Assessment of Student Acquisition of Knowledge and Skills (KASA) Outcomes

Introduction

As mandated by Standard V of the 2005 Standards for Certification, professional programs in communication disorders must design and implement plans for formative (V-A) and summative (V-B) assessment of student acquisition of the knowledge and skills outcomes in Standards III (knowledge outcomes) and IV (skills outcomes). The goal of formative assessment is to collect critical information for monitoring a student’s acquisition of knowledge and skills. Formative assessment should be an ongoing process. The goal of summative assessment is to determine the cumulative body of knowledge and skills a student has acquired over the course of their professional preparation. Although the CFCC standards mandate formative and summative assessment for graduate programs in communication disorders, the following sections will describe a system of student assessment at both the undergraduate and graduate levels.

Formative Assessment

The following formative assessment plan is applicable to both knowledge (typically obtained through classroom work) and skills (typically obtained through clinical experiences) acquisition, as detailed in the Knowledge and Skills Acquisition (KASA) form.

Academic Preparation

Traditional methods of assessment will be utilized for determining student acquisition of knowledge outcomes. Over the course of their professional preparation, students are expected to learn an enormous amount of information through their didactic coursework. Ultimately, it is the responsibility of each instructor to ensure that students are learning the information in their classes. Traditional methods of assessment have included, but are not limited to, in-class assignments, homework assignments, examinations and quizzes, projects, term papers, reports, and oral presentations. Faculty members should still have the academic freedom to decide what methods of assessment are the most appropriate for their classes, and as such, formative assessment will utilize these traditional methods of assessment. Faculty members will be free to decide what methods are most appropriate for the classes they teach.

Traditionally, faculty members have only needed to be concerned with documenting student progress through the use of grades. Grades alone may not be an effective indicator of how much information the student has truly learned. For example, a student earning a final grade of “B” in a course may have met most but not all of the course objectives. If the instructor only records grades, he or she may not be able to differentiate which objectives were and were not met by the student. Standard V of the CFCC Standards calls for greater accountability on the part of the instructor in terms of documenting student progress. Grades alone are not sufficient. Course instructors must be able to provide evidence that each student in their classes has met the course objectives.
The formative assessment process mandated by the CFCC should allow for documentation of the acquisition of the knowledge and skills outcomes in Standards III and IV. To facilitate this, faculty members must know which knowledge and/or skills outcomes are applicable to the content of the courses they teach. The department has developed a KASA Outcomes Course Matrix that illustrates which undergraduate and graduate courses in the program provide at least some information that addresses each of the knowledge and skills outcomes. One can easily determine which knowledge and skills outcomes are addressed in each undergraduate and graduate course offered by the program. To readily facilitate the documentation of formative assessment, the knowledge and skills outcomes listed for each course in the KASA Outcomes Course Matrix should replace the traditional learning objectives for those courses. In essence, the knowledge and skills outcomes should become the learning objectives for each course. With the knowledge and skills outcomes serving as the learning objectives for each course, the instructor can easily document whether or not a student has acquired certain knowledge and skills outcomes. All undergraduate and graduate course syllabi should document which knowledge and skills outcomes are addressed in that course.

A KASA Outcomes Tracking Form will be utilized to document student acquisition of knowledge and skills. Each of the 190 knowledge and skills outcomes is listed on the KASA Outcomes Tracking Form along with the undergraduate and graduate courses that contain content and/or experiences that address the outcomes. The form allows faculty members to document the degree to which a particular outcome was acquired in their courses by indicating whether the outcome was met, in progress, or not met. As each student enters the communication disorders program (whether as an undergraduate, graduate, or post-baccalaureate student), he or she will be given a copy of this document and will be asked to keep track of it throughout their entire academic career. As the student progresses from academic term to academic term, he or she will submit the form to each course instructor so that the appropriate information can be entered onto the form. Upon termination of each academic term, the knowledge and skills outcomes that were addressed that term will be transferred onto an electronic database.

It should be reemphasized that faculty members are free to choose whatever methods of assessment they deem appropriate for determining whether or not a student has acquired the knowledge and/or skills outcomes for their courses. However, the faculty member should choose and design assessment instruments that will directly evaluate the students’ acquisition of knowledge and skills. This may require greater forethought and more precise record-keeping. The knowledge and/or skills outcomes addressed by a particular course, the assessment method(s) to be used to determine progress toward the outcomes, and a statement concerning student assistance must be included in each and every undergraduate and graduate syllabus.

A Student Assistance Plan has been developed to provide students with remedial opportunities for meeting the KASA knowledge and skills outcomes should they experience difficulty in meeting any number of the outcomes throughout their studies. This plan is also included in the department’s Comprehensive Assessment Plan.

Clinical Preparation

Documentation of clinical preparation will follow the same basic procedure as for academic preparation. The KASA Outcomes Tracking Form provides space for clinical personnel to document the student’s progress towards acquiring skills outcomes. Although certain skills may be acquired during didactic coursework, it is anticipated that most skills outcomes will be acquired during clinical practicum experiences.
CFCC Standard IV-G presents three skill development areas for the nine avenues of clinical practice. The three skill development areas are: evaluation, intervention, and interaction/interpersonal skills. The development area of evaluation is further defined by seven specific skills: (1) conducting screening and prevention procedures; (2) collecting and integrating case history information; (3) selecting and implementing evaluation procedures; (4) adapting interviewing and testing procedures; (5) interpreting results and making recommendations; (6) completing administrative and reporting functions; and (7) making appropriate recommendations and referrals. The skill development area of intervention is also further defined by seven specific skills: (1) developing treatment plans; (2) implementing intervention plans; (3) effectively utilizing materials and instrumentation; (4) measuring and evaluating performance and progress; (5) modifying intervention plans to meet the needs of clients; (6) completing administrative and reporting functions; and (7) identifying associated conditions and making referrals. Finally, the skill development area of interaction/interpersonal is defined by three specific skills: (1) communicating effectively with the client, client's family, etc.; (2) collaborating with other professionals; and (3) counseling and collaborating with the client, client's family, etc.

The nine avenues of clinical practice are: (1) articulation disorders; (2) fluency disorders; (3) voice and resonance disorders; (4) receptive and expressive language disorders; (5) hearing disorders; (6) swallowing disorders; (7) cognitive-communicative disorders; (8) social-communicative disorders; and (9) communication modalities. According to the CFCC standards, candidates for certification should acquire the specific skills in evaluation, intervention, and interaction/interpersonal for the nine avenues of clinical practice. This is problematic for professional preparation programs, as the typical two-year graduate program is not equipped to provide such a wide and varied clinical experience in such a short amount of time. It is anticipated that the average student in Eastern Washington University's graduate program will at the very least acquire all skills in evaluation, intervention, and interaction/interpersonal for several of the nine avenues of clinical practice. The idea then, is that the student will be able to generalize these skills to avenues of clinical practice to which they were either not or minimally exposed.

Typically, students in clinical practicum are assigned to several different clients, representing a range of ages, cultural/ethnic backgrounds, and/or types of disorder. The clinical supervisor will document the student's progress by completing the appropriate form(s) and then summarizing the student's progress at the end of the academic term by completing the summary form. The Clinical Director will then collect all forms from all supervisors and make a determination as to which skills outcomes were "met," were "in progress," or were "not met." Progress will then be documented on the KASA Outcomes Tracking Form. This process will continue each academic term the student is assigned to clinical practicum. The appropriate skills outcomes will be judged as having been "met" if the student accumulates a minimum of approximately 15 cumulative clock hours in a particular avenue of clinical practice and his or her clinical work is in good standing (defined as a minimum final grade of 3.3 in practicum). The number of cumulative clock hours needed for KASA outcomes to be marked as "met" may be slightly less than 15 depending on the specific avenue of clinical practice. A judgment of "in progress" will be made if the student earns at least one, but less than the minimum cumulative clock hours for a judgment of "met" in a particular avenue of clinical practice and his or her clinical work is in good standing. A judgment of "not met" will be made if either the student has not earned at least one (1) clock hour in a particular avenue of clinical practice or if clock hours were earned when his or her clinical work was not in good standing. For clinical work that is not in good standing, the program has a Student Assistance Plan that will allow the student to remediate areas of concern. The assistance plan is also a part of the department's comprehensive assessment plan.
It is anticipated that for the typical student, the acquisition of most knowledge outcomes is going to take place within the didactic course (i.e., academic) environment. Similarly, it is expected that a typical student's acquisition of most skills outcomes is going to occur during clinical practicum experiences. However, the program recognizes that there may be instances where a student acquires a particular knowledge or skill outside the usual domain. In these instances, documentation of the acquisition of a specific knowledge or skill outcome will be accomplished through use of the Documentation of Special Acquisition of Knowledge of Skill form. This form allows a course instructor or clinical supervisor to document the specific knowledge or skill that was acquired along with a description of the activity that allowed the student to acquire the knowledge or skill. The student will attach any such forms to their KASA Outcomes Tracking Form. The specific knowledge or skill outcome will then be transferred to the electronic database.

**Student Assistance Plan**

An integral component of an effective assessment process is the provision of remediation when certain knowledge or skills outcomes are not acquired as expected. A student assistance plan has been developed for students who struggle in their academic coursework and/or clinical experiences. This plan is a separate document that is included in the department’s comprehensive assessment plan. The student is strongly urged to read this document and become familiar with the processes that exist for remediation when difficulty is being experienced in class work and/or clinic.

**Summative Assessment**

Summative assessment is used for the purpose of determining students' overall level of knowledge and skill upon completion of their academic and clinical preparation. CFCC Standard V-B mandates that candidates for certification must pass the national examination in speech-language pathology, which is used as a summative assessment measure. However, this program will utilize additional summative assessment measures at both the undergraduate and graduate levels.

**Undergraduate Level**

At the undergraduate level, summative assessment will take two forms: (1) a General Examination in Communication Disorders, and (2) COMD 490: Senior Capstone: Professional Issues in Communication Disorders. The General Examination in Communication Disorders is designed in part to be used as a means of student assessment to determine program effectiveness. However, it will also be used as a summative assessment measure to determine how well the students learned the information presented to them over the course of two years (their junior and senior years). The post-test version of the examination will be taken by seniors who are expecting to graduate. This version of the examination will serve not only as a post-test measure to indirectly determine program effectiveness, but will also be used to gauge student knowledge upon completion of the undergraduate curriculum. At this time, no minimum score has been set as a criterion for graduation. The test is in the development stage and will not be used to determine readiness for graduation until it has been field tested.

COMD 490: Senior Capstone: Professional Issues in Communication Disorders is intended to challenge seniors by assessing their ability to integrate information and use that information in novel situations. A special project is required as part of the course and is used as the assessment vehicle. Students must successfully complete the special project in order to pass the course. Successful completion of the project and course will be an indicator that undergraduate students who are preparing for graduation are indeed ready to meet the challenges of graduate study.
Graduate Level

At the graduate level, three formative assessment measures will be utilized: (1) the Praxis Examination in Speech-Language Pathology, (2) a research project or thesis, and (3) the Comprehensive Examination. Students nearing completion of their graduate studies will be asked to take the Praxis Examination. Although the results of the examination will be used primarily for the purpose of gauging program effectiveness, they will also be used to determine a student's extent of knowledge and his or her ability to apply existing knowledge to areas in which specific instruction was not provided.

Every student who graduates from this program with a master's degree must successfully complete either a research project or formal thesis. Early in their graduate studies, students enroll in COMD 520: Research Methods. In this course, students develop knowledge and skill in abstracting research, conducting a literature review, and developing sound methodology. By the completion of the course, it is expected that the student will have a synopsis for his or her chosen line of research. From that point, the student identifies faculty members who have an interest in that particular area of research. The faculty members are recruited to serve as the student's research advisory committee. Over the remainder of their graduate studies, students conduct the research, analyze the results, and offer interpretations of the findings. The culmination is a poster for a research project or a formal thesis. Each year the department will present a Student Research Day where all students will defend their research project or thesis. For a thesis, the defense will be a formal presentation to an audience that will include their research committee and possibly other students and interested persons. For a research project, the student will display his or her poster and will stand by it to answer any questions posed by his or her research committee and other interested parties. Successful completion and defense of the research project or thesis is an indicator that the student understands the research process and its importance to sound clinical practice.

Finally, in order to graduate all candidates for the master's degree must successfully complete an oral Comprehensive Examination. The Comprehensive Examination is scheduled during the last semester in anticipation of graduation and typically takes one hour to complete. The hour is devoted to the discussion of a wide range of topics that are directly and indirectly related to the discipline. The purpose of this question-and-answer period is to determine if the student can integrate the information he or she has learned and apply that knowledge to novel situations. Successful completion of the Comprehensive Examination is an indicator that the student is indeed ready to enter the work force as a competent clinician.