

## B.S. – Speech and Hearing Sciences

<p style="text-align: center;"><b>Learning Outcome</b></p> <p style="text-align: center;"><i>What should a graduate in this major know, value, or be able to do at Graduation and beyond?</i></p>	<p style="text-align: center;"><b>Data Collection and Analysis</b></p> <p style="text-align: center;"><i>What assessment tools and/or Methods will you use to determine Achievement of the learning outcome? Describe how the data from these tools And/or methods will be collected. Explain the procedure to analyze The data.</i></p>	<p style="text-align: center;"><b>Results of Evaluation</b></p> <p style="text-align: center;"><i>What were the findings of the Analysis Team? List any specific Recommendations.</i></p>	<p style="text-align: center;"><b>Use of Evaluation Results</b></p> <p style="text-align: center;"><i>What changes in curriculum, courses, Or procedures were made as a result Of the program learning outcome Assessment process?</i></p>
<p><b>#1</b> Describe the role of the following basic processes of communication; respiration, phonation, articulation, resonance, and cerebration, and how abnormal functioning of each process may result in disorder.</p>	<p><b>#1</b> Criterion referenced performance competencies on voice and articulation assessment scored by faculty assessment team members. See Appendix B.</p> <p>Scores on written exams , research papers, and presentations per competency requirements in SHS 306; Anatomy and Physiology, SHS 332; Disorders of Articulation, SHS 416; Neuroanatomy, and SHS 422; Voice Disorders.</p> <p>Attainment of course objectives are assessed by the department based on a standard grading rubric. Exams are standard to the department, not individual instructors. See Appendix A.</p>	<p><b>#1</b> Voice competencies were passed at a rate of 95% as scored by faculty assessment team members. Articulation competencies were passed at a rate of 90% as scored by faculty assessment team members.</p> <p>The following number of students passed departmental competencies.            SHS 306 = 87%            SHS 332 = 90%            SHS 416 = 100%            SHS 422 = 95%</p>	<p><b>#1</b> Student performance on departmental objectives reflected a need to make the following changes:</p> <p>Addition of Neuroanatomy coursework at the undergraduate level as a prerequisite for coursework related to neurological disorders at the graduate level.</p> <p>Introduction to dysphagia evaluation in Voice Disorders class.</p> <p>Use of interactive lessons on DVD for vocal pathology and disordered acoustic characteristics of voice.</p>

<p><b>#2</b> Describe the typical development of speech and language skills and relate the development of these skills to linguistic, cultural, cognitive, and psychological influences.</p>	<p><b>#2</b> Criterion referenced performance competency on language assessment scored by faculty assessment team members. See Appendix B.</p> <p>Portfolios completed for SHS 420; Neurogenic Communicative Disorders are evaluated by the faculty assessment team members. See Appendix C.</p> <p>Scores on written exams, research papers, and presentations per competency requirements in SHS 302; Phonetics, SHS 304; Development of Speech and Language, SHS 334; Language Disorders, and SHS 420; Neurogenic Communicative Disorders. Attainment of course objectives are assessed by the department based on a standard grading rubric. Exams are standard to the department, not individual instructors. See Appendix A.</p>	<p><b>#2</b> Performance on language competencies were passed at a rate of 92% scored by faculty assessment team members.</p> <p>Neurogenic Communicative Disorders Portfolios were completed with 89% accuracy evaluated by faculty assessment team members.</p> <p>The following number of students passed departmental competencies. SHS 302 = 98% SHS 304 = 84% SHS 334 = 83% SHS 420 = 91%</p>	<p><b>#2</b> Student performance on departmental objectives reflected a need to make the following changes:</p> <p>Utilization of acoustic technology to help students differentiate geographical/ethnic dialectical variations.</p> <p>Initiation of case studies for Language Disorders related to brain dysfunction for assessment and therapeutic intervention planning.</p> <p>Use of videoteleconference technology for instruction of Language Development and Language Disorders.</p>
<p><b>#3</b> Select, describe, and integrate the findings from a variety of standardized and nonstandardized assessment instruments for children and adults.</p>	<p><b>#3</b> Criterion based competency on communication Assessment scored by faculty team members. See Appendix B.</p> <p>Portfolios completed for SHS 336 Appraisal and Diagnosis of Communication Disorders are evaluated by faculty team members. See Appendix C.</p> <p>Scores on written exams, research papers and presentations per competency requirements in</p>	<p><b>#3</b> Communication assessment Performance Competency completed with 90% accuracy as scored by faculty assessment team members.</p> <p>Portfolios for Appraisal/Diagnosis passed with 98% accuracy as scored by faculty assessment team members.</p> <p>The following number of students passed departmental competencies.</p>	<p><b>#3</b> Student performance on departmental objectives reflected a need to make the following changes:</p> <p>Establish clinical practicum portfolio including summary of observation hours, clinical evaluations, and clock hour sheets signed by ASHA certified supervisor.</p>

	<p>SHS 410; Clinical Orientation; SHS 336; Appraisal and Diagnosis of Communication Disorders.</p> <p>Attainment of course objectives are assessed by the department based on a standard grading rubric. Exams are standard to the department, not individual instructors. See Appendix A.</p>	<p>SHS 410 = 88%</p> <p>SHS 336 = 85%</p>	<p>Students meet weekly with the clinic director to discuss clinical competencies, knowledge, and skills.</p> <p>Addition of counseling parents of children with communication disorders in SHS 336 content.</p>
<p><b>#4</b> Perform routine audiological assessment procedures including hearing screening and air/bone conduction threshold testing.</p>	<p><b>#4</b> Criterion referenced competency on Hearing Screening and Air/Bone Conduction testing scored by faculty team members. See Appendix C.</p> <p>Scores on written exams, research papers and presentations per competency requirements in SHS 414; Audiology and SHS 455, Diagnostic Audiology.</p> <p>Attainment of course objectives are assessed by the department based on a standard grading rubric. Exams are standard to the department, not individual instructors. See Appendix A.</p>	<p><b>#4</b> Hearing Screening Competencies were completed with 87% accuracy as scored by faculty assessment team members.</p> <p>The following number of students passed departmental competencies.</p> <p>SHS 414 = 88%</p> <p>SHS 455 = 93%</p>	<p><b>#4</b> Student performance on departmental competencies reflected the need to increase the use of new interactive technology in the classroom to present information regarding the physics of sound.</p>
<p><b>#5</b> Formulate behavioral objectives and plan appropriate procedures to achieve those objectives for intervention with clients who have communication disorders.</p>	<p><b>#5</b> Criterion Referenced competency on writing and executing behavioral objectives in clinical practicum therapy sessions. See Appendix B.</p> <p>Completion of portfolio on long and short term lesson plans evaluated by faculty assessment team members. See Appendix C.</p> <p>Clinical documentation of intervention</p>	<p><b>#5</b> Behavioral Objective competencies were completed with 95% accuracy as scored by faculty assessment team members.</p> <p>Lesson Plan Portfolios were completed with 93% accuracy as scored by faculty assessment team members.</p>	<p><b>#5</b> Student performance on departmental competencies reflected the need to use templates to guide student clinicians in choosing appropriate intervention goals for individual client needs available through new computer software in the</p>

	<p>practicum.</p> <p>Scores on written exams, research papers and presentations per departmental competencies in SHS 412; Methods in Communication Disorders.</p> <p>Attainment of course objectives are assessed by the department based on a standard grading rubric. Exams are standard to the department, not individual instructors. See Appendix A.</p>	<p>Clinical Clock Hour repository for therapy practicum experience was completed per student with 100% accuracy.</p> <p>The following number of students passed departmental competencies. SHS 412 = 80%</p>	<p>student lab.</p>
--	---	--	---------------------

Student records are maintained that indicate:

1. The use of formative and summative assessments during the student's course of study.
2. Progress toward completion of the Bachelor of Science Degree in Speech and Hearing Sciences.

An advising file for each student is maintained in the office of the advisor. Once admitted into the program, each student meets individually with the advisor to review transcripts and course syllabi to document progress in the acquisition of knowledge and skills necessary to meet requirements for the Bachelor of Science Degree in Speech and Hearing Sciences. During each semester, students again meet with their advisor. An advising form is used to document courses to be taken by the student to meet graduation requirements. Students must also complete and submit a program of study to the dean. All documents are maintained in the advising file and are accessible to each student.

The students also maintain a clinical practicum portfolio. At the end of each semester, the Clinic Director and the students review the files, update them, and discuss clinical progress. Throughout the semester, these portfolios are kept in locked cabinets, but are available for the faculty and students to access when needed.

The clinical portfolio contains a summary of observation hours obtained, clinical evaluations of student performance completed by supervisors, clinical grades, clinical clock hour sheets signed by ASHA certified supervisors, a computer generated cumulative total of those hours, and a signed confidentiality form.

Responsibility for maintaining the advising file is shared by the student and advisor. At the end of each semester, instructors submit to the advisor verification of the completion of student learning outcomes for each course completed by the student. The academic advisor updates the student's profile that is maintained in the student's advising file. Students who fail to achieve the minimum competency level established for learning outcomes must meet with the advisor prior to the beginning of the next semester. A remediation plan is then developed.

The clinical file is maintained by the student throughout each semester. At the end of the semester, students update their files and bring both of them to their individual conferences with the clinical director. During this final checkout process, the clinic director carefully reviews the accuracy and currency of each file and discusses with them their progress. Typically, the student makes progress in a semester. However, if the student is not showing adequate progress, a remediation plan is developed.

#### Formative Assessment:

1. Faculty use formative assessment within courses including exams, class assignments, and analysis of case studies. Faculty have set minimum competency levels for key student learning outcomes, and will continue to review them.
2. Clinical Clock Hour forms are used to track the development of clinical competencies. The Clinical Director and students meet at the beginning, middle, and end of the semester to identify competencies and track attainment levels.
3. Clinical supervisors provide weekly written feedback and meet with students to give specific feedback about their progress toward acquisition of knowledge and skills when students are providing clinical services in the clinic. At the beginning, middle, and end of the semester, the supervisors discuss the student's clinical competencies levels. At the end of the semester, the supervisor and student will discuss the growth process that has occurred during the semester and decide on the level of competency of each student learning

outcome addressed. Students also meet weekly with the Clinic Director to discuss a myriad of clinical issues, including clinical competencies, knowledge, and skills.

4. Clinical supervisors who provide supervision off-campus meet with the students frequently. Students are given written feedback regarding their clinical performance. The student in turn, shares this information with the university clinical director. Students also complete off-campus practicum reports that describe specific experiences that they have had and address specifically what knowledge and skills were gained at their sites. Students also attend meetings held by the Clinical Director to discuss student's progress. The Clinical Director makes visits, to monitor the quality and breadth of the student's experience and to provide a critical link between the department and the off-campus facility.

5. Faculty meet monthly to review student's progress.

6. Faculty provide group sessions for students in areas such as phonology, aural rehabilitation, fluency, etc., to assist students in the development of knowledge and skills in various areas, as the need arises.

7. The academic advisor meets with students to review and discuss progress in completing academic requirements using the study plan for B.S. in Speech and Hearing Sciences.

8. The Clinic Director meets with the students at the end of each semester that they are enrolled in clinical practicum to ensure that progress is being made regarding their acquisition of knowledge and skills.

## Appendix A

### Departmental Competency Objectives Set for Individual Coursework

Student's level of achievement in each area is scored using the following rating scale:

5 = Competent

4 = Emerging/with guidance

3 = Needs improvement/showing effort

2 = Needs improvement/not showing effort

1 = Unacceptable/unable to complete

0 = Not applicable/ no exposure

To obtain the total score, add up the total of the numbers circled in the section. Divide by the maximum number possible to obtain a competency percent.

The grading scale is as follows:

100-92%	A
91-90 %	A-
89-87%	B+
86-83%	B
82-80%	B-
79-77%	C+
76-73%	C
72-70%	C-

## SHS 306, Anatomy and Physiology

Student identifies and describes:

1. relevant muscles, bones, and cartilage involved in oral communication.	5	4	3	2	1	0
2. the function of those structures involved in oral communication	5	4	3	2	1	0
3. concepts such as Boyle's Law and the Myoelastic – Aerodynamic Theory, and their roles in speech production.	5	4	3	2	1	0
4. the processes of normal respiration, phonation, articulation, resonance, and audition.	5	4	3	2	1	0
5. the common deviations in speech and hearing mechanisms which cause oral communicative problems.	5	4	3	2	1	0
6. common instruments and methods used in assessing speech and hearing processes.	5	4	3	2	1	0

## SHS 332, Disorders of Articulation

Student identifies and describes:

1. characteristics symptomatic of articulation disorders.	5	4	3	2	1	0
2. causes of articulation disorders.	5	4	3	2	1	0
3. selection, administration, and interpretation of articulation assessment measures.	5	4	3	2	1	0
4. procedures used in differential diagnosis and prognosis of articulation disorders.	5	4	3	2	1	0
5. principles and procedures used in individual program planning for articulation disorders.	5	4	3	2	1	0
6. procedures used in therapeutic intervention for articulation disorders.	5	4	3	2	1	0

## SHS 416, Neuroanatomy

Student identifies and describes:

1. neuroscience and its relationship to speech-language-hearing pathology.	5	4	3	2	1	0
2. components of a neurological examination.	5	4	3	2	1	0
3. types of neurological diseases.	5	4	3	2	1	0
4. neuroanatomical terminology.	5	4	3	2	1	0
5. structures within the central and peripheral nervous systems, and describe their functions.	5	4	3	2	1	0
6. communicative functions with Brodmann's anatomical labels.	5	4	3	2	1	0
7. neurological rules for localizing lesions in the nervous system.	5	4	3	2	1	0
8. pathways for sensation, proprioception, and motor function.	5	4	3	2	1	0
9. mechanism of blood circulation to the brain.	5	4	3	2	1	0
10. clinical neurological diagnostic technology.	5	4	3	2	1	0
11. parts of nerve and glial cells; discuss functions.	5	4	3	2	1	0
12. common neurotransmitters, along with their functions.	5	4	3	2	1	0

## SHS 422, Voice Disorders

Student identifies and describes:

1. Anatomy and physiology of the larynx and an understanding of the anatomy and physiology of voice production.	5	4	3	2	1	0
2. Etiologies, prevention, assessment, and treatment of organic, neurological, and nonorganic voice disorders.	5	4	3	2	1	0
3. Selection and use of equipment and techniques in assessment of voice disorders.	5	4	3	2	1	0
4. Etiology, assessment, and treatment of voice disorders.	5	4	3	2	1	0

## SHS 302, Phonetics

Student identifies and describes:

1. phonetics with its five major branches.	5	4	3	2	1	0
2. terminology related to phonetics.	5	4	3	2	1	0
3. symbols utilized in the International Phonetic Alphabet.	5	4	3	2	1	0
4. phonemes represented by the IPA symbols.	5	4	3	2	1	0
5. major dialects of American English.	5	4	3	2	1	0
6. different registers and idiolects.	5	4	3	2	1	0
7. phonemes based on distinctive features.	5	4	3	2	1	0
8. Transcription of phonemes within word, sentence, and conversational contexts.	5	4	3	2	1	0
9. stress, intonation, and rhythm patterns in contextual language.	5	4	3	2	1	0
10. relationship between phonetics and phonology as it relates to speech and reading.	5	4	3	2	1	0
11. error transcription for articulation disorder.	5	4	3	2	1	0
12. development of the phonological rule system.	5	4	3	2	1	0

## SHS 304, Development of Speech and Language

Student identifies and describes:

1. current theories of language development.	5	4	3	2	1	0
2. linguistic developmental milestones according to ages and MLU).	5	4	3	2	1	0
3. current issues concerning the acquisition and use of language by individuals from linguistically diverse backgrounds (knowledge, beginning level).	5	4	3	2	1	0
4. relationship between linguistic development and other areas of development in young children.	5	4	3	2	1	0
5. linguistic milestones achieved by normally developing children.	5	4	3	2	1	0
6. relationship between play/interaction and linguistic development.	5	4	3	2	1	0

## SHS 334, Language Disorders

Student identifies and describes:

1. the normal language development process.	5	4	3	2	1	0
2. etiological factors related to language impairments.	5	4	3	2	1	0
3. models for identification of language impairment classifications.	5	4	3	2	1	0
4. evaluation techniques for diagnosis of language impairment.	5	4	3	2	1	0
5. intervention strategies in planning remediation.	5	4	3	2	1	0

## SHS 420, Neurogenic Communicative Disorders

Student identifies and describes:

1. neuroanatomy and physiology, including the peripheral and central nervous systems, blood supply to the brain, and localization of function.	5	4	3	2	1	0
2. neurologic causes of communication disorders.	5	4	3	2	1	0
3. Interview, Physiologic, and Neurologic examination of patients with dysfunction.	5	4	3	2	1	0
4. Documentation of results from examination.	5	4	3	2	1	0
5. Survey of assessment instruments for neurogenic communication disorder.	5	4	3	2	1	0
6. behavioral, cognitive, and emotional consequences of brain dysfunction.	5	4	3	2	1	0
7. Determination of candidacy for treatment.	5	4	3	2	1	0
8. Protocol for treatment sessions.	5	4	3	2	1	0
9. Recording and charting patients' performance.	5	4	3	2	1	0
10. Adjusting treatment tasks for patients, including instruction and feedback, based on neurogenic deficit.	5	4	3	2	1	0

### SHS 410, Clinical Orientation

Student identifies and describes:

1. an overview of clinical practicum and its organization, as well as, an understanding of proper conduct while working with a supervisor and clients.	5	4	3	2	1	0
2. how to select target behaviors, basic methods of treatment, how to control undesirable behaviors, and how to maintain target behaviors.	5	4	3	2	1	0
3. information regarding the ASHA code of ethics, its standards, and expectations.	5	4	3	2	1	0

### SHS 336, Appraisal and Diagnosis of Communication Disorders

Student identifies and describes:

1. identify fluency, voice, articulation, language, neurological, and hearing disorders utilizing medical and descriptive developmental models of assessment.	5	4	3	2	1	0
2. appropriate protocol for case history, interview, oral mechanism evaluation, hearing screening, cognitive, motor and communicative assessment.	5	4	3	2	1	0
3. characteristics of specific test instruments which relate to validity and reliability, as well as variables related to examiner and examinee that affect productivity of the diagnostic evaluation.	5	4	3	2	1	0
4. outlining steps to follow in diagnosis of fluency, hearing impairment, voice, articulation, language, and neurological communicative disorders.	5	4	3	2	1	0
5. written examination reports including test results from practicum evaluations performed throughout the semester.	5	4	3	2	1	0

### **SHS 414, Audiology**

Student identifies and describes:

1. Elements of Audiology including anatomy and physiology of the ear, types of hearing loss, and simple tests of hearing.	5	4	3	2	1	0
2. Types of Hearing Assessment	5	4	3	2	1	0
3. Hearing Disorders	5	4	3	2	1	0
4. Management of Hearing Loss	5	4	3	2	1	0

### **SHS 455, Diagnostic Audiology**

Student identifies and describes:

1. conversation and communication behaviors, including communication strategies and conversational styles.	5	4	3	2	1	0
2. speech perception, assessing hearing, listening devices, auditory training and speechreading.	5	4	3	2	1	0
3. aural rehabilitation as it relates to adults who have a hearing loss.	5	4	3	2	1	0
4. aural rehabilitation as its relates to children who have a hearing loss.	5	4	3	2	1	0
5. speech, language, and literacy development in children with a hearing loss.	5	4	3	2	1	0
6. the management of cochlear implants in children.	5	4	3	2	1	0

## SHS 412, Methods in Communication Disorders

Student identifies and describes:

1. basic principles of speech/language intervention.	5	4	3	2	1	0
2. long-term and short term goals appropriate for an IEP.	5	4	3	2	1	0
3. appropriate techniques to deal with articulation and phonological disorders.	5	4	3	2	1	0
4. appropriate techniques to deal with language disorders	5	4	3	2	1	0
5. appropriate techniques to deal with adult aphasia, dysarthria, and apraxia.	5	4	3	2	1	0
6. appropriate techniques to deal with fluency.	5	4	3	2	1	0
7. techniques to deal with voice disorders.	5	4	3	2	1	0

## Appendix B

### Objectives for writing and executing behavioral goals for speech/language assessment and clinical practicum therapy.

Student's level of achievement in each area is scored using the following rating scale:

5 = Competent

4 = Emerging/with guidance

3 = Needs improvement/showing effort

2 = Needs improvement/not showing effort

1 = Unacceptable/unable to complete

0 = Not applicable/ no exposure

To obtain the total score, add up the total of the numbers circled in the section. Divide by the maximum number possible to obtain a competency percent.

The grading scale is as follows:

100-92%	A
91-90 %	A-
89-87%	B+
86-83%	B
82-80%	B-
79-77%	C+
76-73%	C
72-70%	C-

**Student communicates orally:**

1. Using language appropriate for audience	5	4	3	2	1	0
2. Using accurate and concise information	5	4	3	2	1	0
3. In spoken English consistent with ASHA position on nonstandard	5	4	3	2	1	0
4. Dialects and accents						
5. Using other languages at an equivalent standard when appropriate or	5	4	3	2	1	0
6. Using an interpreter						
7. Attending and responding appropriately	5	4	3	2	1	0

**Student communicates in writing:**

1. Using language appropriate for audience	5	4	3	2	1	0
2. Using correct mechanics	5	4	3	2	1	0
3. Using accurate and concise information	5	4	3	2	1	0

**Evaluation Competencies:**

1. Selects and administers appropriate screening procedures to determine Appropriateness for speech-language evaluation and/or referral.	5	4	3	2	1	0
2. Selects and gathers necessary case history information from staff, family, Client, and records prior to diagnostic assessment.	5	4	3	2	1	0
3. Selects appropriate diagnostic tests to assess relevant areas.	5	4	3	2	1	0
4. Administers formal tests according to published guidelines.	5	4	3	2	1	0
5. Administers informal assessment including use of non-standardized Tests, curriculum based, criterion referenced, behavioral observations, and/or instrumental tests.	5	4	3	2	1	0
6. Adapts assessment method according to client response.	5	4	3	2	1	0
7. Accurately interprets formal and/or informal tests to establish a diagnosis.	5	4	3	2	1	0
8. Utilizes multiple data information to obtain appropriate differential Diagnosis.	5	4	3	2	1	0

9. Is able to provide evaluation documentation that follows guidelines Required by practicum setting.	5	4	3	2	1	0
10. Is able to perform re-evaluations to judge the effectiveness of client Progress when appropriate.	5	4	3	2	1	0

**Intervention Competencies:**

1. Establishes appropriate long term goals for client.	5	4	3	2	1	0
2. Establishes behavioral objectives that include condition, performance, And termination criteria.	5	4	3	2	1	0
3. Establishes appropriate frequency and duration of speech-language pathology Services.	5	4	3	2	1	0
4. Establishes a plan of care appropriate to diagnostic findings.	5	4	3	2	1	0
5. Adjusts plan of care in response to client changes.	5	4	3	2	1	0
6. Selects appropriate intervention strategies to achieve desired outcomes And meet the individual needs of the client.	5	4	3	2	1	0
7. Utilizes appropriate treatment outcome measures/data collection in the delivery Of intervention services.	5	4	3	2	1	0
8. Is able to provide intervention documentation that follows guidelines and Format required by practicum setting.	5	4	3	2	1	0
9. Collaborates with the client, and other professionals to develop, modify, And coordinate plan of care to achieve the best treatment outcomes.	5	4	3	2	1	0

**Interaction Competencies:**

1. Attendance is reliable and punctual.	5	4	3	2	1	0
2. Demonstrates the ability to work with clients of various ages, gender, Socioeconomic, and ethnic backgrounds.	5	4	3	2	1	0
3. Respects cultural and personal differences of others.	5	4	3	2	1	0
4. Adheres to regulations for client confidentiality and privacy.	5	4	3	2	1	0

5. Selects a communication style (verbal and written) that meets the needs of Different audiences.	5	4	3	2	1	0
6. Demonstrates effective use of time to complete verbal and written tasks Involving case management.	5	4	3	2	1	0
7. Abides by the policies and procedures in the practicum setting.	5	4	3	2	1	0
8. Implements clinical instructor's suggestions in an open and non-defensive Manner, and follows through on recommendations for clients.	5	4	3	2	1	0
9. Engages in nonjudgemental, constructive discussions with other speech-Language pathologists, clients, families, and other professionals.	5	4	3	2	1	0
10. Adheres to the ASHA code of ethics.						

## Appendix C

### Departmental Competency for Student Portfolios

Student's level of achievement in each area is scored using the following rating scale:

5 = Competent

4 = Emerging/with guidance

3 = Needs improvement/showing effort

2 = Needs improvement/not showing effort

1 = Unacceptable/unable to complete

0 = Not applicable/ no exposure

To obtain the total score, add up the total of the numbers circled in the section. Divide by the maximum number possible to obtain a competency percent.

The grading scale is as follows:

100-92%	A
91-90 %	A-
89-87%	B+
86-83%	B
82-80%	B-
79-77%	C+
76-73%	C
72-70%	C-

**Assessment and Intervention:**

1. Select describe, and intergrate the findings from a variety of standardized non-standardized assessment instruments for children and adults.	5	4	3	2	1	0
2. Describe the procedure to appropriately administer a basic oral mechanism examination For children and adults.	5	4	3	2	1	0
3. Describe the elements of and interpret responses to a case history for disorders.	5	4	3	2	1	0
4. Describe the possible effects of cultural and linguistic factors on assessment and indicate Techniques to accommodate such factors in assessment.	5	4	3	2	1	0
5. Interpret the results of an assessment and make appropriate recommendations based on that Interpretation.	5	4	3	2	1	0
6. Write behavioral objectives and plan appropriate procedures to achieve those objectives for Intervention with impaired clients.	5	4	3	2	1	0
7. Select appropriate targets and entry levels for intervention and provide a rational for the Selection.	5	4	3	2	1	0
8. Develop a probe list and other techniques for assessing the effectiveness of an intervention Program.	5	4	3	2	1	0

**Language and Neurological Disorders:**

1. Describe common patterns and related factors.	5	4	3	2	1	0
2. Select and interpret appropriate diagnostic procedures for common disorders.	5	4	3	2	1	0
3. Develop appropriate treatment plans for common disorders.	5	4	3	2	1	0
4. Describe symptoms and differentiate among aphasia, TBI, dementia, right hemisphere Damage, and normal aging.	5	4	3	2	1	0
5. Select an interpret appropriate diagnostic procedures for common acquired disorders.	5	4	3	2	1	0
6. Develop appropriate treatment plans for common acquired disorders.	5	4	3	2	1	0

**Hearing Assessment:**

1. Describe common disorders of outer, middle, and inner era and auditory nervous system.	5	4	3	2	1	0
2. Explain effect of severity on onset of hearing loss on speech and language skills.	5	4	3	2	1	0
3. Perform screening assessment of hearing-air and bone conduction.	5	4	3	2	1	0
4. Identify current amplification techniques and assistive devices for hearing loss.	5	4	3	2	1	0
5. Discuss current issues and scope of practice regarding central auditory processing disorders.	5	4	3	2	1	0

**Cultural and Social Consideration:**

1. Differentiate between speech differences and disorders.	5	4	3	2	1	0
2. Differentiate between language differences and disorders.	5	4	3	2	1	0

3. Describe key cultural variables that influence communication.	5	4	3	2	1	0
4. Describe techniques to elicit and support appropriate behaviors in clinic, home, and School situations.	5	4	3	2	1	0
5. Methods to facilitate social skills for communication and maximize communication Opportunities.	5	4	3	2	1	0
6. Appropriate social interaction guidelines for clients of diverse cultural backgrounds.	5	4	3	2	1	0