For Programs Only: A “Q and A” from a Consumer’s Perspective

By Erica Friedland and Patricia Gaffney

This article takes the perspective of a consumer undergoing the ACAE accreditation process. ACAE is a relatively new accreditation agency that is devoted to audiology with a novel approach that makes extensive use of collaboration and digital technology. Below are questions that have been asked with answers/responses to them.

How does the ACAE process begin?
“The beginning is the most important part of the work.” —Plato

Training, of course. A unique feature of this accreditation process is that all data entry and communication occurs through a Web-based program called Computerized Accreditation Program® (CAP). CAP is state-of-the-art technology in terms of accreditation. ACAE provides the university with hands-on, in-person training on the CAP software and how data is entered into it.

So, you mentioned data gathering, what type of data is needed?
“Spectacular achievement is always preceded by spectacular preparation.” —Robert H. Schuller

The survey section of the CAP is the basis for the self-study portion of the accreditation review. The survey has 12 sections that encompass things such as university administration, organization structure, program administration, curriculum, student demographics, facilities, and finances. Take notes during the training, because the depth of information needed to complete the surveys does not hit home until you go to enter it online.

It is important and advantageous to the entire process to assign at least two individuals to take the lead in organizing and entering the data and supporting documentation. In our experience, this part of the accreditation process was the longest and most time consuming. The structure is logical and systematic, but you will be analyzing your program data in a way you have not done in the past.

For example, in a survey section titled, Curriculum Characteristics—Competency Analysis, you are asked the assessment approach for each of the 33 competencies, and also when mastery of each of the 33 competencies is achieved during the course of the program. The faculty must consider when the students in the program demonstrate mastery of each competency. For example, D2 addresses the student’s knowledge “regarding the application of audiological diagnosis, treatment, and management principles in diverse settings, including practice-based, educational, and industrial environments.” None of your students may exhibit mastery of this competency by the end of year two. Fifty percent may exhibit competency by the end of year three, and the other 50 percent by the end of year four. Likely, you haven’t asked these specific questions previously, so input from all teaching and clinical faculty is needed to accurately map each competency to courses and to student achievement. You have the opportunity to discover areas in which your program excels and perhaps also those areas that need improvement.
Since CAP is a Web-based program, access is available anywhere you have an Internet connection. CAP also allows different departmental collaborators to message each other privately and internally to the CAP. This particular feature was useful when multiple people were travelling and had to work on the same area of the survey. One thing to note about uploading supporting documentation, all documents must be in pdf format, therefore, it is suggested that you have full capabilities with Adobe Acrobat, Microsoft Office 2007, or higher, and/or a scanner that scans to pdf.

**After the program has collected and input the data, what do you do with all the information?**

“If I am not mistaken, Data was the comic relief of the show.” — Brent Spiner

CAP will generate multiple tables and charts that assist you in completing your self-study. The self-study is a process used for close examination and reflection of all aspects of your program. ACAE is focused on the outcomes of the program, rather than the process your program utilized to achieve those outcomes. This is a program’s opportunity to highlight the creative and unique ways faculty teach and assess competency related to the ACAE standards. There will undoubtedly be areas that you uncover as weaknesses of your program. You will find that instead of trying to mask those weaknesses, you can fully evaluate the extent of the weakness without apprehension of potential penalty with the understanding that the goal of this accreditation is excellence in audiology education. You are asked to provide evidence to support the standard, your current analysis of how the program meets the standard, and any proposed action for the future in terms of the standard.
I’ve heard that there is a virtual site visit; can you tell me more about that process?
“In order to get from what was to what will be, you must go through what is.” —Anonymous
After the self-study is complete, the executive director of ACAE and the program chair will set a date for the on-site review. Approximately three months prior to this date, a review committee is assigned to your program and the virtual site visit will begin. The committee will review all of the survey data and the self-study online. They will examine the supporting documents, tables, and charts all in an effort to streamline the on-site visit. They are evaluating the data you have provided and assessing whether it supports the standards. During this time, the reviewers can post questions, comments, or ask for clarification in the CAP. This allows the program to respond or provide more information in a low pressure situation with ample time to prepare any additional information. The on-site review is very focused, because the reviewers are already familiar with your program.

Site visits can be pretty stressful, what makes this process any different?
“In times of stress, be bold and valiant.” —Horace
Feeling stressed about the site visit is not any different, but the approach that ACAE brings to your visit is different. The purpose of this site visit is to verify what was put on “paper” is actually occurring within the program. Just as you may have experienced with other site visits, meetings are scheduled with all the key players such as administration, faculty, students, alumni, and preceptors. The reviewers tour the facilities with an open dialogue.

As each standard is evaluated, the reviewers are writing their preliminary site visit report for presentation at the final conference. Part of what makes the site visit stressful in other program reviews is that the final outcome is not known for several weeks to months after the review. ACAE makes their process different by providing a written report on-site. Our university president was present at the final conference, he noted that he was impressed that a written report evaluating each standard and compliance with each standard was provided and reviewed prior to the site visitors leaving campus. He expressed that this is something he had not encountered with other accreditation evaluations and how valuable it was to receive such timely feedback. The reviewers also give the administrators and faculty opportunity to provide comments during this final conference. In our preliminary report there were two items that needed clarification, the reviewers listened and made changes to the final report.

Overall, did you benefit from the process?
“The reward of a thing well done, is to have done it.” —Ralph Waldo Emerson
Without a doubt, our program has experienced significant benefit. First, we felt an extreme sense of pride in being able to present such a sophisticated and forward-thinking accreditation process to the university president and top administrators. It helped to improve our “footprint” on campus.

Second, the site visit report noted several areas of “strength” in our program. One of the areas was systematic process for planning and evaluation. The program evaluators and board of directors documented the program has, “…an outstanding process of continued program assessment and improvement with specific, measurable, achievable, realistic, and timely goals and objectives. There was exemplary attention to detail in the documentation of student progress against outcomes.” This is an area in which all programs strive to achieve excellence. It was exceptional for the faculty to be recognized for their consistent hard work, effort, and dedication towards student achievement and program excellence.

Finally, our program had outgrown our current clinical space and ACAE noticed. Noise levels were high, there was little capacity for clients to be evaluated, and students did not have adequate lab and classroom space. As is the case with most universities, space is at a premium. However, we were immediately placed at the top of the list due to the documentation in the area addressing clinical facilities that ACAE provided in the site visit report. It was the key factor in the university moving forward with securing and building a new clinic and classroom space for our program. 😊

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