Speech-Language Pathology Program

STRATEGIC PLAN 2022-2027

Accreditation Goals

Goals	Objectives	Strategies	Initiate	Complete	Target Outcomes	Accountability
Ensure the SLP Program meets CAA standards for accreditation	1. Review and respond to CAA Initial Observations Report on the SLP Program's application for reaccreditation 2. Prepare for CAA site inspection 3. Review and respond to CAA Final Observations Report on the SLP Program's submitted application for reaccreditation 4. Report annual or ongoing progress to the American Speech-Language-Hearing Association (ASHA) and the CAA	1. Faculty will meet to review the Program's Self-Study, CAA Standards and respond to CAA Reports 2. Faculty will ensure that the Program's student, faculty, public and committee documents meet CAA compliance standards 3. Faculty will provide annual data for program reporting to CAA and ASHA and will review aggregated reports at faculty and/or committee meetings 4. Faculty will provide data for input into reaccreditation documents	2022	2027	1. Submit Program's Response Report to CAA's Initial Observations Report 2. Faculty will have necessary materials prepared for CAA site inspection 3. Submit Program Response Report to CAA's Final Report 4. Submit Program's Higher Education Survey to ASHA and submit reaccreditation application or annual report to CAA	o Program Director o Program Faculty o Accreditation and Self-Study Committee

Program Governance Goals

Goals	Objectives	Strategies	Initiate	Complete	Target Outcomes	Accountability
Ensure the SLP Program maintains effective Program governance	1. Maintain effective program operation 2. Review all academic and clinical program procedures and revise all Program manuals 3. Maintain client census at the Speech-Language Institute (SLI) 4. Continue to operate a class body student organization 5. Continue to operate a chapter of the National Student Speech-Language-Hearing association (NSSHLA) 6. Continue to operate an Advisory Board 7. Continue to operate an Alumni Board	1. Program Director will meet regularly with faculty, administration, and students for needs assessment and to ensure effective program operations 2. Faculty will meet annually to review and approve program manuals, and will meet regularly at faculty meetings or in Program committee to review program policies and procedures for currency 3. The Clinic Committee and clinic leadership will meet at least quarterly to ensure effective clinic operations 4. A faculty member will meet with representatives of	2022	2027	1. Academic assessment outcomes data reports including graduation rates and summative student learning outcomes; sufficiency of faculty and program resources 2. Program manuals, policies and procedures reviewed, updated, and approved annually by faculty meeting and finalized for dissemination 3. Clinic will maintain an average of 350 visits/month, with 25-30 visits/day. 4. Lead class student body in at least 2 community service projects; annually; maintain an effective social media presence; raise money to bequest SLP with a gift from each graduating class; plan and deliver the graduation celebration immediately following graduation; keep	o Program Director o Director of Clinical Education o Clinic Coordinator o Program Faculty o Faculty Class and NSSHLA Advisors o Faculty Advisory Board Facilitator

		a class body student organization at least twice each quarter to ensure that students views, or concerns are adequately represented to the Program 5. A faculty advisor will meet with representatives of the NSSHLA chapter at least twice each quarter to ensure adequate support from the Program 6. A faculty board liaison will meet with an Advisory Board to solicit input on Program development 7. A faculty board liaison will meet with an Alumni Board to solicit input on curriculum development and the development of a social network for professional peer support			records of the organization 5. Conduct at least 3 social events for student body annually; lead student body in at least 2 community service projects annually; maintain an effective social media presence; keep records of the organization 6. Advisory Board will meet at least twice per calendar year; keep records; in addition to meetings will host at least one Board appreciation event per calendar year. 7. Alumni Board will meet annually at least twice per calendar year; keep records; host at least one Board appreciation event per calendar year.	

Sufficiency/Development of Faculty and Staff Goals

Goals	Objectives	Strategies	Initiate	Complete	Target Outcomes	Accountability
Maintain sufficient academic and clinical faculty to meet program needs.	1. Build clinical faculty as the Speech-language Institute (SLI) client census grows.	1. Work with CHS Dean to ensure that the Program continues to have sufficient faculty and infrastructure to meet Program objectives.	2022	2027	1. Build clinic census to an average of 350 visits/month, with 25-30 visits/day.	o Program Director o Clinic Coordinator o Program Faculty
Establish faculty goals and plans for teaching, research, continuing education, and service.	2. Prepare annual Faculty Development Plans for Program faculty.	2. Obtain approval of CHS Dean.			2. Establish a formal program whereby senior faculty members mentor junior faculty members (within or outside the department) in their efforts to receive tenure.	
Continue to support faculty in implementing individual research lines.	3. Support eligible faculty in promotion and/or tenure development.	3. Provide Program Faculty with sufficient time and resources to complete and disseminate research.			3. Increase departmental submissions for publication by 20% over baseline*; annual attendance at scientific meetings and other CEU activities.	
Continue to foster collegial Faculty culture, including ideas for graduate teaching, faculty scholarship, and service.	4. Faculty to engage in timely discussions of topics relevant to the Program.	4. Faculty to engage in timely discussions of the advancement of the Program's Mission and Vision.			4. Hold regular meetings of Program Faculty and Program Committees; Hold regular "lunch and learn" meetings (at least 3 times a year) to focus on areas of faculty teaching, scholarship or clinic interests.	

Maintain communication within the Program.	5. Support communication within faculty and between faculty and administration.	5. Hold regular program committee meetings; hold regular faculty meetings; hold regular SLP faculty retreat.			5. Committees to meet once each quarter; faculty to meet once every six weeks; faculty retreat to occur every two years.	
Ensure that academic faculty, clinical faculty, and staff have sufficient time and resources to attend training and conferences.	6. Hold training for faculty and staff in HIPAA and FERPA policies, as well as advanced training in MS Word and Excel, and Adobe Publisher for Program staff.	6. Provide resources to cover job duties while Program Faculty attend conferences.			6. Faculty will maintain and hold specific certifications. Faculty will attend an average of one to two conferences each year to support networking and continuing education opportunities.	
Provide support for faculty members to obtain intramural/extramural support for research endeavors.	7. Support partnerships between academic and clinical faculty.	7. Partnerships will result in (a) collaborative research and (b) collaborative treatment of clients.			7. Academic faculty will submit an average of one grant proposal every two years	
Evaluate faculty areas of expertise.	8. Evaluate faculty and staff workloads annually.	8. Review with Program Faculty factors relative to academic and clinical needs and desired growth in the Program.			8. Reularly evaluate Praxis scores, program outcomes, and performance evaluations to measure these outcomes; Praxis pass rate (all attempts) should be at least 10% above the national average	

Curriculum Development and Student Assistance Goals

Goals	Objectives	Strategies	Initiate	Complete	Target Outcomes	Accountability
Ensure curriculum supports student development of knowledge and skills.	1. Provide students with breadth of knowledge on research and best practices in SLP 2. Ensure that academic and clinical courses prepare students to fulfill program learning objectives and ASHA and CAA requirements 3. Develop new summative model for evaluating student competencies	1. Review of academic and clinical course, curriculum map; identify opportunities for new courses or removal of others. 2. Review of Program PLOs, ASHA, CAA standards (as needed). 3. Identify best practices in the use of portfolio assessment; identify possible portfolio products based upon syllabi and instructor input.	2022	2027	1. Annual Curriculum Report 2. Completion and/or revision of Program Learning Objectives to Standards mapping spreadsheet as needed 3. Develop procedures document for student portfolios.	• Program Director • Education Committee • Program Faculty
Ensure opportunities and experiences support student development of knowledge and skills.	4. Provide students with an array of clinical opportunities and experiences to meet clinical competencies within the SLI. 5. Increase clinic-academic faculty	4. Assign students a variety of clinical experiences (age, diagnoses, etc.) within the University clinic. 5. Identify current external sites for	2022	2027	4. Increase complex cases by 20% over baseline*. External preceptors surveys/interview checklists. 5. Students will engage in simulated learning	• Director of Clinical Education (DCE) • Clinic Coordinator • Program Faculty

	collaboration for facilitating improved student learning.	practicum experiences to ensure areas of need are met; provide each student with a unique clinical (offsite part-time placements; camps, group interventions at the SLI) experiences during their first year; identify and plan for implementing simulated learning activities; Faculty members will provide updates on courses.			activity at least once a year.	
Ensure student growth and learning is supported throughout program	6. Increase clinic and academic faculty communication to support student growth and learning	6. Follow student advisement procedures to identify potential academic or clinical concerns.	2022	2027	6. Develop remediation plans that include student, academic or clinic advisor, and clinical faculty member (as appropriate)	• Program Director • DCE • Program Faculty

Research development for Faculty and Students Goals

Goals	Objectives	Strategies	Initiate	Complete	Target Outcomes	Accountability
To enhance a culture of excellence in research and scholarship in the department.	1. Enhance scholarly productivity of full-time faculty. 2. Excellence in basic, clinical, or translational research that aims to understand, prevent, screen, diagnose and treat speech, language, and swallowing impairments. 3. Excellence in other research lines relevant to communication sciences and disorders (examples include but are not limited to scholarship of teaching and learning)	1. Establish writing accountability groups 2. Participate/host a college level "scholarship mingle" twice a year where faculty from other programs get to discuss their research 3. Three departmental Lunch and learn sessions during an academic year. The purpose is to talk about research that could potentially lead to interdisciplinary ideas. 4. Encourage collaborative clinical research projects between academic and clinical faculty. 5. Encourage members of the program to participate in research development opportunities offered through the Midwestern ORSP.	2022	2027	1. 20% increase from 2022 baseline* in the number of manuscripts submitted 2. 20% increase from 2022 baseline* number of presentations at state, national and international conferences 3. 20% increase from 2022 baseline* number of internal or external grant submissions 4. 20% increase from 2022 baseline* number of student opportunities for participation in faculty-directed research	• Program Director • Research Committee

		6. Address the importance of research to students early in the program during orientation. 7. Encourage students to discuss with faculty about their research ideas as part of the research methods class and during first advising session. 8. Research mentorship for new faculty to have tangible targets for manuscript preparation and/or grant submission.				

*Baseline is provisionally defined as the collective average in the preceding three years (2019-22)

Student Admissions Goals

Goals	Objectives	Strategies	Initiate	Complete	Target Outcomes	Accountability
To recruit annually a cohort of 40-45 students	1. To increase visibility of the program to future applicants. 2. To increase visibility of the program's unique offerings and faculty and student accomplishments. 3. To increase visibility and reputation of the program within the local SLP and rehab communities.	1. Advertise program via MWU website and the CSDCAS application portal. Work with Office of Admissions to hold virtual and in-person open houses and tours. Participate in Office of Admissions events including but not limited to Open House's, and High School Career Days 2. Increase social media presence of program 3. Host CEU and other educational/trainings /seminars	2022	2027	1. Total number of annual applications being approximately 400	• Admissions Committee • Program Social Media Team • Program Director • Program Faculty

To retain high quality candidates	4. To matriculate a cohort with strong academic background 5. To matriculate a cohort with strong interview scores.	1. Develop scholarship fund 2. Increase research opportunities for students 3. Develop elective/independent study options 4. Review current interview procedures and materials to identify ways to improve identification of strong and weak students	2022 2022 2022 2022	2027 2024 2024 2023	1. Cohort average MGPA of 3.5 or greater; CGPA of 3.3 or greater 2. Cohort average interview score of 7 or higher.	• Admissions Committee • Program Director • Education Committee • Research Committee

Sufficiency of Facilities and Equipment Goals

Goals	Objectives	Strategies	Initiate	Complete	Target Outcomes	Accountability
Evaluate and maintain sufficiency of SLP Program facilities.	1. Assess program needs and make recommendations for modifications or additions to Program facilities and space to meet educational and clinical missions.	1. Monitor and implement any needed changes to space and furniture/accommodations in the SLI Clinic and offices, research labs, to address new developments, replacement of items due to age/obsoleteness, etc. 2. Monitor and implement any needed changes to space and furniture/accommodations in the Classroom/Lab or Program Faculty offices due to age/obsoleteness/changing needs.	2022	2027	1. Meet with CHS Dean to discuss any overall changes to space. 2. Resource list created for new faculty regarding on campus supports (Media, Simulation Center, Student Services, Gross Anatomy Lab, Research Labs, Library, etc.) to facilitate further usage of university resources.	• Program Director
Evaluate and maintain sufficiency of Program equipment.	2. Assess current program equipment and supplies/materials for sufficiency to meet educational and clinical missions.	1. Establish communication with all faculty regarding need for new materials/tests/resources based on courses.	2022	2027	1. Inventory of materials and resources is annually updated in both the Classroom/Lab and SLI to archive those no longer relevant	• Program Director • Clinic Coordinator

	3. Establish a plan for replacement of capital expense equipment due to aging/obsoleteness (cameras, furniture, specialized computers, speech generating systems, etc.).	2. Monitor equipment for functionality and sufficiency to meet educational and clinical missions. 3. Develop schedule for review of equipment function and operation.			and create updated resource list 2. Process detailed for SLP academic and clinical faculty to coordinate use of resources across campus (test protocols, online software programs such as SALT, etc.). 3. Protocol and schedule developed to review updates needed on software/programs/equipment used in the SLP Classroom/Lab. 4. Updates scheduled/arranged for acquisition and installation of any new or replacement equipment and logged in a centrally located database for faculty/staff review. 5. Archival/disposal of items/equipment/test materials no longer used/relevant and logged.	