



Speech
Pathology
Australia

Accreditation of
Speech Pathology
Degree programs

Part B

Reporting Requirements
and Core Standards

B



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Accreditation of Speech Pathology Degree programs
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Accreditation standards

Purpose

This document, Part B: Reporting Requirements and Core Standards for Accreditation of Speech Pathology Degree Programs, provides the reporting requirements and Core Standards and associated criteria which Universities are required to address as part of their accreditation documentation.

This document (Part B) needs to be read in conjunction with related content and information that is available elsewhere:

- Part A: Background and Processes, Accreditation of Speech Pathology Degree Programs (Speech Pathology Australia, 2019)
- Part C: Documents and Templates for Accreditation of Speech Pathology Degree Programs (Speech Pathology Australia, 2019)
- Competency-based Occupational Standards for Speech Pathologists; Entry-Level (2011), see online version [here](#).
- Guidelines for reporting of Aboriginal and Torres Strait Islander Curriculum Development and Inclusions, see online version [here](#).

Reporting requirements

Overview of reporting requirements

Part A contains details of the reporting requirements for a university applying for accreditation by Speech Pathology Australia.

As noted in Part A, the documentation must include, at a minimum:

- Table of contents with numbered pages
- Program overview template
- Executive summary
- Background information
- Foreseeable program changes
- Required documentation
- Evidence related to each criteria of the Core Accreditation Standards
- The university's evidence rating for each criterion against the Core Standards.

Templates

SPA has provided templates to assist universities to present the reporting requirements as detailed below.

Some of these templates can be modified to meet each Programs' needs, or evidence can be provided in the format provided or in a different format if preferred. However, universities must provide details which align with the content required in each of the provided templates.

Templates for the Program Overview, Executive Summary, Background Information, Foreseeable Changes and Core Standards are found in Section C of this resource.

Program overview

The Program Overview is mandatory. Additional rows and detail can be added if necessary, to ensure the program/s is accurately described.

The Executive Summary

The Executive Summary reports on the perceived strengths and weaknesses of the Program, particularly in terms of coverage of the CBOS. The Executive Summary provides an opportunity for the University to highlight the areas it is proud of, and those areas which are perceived challenges. The Executive Summary would typically be no more than two pages in length.

Background information

Background Information follows the Executive Summary and is contained within the Program Overview Template. It provides an initial framework for the accreditors before they review more detailed sections of the documentation. The university should include reference to the following points, but may include other details as deemed appropriate:

- Provide an overview of the Program and any variations which exist (eg. Honours stream, electives, alternative exit points)
- Provide a brief description of how the Program fits into the broader university structure/context
- Briefly discuss how the Program has developed/changed since inception (or since most recent accreditation as appropriate)
- Describe the pedagogical philosophy of the Program and any special emphases or points of difference
- Briefly describe the student profile
- Briefly describe the staffing profile
- Provide a Program Map and overview of the Placement Program
- Cross reference to later sections of documentation as appropriate.

Foreseeable changes

This content provides the accreditation panel with insights regarding changes which may or may not be addressed in the documentation elsewhere. Reporting foreseeable changes also aligns with the reporting requirements of the Annual Report (due in January of each calendar year).

Universities will also report any proposed or foreseeable changes to their program/s under the following key areas:

- Human Resources (staffing resources for program delivery)
- Physical Resources (Infrastructure, teaching materials)
- Students (enrolments, pre-requisites, supports)
- Curriculum (including placement sourcing, changes to assessment, program changes)
- Other

The core standards

Speech Pathology Australia recognises that programs differ in structure, philosophy and pedagogy and therefore the capacity for all programs to present their documentation in the same format may not be feasible. Therefore, universities are encouraged to supplement the requirements described here to facilitate the accreditation panel's understanding of their program/s.

It is recognised there may also be some replication of information across Standards/criteria. Cross referencing is therefore encouraged to avoid duplication of information.

The core standards have been grouped into three standards with separate criteria for each standard.

The Core Accreditation Standards are:

- Governance
- Students; and,
- Curriculum.

Each standard is associated with specific criteria and suggestions of types of evidence, however universities are encouraged to provide their own relevant evidence against the specific criteria.

Standards 1 and 2 (Governance and Students) relate to the educational context in which the Program is offered.

Standard 3 (Curriculum) relates to the curriculum and assessment of student competency for entry-level practice as a Speech Pathologist in Australia.

Evaluation fields are provided for each criterion.

Responses to the Core Standards will likely build on the overviews provided in the Executive Summary and the Background Information. Some responses will require reference to tables, appendices and summaries of evidence (see Additional Documentation below). Many criteria refer to the CBOS (2011, revised 2017).

It is essential for Universities to detail how their Program/s cover all aspects of the CBOS, that is, the Professional Framework, Range of Practice Principles and the CBOS units and elements, across all the Range of Practice Areas for both children and adults.

Universities should ensure their responses to the Core Standards include:

- The process used by the University to track students' development of Entry level Competency.
- The process to ensure students achieve Entry Level competency across the RoPA, Professional Framework, Range of Practice Principles and CBOS Units for both children and adults
- The embedding of assessments for all students across the RoPA to the standard of Entry Level
- The penultimate placement experience (for adults or children) requires student competency to be assessed as progressing (at minimum) towards Entry Level competency
- The final placement experience (for adults or children) requires student competency to be assessed as entry level by the end of the placement
- Directly assessed placements must occur with adult AND child populations during the placement program.

Table 1 provides an example of how the core accreditation standards, criteria and examples of evidence are presented. Note that all of the Core Standards, with criteria and examples of evidence are presented later in this document (Part B), and the templates required for completion by Universities can be found in Part C.

Table 1. Example of Core Accreditation Standard, Criteria and Description of Evidence

Core Standard 1: Governance The University has established governance procedures for the speech pathology program of study that ensures development and delivery of sustainable, high quality education for students that enables them to graduate with the competencies required for entry to the profession of Speech Pathology in Australia.		
Criteria	Evidence Rating	Examples of Possible Evidence or Location of Evidence
1.1 Educational Quality		
1.1.1 The education provider holds current registration with TEQSA as an education provider in the Australian University category.		Copy of the University's registration status with TEQSA.

University self-evaluation of evidence

Universities are required to complete the self-evaluation column noting an Evidence Rating for each criterion for each of the three Core Standards. Evidence Ratings are as follows:

Evidence Rating:

Met (M) The standard is met with acceptable evidence

Partially Met (PM) The standard is partially met

In Progress (IP) Evidence is incomplete because content is being planned, under review, or has not yet been implemented

Not met (NM) The standard is not addressed by the evidence or the evidence does not meet minimum requirements

University documentation against the core standards

Table 2 provides an example of how a university could complete the Core Standards Template. Note the completion of the Evidence Rating and the University's response to the criterion as well as where to locate specific evidence. It would be equally acceptable for the university to provide more detail in the evidence cell and therefore not require a reference to the appendix. Hyperlinks would also be acceptable if appropriate.

Table 2. Example of University Documentation

Core Standard 1: Governance The University has established governance procedures for the speech pathology program of study that ensures development and delivery of sustainable, high quality education for students that enables them to graduate with the competencies required for entry to the profession of Speech Pathology in Australia.		
Criteria	Evidence Rating	Evidence or Location of Evidence
1.1 Educational Quality		
1.1.1 The education provider holds current registration with TEQSA as an education provider in the Australian University category.	M	The University was accredited by TEQSA in 2016. Please refer to Appendix 1.1 for registration status.

Additional documentation

Universities are required to provide evidence of how the Program meets each of the criteria presented in the Core Standards. Amongst the provided evidence, it is expected that all Programs will provide the following:

A summary of main evidence

This document provides a comprehensive summary of all the academic and clinical placement assessments and their relevance to CBOS Units (Occupational Competencies) in particular. Information on any assessment tasks relevant to the Professional Framework and/or the Range of Practice Principles should also be referenced.

Universities should also provide a Summary of each Unit/Subject which enables specific elements of the CBOS Occupational Competencies to be detailed.

Universities are permitted to create their own summary of main evidence tables or use/edit the templates provided in Part C.

A summary of assessments within clinical placement and academic subjects

This documentation must include:

- Unit/Subject Code
- Description of assessment
- How the assessment relates to the RoPA, Professional Competencies and CBOS Units
- How assessment relates to Professional Framework and Range of Practice Principles
- If the assessment is must pass
- The conditions under which students are assessed
- Any variation for Honours programs

Some of this information will be contained within individual Unit/Subject Summaries within the Main Evidence tables. Some will be reported separately to enable drilling down into individual assessments within a Unit/Subject. Templates have been provided in Part C. Universities may edit these templates or create their own.

Unit outlines for each unit of study within the degree program

Information on the units/subjects for the program in relation to CBOS is required. It may not be sufficient to provide copies or web-links of the subjects/units as they are provided to students, depending on what inclusions are required by each university.

Each subject/unit outline must include:

- Subject description, learning objectives, pre-requisite subject/units and year of study
- Examples of tasks, questions and assessment criteria for assessments deemed to be considered as evidence of Entry Level competency
- Information on the relationship to the Professional Framework and Range of Practice Principles.

Competency mapping by university

Student competency development occurs in various ways throughout a Program, typically from a combination of academic and clinical activities, as well as through reflection and self-directed tasks. Whilst many experiences develop competency, accreditation values those activities which assess competency development.

Universities should therefore map:

- How competency development is assessed throughout the Program against the CBOS (2011, revised 2017).

This mapping is likely to be provided as evidence for some criteria of the Core Standards.

- Individual student competency development against the CBOS (2011, revised 2017).

That is, if an assessment is not 'whole of cohort', as is the case for some clinical placements, then universities should demonstrate how they individually track student competency development and how any perceived gaps in coverage against the CBOS are managed.

For example, if student A has no evidence of delivering intervention to children who stutter by the end of the Program as they did not have a fluency placement, what assessments are embedded in the Program or what alternative experiences are provided that assure competency of Unit 4 for paediatric fluency?

Placement documents including Clinical Education Handbook

Universities must submit an outline of the pedagogical framework that underpins their clinical education program. This must include detail on how the clinical education program integrates with the overall program.

Note that a holistic approach to the provision of opportunities to demonstrate achievement of Entry Level competency as determined by CBOS 2011 for whole cohorts of students is highly valued by the accreditation panel. When considering the evidence presented by the Universities, the panel values integrated evidence from the placement and academic components of programs.

Speech Pathology Australia accepts the use of COMPASS® as a tool to provide evidence of speech pathology competency development in placement contexts, however it is not mandated. While COMPASS® scores can be used to contribute to assessment decisions, they are not the only information provided by the COMPASS® assessment regarding student performance (individually and in relation to their peers). Information from COMPASS® is also not the only means of determining whether each student has met the required level of performance to pass each placement. Universities are responsible for the collection of a range of appropriate assessment evidence, including tracking the students' placement experiences across the RoPA.

The following is relevant evidence for accreditation:

- A copy of the information given to students and clinical educators about placements for each year.
- A statement about how the program is assessing competency development.
- If COMPASS® is used, provide detailed information on placement assessment. COMPASS® provides a range of information beyond a student's individual score. Information on how the guidance provided in the COMPASS® Technical Manual is applied to interpret the students' scores and performance should be explained to ensure the placement educator's assessment accurately reflects the student's level of performance. Processes to support this determination may include strategies such as discussion between Placement Coordinators and Placement Educators during the placement, student reflection and evidence of their competency development or strategies used to moderate assessment.

- Where COMPASS® is not used, it is necessary to supply details of the different placement assessments used for each of the years of the program, plus any variation for honours programs and including any forms and instructions used
- A copy of training manuals for clinical educators who assess students in placements
- A copy of the clinical education handbook provided to students and clinical educators
- A copy of any log/placement record sheet used by the students or university staff, including any summary of hours.

Core standards with criteria and suggested evidence

(note templates available in part C)

Core standard 1: Governance		
The University has established governance procedures for the speech pathology program of study that ensures development and delivery of sustainable, high quality education for students that enables them to graduate with the competencies required for entry to the profession of Speech Pathology in Australia.		
Criteria	Evidence Rating	Examples of Possible Evidence or Location of Evidence
Educational Quality		
1.1.1 The education provider holds current registration with TEQSA as an education provider in the Australian University category		Copy of the University's registration status with TEQSA.
1.1.2 The degree awarded meets the specifications for the appropriate AQF level		Documentation demonstrating adherence to appropriate AQF level.
Organisational Structure		
1.2.1 The governance structure for the University/Faculty/School/Department is defined and sets out the academic oversight of the program.		Organisational charts and demonstration of how the governance structure facilitates planning and oversight of the speech pathology program.
1.2.2 University committees and advisory groups relevant to the delivery of the Speech Pathology program are reported.		A list of relevant university committees and description of lines of communication.
Staffing		
1.3.1 The Head of Program, and/or leadership team, is appropriately qualified (as defined by the TEQSA Higher Education Standards Framework) and has demonstrated expertise in the field of speech pathology.		Documentation of the title and expertise of the academic program leader/leadership team The organisational reporting structure and how the Head of Program is represented in the University's oversight structures.
1.3.2 The University has structures and staffing levels that enable quality and sustainable program delivery.		Organisational chart showing positions within the Faculty/School/Department within which the Speech Pathology Program is situated. Include level and type of appointment (e.g. Level C, HEW 6, continuing full time, fixed term, casual, 0.5FTE etc.) of academic, professional, contract and support staff. Include their roles in the development and delivery of the Program.
1.3.3 A Staff performance review process is in place.		Reporting of processes for monitoring staff performance and professional development opportunities

1.3.4 Strategies are in place to develop the Aboriginal and Torres Strait Islander cultural capabilities of all staff.		See accreditation guidelines for reporting Aboriginal and Torres Strait Islander curriculum development and inclusions here: Guidelines for reporting Aboriginal and Torres Strait Islander content , particularly 3.2.4.
1.3.5 Teaching and learning takes place in an environment where academic staff are engaged in research and/or scholarship of teaching.		Eg. Copy of staff/School targets and performance related, Program evaluations, Publications, Grants, Awards
Resources		
1.4.1 University facilities, equipment and resources support delivery of the program		Reporting how university resources (offices, clinical areas, technology, teaching spaces, research areas, audio-visual resources, finances and equipment etc.) are suitable for the learning and teaching methods/pedagogies employed.
Quality Management		
1.5.1 The University has a process for quality management and program review.		Evidence of regular evaluation and review of the program to ensure continual improvement against academic standards. Evidence of how changes are monitored and evaluated for impact.
1.5.2 The University has processes for responding to feedback and review of teaching, learning and research practices.		Description of how feedback from peers, students and external stakeholders is sought and actioned to inform quality improvement. Minutes of advisory committee meetings.
1.5.3 The University has processes to ensure adherence to professional, ethical and legislative safety standards that are relevant to delivery of the Program		Evidence of relevant Work Health and Safety (WH&S) policies and procedures and processes to ensure that legislated requirements are met, including Working with Children, Police Checks, immunisation, and professional indemnity insurance requirements. Documentation of how risks to standards adherence are monitored in both on and off campus activities (including local and international clinical placements). In relation to University clinics, evidence of processes for quality management and accreditation of clinic services.
1.5.4 Constructive relationships and contractual arrangements exist with workplace clinical education providers. <i>If clinical educators are employed or contracted by the university, staffing scenarios should be described here if not covered in 1.3.</i>		Evidence of clinical placement partnerships and contractual arrangements, for both University operated and externally offered placements.

Core standard 2: Students

The University has clear processes in relation to recruitment, enrolment and support for students throughout the Program. Processes are transparent, equitable and support cultural diversity.

Criteria	Evidence Rating	Examples of Possible Evidence or Location of Evidence
2.1 Program information		
2.1.1 Information regarding the speech pathology program for prospective and current students is accessible and accurate.		<p>Copies of or links to current program information.</p> <p>This may include program promotional material as well as curriculum content.</p> <p>Documents such as entry requirements, prerequisites, program maps and unit outlines could be referenced.</p> <p>Accreditation status should be accurately documented.</p> <p>Description of the processes used to update information and ensure accuracy.</p>
2.2 Admission criteria		
2.2.1 Recruitment and admission eligibility and selection criteria are documented.		<p>Documentation of application and admission procedures.</p> <p>Copies of admission policies and forms.</p>
<p>2.2.2 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 such as the Occupational English Test (OET).</p> <p>Note * 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.</p>		<p>Description of the English language prerequisites for admission to program.</p>
2.2.3 Policies exist regarding recognition of prior learning and credit transfer consistent with AQF Qualifications Pathways Policy.		<p>Documentation of progression rules: policies for recognition of prior learning and credit transfer.</p>
2.2.4 Enrolment patterns are recorded and monitored.		<p>Records of yearly trends in admission, records of attrition and numbers of students in each cohort as well as numbers of graduating students, using the templates provided in Section C as a guide.</p>

<p>2.2.5 A strategy is in place to ensure recruitment and retention of Aboriginal and Torres Strait Islander students, and the strategy is regularly reviewed.</p>		<p>See Accreditation guidelines for reporting Aboriginal and Torres Strait Islander curriculum development and inclusions here: Guidelines for reporting Aboriginal and Torres Strait Islander content, particularly 3.2.5.</p>
<p>2.3 Student support</p>		
<p>2.3.1 Students are informed of and have access to appropriate academic, cultural and personal support services.</p>		<p>Reporting on how students are informed of available support services; and of how formalised support /special needs programs are managed and monitored.</p>
<p>2.3.2 Processes are in place to enable early identification and support for students not performing satisfactorily in academic or clinical environments.</p>		<p>Copies of policies/processes for identifying and monitoring students requiring academic, or any other support.</p>

Core standard 3: Curriculum

The University provides evidence that curriculum development and reviews include collaboration with key stakeholders and that the curriculum content and student assessments cover the range of practice areas in speech pathology across the lifespan. The University provides evidence of how Speech Pathology Australia's Competency-Based Occupational Standards- Entry level (CBOS) are addressed and assessed.

Criteria	Evidence Rating	Examples of Possible Evidence or Location of Evidence
3.1 Philosophy of the Program		
3.1.1 The conceptual framework/ philosophy of the Program is described, along with curriculum threads/themes, and pedagogies used and the reasons for their selection.		<p>Description of the pedagogical principles and practices that inform the Program including educational philosophy.</p> <p>Identification of speech pathology specific, as well as other program content. This may be shown in a program map or other documentation of program inclusions, and cross referenced here.</p>
3.2 Curriculum development and delivery		
3.2.1 The curriculum is current and relevant to the Australian context and addresses broader international perspectives and global health issues.		Description/evidence of how the curriculum reflects the Australian context and responds to education, health, and employment priorities whilst also acknowledging factors which might influence service provision from a broader global perspective.
3.2.2 Cultural capabilities for speech pathology practice with Aboriginal and Torres Strait Islander Peoples are addressed in the areas of partnership/engagement and curriculum development.		See accreditation guidelines for reporting Aboriginal and Torres Strait Islander curriculum development and inclusions here: Guidelines for reporting Aboriginal and Torres Strait Islander content , particularly, 3.2.1 and 3.2.2.
3.2.3 The curriculum includes a well-integrated combination of scholarly and clinical content.		<p>Summary of the program structure and sequencing across semesters.</p> <p>Evidence should show how theory and practice are integrated.</p> <p>Credit points/electives/differences for honours versus pass programs should be included as appropriate.</p>

3.3 Clinical Education		
3.3.1 The conceptual framework/philosophy of the clinical education program is described, along with curriculum threads/themes and pedagogies used, which ensures integration of clinical competence across the range of practice areas for adults and children.		<p>Description of the pedagogical principles and practices that inform the clinical education program.</p> <p>A summary of the clinical education curriculum including duration of placements, type of supervision, service delivery models, range and timing of clinical experiences, e.g. teaching of clinical processes, use of simulation, observation, clinical placements.</p> <p>Evidence that the sequencing of learning and integration of knowledge, skills and professional attributes for clinical practice across the curriculum explicitly prepares students for practice with children and adults across the range of practice areas.</p> <p>Reference may be made to 3.1.1 and 3.4 as appropriate.</p>
3.3.2 The structure of the clinical education curriculum has a developmental trajectory in which students are supported to progress to entry-level competency during the Program.		<p>Evidence that the clinical education curriculum provides a structure that enables students to demonstrate progression in competency development, and how progression is assessed throughout the Program</p>
3.3.3 Clinical assessment of students (during clinical placements within workplaces <i>and</i> during university based clinical activities) throughout the program is robust, standardised across the cohort, linked to learning outcomes, and progression criteria are transparent and universally applied across the cohort.		<p>Documentation of assessment criteria for all clinical activities and clinical placements and description of determinants for progression.</p> <p>Information on decision making processes for modifications to the clinical placement arrangements (e.g. length of placement, additional placement days).</p> <p>Reference may be made to 3.3.1, 3.4.1 and 3.4.5 as appropriate.</p>
3.3.4 Student competency is assessed against CBOS at near entry level for the penultimate placement (for children, adults or mixed populations) and assessed at entry level for the final placement (in a population different from the penultimate clinical placement).		<p>Description of the assessment tool/s and criteria used during placements.</p> <p>Evidence of university planning and tracking to ensure all students receive both adult and child placements.</p>
3.3.5 Assessed clinical experiences are planned, tracked and monitored by staff throughout the program regarding Range of Practice areas, Generic Professional and Occupational Competencies and students' level of competency development.		<p>Documentation of planning of clinical experiences, clinical placements and monitoring of students' clinical practice experiences across adult and child populations and range of practice areas against the CBOS (for individual students and across the cohort of students).</p>
3.3.6 Guidelines related to clinical education, clinical placements, assessment criteria and progression requirements are provided to students and clinical educators.		<p>Copies of the clinical education handbook (or electronic documentation) provided to students and clinical educators.</p> <p>Guidelines which detail progression requirements and communication pathways for students who are not progressing as required.</p>
3.3.7 Clinical educators are appropriately supported in their roles.		<p>Copies of the clinical education handbook (or electronic documentation) provided to students and clinical educators.</p> <p>Guidelines which detail progression requirements and expectations or prerequisites for each clinical activity or placement.</p> <p>Guidelines which enable clinical educators to appropriately manage students requiring additional support during placement.</p>

<p>3.3.8 Clinical education environments are evaluated and monitored to ensure the quality of clinical learning, teaching and supervision.</p>		<p>Documentation of the training/ professional development/ continuing support provided for clinical educators including their role in assessment of students' development of competency, including their knowledge of the assessment tool used (e.g. COMPASS®).</p> <p>Description of processes which enable evaluation of clinical education experiences and/or providers.</p>
<p>3.4 Assessment throughout the Program</p>		
<p>3.4.1 Assessment policies are transparent, consistent and rigorous.</p>		<p>Demonstration of adherence to the university's assessment policy including the methods used to monitor and evaluate current assessment practices</p> <p>How students are informed of the outcome of their assessments.</p>
<p>3.4.2 Academic progression policies are in place, adhered to and accessible to students.</p>		<p>Reporting of academic progression policies.</p> <p>Provision of examples of how modified pathways/progression is managed.</p>
<p>3.4.3 Assessment of a student's communication competence and English language proficiency is evident.</p>		<p>Reporting on how communication competence and English language proficiency is evaluated in both academic and clinical assessments.</p> <p>Details of assessments within the program which assist staff to identify students who are experiencing or are at risk of experiencing challenges.</p>
<p>3.4.4 Students receive feedback on their developing competency across the range of practice areas and against the CBOS from a range of qualified staff.</p>		<p>Detailed and explicit commentary on the formative and summative feedback provided to students in relation to their development of competency throughout the entire curriculum, including both academic and clinical units.</p>
<p>3.4.5 Pass/Fail criteria and description of eligibility for supplementary (additional) assessments are available to students and external assessors such as clinical educators.</p>		<p>Documentation of assessment criteria and rationale for Pass/Fail criteria for academic and clinical assessments.</p> <p>Details of criteria/rationales for repeat or supplementary assessments including for case exams, vivas, OSCEs.</p>
<p>3.5 Curriculum in relation to CBOS</p>		
<p>3.5.1 The Professional Framework, which includes knowledge and application of the ICF and the Generic Professional Competencies, is embedded throughout the curriculum and assessed to meet the standards for entry-level practice.</p>		<p>Presentation of a summary of evidence which map how CBOS is embedded and assessed in reference to the Professional Framework.</p> <p>Universities should refer to the Summary of Main Evidence and Subject Unit/Descriptions template and supporting information in the Accreditation of Speech Pathology Degree Programs (2019) guidelines for further descriptions.</p> <p>Note possible cross-referencing with 3.5.5</p>

<p>3.5.2 The Range of Practice Principles are embedded throughout the curriculum and assessed to meet the standards for entry-level practice.</p>		<p>Presentation of a summary of evidence which map how CBOS is embedded and assessed in reference to the Range of Practice Principles.</p> <p>Universities should refer to the Summary of Main Evidence and Subject Unit/Descriptions template and supporting information in the Accreditation of Speech Pathology Degree Programs (2019) guidelines for further descriptions.</p> <p>Note possible cross-referencing with 3.5.5</p>
<p>3.5.3 The curriculum assesses students' knowledge, skills and professional attributes to meet the standards for entry-level practice relating to competence in each of the Range of Practice Areas in all units and elements of the CBOS, for adults and children.</p>		<p>Presentation of a summary of evidence which maps students' assessed competency development throughout the program. Mapping should demonstrate how CBOS is assessed in reference to the Range of Practice areas for units and elements of the CBOS, for adults and children.</p> <p>Universities should refer to the Summary of Main Evidence and Subject Unit/Descriptions template and supporting information in the Accreditation of Speech Pathology Degree Programs (2019) guidelines for further descriptions.</p> <p>Note Universities may choose to document the clinical components of the curriculum in this section or additionally/ separately in 3.5.</p>
<p>3.5.4 Strategies are in place to support students to develop Aboriginal and Torres Strait Islander cultural capabilities.</p>		<p>See accreditation guidelines for reporting Aboriginal and Torres Strait Islander curriculum development and inclusions here: Guidelines for reporting Aboriginal and Torres Strait Islander content, particularly 3.2.2 (to be read in conjunction with CBOS)</p>
<p>3.5.5 Graduating students have been assessed for <i>entry level competency</i> using a range of appropriately assessed activities across all range of practice areas for adults and children, across all areas of the CBOS (including the Professional Framework, Range of Practice Principles and all CBOS units).</p>		<p>Summary of all assessments <i>which assess entry level competency</i></p> <ul style="list-style-type: none"> • related to the ICF and generic professional competencies • across range of practice areas (recognising that multi-modal communication may be assessed simultaneously with other range of practice assessments) • for the Range of Practice Principles • for all CBOS units and elements • for adult and child populations. <p>Rationales are provided for all claims of transferability of competency across units and range of practice areas (where relevant).</p>

Evaluation by accreditation panel

Speech Pathology Australia Accreditors (SPAAs) will also allocate an Evidence Rating following their review of the documentation related to the Core Standards provided by the University. SPAAs will have one additional code available when rating the evidence. The SPAA Evidence Rating scale is provided below. The item in bold is not used by universities.

Met (M)	The standard is met with acceptable evidence
Partially Met (PM)	The standard is partially met
Not met (NM)	The standard is not addressed by the evidence or the evidence does not meet minimum requirements
In Progress (IP)	Evidence is incomplete because content is being planned, under review, or has not yet been implemented
Requires Confirmation (RC)	The evidence appears to address or partially address the standard, but confirmation is required at site visit, or additional evidence is required.



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