

Graduate Degree Program Assessment Progress Report Cover Sheet:

Degree: M.S.in Speech Pathology **For Calendar Year:** 2010

(Date posted on college assessment website: _____)

Overall Rating: _____

Respond to all six parts following the “Degree Program Assessment Progress Report Instructions.” (NOTE: Parts 1 through 4 can be copied from the relevant sections of your assessment plan.) Attach additional pages as needed.

(1) Student learning goal(s) addressed this year:

Our goals are:

- 1) To produce clinician-scholars who engage in lifelong learning activities that build on knowledge obtained in our program.
- 2) To develop specific and current competencies for evaluating and treating children and adults with speech, language, swallowing, and/or hearing disorders.
- 3) To provide research skills as a foundation for advanced studies and/or as an informed consumer of research.

(2) Learning outcomes/objectives for those goals addressed this year:

Students will demonstrate:

1. knowledge and skills related to the assessment and diagnosis of adults and children with speech, language, swallowing, and/or hearing disorders.
2. knowledge and skills in the (re)habilitation of adults and children with speech, language, swallowing, and/or hearing disorders.
3. knowledge of research methodology in general and within the field of communication disorders

(3) Courses & activities where assessed:

Student knowledge and skills needed for this degree were evaluated this year using the Practicum courses. All on and off-campus supervisors use an instrument piloted in the summer of 2003. This instrument is based on the American Speech Language and Hearing Association Knowledge and Skills Areas standards. An online version of this instrument was launched in the Fall 2005 semester.

(4) Methods used:

During the fifth year of the five-year plan the focus of assessment again shifted to graduate student assessment. In addition to the yearly clinic and program assessment

efforts the graduate student assessment process repeated and included: Graduate Capstone Examination, and results of the KASA objectives.

(5) What are the assessment findings? How did you analyze them?

Graduate Exit Survey

The *Graduate Exit Survey* (Appendix A) was completed by 19 of 19 graduate students approximately 1 – 2 weeks prior to their graduation in May, 2010. The Exit Survey used a 5 point scale with 1 indicating strong disagreement and 5 indicating strong agreement. All questions were worded such that a positive response was always toward 5 and a negative response toward 1. There were 13 questions, five covering the knowledge-base, four covering clinical proficiency, three covering behavioral skills and one for an overall program rating. The grand mean for all 13 questions was 4.6 with a range between 4.3 and 4.9. For the five knowledge-based questions the mean was 4.6 with a range between 4.5 and 4.7. Students reported that they had learned sound clinical judgment and felt that they had learned the skills necessary to function in the workplace. For the four clinical questions the mean was 4.5 with a range between 4.3 and 4.7. The highest scores were given for learning therapeutic skill and the lowest for performing diagnostic procedures. On the three questions related to behavioral skills, the mean score was 4.7 with a range between 4.6 and 4.9. The overall rating for the program was 4.6 (where 4 = good and 5 = excellent). In general, these exit interview data indicate that students are pleased with the education they received from the Department of Audiology and Speech Pathology. This is the second year that students reported feeling less confident in their diagnostic skills than in their therapeutic skills. We should monitor the scores for this question next year and discuss methods of improving student diagnostic skills and experiences if students continue to feel less prepared in this area. Helpful suggestions were offered by many students regarding topics that need more coverage, course sequencing, and practicum placements.

Graduate Course Evaluations

Each semester each graduate course and instructor are evaluated through the College of Health Related Professions in the University of Arkansas for Medical Sciences. That scale ranges from 5 = Strongly Agree, 4 = Agree, 3 = Neither Agree nor Disagree, 2 = Disagree, and 1 = Strongly Disagree (Appendix B). The College of Health Related Professions personnel inform the chairman of Audiology and Speech Pathology if any graduate course evaluation falls below 4.0. A program is decided on and implemented with the individual faculty member that will help improve student evaluations. For calendar year 2009, the department's graduate course evaluations ranged from 4.3 to 5.0 with a mean of 4.75. For calendar year 2010, the department's graduate course evaluations ranged from 4.3 to 5.0 with a mean of 4.8. Overall these scores indicate a high level of student satisfaction with the teaching that is being provided by the faculty. The differences between 2009 and 2010 are small enough that they are not likely to represent any significant difference or changes over the last year. Also, because we are

close to the ceiling on this scale, we are not likely to see any strong gains in course evaluations in the future.

Graduate Student Practicum Evaluation

All on and off-campus supervisors use an instrument piloted in the summer of 2003. This instrument is based on the American Speech Language and Hearing Association Knowledge and Skills Areas standards. An online version of this instrument was launched in the fall 2005 semester. This tool continues to be used to assess student performance in practicum and to track student progress through the skills areas of the new ASHA standards. (See Appendix C).

Practicum Supervisor Evaluation

At the end of every semester, all faculty members who supervise students performing their clinical practicum are evaluated by the students using a 12 question form. Faculty are evaluated on such things as their working relationship with the student, how well they assist the student, still allowing for student input and problem solving, availability to the student, interactions with the student in conferences, etc. A 5 point Likert scale is used for rating supervisor performance on each of the 12 items, with 5 = outstanding, 4 = excellent, 3 = good, 2 = fair, 1 = poor, and NA = non-applicable (See Appendix D). During the spring 2010 term, four (4) faculty supervisors were evaluated by 51 students and the average rating was 4.6. During the summer 2010 term, four (4) faculty supervisors were evaluated by 32 students and the average rating was 4.9. During the fall 2010 semester, five (5) faculty supervisors were evaluated by 53 students. The average rating was 4.6. These data indicate that, on average, our faculty members were rated in the “outstanding to excellent” range with regard to student practicum supervision. The results of the supervisor evaluations were given to individual faculty members for review and modification of supervision techniques. Feedback was also given to individual faculty members during the annual review process.

Consumer Evaluation of Clinical Services

All students in clinical practicum provide supervised services to adults and children with communication disorders. Student clinicians and their clinical supervisors are evaluated by consumers who receive services or by their parents with regard to 19 clinical behaviors on a scale of 5 (excellent) to 1 (poor) or not applicable. The *Consumer Evaluation of Clinical Services form* is presented in Appendix E. This form has been used in the Speech and Hearing Clinic over the past several years to evaluate the quality of clinical services. Aggregate mean results for each year are shown in the chart below, comparing calendar year data from 2005 through 2010. A five-point Likert scale is used for rating consumer satisfaction. The aggregate data available in audiology for the years 2006, 2007 and 2008 reflected only a single semester from each year, while that for 2010 reflected an entire year. Audiology data for 2005 and 2009 was unavailable. The number of students and clinical supervisors providing clinical services in audiology also varied from semester to semester and from year to year, as did the number of clients providing ratings.

Of the 60 clients who returned audiology consumer surveys in 2010, no individual client provided an overall rating of clinical services lower than 4.5, and of the 158 clients who returned speech-language pathology consumer surveys, no individual client provided an overall rating lower than 3.93. On average, consumers of both audiology and speech-language pathology clinical services over the past six years have consistently indicated that the services provided at the UALR Speech and Hearing Clinic are “high average” to “excellent.” These ratings show that clients are continually satisfied with our clinical services.

Graduate Capstone Examination Audiology & Speech Pathology

Each year from 2008-2010, Graduate students in the speech pathology program participated in a multiple choice comprehensive examination that they each were required to pass before exiting the program. Additionally, in 2008 and 2009, the students answered survey questions probing their assessment of the examination process. The data show a decline in the number of students who failed the examination after the first attempt across the years. The students are allowed three chances to pass the comprehensive examination. Students who fail are given a different version of the test, and provided with remediation in their areas of weakness. It should be noted that, in every year, the students who failed on the first attempt eventually passed the examination.

Student Evaluation of Comprehensive Examination

The frequencies of responses were generated for each of the categories across for the corresponding years. The cells containing the greatest number of responses for each year were placed in bold. Overall the students agreed that the examination sampled their knowledge base, while the students were relatively neutral regarding how well the exam helped them study for the praxis examination. One of the more noteworthy findings was that the students felt that the examination questions were not clearly written. However, they felt strongly that they were given good guidelines prior to the examination, were given a comfortable room for testing, and that the administration of the examination was satisfactory. The students leaned toward the feeling that their knowledge could not have been more adequately assessed. In response to this feedback our faculty began a department-wide effort to analyze the questions more closely and proofread for errors. We have also created an examination that is much more consistent in form than previous examinations.

KASA Objectives

Beginning in 2005 all graduate programs in speech-language pathology were directed, by the American Speech Language Hearing Association (ASHA), to assess and document the academic and clinical knowledge and skills of their M.S. students. Nine primary areas are measured and these are: Hearing, Swallowing, Cognitive aspects of communication, Social aspects of communication, Receptive and Expressive language (includes literacy), Voice and Resonance, Articulation, Fluency, and Augmentative and Alternative Communication.

The UALR/UAMS audiology and speech-language pathology faculty created 300+ specific learning objectives which target: prevention, assessment and intervention knowledge and skills for the nine areas. The learning objectives are quantitatively measured in 14 different graduate classes. Although the graduate students in speech-language pathology may receive information pertaining to various knowledge and skills in multiple courses, each academic learning objective is formally assessed in only one designated course. All the M.S. students are required to pass 100% of the specific learning outcomes. In the event that a student does not pass a KASA item within a specific course, the course instructor implements his/her remediation plan to assist the student acquire the pertinent knowledge and skills item(s).

Each faculty member formally assesses each of the learning objectives which have been assigned to be taught and measured in their courses. Initially, each faculty member entered the KASA data (outcomes for the various learning objectives) for each graduate student enrolled in their course at the end of each semester. At the beginning of 2010, there was a change in the data entry process. Currently, each faculty member is responsible for contacting the department chair (in writing) to confirm that the students in their courses did indeed pass the KASAs for that course. These data are then entered into a software program (established specifically for this purpose) by the department chair and the department clinic director. Thus far, this software program contains academic KASA data for each speech-language pathology student enrolled in the M.S. program between Spring 2005 and Fall 2010. One hundred percent of all the M.S. students enrolled in the program have completed 100% of their academic KASAs.

In addition to the academic KASAs, each student also completes specific clinical KASAs as outlined by ASHA. Completion of the clinical KASAs is closely monitored by the department clinic director. All the M.S. students are required to meet minimal competencies in accordance with ASHA specifications. As with the academic KASAs, there are specific remediation activities employed by certified speech-language pathologists to assist students pass their clinical KASA's should they evidence the need for this assistance. Student data from the clinical KASAs are also entered into the KASA software program by the clinical director. One hundred percent of all the M.S. students enrolled in the program have completed 100% of their clinical KASAs. Paper copies of each student's academic and clinical KASAs are added to their department folders immediately following their M.S. graduation from UAMS.

Assessment, remediation and tracking of the students' academic and clinical KASA's was a primary area reviewed and evaluated by the three site visitors from the ASHA in fall of 2009. The site visitors provided both positive feedback and insightful suggestions regarding the departments' KASA assessment program. Their specific suggestions were implemented beginning in the spring of 2010.

(6) What conclusions were drawn and what decisions were made as a result? How were stakeholder groups involved?

Conslusions:

The faculty have now used all three versions of the new comprehensive examination using the multiple choice format twice. The validation process for the comprehensive examination is ongoing; the eighth round of using our tests is scheduled to be given this Spring term. The faculty spent a large amount of time analyzing the data from these examinations and revised or deleted several questions. As we continue to collect data we hope to establish a definite cut-off score criterion for pass and fail.

The KASA objectives in speech pathology have become an integral part of the department's assessment of students, as they are, in large part, how our graduates will be judged eligible for national certification and state licensure. The speech pathology program has over 300 KASAs that are used to rate each graduate student in academic and clinical areas. We plan on reviewing our KASAs this year with the goal of streamlining them. Our students continue to graduate and find employment. All assessment indicators point to the fact that we are doing a good job in preparing our students for the professions of speech pathology and audiology.

The department did not conduct any community focus group meetings this year but we continued to receive feedback on our students and programs from the community through various other assessment tools. Our faculty will continue to consider suggestions from the clients we serve and the community at large to continue to improve our program.

Stakeholder Involvement

Five sets of stakeholders contributed information to the current assessment report: faculty, students, consumers of clinical services, employers and working graduates. All faculty members participate in the evaluation of students, both in the clinic and in the classroom. Additionally, all faculty are involved in collecting, analyzing, and summarizing relevant assessment data for this report.

Graduate students perform course evaluations, evaluations of practicum supervisors, and they also complete the graduate exit survey in the semester they finish all requirements.

The consumer/community group evaluates the department's provision of clinical services.

Employers and working graduates evaluated how well our educational program is preparing our students for the work setting.

ASSESSMENT IMPLEMENTATION PROGRESS REPORT

MASTER'S DEGREE in Audiology and Speech Pathology

College of Professional Studies

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ANNUAL REPORT

APRIL, 2011

Department Mission

The mission of the Audiology and Speech Pathology Department (AUSP) is to provide highly educated professionals to work with persons with communication, swallowing, and/or hearing disorders.

Graduate Mission

The mission of the graduate programs in speech-language pathology and audiology is to educate professionals to work with persons with speech, language, swallowing, and/or hearing disorders and to help such persons succeed not only in the work force but also in their lives in general. One aspect of the UALR mission is to use knowledge in ways that will contribute to society. The education of highly qualified speech-language pathologists and audiologists who will use knowledge to improve the lives of people with communication disorders is congruent with that mission. Another aspect of the UALR mission is the application of research knowledge in ways that will benefit humanity. The AUSP faculty and their students engage in research with the objective of discovering new knowledge which may benefit the people of Arkansas and the nation.

Goals

Our goals are to produce clinician-scholars who engage in lifelong learning activities that build on knowledge obtained in our program, to develop specific and current competencies for evaluating and treating children and adults with speech, language, swallowing, and/or hearing

disorders, and to provide research skills as a foundation for advanced studies and/or as an informed consumer of research.

Program objectives

Students will demonstrate:

1. knowledge and skills related to the assessment and diagnosis of adults and children with speech, language, swallowing, and/or hearing disorders.
2. knowledge and skills in the (re)habilitation of adults and children with speech, language, swallowing, and/or hearing disorders.
3. knowledge of research methodology in general and within the field of communication disorders.

Five-year Assessment Plan: Graduate

Three areas for assessment have been identified within the Department of Audiology and Speech Pathology: program and clinical assessment, student assessment, and community and consumer assessment. The Audiology and Speech Pathology assessment plan includes rotating the focus of assessment each year following a three-year cycle.

First Year Assessments (Yearly): Every year of the three-year cycle involves gathering data related to assessment of the program and clinic. This assessment process includes the following instruments: Graduate Exit Surveys, Graduate Course Evaluations, Graduate Practicum Evaluations, Practicum Supervisor Evaluations, and Consumer Evaluation of Clinical Services. No Town Hall meeting was conducted in 2010; therefore, no data for that item are included in the current report. Data from these instruments have been collected each semester. These data are currently being used to evaluate program effectiveness by obtaining input from three of our major stakeholders: faculty, students and on-campus clients. Results from these instruments have also been used for program improvement and decision-making.

Second Year Assessments (2008): During the second year of the three-year cycle assessment efforts will focus on graduate student assessment. In addition to the yearly clinic and program assessment efforts, the graduate student assessment data will be reported every two years and will include: Graduate Capstone Examination and results of the American Speech-Language-Hearing Association (ASHA) Knowledge and Skills Areas (KASA) objectives. Data from these instruments are currently being used to make decisions about the graduate program curriculum.

Third Year Assessments (2009): During the third year of the three-year cycle assessment efforts will focus on assessment of our graduate program by the community and consumers. In addition to the yearly clinic and program assessment efforts community and consumer assessment will be conducted in the third year of the three year cycle and will include: Employer Surveys, Nine-month Post Graduation Surveys, and Focus Group Meetings (as needed). Data from these meetings will be used to get input from the community and alumni about our graduate program. These data should indicate how well the program is meeting the needs of the community.

Fourth Assessment Year (2010): During the fourth year of the five-year plan the clinic and program assessment process will be repeated. The assessment tools will include: Graduate Exit Surveys, Practicum Supervisor Evaluations, Graduate Course Evaluations, and Consumer Evaluation of Clinical Services, and a Town Hall meeting, if held. These data will be used to assess the effectiveness of any changes made to the graduate program after the first year assessment of the clinic and program.

Fifth Year Assessment (2011): During the fifth year of the five-year plan the focus of assessment will again shift to graduate student assessment. In addition to the yearly clinic and program assessment efforts the graduate student assessment process will be repeated and will include: Graduate Capstone Examination, and results of the KASA objectives. Additionally, any new assessment issues can also be implemented depending on the needs of the graduate program.

**Audiology and Speech Pathology Graduate Program
Five-Year Assessment Plan (2011 - 2015)**

<u>Assessment Tool</u>	<u>Cycle</u>	<u>Year</u>
<u><i>Program and Clinic Assessment</i></u>		
Graduate Exit Survey	yearly	2011
Graduate Course Evaluation	yearly	2011
Graduate Student Practicum Evaluation	yearly	2011
Practicum Supervisors Evaluation	yearly	2011
Consumer Evaluation of Clinical Services	yearly	2011
Town Hall Meeting	as needed	
<u><i>Student Assessment</i></u>		
Graduate Capstone Examination	2 nd year	2011
KASA Objectives	2 nd year	2011
<u><i>Community and Consumer Assessment</i></u>		
Community Outreach Screenings Report	3 rd year	2012
Employer Survey	3 rd year	2012
Nine-month Post Graduation Survey	3 rd year	2012

Focus Groups	3 rd year	2012
<u><i>Clinic and Program Assessment Repeated</i></u>	4 th year	2013
<u><i>Student Assessment Repeated</i></u>	5 th year	2014
<u><i>Community and Consumer Assessment Repeated</i></u>	6 th year	2015

Use of Assessment

The Audiology and Speech Pathology Department had historically assessed graduate students using a variety of assessment tools that have been useful for program building and improvement. With the implementation of our five-year plan the following assessment tools were given this year to help meet our graduate program objectives as reflected by program and student assessment: Graduate Exit Survey, Graduate Course Evaluations, Graduate Student Practicum Evaluations, Practicum Supervisors Evaluations, Consumer Evaluation of Clinical Services, Graduate Capstone Examination and KASA objectives.

Graduate Exit Survey

The *Graduate Exit Survey (Appendix A)* was completed by 19 of 19 graduate students approximately 1 – 2 weeks prior to their graduation in May, 2010. The Exit Survey used a 5 point scale with 1 indicating strong disagreement and 5 indicating strong agreement. All questions were worded such that a positive response was always toward 5 and a negative response toward 1. There were 13 questions, five covering the knowledge-base, four covering clinical proficiency, three covering behavioral skills and one for an overall program rating. The grand mean for all 13 questions was 4.6 with a range between 4.3 and 4.9. For the five knowledge-based questions the mean was 4.6 with a range between 4.5 and 4.7. Students reported that they had learned sound clinical judgment and felt that they had learned the skills necessary to function in the workplace. For the four clinical questions the mean was 4.5 with a range between 4.3 and 4.7. The highest scores were given for learning therapeutic skill and the lowest for performing diagnostic procedures. On the three questions related to behavioral skills, the mean score was 4.7 with a range between 4.6 and 4.9. The overall rating for the program was 4.6 (where 4 = good and 5 = excellent). In general, these exit interview data indicate that students are pleased with the education they received from the Department of Audiology and Speech Pathology. This is the second year that students reported feeling less confident in their diagnostic skills than in their therapeutic skills. We should monitor the scores for this question next year and discuss methods of improving student diagnostic skills and experiences if students continue to feel less prepared in this area. Helpful suggestions were offered by many students regarding topics that need more coverage, course sequencing, and practicum placements.

Graduate Course Evaluations

Each semester each graduate course and instructor are evaluated through the College of Health Related Professions in the University of Arkansas for Medical Sciences. That scale ranges from

5 = Strongly Agree, 4 = Agree, 3 = Neither Agree nor Disagree, 2 = Disagree, and 1 = Strongly Disagree (**Appendix B**). The College of Health Related Professions personnel inform the chairman of Audiology and Speech Pathology if any graduate course evaluation falls below 4.0. A program is decided on and implemented with the individual faculty member that will help improve student evaluations. For calendar year 2009, the department's graduate course evaluations ranged from 4.3 to 5.0 with a mean of 4.75. For calendar year 2010, the department's graduate course evaluations ranged from 4.3 to 5.0 with a mean of 4.8. Overall these scores indicate a high level of student satisfaction with the teaching that is being provided by the faculty. The differences between 2009 and 2010 are small enough that they are not likely to represent any significant difference or changes over the last year. Also, because we are close to the ceiling on this scale, we are not likely to see any strong gains in course evaluations in the future.

Graduate Student Practicum Evaluation

All on and off-campus supervisors use an instrument piloted in the summer of 2003. This instrument is based on the American Speech Language and Hearing Association Knowledge and Skills Areas standards. An online version of this instrument was launched in the fall 2005 semester. This tool continues to be used to assess student performance in practicum and to track student progress through the skills areas of the new ASHA standards. (See **Appendix C**).

Grades	Spring 2010	Summer 2010	Fall 2010
A	35	22	40
B	4	1	0
C	0	0	0
D	0	0	0
I	0	0	0

Practicum Supervisor Evaluation

At the end of every semester, all faculty members who supervise students performing their clinical practicum are evaluated by the students using a 12 question form. Faculty are evaluated on such things as their working relationship with the student, how well they assist the student, still allowing for student input and problem solving, availability to the student, interactions with the student in conferences, etc. A 5 point Likert scale is used for rating supervisor performance on each of the 12 items, with 5 = outstanding, 4 = excellent, 3 = good, 2 = fair, 1 = poor, and NA = non-applicable (See **Appendix D**). During the spring 2010 term, four (4) faculty supervisors were evaluated by 51 students and the average rating was 4.6. During the summer 2010 term, four (4) faculty supervisors were evaluated by 32 students and the average rating was 4.9. During the fall 2010 semester, five (5) faculty supervisors were evaluated by 53 students. The average rating was 4.6. These data indicate that, on average, our faculty members were rated in the “outstanding to excellent” range with regard to student practicum supervision. The results of the supervisor evaluations were given to individual faculty members for review and modification

of supervision techniques. Feedback was also given to individual faculty members during the annual review process.

Practicum Supervisors Evaluation - 2010

Term	# of Students	# of Faculty	Rating
Spring 2010	51	4	4.6
Summer 2010	32	4	4.9
Fall 2010	53	5	4.6

Practicum Supervisors Evaluation – 2009

Term	# of Students	# of Faculty	Rating
Spring 2009	40	5	4.4
Summer 2009	17	5	4.6
Fall 2009	26	5	4.6

Practicum Supervisors Evaluation - 2008

Term	# of Students	# of Faculty	Rating
Spring 2008	43	8	4.5
Summer 2008	22	5	4.4
Fall 2008	40	6	4.6

Practicum Supervisors Evaluation - 2007

Term	# of Students	# of Faculty	Rating
Spring 2007	61	11	4.5
Summer 2007	31	7	4.7
Fall 2007	65	8	4.4

Practicum Supervisors Evaluation - 2006

Term	# of Students	# of Faculty	Rating
Spring 2006	50	12	4.6
Summer 2006	0	0	0
Fall 2006	62	10	4.7

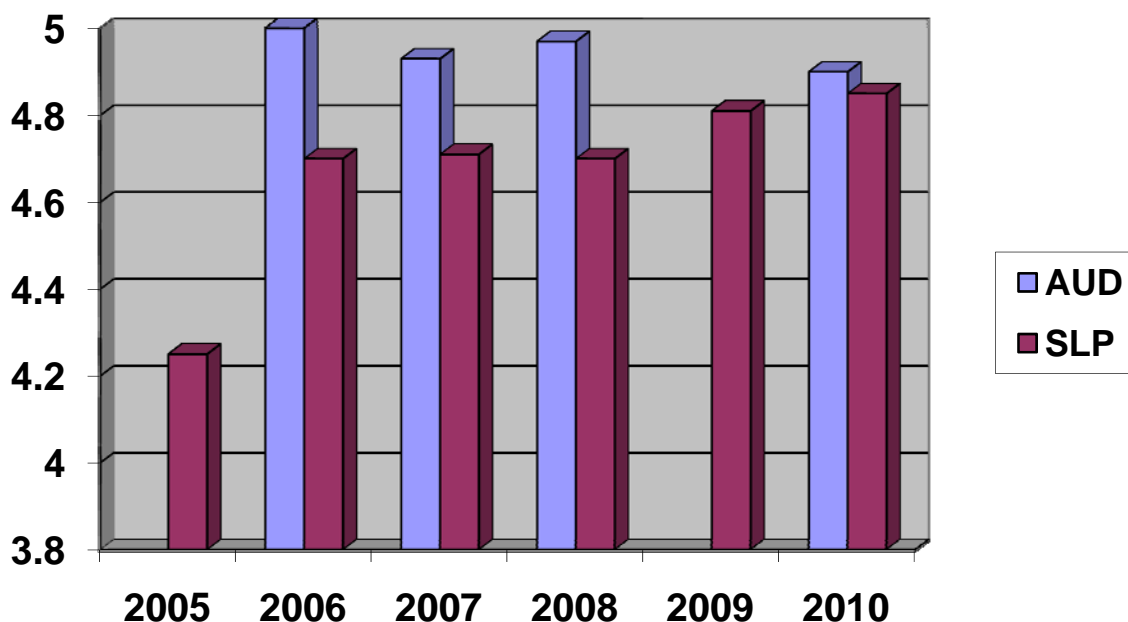
Practicum Supervisors Evaluation - 2005

Term	# of Students	# of Faculty	Rating
Spring 2005	51	12	4.7
Summer 2005	38	11	4.7
Fall 2005	46	12	4.7

Consumer Evaluation of Clinical Services

All students in clinical practicum provide supervised services to adults and children with communication disorders. Student clinicians and their clinical supervisors are evaluated by consumers who receive services or by their parents with regard to 19 clinical behaviors on a scale of 5 (excellent) to 1 (poor) or not applicable. The *Consumer Evaluation of Clinical Services form* is presented in **Appendix E**. This form has been used in the Speech and Hearing Clinic over the past several years to evaluate the quality of clinical services. Aggregate mean results for each year are shown in the chart below, comparing calendar year data from 2005 through 2010. A five-point Likert scale is used for rating consumer satisfaction. The numerical responses are defined as follows:

5 = Excellent, 4 = High Average, 3 = Average, 2 = Low average, 1 = Poor and NA = Not Applicable.



The aggregate data available in audiology for the years 2006, 2007 and 2008 reflected only a single semester from each year, while that for 2010 reflected an entire year. Audiology data for 2005 and 2009 was unavailable. The number of students and clinical supervisors providing clinical services in audiology also varied from semester to semester and from year to year, as did the number of clients providing ratings.

Of the 60 clients who returned audiology consumer surveys in 2010, no individual client provided an overall rating of clinical services lower than 4.5, and of the 158 clients who returned

speech-language pathology consumer surveys, no individual client provided an overall rating lower than 3.93. On average, consumers of both audiology and speech-language pathology clinical services over the past six years have consistently indicated that the services provided at the UALR Speech and Hearing Clinic are “high average” to “excellent.” These ratings show that clients are continually satisfied with our clinical services.

Graduate Capstone Examination Audiology & Speech Pathology

Each year from 2008-2010, Graduate students in the speech pathology program participated in a multiple choice comprehensive examination that they each were required to pass before exiting the program. Additionally, in 2008 and 2009, the students answered survey questions probing their assessment of the examination process. The following table reports the mean and standard deviation of the students’ scores for the three years and the number of students who passed and failed the examination.

Comprehensive Examination Data for 2008-2010

Year	Mean	SD	# of Students Passing (1st attempt)	# of Students Failing (1st attempt)
2008	73.77	6.22	19	3
2009	75.4	6.58	19	1
2010	71.21	7.31	19	0

The above data shows a decline in the number of students who failed the examination after the first attempt across the years. The students are allowed three chances to pass the comprehensive examination. Students who fail are given a different version of the test, and provided with remediation in their areas of weakness. It should be noted that, in every year, the students who failed on the first attempt eventually passed the examination.

Student Evaluation of Comprehensive Examination

The frequencies of responses were generated for each of the categories across for the corresponding years. The cells containing the greatest number of responses for each year were placed in bold.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. The comprehensive exam adequately sampled my knowledge of audiology/speech pathology.	2008: 6 2009: 2	2008: 6 2009: 13	2008: 1 2009: 0	2008: 1 2009: 0	2008: 0 2009: 0
2. I feel that the comprehensive exam, in its current format, will help me when I study for the Praxis exam.	2008: 4 2009: 1	2008: 7 2009: 5	2008: 1 2009: 6	2008: 0 2009: 3	2008: 2 2009: 0

3. Some of the questions were not clearly written.	2008: 4 2009: 3	2008: 5 2009: 5	2008: 1 2009: 3	2008: 2 2009: 3	2008: 2 2009: 0
4. The written guideline and procedures I received prior to the exam were clear and understandable.	2008: 7 2009: 7	2008: 5 2009: 6	2008: 2 2009: 1	2008: 0 2009: 0	2008: 0 2009: 0
5. The room chosen for comprehensive exams was conducive to taking the exam.	2008: 9 2009: 11	2008: 4 2009: 4	2008: 1 2009: 0	2008: 0 2009: 0	2008: 0 2009: 0
6. The administration of the exam was satisfactory.	2008: 11 2009: 11	2008: 3 2009: 4	2008: 0 2009: 0	2008: 0 2009: 0	2008: 0 2009: 0
7. My knowledge could be assessed more adequately using another format.	2008: 1 2009: 0	2008: 1 2009: 1	2008: 2 2009: 8	2008: 7 2009: 3	2008: 3 2009: 3

Overall the students agreed that the examination sampled their knowledge base, while the students were relatively neutral regarding how well the exam helped them study for the praxis examination. One of the more noteworthy findings was that the students felt that the examination questions were not clearly written. However, they felt strongly that they were given good guidelines prior to the examination, were given a comfortable room for testing, and that the administration of the examination was satisfactory. The students leaned toward the feeling that their knowledge could not have been more adequately assessed. In response to this feedback our faculty began a department-wide effort to analyze the questions more closely and proofread for errors. We have also created an examination that is much more consistent in form than previous examinations.

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is formally assessed in only one designated course. All the M.S. students are required to pass 100% of the specific learning outcomes. In the event that a student does not pass a KASA item within a specific course, the course instructor implements his/her remediation plan to assist the student acquire the pertinent knowledge and skills item(s).

Each faculty member formally assesses each of the learning objectives which have been assigned to be taught and measured in their courses. Initially, each faculty member entered the KASA data (outcomes for the various learning objectives) for each graduate student enrolled in their course at the end of each semester. At the beginning of 2010, there was a change in the data entry process. Currently, each faculty member is responsible for contacting the department chair (in writing) to confirm that the students in their courses did indeed pass the KASAs for that course. These data are then entered into a software program (established specifically for this purpose) by the department chair and the department clinic director. Thus far, this software program contains academic KASA data for each speech-language pathology student enrolled in the M.S. program between Spring 2005 and Fall 2010. One hundred percent of all the M.S. students enrolled in the program have completed 100% of their academic KASAs.

In addition to the academic KASAs, each student also completes specific clinical KASAs as outlined by ASHA. Completion of the clinical KASAs is closely monitored by the department clinic director. All the M.S. students are required to meet minimal competencies in accordance with ASHA specifications. As with the academic KASAs, there are specific remediation activities employed by certified speech-language pathologists to assist students pass their clinical KASA's should they evidence the need for this assistance. Student data from the clinical KASAs are also entered into the KASA software program by the clinical director. One hundred percent of all the M.S. students enrolled in the program have completed 100% of their clinical KASAs. Paper copies of each student's academic and clinical KASAs are added to their department folders immediately following their M.S. graduation from UAMS.

Assessment, remediation and tracking of the students' academic and clinical KASA's was a primary area reviewed and evaluated by the three site visitors from the ASHA in fall of 2009. The site visitors provided both positive feedback and insightful suggestions regarding the departments' KASA assessment program. Their specific suggestions were implemented beginning in the spring of 2010.

Town Hall Meeting

No Town Hall meeting was held during 2010.

Stakeholder Involvement

Five sets of stakeholders contributed information to the current assessment report: faculty, students, consumers of clinical services, employers and working graduates. All faculty members participate in the evaluation of students, both in the clinic and in the classroom. Additionally, all faculty are involved in collecting, analyzing, and summarizing relevant assessment data for this report.

Graduate students perform course evaluations, evaluations of practicum supervisors, and they also complete the graduate exit survey in the semester they finish all requirements.

The consumer/community group evaluates the department's provision of clinical services.

Employers and working graduates evaluated how well our educational program is preparing our students for the work setting.

Future Assessments

The faculty have now used all three versions of the new comprehensive examination using the multiple choice format twice. The validation process for the comprehensive examination is ongoing; the eighth round of using our tests is scheduled to be given this Spring term. The faculty spent a large amount of time analyzing the data from these examinations and revised or deleted several questions. As we continue to collect data we hope to establish a definite cut-off score criterion for pass and fail.

The KASA objectives in speech pathology have become an integral part of the department's assessment of students, as they are, in large part, how our graduates will be judged eligible for national certification and state licensure. The speech pathology program has over 300 KASAs that are used to rate each graduate student in academic and clinical areas. We plan on reviewing our KASAs this year with the goal of streamlining them. Our students continue to graduate and find employment. All assessment indicators point to the fact that we are doing a good job in preparing our students for the professions of speech pathology and audiology.

The department did not conduct any community focus group meetings this year but we continued to receive feedback on our students and programs from the community through various other assessment tools. Our faculty will continue to consider suggestions from the clients we serve and the community at large to continue to improve our program.

**Curriculum Assessment Map: Degree Program Assessment
Audiology and Speech Pathology M.S. Degree**

Emphasis: Extensive Somewhat Little None
Assessed: Exam Paper Project Other Not Assessed

		Goal # 1 - To produce clinician-scholars who engage in lifelong learning activities that build on knowledge obtained in our program, to develop specific and current competencies for evaluating and treating children and adults with speech, language, swallowing, and/or hearing disorders, and to provide research skills as a foundation for advanced studies and/or as an informed consumer of research.		
Courses and Activities	How Outcomes are Addressed and Assessed	Outcome # 1.- Students will demonstrate knowledge and skill related to the assessment and diagnosis of adults and children with speech, language, swallowing, and/or hearing disorders.	Outcome # 2- Students will demonstrate knowledge and skills in the (re)habilitation of adults and children with speech, language, swallowing, and/or hearing disorders	Outcome #3- Students will demonstrate knowledge of research methodology in general and within the field of communication disorders.
<i>AUSP 7092 Independent Research</i>	Emphasis: Assessed	Somewhat Project	Somewhat Project	Extensive Project
<i>AUSP 7093 Topics in Speech Language Pathology</i>	Emphasis: Assessed	Extensive Exam	Extensive Exam	None
<i>AUSP 791-7691 Practicum</i>	Emphasis: Assessed	Extensive Other	Extensive Other	None
<i>AUSP 7193 Independent Study</i>	Emphasis: Assessed	Somewhat Paper Exam	Extensive Paper Exam	None
<i>AUSP 7264 Organization and Administration of Clinical Programs</i>	Emphasis: Assessed	None Other	Little Other	None
<i>AUSP 7270 Fluency Disorders</i>	Emphasis: Assessed:	Extensive Exam	Extensive Exam	Little Exam
<i>AUSP 7273 Neurogenic Speech Disorders</i>	Emphasis: Assessed:	Extensive Exam	Extensive Exam	Little Exam
<i>AUSP 7275 Craniofacial Speech Disorders</i>	Emphasis: Assessed:	Extensive Exam Other	Extensive Exam Other	Little Other
<i>AUSP 7276 Voice Disorders</i>	Emphasis: Assessed:	Extensive Exam Project	Extensive Exam	Little Exam
<i>AUSP 7282 Learning Disabilities</i>	Emphasis: Assessed:	Extensive Exam	Extensive Exam	Little Exam

<i>AUSP 7294 Augmentative and Alternative Communication</i>	Emphasis: Assessed:	Extensive Exam	Extensive Exam	Little Exam
<i>AUSP 7360 Research Methods in Communicative Disorders</i>	Emphasis: Assessed:	Little Exam	Little Exam	Extensive Exam
<i>AUSP 7263 Sociolinguistics</i>	Emphasis: Assessed:	Extensive Exam	Extensive Exam	Little Exam
<i>AUSP 7364 Language Assessment and Therapy</i>	Emphasis: Assessed:	Extensive Exam Project	Extensive Exam Project	Little Exam
<i>AUSP 7365 Counseling in Communication Disorders</i>	Emphasis: Assessed:	Somewhat Exam Project	Somewhat Exam Project	None
<i>AUSP 7366 Advanced Anatomy and Physiology for Speech</i>	Emphasis: Assessed:	Somewhat Exam	None	None
<i>AUSP 7367 Infant-Toddler Communication: Development and Assessment</i>	Emphasis: Assessed:	Extensive Exam	Extensive Exam	Somewhat Project
<i>AUSP 7368 Dysphagia</i>	Emphasis: Assessed:	Extensive Exam	Extensive Exam	Somewhat Exam
<i>AUSP 7371 Neurogenic Language Disorders</i>	Emphasis: Assessed:	Extensive Exam	Extensive Exam	Somewhat Exam
<i>AUSP 7372 Advanced Articulation Disorders</i>	Emphasis: Assessed:	Extensive Exam	Extensive Exam	Somewhat Exam
<i>AUSP 7385 Audiologic Rehabilitation: Children</i>	Emphasis: Assessed:	Somewhat Exam	Somewhat Exam	Little Exam
<i>AUSP 7386 Aural Rehabilitation: Adults</i>	Emphasis: Assessed:	Somewhat Exam	Somewhat Exam	Little Exam
<i>AUSP 7392 Multicultural Issues</i>	Emphasis: Assessed:	Somewhat Exam	Little Exam Project	None
<i>AUSP 7396 Advanced Differential Diagnosis of Speech and Language Disorders</i>	Emphasis: Assessed:	Extensive Exam	None Exam	None
<i>AUSP 8100-8600 Thesis</i>	Emphasis: Assessed:	None	None	Extensive Project

APPENDIX A

GRADUATE EXIT SURVEY

Department of Audiology and Speech Pathology

The primary goal of the Department of Audiology and Speech Pathology is to prepare the graduate to function as a competent audiologist or speech-language pathologist. This survey is designed to help the department faculty determine its' strengths and areas needing improvement. All data will be kept confidential and will be used for program evaluation purposes only.

BACKGROUND INFORMATION:

Name: _____ Address: _____
Phone Number: _____ Email address: _____
Have you accepted a professional position? _____
If so, where? _____

Consider each item separately and rate each item independently of all others. Circle the rating that indicates the extent to which you agree with each statement. Please do not skip any rating. If you do not know about a particular area, please circle NA.

5 = Strongly Agree 4 = Generally Agree 3 = Neutral (acceptable) 2 = Generally Disagree 1 = Strongly Disagree NA = not applicable.

I. KNOWLEDGE BASE (Cognitive Domain)

The Program:

- | | | | | | | |
|--|---|---|---|---|---|----|
| A. Helped me acquire the knowledge necessary to function in my work setting | 5 | 4 | 3 | 2 | 1 | NA |
| B. Prepared me to identify and interpret pertinent data from patient charts/records. | 5 | 4 | 3 | 2 | 1 | NA |
| C. Prepared me to identify and interpret pertinent diagnostic and prognostic data | 5 | 4 | 3 | 2 | 1 | NA |
| D. Helped me to acquire the knowledge necessary to recommend and conduct appropriate therapeutic procedures. | 5 | 4 | 3 | 2 | 1 | NA |
| E. Trained me to use sound clinical judgment while functioning in this work setting. | 5 | 4 | 3 | 2 | 1 | NA |

II. CLINICAL PROFICIENCY (Psychomotor Domain)

The Program:

- | | | | | | | |
|--|---|---|---|---|---|----|
| A. Prepared me to perform the clinical skills appropriate for my level of training | 5 | 4 | 3 | 2 | 1 | NA |
|--|---|---|---|---|---|----|

- B. Prepared me to perform accurate patient assessments. 5 4 3 2 1 NA
- C. Prepared me to perform and interpret diagnostic procedures. 5 4 3 2 1 NA
- D. Prepared me to perform appropriate therapeutic procedures. 5 4 3 2 1 NA

III. BEHAVIORAL SKILLS (Affective Domain)

The Program:

- A. Prepared me to communicate effectively in a clinical setting. 5 4 3 2 1 NA
- B. Prepared me to conduct myself in an ethical and professional manner. 5 4 3 2 1 NA
- C. Taught me to manage my time efficiently while functioning in a clinical setting. 5 4 3 2 1 NA

IV. ADDITIONAL COMMENTS

OVERALL RATING:

Please rate the OVERALL quality of the program in Communication Disorders and Sciences (*please circle one*)

5 = excellent 4 = very good 3 = good 2 = fair 1 = poor

Were any of the practicum or traineeship sites to which you were assigned within a one hour drive of your residence when you were a student? Yes No

If yes, approximately what percentage of them was within that distance? _____%

Please identify two or three strengths of the program.

Please make two or three suggestions to further strengthen the program.

THANK YOU!

DATE: _____

Graduate Exit Survey/May, 2004

APPENDIX B

Graduate Course Evaluation
Section 1 Form

Instructor Last Name:
Instructor First Name:
Course #
Students
Course Name
Semester

College of Health Related Professions
Student Evaluation of Instruction

Instructor:
Course #:
Course Name:

Please mark your answers in the bubbles on the right using the scale shown.

This
Not this

NA = Not Applicable/No Opinion
5 = Strongly Agree
4 = Agree
3 = Neither Agree Nor Disagree
2 = Disagree
1 = Strongly Disagree

	1	2	3	4	5	
Speaks Audibly and Clearly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Fluent in English	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Organizes Presentations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Lectures Cover Objectives/Goals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Discusses Current Developments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Stimulates Thinking and Discussion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Keeps Scheduled Appointments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Treats Students with Respect	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Demonstrates Enthusiasm	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Tests Cover Course Objectives		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

After you have marked your answers, give this sheet to the Proctor face down. PLEASE DO NOT FOLD

APPENDIX C

Graduate Student Practicum Evaluation—Speech-Language Pathology
UALR/UAMS Department of Audiology and Speech Pathology
2801 South University, Little Rock, AR 72204
Ph: 501-569-3155 FAX: 501-569-3157

Student Name: _____ Semester: Fall 20 _____ Spring 20 _____ Summer 20 _____
 Practicum Site: _____ Supervisor: _____ ASHA #: _____

Competency Rating Code: Rate each competency from 1.0 to 3.0. Decimals may be used if necessary (e.g. 1.5, 2.7, etc.) Use the following descriptors to rate each competency:

- 1.0 = Competency/skill is emerging but needs further development; requires frequent supervisory instruction –**Emerging**
- 2.0 = Competency/skill is present but needs refinement; requires frequent supervisory instruction—**Meets Standard**
- 3.0 = Competency/skill is developed; requires infrequent supervisory monitoring—**Exceeds Standard**

(A) Articulation; (F) Fluency; (H) Hearing; (V) Voice/Resonance; (S) Swallowing; (P) Pragmatics; (CM) Communication Modalities; (L) Rec./Exp. Language; (C) Cognitive (please check the area(s) in which skills were obtained)

I. EVALUATION	MID TERM	FINAL	A	F	H	V	S	P	CM	L	C
A. Conducts screening and prevention activities.											
B. Collects case history information and integrates information from clients/patients, family, caregivers, teachers, relevant others, and other professionals.											
C. Selects and administers appropriate evaluation procedures, such as behavioral observations, non-standardized and standardized tests, and instrumental procedures.											
D. Adapts evaluation procedures to meet clients' needs.											
E. Interprets, integrates and synthesizes information to develop diagnoses and prognoses and make appropriate recommendations for intervention.											
F. Completes administrative and reporting functions necessary to support the evaluation.											
G. Refers clients/patients for appropriate services.											

I. INTERVENTION	MID TERM	FINAL	A	F	H	V	S	P	C M	L	C
A. Develops setting appropriate intervention plans with measurable and achievable goals that meet clients' needs.											
B. Collaborates with clients and relevant others in the planning process.											
C. Implements intervention plans.											
D. Involves clients and relevant others in the intervention process											
E. Selects or develops and uses appropriate materials and instrumentation for prevention and intervention											
F. Measures and evaluates clients' performance and progress.											
G. Modifies intervention plans, strategies, materials and instrumentation as appropriate to meet the needs of clients.											
H. Completes administrative and reporting functions necessary to support intervention.											
I. Identifies and refers clients for services appropriate.											
III. PROFESSIONAL, INTERACTIONAL & PERSONAL QUALITIES	MID TERM	FINAL	A	F	H	V	S	P	C M	L	C
A. Communicates effectively, recognizing the needs, values, preferred mode of communication, and cultural/linguistic background of the client/family/caregivers and relevant others.											
B. Collaborates with other professionals in case management, when appropriate.											
C. Provides counseling regarding communication and swallowing disorders to client, family, caregivers, and relevant others.											
D. Adheres to the ASHA Code of Ethics and behaves professionally.											
E. Possesses oral skills sufficient for entry in to professional practice.											
F. Possesses written skills sufficient for entry in to professional practice.											

The student treated the following populations at this site:

_____ Early Intervention (0-3) _____ Preschool (3-5) _____ School Age (5-16) _____ Adult (16+)

The student treated the following types of disorders while at this site:

MID-TERM COMMENTS:

FINAL COMMENTS:

MIDTERM EVALUATION:

Student's Signature: _____ **Date:** _____

Supervisor's Signature: _____ **Date:** _____

I have read this evaluation and have had the opportunity to discuss its contents with the clinical supervisor named above. (Comments may be written on a separate page, dated and attached.)

Clinical Hours Accrued to Date: This Site _____ All Sites _____ Supervisor's phone # _____

FINAL EVALUATION:

Student's Signature: _____ **Date:** _____ **Supervisor's Signature:** _____

Date: _____

I have read this evaluation and have had the opportunity to discuss its contents with the clinical supervisor named above. (Comments may be written on a separate page, dated and attached.)

Clinical Hours Accrued to Date: This Site _____ All Sites _____ Supervisor's phone # _____

Revised 8/2004

APPENDIX D

Form 75

Evaluation of Practicum Supervisors

(Developed from ASHA's Position Paper: Clinical Supervision in Speech-Language Pathology and Audiology)

Name of Supervisor: _____ **Practicum Site:** _____

Semester/Year: _____ / _____ **Date of Evaluation:** _____

A 5-point scale is to be used to rate the items listed below:

5 = Outstanding; 4 = Excellent; 3 = Good; 2 = Fair; 1 = Poor; NA = Non-applicable

The supervisor:

1. establishes and maintains an effective working relationship with the supervisee. _____
2. assists the supervisee in developing clinical goals and objectives. _____
3. assists the supervisee in developing and refining assessment skills. _____
4. demonstrates for and participates with the supervisee in the clinical process. _____
5. assists the supervisee in analyzing assessment and treatment sessions. _____
6. guides the supervisee in maintaining clinical records. _____
7. interacts with the supervisee in supervisory conferences. _____
8. assists the supervisee in evaluating his/her clinical performance. _____
9. assists the supervisee in developing skills of report writing and editing. _____
10. models professional conduct. _____

Additional Comments:

Jan. 2001

APPENDIX E

**UALR/UAMS Speech-Language and Hearing Clinic
2801 South University, Little Rock, AR 72204
501-569-3155 Phone 501-569-3157 Fax**

Form 31

EVALUATION OF CLINICAL SERVICES

CLIENT'S NAME: _____ **DOB:** _____
CLINICIAN: _____ **SUPERVISOR:** _____
DATE: _____

5 – Excellent 4 - High Average 3 – Average 2 – Low Average 1 – Poor 0 - Does Not Apply

1. Prompt and accurate attention to request for information or appointment scheduling following you first contact with the facility	5	4	3	2	1	0
2. Efficient and prompt forwarding of reports	5	4	3	2	1	0
3. Courteous treatment by all clinic personnel	5	4	3	2	1	0
4. Special problems noted and assistance provided	5	4	3	2	1	0
5. Considerate answers to all questions	5	4	3	2	1	0
6. Appointments begun at scheduled time	5	4	3	2	1	0
7. Instruction in how to manage the communication problem outside this clinic	5	4	3	2	1	0
8. Clear communication of the results of the evaluation and/or therapy	5	4	3	2	1	0
9. Referral to appropriate service facilities if necessary	5	4	3	2	1	0
10. Clear statement of recommendation	5	4	3	2	1	0
11. Clear statement of how recommendations are to be implemented	5	4	3	2	1	0
12. Opportunity to ask questions after an evaluation or therapy	5	4	3	2	1	0

13. Performance of services at the Speech & Hearing Clinic	5	4	3	2	1	0
14. Student clinician conducts himself/herself in a professional manner	5	4	3	2	1	0
15. Level of confidence instilled in you by your student clinician	5	4	3	2	1	0
16. Professional appearance of student clinician	5	4	3	2	1	0
17. Conferences held away from the presence of nonprofessional personnel	5	4	3	2	1	0
18. Overall acceptability of services received at the Speech and Hearing Clinic	5	4	3	2	1	0

COMMENTS
