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**Guidelines for accreditation of speech pathology programs**

**Part 3: Templates for university accreditation**

**Version history**

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| Version | Date | Revision notes |
| 1.0 | May 2022 | Release of pre-print version |
| 1.1 | August 2022 | Minor formatting changes  Footnote added to Template 3  Added detail and column edits to Templates 7, 8, 9  Added detail in Part 2, section 2.1 related to alternative assessment tools if COMPASS® is not used |
| 1.2 | September 2022 | ‘Cognitive communication’ changed to ‘cognition’ Part 2 p. 12  Minor wording changes to Criterion 20 and evidence required  Removal of ‘actively’ before ‘reflect’ in the evidence required of Criterion 37  Removal of ‘capacity’ and minor wording changes to Criterion 39 |

Note: As there is content duplication across the Excerpt and Parts 1, 2 and 3, the same version history table appears in each document.

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Guidelines for accreditation of speech pathology degree programs

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# Introduction

The suite of documents comprising the *Guidelines for accreditation of speech pathology degree programs* (SPA, 2022) outlines Speech Pathology Australia’s role in the accreditation of speech pathology degree programs in Australia. It also details the processes to follow and accreditation standards to address when applying for and undergoing accreditation.

These documents supersede all previous accreditation standards and accreditation guideline documentation.

The documents are for:

1. universities developing a new speech pathology degree program
2. universities applying to be accredited for the first time
3. universities applying for re-accreditation
4. Speech Pathology Australia (SPA) accreditors.

Universities and SPA accreditorsmay refer to *Transitioning to accreditation that aligns with the professional standards for speech pathologists in Australia: A resource document* (SPA, 2020) to support their transition from previous accreditation guidelines to the current standards.

Please ensure you are using the latest version of the guidelines by downloading them directly from the SPA website, rather than using a previously printed or cached version.

The *Guidelines for accreditation of speech pathology degree programs* (SPA, 2022) is divided into three parts:

1. **Part 1:** Regulation, standards and procedures
2. **Part 2:** Evidence guide
3. **Part 3:** Templates (this document)

# Template 1

## Program details

|  |  |  |  |
| --- | --- | --- | --- |
| University |  | | |
| Campus/s to be assessed |  | | |
| Name of program/s[[1]](#footnote-2) |  | | |
| Head of Program & contact details |  | | |
| Program/course code(s) |  | Program/course abbreviation(s) |  |
| Program type/s  (Undergraduate/graduate entry) |  | | |
| Qualification name/s |  | | |
| AQF level/s |  | | |
| Month/year of last accreditation |  | Program/s accredited until year ending … |  |

# Template 2

## Staffing overview

|  |  |  |  |
| --- | --- | --- | --- |
| Appointment type | Total staff | Total FTE | Comments |
| Teaching only (specify levels i.e., levels A to E) |  |  |  |
| Research only (specify levels i.e., levels A to E) |  |  |  |
| Teaching/research (specify levels i.e., levels A to E) |  |  |  |
| Other e.g., professional staff (specify levels) |  |  |  |

# Template 3

## Staff details

(Duplicate template for each member of staff[[2]](#footnote-3))

|  |  |
| --- | --- |
| Staff name |  |
| Qualifications |  |
| Role and type of contract, including FTE as relevant (e.g. permanent, sessional etc.) |  |
| Relevant professional memberships. Please identify if a member of SPA |  |
| University committee involvement |  |
| Subject coordination  (Provide code and name) |  |
| Subject involvement  (Provide code and name) |  |
| Details on involvement with the development and monitoring of the curriculum |  |
| Research interests/ highlights |  |
| Publication and/or funding highlights |  |
| Other information relevant to the university accreditation process |  |

# Template 4

## Student numbers (undergraduate/graduate entry master program)

(Please use separate tables for undergraduate and master program as necessary. Add detail or columns to reflect additional campuses as necessary. Delete unnecessary rows/columns and adjust calendar years to reflect year of document submission and the three years prior)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Year 202X | | Year 202X | | Year 202X | | Year 202X | |
|  | New enrolments | Continuing[[3]](#footnote-4) | New enrolments | Continuing | New enrolments | Continuing | New enrolments | Continuing |
| Year 1 |  |  |  |  |  |  |  |  |
| Year 2 |  |  |  |  |  |  |  |  |
| Year 3 |  |  |  |  |  |  |  |  |
| Year 4 |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Total |  |  |  |  |  |  |  |  |
| Number graduating |  |  |  |  |  |  |  |  |

# Template 5

## Student demographics at admission to program

(Please use separate tables for undergraduate and master programs as necessary. Add detail or columns to reflect additional campuses as necessary. Delete unnecessary rows/columns and adjust calendar years to reflect year of document submission and the three years prior)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Year 202X | Year 202X | Year 202X | Year 202X |
|  | N (%) | N (%) | N (%) | N (%) |
| Total domestic students |  |  |  |  |
| Total Aboriginal and/or Torres Strait Islander students |  |  |  |  |
| Total international students |  |  |  |  |
| Other (please specify)  *Non-mandatory row* |  |  |  |  |

# Template 6

## Whole of cohort, must pass assessments at a level appropriate for entry to the profession

This table is to be submitted as partial evidence to meet criterion 23.

The final column ‘accreditationcriteria addressed’ should be used to list any criteria (other than criterion 23) which are also addressed by the assessment.

*Each* assessmentshould be detailed in a separate row, even if it is part of the same unit/ subject.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Year/ semester | Unit/ subject code | Assessment dimensions  (e.g. type of assessment, brief summary of task, individual/group) | Areas of communication and/or swallowing | Lifespan stage  (e.g., 0-5 years, primary school, 65+) | Domains 1 & 2 - standards addressed | Domain 3 - standards addressed | Accreditation criteria addressed  (other than criterion 23) |
|  |  |  |  |  |  |  |  |
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# Template 7

## Assessments that contribute to core claims of competency but are not at a level appropriate for entry to the profession

This table is to be submitted as partial evidence to meet criterion 24.

The final column ‘accreditationcriteria addressed’ should be used to list any criteria (other than criterion 24) which are also addressed by the assessment.

*Each* assessment should be detailed in a separate row, even if it is part of the same unit/ subject.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Year/  semester | Unit / subject code | Assessment dimensions  (e.g. type of assessment, must pass status, brief summary of task, individual/group) | Areas of communication and/ or swallowing | Lifespan stage  (e.g., 0-5 years, primary school, 65+) | Domains 1 & 2 –  standards addressed | Domain 3 –  standards addressed | Accreditation criteria addressed  (other than criterion 24) |
|  |  |  |  |  |  |  |  |
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# Template 8

## Summary of accreditation standard and criterion evidence

Note that column 3 ‘Key evidence submitted to meet criterion’ should not necessarily list every individual piece of evidence that relates to the criterion but rather provide a brief summary of evidence presented within the submission and a rationale for its inclusion where appropriate.

| **Accreditation standard 1: Governance** | | | |
| --- | --- | --- | --- |
| **Criterion** | **Evidence required to meet this criterion** | **Key evidence submitted to meet criterion** | **Evaluation of evidence submitted by university** (for SPA accreditor use only) |
| **Criterion 1**  The university holds current registration with Tertiary Education Quality and Standards Agency (TEQSA) as an education provider in the Australian University category. | A copy of the university’s registration status with TEQSA. |  |  |
| **Criterion 2**  The speech pathology degree awarded by the university meets the specifications for the appropriate Australian Quality Framework (AQF) level. | A statement indicating approved AQF level and year of approval. |  |  |
| **Criterion 3**  Governance and academic oversight of the speech pathology program are clearly defined. | Organisational charts detailing where the speech pathology program sits within the university and faculty/school with respect to overall governance.  Evidence of reporting lines from/to the head of speech pathology within the university.  Evidence of structures which provide academic oversight e.g., Teaching and Learning Committee, Curriculum Committee, Reconciliation Action Plan Committee etc.  Evidence of processes which provide academic oversight e.g., university and/or faculty/school program rules for progression through year levels, academic integrity processes, and rules regarding assessment (i.e., supplementary assessment, permitted assessment load per unit of study, permitted number of must pass assessments per subject/unit and/or program). |  |  |
| **Criterion 4**  The university has a process for quality management, program review, response to feedback, and maintenance of accreditation requirements in relation to teaching, learning and research practices. | Evidence of regular evaluation and review (at a university, faculty/school and/or program level) of teaching, learning and research practices within the program to ensure continual improvement against academic and accreditation standards.  Evidence of how changes are monitored and evaluated for alignment with the *Professional standards* and accreditation requirements.  Description of how feedback from peers, students and external stakeholders (e.g., external advisory committee) is sought and actioned to inform quality improvement.  Evidence that teaching, learning and research review processes include meaningful engagement with Aboriginal and Torres Strait Islander Peoples and communities, and show action-orientated planning and review that is led by and privileges the voices of Aboriginal and Torres Strait Islander Peoples. |  |  |
| **Criterion 5**  University facilities, equipment and resources support sustainable delivery of the speech pathology program. | Evidence that university resources (e.g., offices, clinical/practice education areas and resources, simulation spaces, online learning platforms, teaching spaces, research areas, audiovisual resources, finances and equipment etc.) enable sustainability of the specified teaching and learning methods/pedagogies outlined within the speech pathology program. |  |  |
| **Criterion 6**  Existing processes ensure adherence to professional, ethical and legislative safety standards that are relevant to delivery of the speech pathology program. | Relevant program rules that ensure adherence to legislative requirements, university policies and professional and ethical standards for staff and students e.g., mandatory training, workplace health and safety, pre-clinical requirements (immunisation, BlueCard, CPR/First aid etc.).  Documentation of how risks are monitored in both on and off campus activities (including local, rural and international practice education placements).  For university clinics, evidence of processes for quality management and accreditation of clinic services where required. |  |  |
| **Criterion 7**  The head of the speech pathology discipline or program is appropriately qualified and has demonstrated expertise in the field of speech pathology. | Confirmation that the head of the speech pathology program is eligible for Certified Practising Speech Pathologist status with SPA, holds a Level D (Associate Professor) or above position and is appropriately qualified as defined by the TEQSA Higher Education Standards Framework.  A Level C (Senior Lecturer) position is also acceptable provided there is suitable evidence that the staff member is adequately supported by senior staff from speech pathology or other disciplines. |  |  |
| **Criterion 8**  The speech pathology program has staffing levels and expertise consistent with the requirements of TEQSA to enable quality and sustainable program delivery. | Levels and types of staffing appointments (e.g., Level C, HEW 6, continuing full-time, fixed term, casual, 0.5 FTE etc.) of academic, professional, contract, casual and support staff.  Speech pathology program staff roles, areas of expertise and areas of research/scholarship of teaching (publications, grants, awards).  Where expertise from speech pathology staff external to the university and/or from non-speech pathology staff is required, documentation of experts’ qualifications and role in the program.  Evidence that where changes to program delivery are expected (i.e., student enrolment numbers), staffing and program sustainability have been considered. |  |  |
| **Criterion 9**  An appropriate staff performance review process is in place. | Reporting of processes for supervision of staff, including reviewing staff performance.  Processes for addressing staff performance concerns.  Evidence of opportunities available to staff for professional development to expand their skills, knowledge and experience. |  |  |
| **Criterion 10**  Policies and/or strategies are in place to extend staff capabilities in culturally safe and responsive practice for Aboriginal and Torres Strait Islander Peoples and communities. | Documented plan and evidence of staff undertaking professional development focused on culturally safe and responsive practice.  Evidence of impact of staff professional development on the planning and implementation of curriculum in partnership with Aboriginal and Torres Strait Islander Peoples and communities.  Evidence of speech pathology staff involvement in relevant university committees, e.g., Reconciliation Action Plan committees, Aboriginal and Torres Strait Islander curriculum development or student recruitment committees.  Where speech pathology staff research has implications for Aboriginal and Torres Strait Islander Peoples and communities, meaningful participation of and engagement with Aboriginal and Torres Strait Islander Peoples and communities is evident in the planning, development and implementation of this research. |  |  |
| **Criterion 11**  Strategies are in place to build/extend constructive partnerships and contractual arrangements with workplace practice education providers. | Evidence of practice education partnerships and contractual arrangements, for both University operated and externally offered placements. |  |  |

| **Accreditation standard 2: Students** | | | |
| --- | --- | --- | --- |
| **Criterion** | **Evidence required to meet this criterion** | **Key evidence submitted to meet criterion** | **Evaluation of evidence submitted by university** (for SPA accreditor use only) |
| **Criterion 12**  Information regarding the speech pathology program for prospective and current students is accessible and accurate. | Copies of or links to current speech pathology program information which may include program promotional material as well as curriculum content, entry requirements, prerequisites, program maps and subject/unit outlines.  Accreditation status is accurately documented in publicly available program information. |  |  |
| **Criterion 13**  Admission eligibility and selection criteria are documented. Policies exist regarding recognition of prior learning and credit transfer consistent with AQF Qualifications Pathways Policy. | Documentation of application and admission selection criteria and procedures for both domestic and international students.  Policies for recognition of prior learning and credit transfer.  Details of maximum program duration for students on modified programs. |  |  |
| **Criterion 14**  Admission to the speech pathology program for international students includes a minimum (IELTS) score of 8.0\* for each component of reading, writing, listening and speaking, or an equivalent grading using another English language testing system \* If IELTS requirement is not 8.0 or there is no English language assessment in place, evidence of how the program assesses, monitors and supports students’ English proficiency across reading, writing, listening and speaking is required. | Description of the English language prerequisites for admission to the speech pathology program.  Evidence of early identification of students needing additional language support.  Evidence of modules, resources and/or courses for students who require additional English language support.  Evidence of use and outcome monitoring of support (modules, resources, and/or courses) when required. |  |  |
| **Criterion 15**  Enrolment patterns are recorded and monitored. | Records of yearly trends in admission, attrition, numbers of students in each cohort and numbers of graduating students. |  |  |
| **Criterion 16**  A strategy is in place to facilitate recruitment and retention of Aboriginal and Torres Strait Islander students, and the strategy is regularly reviewed. | Evidence of strategies aimed at increasing Aboriginal and Torres Strait Islander student recruitment, retention and graduation for Bachelor/Master programs.  Evidence of processes to review and monitor Aboriginal and Torres Strait Islander student recruitment and retention strategies.  Evidence of support services for Aboriginal and Torres Strait Islander students to maximise retention, e.g. university-specific student support services or external support services, such as Indigenous Allied Health Australia.  Evidence of culturally safe teaching practices that ensure culturally safe learning environments for Aboriginal and Torres Strait Islander students to support retention.  See *Guidelines for reporting of Aboriginal and Torres Strait Islander curriculum development and inclusions* for specific examples relating to this criterion. |  |  |
| **Criterion 17**  Students are informed of and have access to appropriate academic, cultural and personal support services. | Evidence of services to support the diversity of students’ needs.  Evidence of how students are informed of these services.  Evidence that learning support plans, e.g., via centralised student support services, are provided to students where required. |  |  |
| **Criterion 18**  Processes are in place to enable early identification and support for students not performing satisfactorily in academic or practice education environments. | Evidence of policies/processes for identifying and monitoring students requiring academic, practice education or other support.  Evidence of available supports. |  |  |
| **Criterion 19**  Assessment policies and academic progression rules exist and are applied transparently, consistently and rigorously. | Demonstration of adherence to the university’s assessment policy including the methods used to monitor and evaluate current assessment practices.  Evidence of how students are informed of assessment policies and criteria including level of performance expected for specific assessment tasks, including must pass tasks.  Evidence that the program has robust formative and summative feedback processes to facilitate students’ development of competency in academic and practice education contexts.  Evidence of how students are informed of the outcome of their assessments.  Reporting of academic progression policies and examples of how modified academic programs are managed.  Evidence of pass/fail criteria for academic assessments. |  |  |

| **Accreditation standard 3: Curriculum** | | | |
| --- | --- | --- | --- |
| **Criterion** | **Evidence required to meet this criterion** | **Key evidence submitted to meet criterion** | **Evaluation of evidence submitted by university** (for SPA accreditor use only) |
| **Criterion 20**  The conceptual framework/philosophy and pedagogies that are used in the program are described with appropriate rationale related to students’ competency development in professional conduct, reflective practice and lifelong learning, and speech pathology practice. | Description of the philosophy and pedagogical principles and practices of both the academic and practice education aspects of the program. This description does not need to be accompanied by a detailed theoretical overview with accompanying literature; rather, it should summarise how the pedagogy informs the design and delivery of the academic and practice education programs. |  |  |
| **Criterion 21**  Speech pathology staff partner with Aboriginal and Torres Strait Islander Peoples and communities in the development of curriculum content and processes which build students’ culturally safe and responsive practice. | Evidence that curriculum content related to Aboriginal and Torres Strait Islander Peoples, communities and culture privileges Aboriginal and Torres Strait Islander voices and is developed in partnership with Aboriginal and Torres Strait Islander people and embedded across the program.  Evidence that students are engaged in learning experiences which build knowledge in providing culturally safe and responsive services, for example, learning from Aboriginal and Torres Strait Islander guest lecturers, learning about respectful and appropriate terminology.  Evidence that the program is respectfully working towards students being engaged in authentic practice education learning experiences with Aboriginal and Torres Strait Islander Peoples and communities.  Evidence that students’ knowledge and skills related to providing culturally safe and responsive services are assessed.  See *Guidelines for reporting of Aboriginal and Torres Strait Islander curriculum development and inclusions* for specific examples relating to this criterion. |  |  |
| **Criterion 22**  The curriculum ensures that students have comprehensive knowledge and understanding of communication and swallowing needs. | Evidence that students are **taught** the theoretical constructs which underpin practice with individuals and communities across the lifespan relating to **all** components of communication and swallowing.  A compilation of subject/unit outlines. |  |  |
| **Criterion 23**  The curriculum assesses, at a level appropriate for entry to the profession1, students’ ability to assess communication and swallowing2 needs and to plan, implement and monitor suitable support for individuals and communities3 across the lifespan.  1 Entry to the profession is defined in Part 2, Section 2.2  2 Communication and swallowing are defined in Part 2, Section 2.2  3 Community is defined in Part 1, Glossary | Mapping of whole of cohort, must pass assessments which require performance at a standard appropriate for entry to the profession. This should be completed on Template 6.  An explanation in the narrative of how the program assures that, upon graduation, students are ready to enter the profession and practise competently in all areas of communication and swallowing. |  |  |
| **Criterion 24**  An explicit description of transfer of knowledge and skills is provided where the curriculum does not assess students’ competency for entry to the profession in all areas of communication and swallowing across the lifespan.  \* Transfer of knowledge and skills is defined in Part 2, Section 2.2. | Clear discussion of transfer of knowledge and skills within the narrative which demonstrates why and how this concept is addressed within the program, including reference to relevant evidence (including Template 7).  Evidence of explicit discussion of transfer with students, which includes specification of the knowledge and skills that are transferable with accompanying rationale.  Evidence that students understand the concept of transfer and can recognise and apply core/generic knowledge within a range of contexts and with a range of client groups across the lifespan. |  |  |
| **Criterion 25**  The curriculum includes a well-integrated combination of academic and practice education content. | Summary of the program structure and sequencing across semesters.  Evidence of how theory and practice are integrated across the curriculum.  Credit points/ electives/differences for honours versus pass programs should be included as appropriate. |  |  |
| **Criterion 26**  Evaluation of students’ communication competence in English is evident. | Evidence of how communication competency is evaluated, including how students are supported to demonstrate English communication skills that underpin speech pathology practice. |  |  |
| **Criterion 27**  The curriculum supports students to recognise and respond respectfully to the impact of culture, language and diversity when working with individuals and communities. | Evidence that students are engaged in learning experiences which are embedded across the program and support them to provide person-centred, family-centred and community-centred approaches which respect culture, language and diversity.  Evidence that students’ development of knowledge and skills in such learning experiences are assessed. |  |  |
| **Criterion 28**  The curriculum is current and relevant to the Australian context and addresses broader international perspectives. | Description/evidence of how the curriculum reflects the Australian context.  Evidence of how the curriculum reflects current education, health, and employment priorities, to ensure future-ready graduates.  Evidence of how the curriculum integrates factors which might influence service provision from a broader global perspective. |  |  |
| **Criterion 29**  The structure of the curriculum has a developmental trajectory in which students are supported to progress to a level of competency appropriate for entry to the profession. | Evidence that the curriculum provides a structure that enables students to demonstrate progression in competency development towards a level appropriate for entry to the profession. |  |  |
| **Criterion 30**  Assessment of students during practice education experiences in all contexts throughout the program is robust, standardised across the cohort, and linked to learning outcomes. Assessment criteria are transparent and universally applied across the cohort. | Description of the tool/s used to assess student competency during practice education placements.  Evidence of clear assessment criteria for all practice education experiences.  Description of determinants for progression to the next practice education experience (e.g., prerequisites).  Information on decision-making processes for modifications to the practice education experience (e.g. length of experience, additional placement days) including processes relating to management of students who do not meet the passing criteria for a given placement (e.g., supplementary vs repeat placement).  Information given to students and practice educators about placement for each year (e.g., practice education booklet). |  |  |
| **Criterion 31**  Student performance in practice education placements is assessed at near Entry-level (when using COMPASS®) or equivalent\* for the penultimate placement and assessed at Entry-level (when using COMPASS®) or equivalent\* for the final placement (with a population different from the penultimate placement).  \*if not using COMPASS® (see Part 2, Section 2.1 for further information). | Evidence of clear criteria for judgement of near Entry-level (when using COMPASS®) competency for students’ penultimate practice education placement.  Evidence that students are assessed at Entry-level (or equivalent if not using COMPASS®) for students’ final practice education placement.  Evidence that students’ final practice education placement is in a context and with a population (e.g., child vs adult vs mixed) that is different from their penultimate placement. |  |  |
| **Criterion 32**  The practice education placement program meets the following criteria:  1. The majority of student placements must be:  a. in Australia  b. with service users who reside in Australia  c. with practice educators who reside in Australia  d. assessed by practice educators who hold or are eligible for Certified Practising Speech Pathologist (CPSP) status.  2. At least one near–entry level/penultimate or entry level placement in Australia, which includes in person, face-to-face service delivery.  3. The majority of placements are with real, rather than simulated, service users. | Evidence that the practice education program meets all criteria as outlined. |  |  |
| **Criterion 33**  Students are provided with practice education experiences with individuals and communities across the lifespan in a range of contexts and with a range of populations. | Documentation of planning and monitoring of students’ practice education experiences.  Evidence that students have had an appropriate range of practice education experiences with individuals and communities across the lifespan. It is expected that students will have practice education experiences with both children and adults, including those with developmental and acquired disorders and difficulties.  Evidence that students have had practice education experiences in a diverse range of contexts e.g., acute hospital, community-based rehabilitation, health prevention and promotion services, school, cognitive disability contexts etc. |  |  |
| **Criterion 34**  Practice educators are supported to ensure they provide appropriate quality of practice education learning, teaching and assessment for students. | Guidelines for practice educators which detail students’ prior theoretical knowledge and placement experience, and reasonable expectations for each practice education activity or placement (based on students’ knowledge and experience to that point).  Documentation of the training/ professional development/continuing support provided for practice educators including their role in providing timely feedback to students and assessment of students’ development of competency using the assessment tool (e.g., COMPASS®).  Information given to students and practice educators about placement for each year (e.g., practice education booklet).  Guidelines which enable practice educators to appropriately manage and assist students requiring additional support during placement.  Description of processes which enable evaluation of practice education experiences and environments.  Evidence of response to feedback from student evaluation of practice education experiences. |  |  |
| **Criterion 35**  Ethical practice as described by the SPA Code of Ethics (as a minimum) is integrated within the curriculum and its application is assessed in academic and practice education contexts. | Evidence of how teaching and assessment of ethical practice is embedded within the academic and practice education curriculum.  Evidence of how students are informed of relevant legislation, workplace and SPA policies and procedures to guide safe and quality services. |  |  |
| **Criterion 36**  Evidence-based practice principles and processes are integrated within the curriculum and their application is assessed in academic and practice education contexts. | Evidence of how teaching and assessment of evidence-based practice principles and processes are embedded within the academic and practice education curriculum.  Evidence that students at entry to the profession are able to recognise and integrate best available sources of evidence (e.g., research base, clients, contexts, clinician) as required within service delivery. |  |  |
| **Criterion 37**  Reflective practice skills are integrated within the curriculum and their application is assessed in academic and practice education contexts. | Evidence that opportunities for development of reflection, critical thinking and clinical reasoning are incorporated and assessed within academic and practice education contexts.  Evidence that students reflect on their cultural identity, values and personal biases.  Evidence that students reflect on their practice, recognise strengths and limitations, and identify where and when to seek support and feedback.  Evidence that students set personal and professional goals which recognise the impact of their attitudes, beliefs and life experiences. |  |  |
| **Criterion 38**  Competencies integral to teamwork and interprofessional collaborative practice are integrated within the curriculum and their application is assessed in academic and practice education contexts. | Evidence that the curriculum includes explicit teaching and assessment of the concept and value of teamwork and interprofessional collaborative practice and opportunities for students to apply their principles.  Evidence of the inclusion or development of interprofessional collaborative practice opportunities within practice education. |  |  |
| **Criterion 39**  Students’ understanding of service provision to individuals, families and/or communities is explicitly developed and assessed within academic and practice education contexts. | Evidence of curriculum that focuses on the client as broader than the individual, extending to the community.  Evidence that the curriculum enables students to demonstrate their understanding of community/service level assessment and intervention e.g., health promotion and prevention strategies at a community level.  Evidence that students apply principles of person-centred, family-centred and community-centred care.  Evidence that students consider the functional impacts of the client’s communication and swallowing on their activities and participation in daily life. This may be considered within the context of a framework such as the International Classification of Functioning, Disability and Health (ICF). |  |  |
| **Criterion 40**  The curriculum develops students’ awareness of a range of service delivery approaches and provides opportunities to experience these. | Evidence that students are aware of a range of service delivery approaches and how these are applied in different contexts to facilitate person-centred, family-centred and community-centred care.  Evidence that the academic curriculum includes content relating to a range of approaches such as prevention and promotion, advocacy, and interprofessional collaborative practice.  Evidence that programs provide opportunities for students to experience a range of service delivery approaches,  Evidence that students develop digital literacy skills including eLearning systems and videoconferencing technology. |  |  |
| **Criterion 41**  The curriculum develops students’ awareness of the diverse range of speech pathology professional roles and provides opportunities to experience these. | Evidence that the curriculum includes content relating to the diverse range of speech pathology roles e.g., assessor, interprofessional collaborator, counsellor.  Evidence that students are aware of the diverse range of speech pathology professional roles and how these are applied in different contexts to facilitate person-centred, family-centred and community-centred care.  Evidence that programs provide opportunities for students to experience a range of speech pathology professional roles. |  |  |

1. List the details for all possible completions including early exit points and honours programs [↑](#footnote-ref-2)
2. Include staff who hold permanent positions within the speech pathology program and/or permanent staff who teach and/or assess students during the program. Sessional/casual/short-term contract staff should also be included if their role and qualifications contribute to the overall staffing expertise within the program and they are expected to be employed in this capacity for the period of accreditation (for example, 2 days per week during Semester 1, ongoing). Professional practice (clinical education) staff should be included if they are employed by the university. [↑](#footnote-ref-3)
3. Continuing students may include, for example, students who have intermitted the program/subjects in the program and are re-joining the cohort for that year or have failed subjects and are re-enrolling for a second (or more) time. [↑](#footnote-ref-4)