACCREDITATION :	<input type="checkbox"/> Audiology	<input checked="" type="checkbox"/> Speech-Language Pathology
DEGREE(S) AWARDED:		MS Communicative Disorders
PERIOD OF ACCREDITATION:	From: Dec. 1, 2001	To: November 30, 2006
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REGIONALLY ACCREDITED BY:	North Central Association of Colleges and Schools	
PERIOD OF ACCREDITATION:	From: Spring, 1996	To: Spring, 2005-06

A. Prior Concerns. List any concerns noted by the CAA in your last reporting period, and describe steps taken to address those concerns.

Since the last Annual Report #1 - 2002 the Council requested an update relative to five standards italicized below. These items are addressed as follows :

Std. 1.6 *Please discuss the pass rate of students taking the Praxis examination in speech-language pathology. The program reported that only 1 of 10 students passed in the last reporting period.*

Appendix I. Praxis Exam data were incorrectly entered. It should have reported that 9 of 10 students passed in the last reporting period. We had one student scored a 590, which was the only failing score. The average score was 684 and the performance range was 590 to 750.

Std. 2.1 *Certification status for Jeanne Gantenbein. This individual should not be used to supervise students for the purpose of ASHA certification.*

The Program is aware of the certification status of the individual noted above. This name has been deleted from the certification roster.

Stds. 2.1, 2.2 *Please provide an update on the search for a full-time tenure-track replacement for Dr. Lucrezia Tomes.*

REPLACED Lucrezia Tomes Ph.D., Assistant Professor CCC-SLP **WITH Jeffrey Lewis Ph.D., Assistant Professor CCC-SLP in August, 2002.**

Std. 5.2 *Please describe recent efforts to increase space allotted to the program.*

The program has reassigned space within the facility. The Speech Science Lab has been reconfigured using a vacated office in the department. This move has resulted in increased lab space for graduate students. Storage areas and workrooms are being reorganized in an attempt to increase efficiencies and utilize space to the maximum.

B. Standards Check Sheet. Complete the following check sheet and check YES for any changes that have occurred during the last reporting period related to each of the specific standards and explain the changes in Section C below. Check YES with an **asterisk (*)** for any anticipated changes related to specific standards and describe in Section D below. (Refer to the CAA's Policy on Substantive Changes to determine if you also need to submit a Substantive Change Plan with this report, as described in Section D.2. below.)

- | | | | |
|-----|--------------|------|--------------|
| 1.1 | NO__ YES__ | 3.5 | NO__ YES__ |
| 1.2 | NO__ YES_x__ | 3.6 | NO__ YES__ |
| 1.3 | NO__ YES__ | 3.7 | NO__ YES__ |
| 1.4 | NO__ YES_x__ | 3.8 | NO__ YES__ |
| 1.5 | NO__ YES__ | 3.9 | NO__ YES__ |
| 1.6 | NO__ YES_x__ | 3.10 | NO__ YES__ |
| 1.7 | NO__ YES_x__ | 4.1 | NO__ YES__ |
| 1.8 | NO__ YES_x__ | 4.2 | NO__ YES_x__ |
| 2.1 | NO__ YES_x__ | 4.3 | NO__ YES__ |
| 2.2 | NO__ YES__ | 4.4 | NO__ YES_x__ |
| 2.3 | NO__ YES__ | 5.1 | NO__ YES__ |
| 2.4 | NO__ YES__ | 5.2 | NO__ YES__ |
| 3.1 | NO__ YES__ | 5.3 | NO__ YES__ |
| 3.2 | NO__ YES_x__ | 5.4 | NO__ YES__ |
| 3.3 | NO__ YES__ | 5.5 | NO__ YES_x__ |
| 3.4 | NO__ YES__ | | |

C. Changes Related to Accreditation Standards. Describe in detail any changes that have occurred in your program as you identified above in **Section B** since your last submitted report (Application or Annual Report, as appropriate), as related to the following standards and issues.

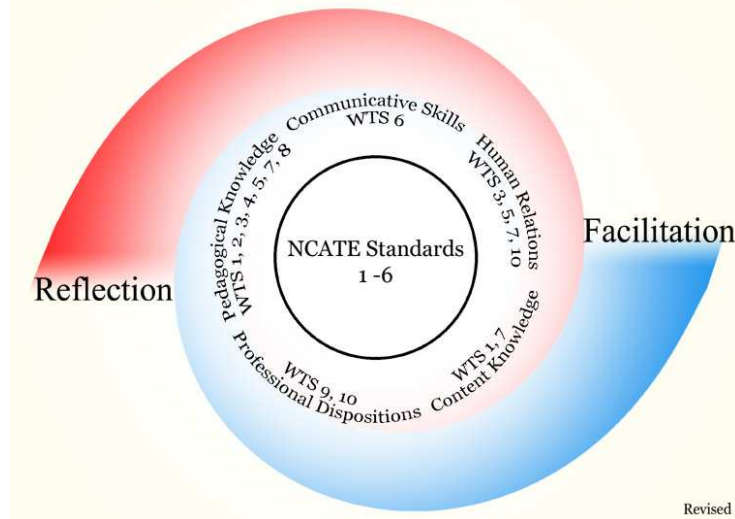
1.0 Administrative Structure and Governance

1.2 The scope of professional practice for the faculty in the Department of Communicative Disorders is unique. We are aligned with the COE mission philosophically, but our practice and training perspective, while inclusive of educational setting is much broader. In essence, our faculty consists of communication scientists with varied specialties in speech and/or language and/or hearing science who prepare graduate and undergraduate students to work across the lifespan and in varied settings. The department is guided by national standards through CAA¹ accreditation, and state licensure requirements through DPI², thus ensuring maximum job marketability in medical and/or school environments.

¹ Council of Academic Accreditation – American Speech-Language and Hearing Association

² Department of Public Instruction

The Teacher is a Reflective Facilitator



Our conceptual framework, The Teacher is a Reflective Facilitator, is the underlying structure in our teacher preparation program at UW-Whitewater that gives conceptual meanings through an articulated rationale to our operation. It also provides direction for our licensure programs, courses, teaching, candidate performance, faculty scholarship and service, and unit accountability. In short, our teacher education program is committed to reflection upon practice; to facilitation of creative learning experiences for pupils; to constructivism in that all learners must take an active role in their own learning; to information and technology literacy; to diversity; and to inquiry (research/scholarship) and assessment. Therefore, all syllabi pertaining to courses required for licensure reflect commitment to these underlying principles.

The assessment plan of the Communicative Disorders Department (as of 5/24/02) includes Knowledge Outcomes, Skill Outcomes, and Dispositions. Numbers (K.1- K.3.) relate to Knowledge Outcomes. Numbers (SK. 1. - SK. 2.) relate to Skills and (D. 1. - D. 5.) refer to Dispositions. As students progress through the curriculum they will be expected to apply their knowledge, skills, dispositions and use of technology to solving problems, thinking critically, and communicating effectively within diverse communication contexts. The following **three examples** of student outcomes are in compliance with the Department of Communicative Disorders Assessment Plan to assess Knowledge=K, Skills=SK and Dispositions=D which are aligned with the Council on Academic Accreditation Standards in Speech Language Pathology (CAA), see () items; and PI 34 Wisconsin Teaching Standards [WTS], see [] items.

I EXAMPLE ONE

A. Knowledge/Content	Standards	
Students will know/understand the:	ASHA	WTS
1. Advantages and limitations of various models of assessment	III-E.5	8
2. Principal questions addressed in the assessment process	III-E.5	8
3. Psychometric criteria used in standardized assessment procedures	III-E.5	8
4. Difference between norm-referenced and criterion-referenced assessment procedures	III-E.5	8
5. Various types of assessment methods used in communicative disorders	III-E.5	8
6. Importance of cultural competence and communication skills in clinical practice	III-E.5	2
B. Skills		
Students will be able to:		
1. Develop assessment rationales and protocols based on different theoretical orientations	III-E.2 III-A.3	8
2. Critically evaluate assessment procedures using appropriate psychometric criteria	III-E.3	9
3. Make clinical decisions, understand the issues involved, and select appropriate assessment methods to aid in the decision-making process	III-E.2	8, 9
4. Use effective listening and communication techniques in simulated situations	III-A.3	6
5. Identify behaviors reflective of cultural competence	III-E.3	6

II EXAMPLE TWO

A. Knowledge/Content	Standards
1. Describe the historical events which have helped establish audiology as a profession.	
2. List the ASHA certification requirements for audiology.	
3. List and describe the different employment settings available for audiologists.	
4. Describe the role of the otolaryngologist, audiologist, hearing aid dealer/specialist, educator of the deaf, and speech-language pathologist in the identification and re/habilitation of hearing loss.	
5. Describe the basics of the anatomy and physiology in the auditory system. (K1, K2)	
6. Describe the different type, degree, and configurations of hearing loss. (K2)	
7. Describe and interpret basic tuning fork tests. (K3)	
8. Describe the pure tone audiometer and test environment necessary to conduct testing. (K3)	
9. Describe the purpose of bone conduction testing. [8] (K3)	
10. Interpret audiograms. SM5, CM5 [8] (K3)	
11. Explain interaural attenuation and describe its role in masking. (K1,K2,K3)	
12. Describe how a speech audiometer works. (K3)	
13. Describe the purpose of SRTs, Speech Recognition, MCL, and LDLs. [8] (K3)	
14. List and describe common tests used in speech audiometry. [8] (K3)	
15. Describe the use of masking in speech audiometry. [8] (K3)	
16. List and describe the different types of auditory evoked potentials. [8] (K3)	
17. Describe the measurement of acoustic immittance (tympanometry and acoustic reflexes). [8] (K3)	
18. Describe the purpose of otoacoustic emissions. [8] (K3)	
19. Describe common pathologies of the outer, middle and inner ear. (K2,K3)	
20. Relate audiometric and acoustic immittance results to aural pathologies. [8] (K2,K3)	
21. List and describe the basic test methods used with young children. [8] (K3)	
22. Describe the purpose of mass hearing screening for children. [8] (K3)	
23. Describe variables that can influence the effectiveness of hearing screening. [8] (K3)	
24. Describe the importance and procedures used to test neonates. SM5 [8] (K3)	
25. Describe a central auditory processing disorder and explain methods used to evaluate a CAPD. [8] (K2,K3)	
26. Describe purpose and procedures used in screening the hearing of aged individuals. [8] (K3)	
27. Describe procedures used to test children and adults with developmental disabilities. [8] (K3)	
28. Describe the procedures in identifying and managing the patient with pseudohypacusis. [8] (K3)	

B. Skills

1. Perform threshold hearing testing and basic screening procedures using a portable audiometer. [8](SK1)
2. Participate in on and off campus hearing screening. SK4 [8] (SK1)
3. Obtain a speech reception threshold and a word recognition score using a clinical audiometer. [8] (SK1)
4. Perform tympanometry and otoscopy. [8] (SK1)
5. Perform conditioned play audiometry. [8] (SK1)
6. Fit ear protection. (SK1)

III EXAMPLE THREE

A. Knowledge/Content	Standards
A. Knowledge/Content	K1, K2, K3, D1, (1a, 2i, 3e, 4 a-c, 5 b-d, 6 a-c, e, 8, 9 b, e), [III A, C, D, F, G, H], 1-10.
1. Normal anatomy and physiology and theoretical issues of feeding and swallowing in adults and children	K1, K2 (III C-E), [1-10].
2. Screening and diagnostic techniques for all individuals with feeding and swallowing disorders	K3 (III C-E), [1-10].
3. Specific treatment strategies and techniques for all individuals with feeding and swallowing impairment	K3 (III C-E), [1-10].

4. Recovery processes and degenerative characteristics generally associated with the common congenital and acquired medical conditions associated with dysphagia K3 (III C-E, G), [1-10].
5. Signs, symptoms and risk factors leading to identification of persons with dysphagia with knowledge on different cultural point of view of dysphagia. K2 (III C-E, F, G, H) [1-10].

B. Skills

1. Reviews of the medical record for information pertaining to history/medical status relating to the possibility of a dysphagia diagnosis SK1,D1.
2. Screenings of patients for dysphagia SK1, D1.
3. Bedside clinical evaluations of dysphagia SK1, D1.
4. Accurately synthesize and interpret clinical information and examination findings resulting in differential diagnosis of individuals with feeding and swallowing disorders SK1, D1.
5. Utilize and apply findings/data to develop an appropriate assessment and treatment plan for persons with dysphagia and feeding impairment SK1, D1.
6. Interpret findings and treatment plans to determine efficacy and outcome of services. SK1, D1.
7. Counsel patients and family members re: dysphagia issues with knowledge on different cultural point of view SK1, D1.

1.2 Professional advancement and development procedures and standards guide performance reviews. Faculty submit portfolios for reappointment reviews each year which must include a narrative describing their work in relationship to Boyer’s teacher-scholar model and the mission and goals of the university, college and department. Department peer review and merit processes are also aligned with Boyer’s teacher-scholar model and the mission and goals of the university, college and department. On 11/5/03 the tenured faculty reviewed portfolios submitted by Dr. Lewis and Dr. Miolo for their reappointment review. Performance reviews for all part time staff were also completed on this date. Post tenure reviews will be conducted for Dr. DePaul and Dr. Casey December 1, 2003 and Dr. Ding’s reappointment review will be in January, 2004.

1.4 The department chair was reappointed for another 3 year term July 1, 2003 – July 1, 2006.

1.6 The program conducts ongoing and systematic assessment of academic and clinical education and performance of its students and graduates. Students have ongoing opportunity to assess their academic and clinical education program. Results of the assessments are used to plan and implement program improvements that promote high-quality educational experiences for students.

Knowledge, Skills and Disposition Outcomes are assessed by:

- portfolio tracking throughout a selection courses
- exit surveys of all graduates
- number of admissions to graduate schools
- comprehensive exams
- (NESPA) performance (see Appendix I.)
- exit surveys and interviews of all graduates
- employer and alumni surveys
- Adapted Wisconsin Procedure for Appraisal of Clinical Competence (AW-PACC)
- percentage employed upon completion of the graduate degree

Students maintain their Graduate Portfolio which is formally assessed throughout their preparation. Members of the department use rubrics to assess the reflective narrative and integrative portfolio summaries. Performance data are collected, analyzed and maintained by the graduate coordinator. Faculty review the results at the end of each portfolio cycle and implement changes as needed. A new ASHA hour recording form, aligned with the new standards, has been developed using a spreadsheet format and is being implemented.

Employment Upon Graduation (MS degree)

	88/89	89/90	90/91	91/92	92/93	93/94	94/95	95/96	96/97	97-98	98-99
Public Schools	9	8	2	7	1	6	9	8	13	11	10
Medical Setting	5	8	6	8	4	7	6	5	3	5	2
Not employed	0	0	0	0	0	0	0	0	0	0	0

	99-00	00-01	01-02	02-03	Summary
Public Schools	11	10	11	8	124 (66%)
Medical Setting	1	2	0	2	64 (34%)
Not employed	0	0	0	0	0

1.7 Throughout the academic, clinical and portfolio assessment processes students are given feedback. Student performance reviews are conducted prior to semester advising sessions. During the advising session the students' advisor reviews progress in meeting requirements and makes recommendations for changes or improvements. Students and the program faculty maintain the documentation of progress in achieving the knowledge, skills and dispositions associated with entry level practice. The department chair, graduate coordinator and practicum coordinator are responsible for the data collection and record maintenance completed at the end of every semester. Student files and portfolios provide records of performance throughout the two year masters degree process. In the future, an electronic portfolio processes (Chalk & Wire) may be implemented in the College of Education as part of the unit assessment plan. It is possible that the CAA standards will be incorporated into this database and linked to the program curricula and artifacts for all of the courses in the program. Students and faculty will have access to the database for purposes of assessment and feedback. In addition, the external cooperating supervisors will be able to access the evaluation forms for inclusion in the portfolio.

The student portfolio includes a section containing the pages from the Competency Continuum for Speech and Language Pathology. This document aligns with the Knowledge And Skills Acquisitions Form (KASA). The program is using the KASA and the Competency Continuum. The department chair is working with students in the computer science department to develop a user-friendly software program that will generate the KASA information on a semester basis. Electronic files using the spreadsheet format of the KASA are being piloted at this time. All documentation is in compliance with the ASHA CCC requirements 2005-SLP and records are being maintained in the department office for every student.

1.8 Undergraduate and graduate students were informed of the accreditation and teacher licensing changes throughout the 2002-2003 academic year. Discussions and ongoing meetings continue to occur between faculty members, across the college and between faculty and students.

2.0 Faculty/Instructional Staff

2.1 The current FTE allocations include 5.5 tenure track FTE and four ad hoc adjunct faculty employed as follows:

Full Time Tenure Track Faculty Fall 2002-2003

Scott Bradley, Ph.D., Associate Professor CCC-Audiology (graduate coordinator)
 Patricia Casey, Ph.D. Professor, CCC-SLP (department chair) reappointed 7/1/03-7/1/06
 Giuliana Miolo, Ph.D., Assistant Professor CCC-SLP (50% (SP-02 through F-03) release time for collaborative research project); full time SP-04
 VACANT Mary Ward, Ph.D. Assistant Professor CCC-SLP 63% annualized (02-03) maternity leave with related extenuating medical needs. Resignation August, 2003
 Jeff Lewis, Ph.D. Assistant Professor CCC-SLP August, 2002 hired as a tenure track faculty member
 Ruiying Ding, Ph.D. Assistant Professor CCC-SLP, August, 2003 hired as a tenure track faculty member.

Part-Time Tenure Track Faculty Fall 2002-2003

Roxanne DePaul, Ph.D. Professor CCC-SLP (50% appointment to serve as UW-W Honors Coordinator)
 Fall-03 Sabbatical

Part-Time Adjunct Faculty Spring 2003 (replacements for release time faculty)

Beth Miller-Swanson M.S. ABD Clinical Supervisor (F2002-SP2004)
 Kay Nelson M.S. Clinical Supervisor
 Kathy Pazak M.S. Clinical Supervisor

Part-Time Adjunct Faculty Fall 2003 (replacements for release time or vacancy)

Julie Frazier, M.S. Instructor graduate Voice course (F-2002, F-2003)

Beth Miller-Swanson, M.S., ABD Clinical Supervisor (F2002-SP2004)
 Kathy Pazak, M.S. Clinical Supervisor (F2002-SP2004)
 Ann Massoglia, M.S. Instructor undergraduate course

(a) Faculty/Instructional Staff Who Have Left	Degree	CCC area	% in graduate program(s)
Mary Ward	Ph.D.	SLP	.125%

(b) Faculty/Instructional Staff Hired as *Replacements for Faculty Who Have Left	Degree	CCC area	% in graduate program(s)
Kathy Pazak	MS	SLP	.375
Beth Miller Swanson	MS	SLP	.375
Julie Frazier	MS	SLP	.125

Ann Massoglia	MS	SLP	0
(c) *New Faculty/Instructional Staff Hired	Degree	CCC area	% in graduate program(s)
Jeffery Lewis	Ph.D.	SLP	50%
Ruiying Ding	Ph. D.	SLP	50%

An updated practicum supervisor **certification report**. See **ATTACHMENT B** at the end of this report.

3.0 **Curriculum (Academic and Clinical Education)**

3.2 The academic and clinical education in Communicative Disorders are current and dynamic, and intellectually challenging, as described in the UW-Whitewater mission statement (2.1). Preparation for entry level practice as a speech-language pathologist must include undergraduate preparation in which student mastery of the discipline is integrated in a strong general education curriculum (1.3). The undergraduate program in Communicative Disorders prepares students to be broadly educated life-long learners (1.4) and to provide scientifically-based diagnosis and treatment to clients with communicative disorders by developing and implementing programs that encourage and promote basic scientific and applied/clinical research.

The graduate program is designed for completion in two years including two summers. Full-time enrollment is 12 credits during the academic year and 9 credits during the summer. Comprehensive examinations and portfolio presentations are an integral aspect of determining academic and clinical competence and must be successfully completed for the degree. The curriculum prepares students for passage of the NESPA leading to entry level practice and obtaining the Certificate of Clinical Competence. In preparing to practice as a Speech-Language Pathologist, students will learn such skills as : conducting formal and informal measures to diagnose and implement goals for the treatment of individuals of all ages with disorders of articulation, language, voice, fluency and swallowing; theorizing about disorders of articulation, language, voice, fluency and swallowing; engaging in self and client evaluations utilizing objective behavioral measurements; and presenting client-related information in both written and oral communication.

The assessment plan of the Communicative Disorders Department (as of 5/24/02) includes Knowledge Outcomes, Skill Outcomes, and Dispositions. Numbers (K.1- K.3.) relate to Knowledge Outcomes. Numbers (SK. 1. - SK. 2.) relate to Skills and (D. 1. - D. 5.) refer to Dispositions. As students progress through the curriculum they will be expected to apply their knowledge, skills, dispositions and use of technology to solving problems, thinking critically, and communicating effectively within diverse communication contexts.

The assessment plan for professional licensure is grounded in a developmental portfolio process, which incorporates:

1. Multiple measures of the knowledge, skills and dispositions sought by the Council for Academic Accreditation in Speech-Language Pathology (CAA) and the Wisconsin Teacher Standards (WTS) and;
2. Performance-based assessments, with formative and summative feedback given to the student regularly during his/her professional training; and
3. Reflective statements by the program completer that demonstrate developmental refinement of professional knowledge, skills, and dispositions.

Students can refer to Department of Communicative Disorders Guidelines to Assist in Selecting Items for Inclusion in Student Portfolios and review their course syllabi which explicitly delineate the relationships between knowledge, skills and dispositions to be achieved. Students and faculty are involved in undergraduate and graduate research projects and students receive ongoing exposure to research and theory throughout their undergraduate and graduate preparation.

The graduate program has articulated a structure for the portfolio based on professional standards, rubrics that operationalize each performance level articulated above, decision tolerance levels that inform decisions that are based on the portfolio, and timeframes for the submission and evaluation for the portfolio. It is through these portfolios that the quality of each student's knowledge, skills, and dispositions is assessed, and that feedback is given to the student about her/his progress.

Data from the final assessment of student portfolios, plus feedback from program completers and employers on the students' attainment of knowledge, skills, and dispositions, are used to inform program improvement efforts.

The graduate program in Communicative Disorders is a well-defined continuation and advancement of the university's strong undergraduate major in Communicative Disorders. The primary goal of the graduate program in Communicative Disorders is to provide qualified candidates with the appropriate training and requisite degree (MS Communicative Disorders) for entry level practice of speech-language pathology. The graduate program at UW-Whitewater integrates diversity issues (4.2) throughout a comprehensive array of courses as well as on- and off-campus practicum experiences at the graduate level. Students enroll in practicum experiences every semester. The practicum experiences provide dynamic learning communities that encourage individual growth and development of values, service, and respect for others (4.1). The academic and practicum opportunities expose students to different cultures, work environments, and issues related to communicative disorders across lifespan and work settings. Academic and clinical education is achieved through (1) mentorship: faculty as advisors and second-year students as mentors to new students; (2) state-of-the-art academic instruction: a current curriculum taught by productive teacher-scholars; and (3) experienced faculty and off-campus supervisors: students supervised by faculty who are experienced, certified speech-language pathologists or audiologists or practicing speech-language pathologists working on and off-campus.

1. Provide an overview of the clinical portion of the curriculum. Delineate academic prerequisites, the sequence of clinical education placements, and the clinical hours requirements of the program.

	Academic Prerequisites	Clinical Education Placements	Clinical Hours Acquired
Junior	Intro to Clinical Practicum in Communicative Disorders	Completion of Observation of Clients with Communicative Disorders	25
Senior		Complete series of three week visits to a variety of clinical settings	
Year I Fall	Undergraduate Major in Communicative Disorders	University of Wisconsin-Whitewater Center for Communicative Disorders	20 to 40
Year I Spring	Fluency Disorders Voice Disorders Speech and Language Disorders in Young Children	University of Wisconsin-Whitewater Center for Communicative Disorders	20 to 40
Year I Summer	Language Learning Disorders in School Age Children Aural Rehabilitation	Janesville School District Summer School Program Fort Atkinson School District Summer School Program	20 - 30
Year II Fall	Post-Student Teaching	Student Teaching Placement OR	40 - 150

	Seminar	University of Wisconsin-Whitewater Center for Communicative Disorders	
Year II Spring		Student Teaching Placement OR University of Wisconsin-Whitewater Center for Communicative Disorders	40 - 150
Year II Summer	Swallowing Dysarthria Dysphasia	Externship in medical setting	100 - 150

Average number of hours completed by graduates Summer, 2003 was 467 with a range of 393-563.

2. Explain how the program ensures that students meet each of the requirements specified below:
 - a. Students observe for at least 25 hours before seeing assigned clients.
Verified records of observation hours must be submitted to the department by each student prior to assignments of clients
 - b. Students obtain at least 50 contact hours in each of three distinctly different settings.
Please see table above
 - c. At least 50% of each evaluation session, including screening and identification, is directly observed by a supervisor who holds the CCC in the appropriate area.
Each supervisor maintains records of time spent in direct observation of evaluation sessions
 - d. At least 25% of each students' total treatment time with each client is observed by the supervisor.
Each supervisor maintains records of time spent in direct observation of treatment sessions.
 - e. Major decisions by student clinicians regarding evaluation and treatment of a client are implemented or communicated to the client only after approval by the supervisor.
All students meet with their supervisor on a weekly basis to discuss treatment program
 - f. Students earn clinical clock hours only for the time spent in direct provision of services to clients or their families/caregivers. Supervisors and students maintain the Competency Continuum and KASA documentation for clinical experiences.

Each semester, supervisors and clinic director review and check students' recording of clinical hours and competencies. Faculty and students maintain KASA entries related to knowledge, skills and dispositions documented in non-clinical experiences. This is done at the end of every semester as a part of the portfolio review and throughout the academic cycle during student advising and performance reviews. See the attached KASA form (ATTACHMENT A) which has been completed for one hypothetical graduate student who could apply for ASHA certification under the new standards in SLP.

4.0 Students

4.2 The program instituted a graduate orientation/advising session in April, 2003 for graduates beginning the program Fall, 2003. Students met the faculty, interacted with other students, and became acquainted with the new CAA standards. Members of the department discussed the curriculum and assessment processes that would be implemented throughout the students' two year experience. Student surveys revealed that the orientation session was an effective and satisfying process. Faculty agreed and it will be repeated in April 2004.

4.4 Remediation of Academic and Clinical Deficits

Prior to the formal advising period each semester, the faculty meets to discuss student progress. During the meeting, each faculty member identifies students who are having difficulty in their classes or practicum and informs the students' advisors. During advising, a written plan is developed which may include the following:

Study strategies

Reduced academic load

Reduced clinic load

Special needs accommodations

Additional coursework to address areas of weakness

Referral to the Office of Career Counseling or Project Assist

Graduate students with a cumulative GPA below 3.0 are placed on probation by the Graduate School.

Prior to the formal advising period each semester, supervisory staff and faculty meet to discuss student progress. During the meeting, each supervisor identifies students who are having difficulty in practicum. If appropriate, the student meets with the supervisor and the clinic director to develop a written action plan which may include the following:

Specific goals and objectives that address areas of weakness
Reduced clinic load and delaying off-campus practicum
Remediation work as necessary etc. . .

A remediation program implemented in 2001 follows:

Clinician Name _____
Clinical Objectives for Spring Semester _____

The following goals are based on the client attending the clinic on Tuesdays only.

1. Clinician will submit a preliminary treatment plan at the supervisory conference on Thursday.
2. Clinician will submit session data and progress notes from the Tuesday session at the supervisory conference on Thursday.
3. If the plan needs to be modified and supplemented by additional reading or research, the revised plan will be submitted at least two days before the planned session.
4. Clinician will submit all sections of the report by the required due dates. If revisions have been suggested on previous drafts, newly submitted drafts must incorporate them.
5. Clinician will attend weekly meetings with supervisors. Discussions at these meetings should focus on refining the plan rather than creating a plan. She will:
 - (a) bring all the necessary paperwork regarding client treatment in a binder;
 - (b) present sound rationales for her treatment plans;
 - (c) justify her decisions, if asked to do so; and,
 - (d) respond to supervisor questions or concerns about her plan .
6. If, during this meeting, the supervisor asks Clinician to implement a certain treatment procedure or recommends resources, Clinician needs to
 - (a) record these ideas;
 - (b) show evidence of incorporating these ideas into her treatment plan;
 - (c) locate and use the resources; and,
 - (d) if necessary, develop appropriate alternatives to the supervisor's ideas.
7. Clinician will execute the assessment and treatment plans approved by the supervisor. To do so, she will
 - (a) use systematic task steps;
 - (b) give clear and concise task instructions;
 - (c) monitor and record client progress;
 - (d) provide positive and negative feedback to the client; and,
 - (e) use language and tone of voice that encourage the clients and are sensitive to their feelings.

If Clinician has questions concerning these objectives, she may ask for additional direction and clarification.

In two weeks Clinician's clinical supervisors will review her progress toward these objectives. Her success in meeting these objectives will be reflected in her Final Grade Reports, submitted by her clinic supervisors.

5.0 Program Resources

5.5 Each semester, the clinic director evaluates each student's record of clinical experience prior to making clinical assignments in our on-campus clinic. Every effort is made to ensure that students receive clinical

experience with preschool, school-age and adult clients who experience a variety of communicative disorders. Students are enrolled in clinical practicum every semester.

Typically, a student will be assigned three to five clients in their first year of the graduate program. Usually these clients will be either pre-school or school-aged clients with speech and/or language disorders and are seen in one-on-one or a small groups in our on-campus clinic. All students participate in two programs, an Emergent Literacy Program and a speech-language-hearing screening program conducted in collaboration with our University's Children's Center. Each student is required to participate for at least 8 hours in the screening program. The students, working in 2- to 4-member teams, conduct 45-minute sessions which focus on the development of emergent literacy skills with pre-school children twice a week. At the end of the first year, our students participate in a summer program in the public schools working with classes of pre-school or school age children with speech and/or language disorders.

In their second year, they are assigned adult clients with speech and/or language problems in our on-campus clinic. During their second year they also complete their student teaching placement at either an early childhood, elementary, middle or high school program. We try and place students according to their interest area if possible. In addition, those students who completed their student teaching placements at the undergraduate level are offered a second pediatric clinical placement in settings other than an educational setting e.g. Birth-to-Three agencies, Children's Hospitals, pediatric clinics etc. At the end of their second year, they complete a final externship in a medical setting with adult clients. Therefore, at the completion of their program, students will have worked in at least four different sites.

D. Anticipated Changes.

Other than hiring another faculty member the program is not anticipating other changes during the upcoming year. We do not anticipate making any of the following types of changes in our program.

- Yes No Development of consortium
- Yes No Distance education
- Yes No Satellite campus
- Yes No Adding or changing the degree offered in an existing accredited program
- Yes No Contractual arrangements

As the program director, I have reviewed the standards for accreditation. The program(s)

- appear(s) to be in full compliance
- may not be in full compliance with standards
- is/are not in compliance with standards

Patricia L. Casey, Ph.D.

November 26, 2003

Signature of Program Director

Date

Patricia L. Casey, Ph.D. Professor, Department Chair
Name and Title of Program Director

APPENDIX I: PRAXIS EXAMINATION RESULTS

Please provide the Praxis exam pass rate data below for students in your program in the previous ETS testing cycle (September 2001-June 2002) and indicate the source of the data (ETS, Program – one or both may be used).

Exam data	Speech-Language Pathology		Audiology	
	ETS Data	Program Data	ETS Data	Program Data
Number of students taking exam (in previous ETS reporting period)	8	10		
Number (and %) passed *	7 passed 87.5% passed	9 passed 90% passed		

**Provide an explanation if the program pass rate falls below the national average pass rate. (Also, see 1.6)*
One student scored a 590 missing the passing score by 10 points. Range for passing scores was 640-750 compared to the national average range of 630-700.

APPENDIX II: EMPLOYMENT/JOB PLACEMENT RATES

Please provide, to the best of your knowledge, the percentage of your graduates in the last 3 years that have been employed in the profession within one year of graduation, using the format shown below. NOTE: This percentage may include graduates who are either employed or are pursuing further education in the profession.

Academic Year	Employment Rate in Profession (%)
1999-2000	100%
2000-2001	100%
2001-2002	100%
Average*	100%

** If the average rate over 3 years falls below 80%, please provide an explanation. (Also, see 1.6)*

APPENDIX III: GRADUATION/PROGRAM COMPLETION RATES

Provide the program completion rates for the last 3 years for this degree program (based on enrollment data).

Academic Year	Prog. Completion Rate (%)
1999-2000	100%
2000-2001	100%
2001-2002	100%
Average*	100%

** If the average rate over 3 years falls below 80%, please provide rationale, describe the activities in which you have engaged to improve the completion rate, and resulting progress from these activities. (Also, see 1.7).*

APPENDIX IV-A: - FACULTY/INSTRUCTIONAL STAFF SUMMARY

A: Master's Degree Program

Name, degree, academic rank, and title of staff. (List full-time faculty first, followed by part-time. List full name in this order: Last, first, middle).□□	CCC SLP, A, DUAL, or N/A□□	TYPE OF APPOINTMENT		Percentage of FTE in the MASTER'S PROGRAM □□	GRADUATE PROGRAMS Percentage of total time assigned to: (percentage should =100% for each person)				STUDENTS SUPERVISED IN AN AVERAGE TERM □□
		Full-Time□	Part-time: average hours per week (total hours/no. of weeks in academic year) □		Administration/service/ other □	Research and research direction □	Provision of clinical teaching/ supervision	Academic instruction	
Bradley, Scott, Ph.D. Associate Professor	A	Yes		.625	25	5	20	50	
Casey, Patricia, Ph.D. Professor, Dept. Chair	SLP	Yes		.50	25	5	20	50	6
DePaul, Roxanne, Ph.D. , Professor	SLP	50*		.125	5	5	0	90	0
Ding, Ruiying, Ph.D. Assistant Professor	SLP	Yes		.50	--	25	25	50	6-8
Lewis, Jeffrey, Ph.D. Assistant Professor	SLP	Yes		.50	5	20	25	50	6-8
Miolo, Giuliana, Ph.D. Assistant Professor	SLP	Yes (R)		.50	25	20	5	50	0
Ward, Mary, Ph.D. Assistant Professor	SLP	Yes**		.125	0	0	0	100	0

Frazier, Julie, M.S. Instructor	SLP		10	.125	--	--	--	100	--
Nelson, Kay, M.S. Instructor	SLP		25-30	.75	--	--	75	25	6
Swanson, Beth, M.S. Instructor	SLP		25-27	.75	--	--	100	--	6-8
Massoglia, Ann, M.S. Instructor	SLP		10	--	--	--	--	100	--
Pazak, Kathy, M.S. Instructor	SLP		20	.375	--	--	75	25	6
Total FTE for master's program				4.875					

(R) 50% Research Release Sp03 - F03

* 50% as Honors Program Coordinator

** 50% Release for Maternity Leave

APPENDIX V: VITA OUTLINE

Name: Ruiying Ding

Academic Rank: Assistant Professor

CCC status: CCC-SLP Date employed: August 24, 2003

Tenure Track? Yes

1. Degree	Institution	Year	Major
B.S.	Northwestern University	1994	Speech-Language Pathology
M.A.	Northwestern University	1997	Speech-Language Pathology
Ph.D.	Northwestern University	2002	Speech-Language Pathology

2. Describe significant professional experience, contributions, and continuing education activities during the past 5 years for each staff member, whether part-time or full-time.

A. Research and scholarship:

Publications

Ding, R., Logemann, J.A., Larson, C.R., & Rademaker, A.W. The Effects of taste and consistency on swallow physiology in younger and older healthy individuals: A surface electromyographic study. Journal of Speech Language Hearing Research, 46, 977-989.

Ding, R., Larson, C.R., Logemann, J.A., & Rademaker, A.W. (2002). Surface electromyographic and electroglottographic studies in normal subjects under two swallow conditions: normal and during the Mendelsohn maneuver. Dysphagia, 17, 1-12.

Ding, R. & Logemann, J.A. (2000). Pneumonia in stroke patients: a retrospective study. Dysphagia, 15, 51-57.

Ding, R. (2002). The effect of taste on swallow physiology in young and elderly individuals-A surface electromyographic study. Dissertation, Northwestern University.

Conference presentations

Ding, R., Larson, C.R., Logemann, J.A., & Rademaker, A.W. (1999 Nov.). Surface electromyographic and electroglottographic studies in normal subjects under two swallow conditions: normal and during the Mendelsohn maneuver. Convention of the American Speech Language Hearing Association, San Francisco, CA

B. Clinical service delivery:

Jan –Aug 2003 Director of Speech Therapy, North Shore Pediatric Therapy
Glenview, IL

Oct 2001-Dec 2002 Lead Speech Therapist, Children's Therapy and Rehab Specialists
Lake Zurich, IL

Oct 2000-Oct 2001 Speech Therapist, Alexian's Brothers Medical Center
Elk Grove Village, IL

Sep 1999-Sep 2001 Speech Therapist, Vencor-Northlake Hospital
Northlake, IL

Jan 1999-Aug 1999 Speech Therapist, Communication Therapy Service
Schaumburg, IL

July 1998-Dec 1998 Speech Therapist, Therapeutic System Libertyville, IL

C. Clinical supervision:

2001-2002 Supervised two CFY clinicians in outpatient clinic.

2000-2001 Supervised second year graduate clinician in acute care hospital.

D. Continuing education:

Annual Illinois Speech Language Association Convention (2-days)

ASHA convention (1999 and 2003)

Numerous short courses trainings: picture communication system training, oral motor therapy training, passy-muir valve training, etc.

E. Service (professional, community)

Library representative of Department of Communicative Disorders

Editorial responsibilities: Dysphagia journal ad-hoc reviewer, 2002.

Provided several in-service to doctors in doctors' office and hospitals between 2000 and 2002.

Performed several hearing screening in health fairs between 1995-1997.

Courses taught or teaching:

University of Wisconsin-Whitewater, 510-278 Anatomy and Physiology, Fall, 2003

University of Wisconsin-Whitewater, 510-424 Organic Communicative Disorders, Fall, 2003

University of Wisconsin-Whitewater, 510-730 Dysphagia, Fall, 2003

Northwestern University D37 Dysphagia co-taught with Dr. Logemann, Spring, 1999

APPENDIX V: VITA OUTLINE

Julie Frazier

Date employed Fall, 2003

Academic Staff

Non-tenured track

CCC SLP

Professional

Teach Voice Disorders to graduate level students. Coursework

Objective:

would include normal and disordered vocal fold structure and function, assessment and a variety of treatment techniques.

Work

Speech/Language Pathologist - Meriter Hospital, Madison WI.

Experience:

Provide diagnosis and treatment of speech/language, cognition, voice, and swallowing in adolescents and adults. Extensive training in voice and videofluoroscopic swallow studies. Have supervised graduate students and CFY positions. Involved in protocol development and quality improvement. Have provided inservices for the department, program, various units of the hospital and community groups. June 1987 to present.

Graduate Clinician/Work Study - University of Wisconsin Voice Clinic and Laboratory under direction of Diane Bless, PhD and Charles Ford, MD. Performed videostroboscopic and acoustic evaluation and treatment on children, adolescents and adults with voice disorders. Assisted in training fellow students and medical students in use of equipment and interpretation of test results. Performed all phases of research including data collection, analysis and interpretation. June 1985 to June 1987.

Professional

Laryngeal Video Endostroboscopy Workshop - R.E. Stone, PhD.

Training:

May 1997. Vanderbilt University-Nashville TN

Education:

University of Wisconsin - Madison WI

Master of Science, Communicative Disorders, May 1987

University of Wisconsin - Madison WI
Bachelor of Science, Communicative Disorders, August 1985

Professional Affiliations: American Speech-Language-Hearing Association, 1987 to present
Wisconsin Speech-Language-Hearing Association, 1995 to present

Presentations: Outcome Study of Voice Patients - Poster Session, ASHA 1995
 TBI: Treatment Across the Continuum - WSHA 1999

APPENDIX V: VITA OUTLINE

Name Ann Tomasin Massoglia Date employed Fall 2003

Academic rank Academic Staff Tenure track? No

CCC status SLP Tenured? No Date NA

Degree M.S. Institution UW-Whitewater Year 1980 Major Communicative Disorders

B.S.E. UW-Whitewater 1978 Communicative Disorders

Describe significant professional experience and contributions during the past five years.

a. Teaching:

<u>Year</u>	<u>What</u>	<u>Where</u>
1980- Present	Speech Language Pathologist Fort Atkinson School District	Fort Atkinson, WI
1998, 2002	Normal Language Development and Language Disorders in EEN Children	UW-Whitewater

b. Service:

<u>Year</u>	<u>What</u>	<u>Where</u>
2000- Present	Reading Curriculum Committee Fort Atkinson Schools	Fort Atkinson, WI
1999- Present	Fort Atkinson Curriculum Improvement Team Fort Atkinson Schools	Fort Atkinson, WI
1999- Present	Special Education Advisory Committee Fort Atkinson Schools	Fort Atkinson, WI
2000	Technology Committee Barrie Elementary School	Fort Atkinson, WI
1999- Present	Barrie Video Crew Advisor Barrie Elementary School	Fort Atkinson, WI
1987- 1998	Barrie Student Council Advisor Barrie Elementary School	Fort Atkinson, WI

c. Research:

None

d. Clinical Supervision:

<u>Year</u>	<u>What</u>	<u>Where</u>
1983- Present	Off-Campus Supervisor	UW-Whitewater

e. Continuing Education:

<u>Year</u>	<u>What</u>	<u>Where</u>
1998	Helping School Aged Children Who Stutter- Workshop	Madison, WI
1998	Technology In The Classroom- Workshop	Janesville, WI
2003	WHSA- Presenter	Madison, WI
Ongoing	Inservice Workshops (Topics include: Special Education Law, Effective Teaching Strategies, Team Building, ESL Issues, Health, 6-Traits Writing)	Fort Atkinson School District

APPENDIX V: VITA OUTLINE

Beth Miller Swanson, M.A., CCC-SLP
Clinical Supervisor (non-tenure)

1. Degree	Institution	Year	Major
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Western Michigan University

Master of Arts Degree; Speech Pathology and Audiology, December 1988

Thesis: Effects of Intervention on the Ability of Students with Hearing Impairments to Write Personal Narratives

Augustana College

Bachelor of Arts Degree; Speech Pathology and Audiology, June 1987

2. Describe significant professional experience, contributions, and continuing education activities during the past 5 years for each staff member, both full-time and part-time. (If none, so state).

A. Research and scholarship:

Miller Swanson, B., Brew, N., & Hammons, K. Using a Basic Reading Inventory in Literacy Assessment and Intervention. Poster presented at the Annual Convention of the Wisconsin Speech-Language Pathology and Audiology Association, Madison, WI, March 2003.

Miller Swanson, B., Kittleson, N., & Stoffers, B. Using a Writing Process Approach to Facilitate Written Language Development. Poster presented at the Annual Convention of the Wisconsin Speech-Language Pathology and Audiology Association, Madison, WI, March 2003.

Miller Swanson, B., Miolo, G., Hamilton, S., Kloeping, S., & Romberg, A. Facilitating the Development of Emergent Literacy Skills in Pre-School Children. Poster presented at the Annual Convention of the Wisconsin Speech-Language Pathology and Audiology Association, Madison, WI, March 2003.

Miller Swanson, B., & Hanson, J. Facilitating Phonological Awareness in Young Children. Poster presented at the Annual Convention of the Wisconsin Speech-Language Pathology and Audiology Association, Milwaukee, WI, February 2002.

Miller Swanson, B. Pro-Active Behavior Management: Strategies for Working with Young Children. Dual presentations for the 23rd Annual Early children Conference, Whitewater, WI, April 2001.

Miller Swanson, B. Pragmatics. Presentation for Head Start of Dane County Inservice, Madison WI, March 2000.

Miller Swanson, B. Behavior Management. Lecture for CD510-660: Graduate Practicum in Communicative Disorders, University of Wisconsin-Whitewater, Fall 2000; Fall 1999

Miller Swanson, B. Writing Goals, Objectives and Lesson Plans. Lecture for CD510-660: Graduate Practicum in Communicative Disorders, University of Wisconsin-Whitewater, Fall 2000; Fall 1999

Miller Swanson, B. Scaffolding in a Language-Based Classroom. Lecture for CD840: Language Problems of School-Age Children and Adolescents, University of Wisconsin-Madison, Fall 1999; Spring 1999; Spring 1997

Miller Swanson, B. Clinical Assessment. Lecture for CD510-660: Graduate Practicum in Communicative Disorders, University of Wisconsin-Whitewater, Fall 1999

Miller Swanson, B. The Development of Literacy. Lecture for CD240: Child Language Development, University of Wisconsin-Madison, Fall 1998; Spring 1998

Miller Swanson, B. Classroom-Based Language Intervention. Lecture for CD510-355: Language Development and Disorders in Children, University of Wisconsin-Whitewater, Spring 1997

Miller Swanson, B. Classroom-Based Language Intervention. Lecture for CD510-713: Seminar in Language Disorders, University of Wisconsin-Whitewater, Fall 1996

H&R Block Foundation Scholarship, August 1996; August 1995

B. Clinical service delivery:

Private Practice, specializing in early childhood and school-aged language, literacy and speech, 6/03-current, Madison, WI

Speech-Language Pathologist/Multidisciplinary Team Member for Integrated Preschool, 8/93-6/94, Community Consolidated School District #15, Early Childhood Program, Palatine IL

Speech-Language Pathologist/Transdisciplinary Team Member for Integrated Preschool, 8/92-7/93, Cherry Creek School District, CHEER Program, Aurora CO

Classroom Teacher/Speech-Language Pathologist for Language-Learning Impaired Students, 1/89-8/92, Transdisciplinary Team Leader, 8/91-8/92, South Metropolitan Association for Students with Low-Incidence Handicaps, Communication Development Program, Flossmoor IL

Contract Speech-Language Pathologist; Assessment at Ludemann Center for Developmentally Disabled Adults; 8/90-8/92, Sertoma Center for Communication Disorders, Palos Heights IL

Contract Speech-Language Pathologist; Adult Language; Diagnostics and Intervention, 6/89-2/90, Alexian Brothers Medical Center, Elk Grove Village IL

C. Clinical supervision:

CD510-660: Graduate Practicum in Communicative Disorders, University of Wisconsin-Whitewater, Fall 2003, Spring 2003, Fall 2002, Spring 2002, Fall 2001, Spring 2001, Fall 2000; Spring 2000; Fall 1999; Fall 1998

CD390: Practicum in Communicative Disorders, University of Wisconsin-Madison, Fall 2000; Spring 2000; Fall 1999; Spring 1999; Fall 1998; Spring 1998; Fall 1997; Spring 1997

CD790: Graduate Practicum in Communicative Disorders, University of Wisconsin-Madison, Summer 2000; Summer 1999

D. Continuing education:

University of Wisconsin-Madison

30 credits in Communicative Disorders, September 1994-May 1997

Denver University

17 hours in Early Childhood Special Education, January 1993-August 1993

Northern Illinois University

33 hours toward Master of Science Degree; Reading Specialization, June 1989-June 1992

E. Service (professional, community):

F. Courses taught or teaching:

CD240: Language Development in Children and Adolescents, University of Wisconsin-Madison, Spring, 1999

CD751: Supervision, Communicative Disorders, University of Wisconsin-Madison, Spring 1998

CD440: Child Language Disorders, Assessment and Intervention, University of Wisconsin-Madison, Fall 1997

CD342: Language Development and Disorders in School-Age Children and Adolescents, University of Wisconsin-Madison, Fall 1996; Fall 1995

APPENDIX V: VITA OUTLINE

Name Kathy Pazak

Instructor/Clinical Supervisor

CCC status SLP

Date employed Fall, 2002-03; 2003-2004

Non-tenured track

EDUCATION:

Marquette University Milwaukee, Wisconsin, MS, 1986

Marquette University, Milwaukee, Wisconsin, BS, 1980

BOARD CERTIFICATIONS:

Certified Clinically Competent, 1987
American Speech, Language, Hearing Association
Speech/Language Pathologist License, 1994
State of Wisconsin

AWARDS AND ACHIEVEMENTS:

Department of the Army Superior Performance Award,
Landstuhl, Germany, 1990
Award for Continuing Education (ACE) 1991, 1995

PROFESSIONAL SOCIETY MEMBERSHIP:

American Speech Language Hearing Association, from 1980
Overseas Association of Communication Sciences, 1989-1992

WORK EXPERIENCE:

Speech Language Pathologist, Meriter Hospital, Madison, Wisconsin September 1998 to present. Evaluated and treated infants to school aged children. Consulted on feeding issues with infants in the Special Care Nursery. Conducted outpatient feeding evaluations on children. Performed VSS on both adults and children. Knowledgeable in school criteria for children with exceptional needs; insurance coverage and community resources available for families with children with special needs.

Clinical Supervisor/Lecturer, University of Wisconsin-Whitewater January 2001 to present. Provided clinical supervision to graduate students in the Communications Disorders Clinic. Taught graduate level courses in Language Disorders in Young Children.

Speech Pathologist UWHC, Madison, Wisconsin September 1999 to December 2000. Filling an LTE position on Pediatric, Inpatient Rehab, Outpatient Neurology, Inpatient Medical/Surgical Teams and Home Health. Treated patients with a variety of communication/swallowing needs. Assisted families with medical needs to utilize community resources, school services and helped them to navigate their insurance coverage.

Speech Language Pathologist, Beverly Terrace Health and Rehab, Watertown, Wisconsin, April 1996 to July 1998 Served as contractual staff at Watertown Memorial Hospital. Evaluated and treated adults and pediatric outpatients. Served as the medical consultant for second opinions in the field of Speech/Language for Watertown Unified Schools. Was both a CFY supervisor and provided a practicum site for graduate clinicians from UW.

Speech Language Pathologist, Rehab Resources, Watertown, Wisconsin, February 1994 to August 1996 Provided Speech/Language Services to both the Dodge and Jefferson County Birth -3 Programs at a satellite site in Watertown. Did both home and center based therapy and parent training using a modified Hanen approach. Much of the therapy was conducted with either the OT or PT when sensory issues were involved

Speech Language Pathologist, Watertown Memorial Hospital, Watertown, Wisconsin, October 1992 to April 96 Same as above.

Speech Language Pathologist, Landstuhl Army Regional Medical Center, Germany, August 1989 to August 1992 Provided Speech Pathology Services for active duty and retired service members, their spouses and children. Treated outpatients through an ENT clinic. Inpatients were seen on medical floors or in the ICU. Modified Barium Studies and Fiberoptic Endoscopic Evaluation of Swallowing evaluations were conducted to

evaluate swallowing disorders in adults. Was a member of the only Cleft Palate Team in Europe. Was responsible for the only NICU in Europe for service members and dependents.

Speech Language Pathologist, CESA #7, Chilton, Wisconsin, August 1988 to June 1989 Evaluated and treated children in the New Holstein Schools from EC through high school.

Speech Language Pathologist, River Ridge Rehabilitation, Stillwater, Minnesota, June 1986 to August 1988 Was responsible for providing Speech Pathology Services to adults in many rural SNF.

Peace Corp Volunteer, Kingdom of Tonga, South Pacific, November 1981 to May 1983
 (Use the following vita outline as a format for information regarding any new members of your faculty/instructional staff. Limit to 3 pages per individual.)

APPENDIX IV-A: - FACULTY/INSTRUCTIONAL STAFF SUMMARY

A: Master's Degree Program

Name, degree, academic rank, and title of staff. (List full-time faculty first, followed by part-time. List full name in this order: Last, first, middle).□□	CCC SLP, A, DUAL, or N/A□□	TYPE OF APPOINTMENT		Percentage of FTE in the MASTER'S PROGRAM □□	GRADUATE PROGRAMS Percentage of total time assigned to: (percentage should =100% for each person)				STUDENTS SUPERVISED IN AN AVERAGE TERM □□
		Full-Time□	Part-time: average hours per week (total hours/no. of weeks in academic year) □		Administration/service/ other □	Research and research direction □	Provision of clinical teaching/ supervision	Academic instruction	
Bradley, Scott, Ph.D. Associate Professor	A	Yes		.625	25	5	20	50	
Casey, Patricia, Ph.D. Professor, Dept. Chair	SLP	Yes		.50	25	5	20	50	6
DePaul, Roxanne, Ph.D., Professor	SLP	50*		.125	5	5	0	90	0
Ding, Ruiying, Ph.D. Assistant Professor	SLP	Yes		.50	--	25	25	50	6-8
Lewis, Jeffrey, Ph.D. Assistant Professor	SLP	Yes		.50	5	20	25	50	6-8
Miolo, Giuliana, Ph.D. Assistant Professor	SLP	Yes (R)		.50	25	20	5	50	0
Ward, Mary, Ph.D. Assistant Professor	SLP	Yes**		.125	0	0	0	100	0
Frazier, Julie, M.S. Instructor	SLP		10	.125	--	--	--	100	--
Nelson, Kay, M.S. Instructor	SLP		25-30	.75	--	--	75	25	6
Swanson, Beth, M.S. Instructor	SLP		25-27	.75	--	--	100	--	6-8

Massoglia, Ann, M.S. Instructor	SLP		10	--	--	--	--	100	--
Pazak, Kathy, M.S. Instructor	SLP		20	.375	--	--	75	25	6
Total FTE for master's program			4.875						

(R) 50% Research Release Sp03 - F03

* 50% as Honors Program Coordinator

** 50% Release for Maternity Leave

APPENDIX VI: STUDENT DATA

Year ¹ : 02 - 03	Bachelor's			Master's			Doctorate		
	ADMITS	GRADS	CURRENT TOTAL ²	ADMITS	GRADS	CURRENT TOTAL	ADMITS	GRADS	CURRENT TOTAL
Speech-Language Pathology	17	23	80	15	10	27			
Audiology									
Speech, Language, and Hearing Science									
Other (specify)									

Attachment A (Hypothetical KASA electronic file)

Attachment B Practicum Supervisors
December 1, 2002 through November 30, 2003

Name	Account Number	Valid Through
Anderson, Candace	01140712	12/31/03
Mary Braun	01000443	12/31/03

¹ Indicate academic year by noting last two digits of years in question, e.g., 99-00, 00-01, 01-02.

² Current Total should indicate total of all students enrolled in the program during reporting year, regardless of part-time or full-time status. If a large percentage of students are classified as part-time, please describe in Section 2.0.

April 23, 2003

Capobianco, Martha	01067998	12/31/03
Cleary, Ann	00715037	12/31/03
Ding, Ruiying	09146242	12/31/03
Fluharty, George	00763060	12/31/03
Pershing, Brenda	09109283	12/31/03
Shaefer, Chris	01206414	12/31/03
Stephug, Denise	01079636	12/31/03
Stine, Rosemary	00208033	12/31/03
Winkel, Deborah	12045365	12/31/03
Wood, Elaine	00238329	12/31/03