Why Every Audiologist Should Care about University Program Accreditation

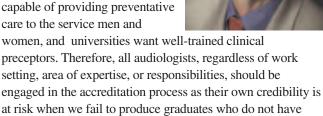
ompetence is a word used to describe one of the professional qualities audiologists should possess at any stage of their careers, but is of critical concern at that point when the new graduate enters the workplace. Over the past 20 years, innumerable discussions and meetings have been held to determine what the "entry-level" competence should be for persons graduating from our training programs. Beyond what those competencies should be is the question of how we, as a profession, assure the public, including patients, licensure boards, governmental agencies, third-party payers, and other health professionals, that our graduates have these competencies and are prepared to provide services for which they are trained.

The responsibility for these assurances to the public rests with the profession as a whole, not just with the American Academy of Audiology (Academy) or the university academic programs. In the document titled "Profiling the Professions: A Model for Evaluating Emerging Health Professions," the Center for Health Professions at the University of California San Francisco noted that: "Regardless of the particular track one follows or the portal one uses to enter a profession, the *profession* (italics added) should be able to demonstrate (through clearly prescribed methods) that its members are competent to provide the care they offer when they enter the profession." Therefore it is the responsibility of all audiologists to assure the public that those individuals who desire to enter our profession are appropriately trained, possess the requisite knowledge, and are capable of rendering the necessary decisions for quality patient care.

Because graduates enter the workplace in a multitude of environments, there is no work setting of our profession that should not embrace the need for rigorous standards for our graduates. For example, Veteran's Administration hospitals need to know that our graduates can select and fit hearing aids. Pediatric hospitals need to be assured that graduates can test the hearing of newborns. Private practices seeking partners need to believe that graduates are capable of working independently. Educational settings want to know that graduates understand the unique environments of classrooms.

IAN M. WINDMILL, PHD, CHAIR. ACCREDITATION **COMMISSION FOR AUDIOLOGY EDUCATION (ACAE)**

The military desires individuals



these necessary entry-level competencies. When the Academy was founded, one of the guiding principles was to elevate the academic education of our graduates to the doctoral level. At the same time Academy was founded, the transition to the AuD began, and these two movements became intimately intertwined. In point of fact, the Academy required that all new members, approximately five years after the founding, would be required to have a doctoral degree. The founders recognized that the respect and recognition we were striving to achieve were coupled to our educational foundation. As part of that vision for the profession, subsequent leaders recognized that this educational foundation must also be responsive to our professional evolution, and this responsiveness could only be achieved through the development of a process which provided a quality control mechanism for our educational system. Hence the Accreditation Commission for Audiology Education (ACAE) was launched in 2003 through the joint efforts of the Academy and the Academy of Dispensing Audiologists.

WHAT IS ACCREDITATION?

Accreditation is a process of external quality review used by higher education to scrutinize colleges, universities and academic programs for quality assurance and quality improvement. It is considered a voluntary program as universities or programs are not required to participate in the process. However, for reasons including the desire to comply with professional standards, the requirements of licensure boards, university mandates, or marketing efforts, most programs and universities choose to be accredited.

Most people believe accreditation is a way to force





programs to assure quality in their graduates through compliance with educational standards promulgated by the profession. Conversely, concerns have been raised about the quality of "some graduates" from "some programs," and therefore, the responsibility of accreditation to assure quality has been questioned. In one sense, the role of accreditation is to assure that graduates do meet some pre-determined level of competency. However, accreditation is also designed to assure that an academic program is meeting its own stated goals, which consequently should be aligned with the profession's expectations for graduates. For example, a non-research institution may not require research output from the faculty, but the profession should expect that graduates from that institution learn to be appropriate consumers of research. Accreditation also cannot evaluate the competencies of individuals who graduate from a program; rather, the process of accreditation must focus on the program itself and its methods for assuring the competence of graduates as a whole.

In the United States, there are four basic types of accreditation. Regional accreditation is generally focused on the university as a whole and is provided by one of six regional accreditors. Their focus is on those issues which impact all students or cut across many departments, including the overall administrative structure and operations of the university. Faith-based accreditation focuses on those institutions which generally have a religious orientation, but also focus on the institutions as a whole. Private career accreditation is primarily for institutions which have a singular career focus or prepare individuals for technical careers. Programmatic or specialized accreditation is focused at the academic program level within universities. In the United States, there are more than 18,000 programs in this category which are currently accredited, with the majority being in the health and professional degree areas. Accreditation for audiology programs falls in this last category.

In the United States, the regulation of accrediting agencies is the responsibility of the U.S. Department of Education (USDE). The National Advisory Committee on Institutional Quality and Integrity (NACIQI), a section of the USDE, evaluates accrediting agencies to assure they are performing in a manner consistent with the guidelines of the USDE. Guidelines for student achievement, curricula, faculty, facilities, support services, admissions, complaint resolution, and graduation rates are examples of the criteria which must be included in an accrediting agency's standards. The stated purpose for the recognition of accrediting agencies by the USDE is to assure that students receiving federal financial support are receiving a quality education. Hence, any academic program in which federal funds provide some level of support for students must be accredited.

The Council on Higher Education Accreditation (CHEA) is an organization formed by the university communities to assure and strengthen academic quality and ongoing quality

improvement. CHEA guidelines include the areas of accountability, academic quality, self-study and planning for change, fair decision processes, ongoing review, and that programs have sufficient resources to meet their stated goals. Recognition by either the NACIQI or the CHEA requires that an accreditation agency meet their regulations and guidelines and be operational for at least two years.

WHY DO WE NEED ACCREDITATION?

A contemporary, well-respected and standardized educational process is one of the cornerstones of an autonomous, respected profession. Any profession, including audiology, must promulgate educational standards that are rigorous and comprehensive, and only graduates of programs that can meet these standards should gain access to the profession. The judgment as to whether academic programs prepare students to enter the profession is the responsibility of an accrediting agency.

The time when most audiologists likely thought much about accreditation was when they were selecting a graduate program. In reality, a student applying to a program probably does not appreciate what accreditation really means, but assumes it bears some relation to quality. After graduation, accreditation probably does not command much attention for the average audiologist. However, the impact of accreditation goes well beyond assuring potential students that the program meets a set of professional standards.

For our profession, accreditation is one of the key elements of autonomy. While not as dramatic as direct access or developing the AuD degree, accreditation provides the educational foundation on which autonomy is built. Any inconsistencies in the educational system detract from our ability to declare ourselves an autonomous profession. Accreditation is tied to the perception of the profession from other health-care professionals and agencies. The consistency and rigor of our education lends credibility to the perception of the profession. Accreditation is also tied to licensure boards. Most licensing agencies require applicants to be graduates of accredited training programs. Perhaps most importantly, accreditation provides an unwritten blanket of trust for the consuming public. For health-care in particular, the public must have confidence in their providers. Accreditation of training programs, along with licensure, provides that confidence.

If professional autonomy is a goal for audiology, then a rigorous and consistent educational system must be assured. We cannot declare to the public that audiologists have the necessary skills to provide hearing and balance care and then allow academic programs to train audiologists to whatever level they deem appropriate. All audiologists should care that processes are in place to assure that the entry-level competence of new graduates meets our profession"s expectations. In this regard, accreditation is a key element of our vision for an autonomous profession.