Advisement Program Assessment—What we do currently and plans going forward

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<th>GC Question</th>
<th>Faculty Academic Question (reflect on the GC question and modify as appropriate)</th>
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| a. Do you have a system of academic advisors concerned with academic progress and professional development in place?  
  • Do you have individual advisors for individual students, or one or more faculty (e.g., EO, DEO, DGS) who serve this function for all students?  
  • Which do you think is optimal? | Each student is assigned a faculty advisor who is assigned to each cohort. The designated advisor works with students regarding academic progress and programmatic concerns. Student-advisor meetings commence early in his/her studies and embed in discussions the program’s lock-step curriculum, clinical and academic competencies, graduation requirements, and progress towards fulfilling graduation requirements. During subsequent semesters, the student meets with the adviser at least once a semester and as needed to schedule classes and review academic and clinical performance. These meetings are sometimes scheduled in groups, thus ensuring all students are worked with on a consistent basis. The student’s advisor is available to discuss individual concerns by appointment.  
  Currently the EO serves as the faculty advisor to year 1 students, and the Deputy EO serves as advisor to the year 2 cohort. Profs. Silverman and DiToro serve as advisors to the year 3 and 4 cohorts, respectively.  
  This model, although recently implemented, has been more successful than previous models of dividing individual students among faculty at various affiliated campuses.  
  In addition to the cohort advisor, each student selects a capstone advisor who provides motivation and guidance for their requisite research project. This mentor commences working with the student’s research project towards the end of year two.  
  Students enrolled in the AuD program also benefit from advisement through the co-coordinators of clinical education who serve as mentors for clinical development and place the students at externship sites. The co-coordinators of clinical education meet with students, visit the externship sites the students are assigned to, prepare them for professional practice via resume and interview preparation workshops.  
  Finally, the program supports peer mentoring through the Graduate Center’s chapter of the Student Academy of Audiology (SAA). The SAA regularly submits a written report of their activities to the current students and faculty, and a faculty advisor provides updates at faculty meetings.  
  During orientation, students are informed that they can schedule a meeting with the EO or DEO if they have concerns that were not adequately addressed by the above. |
| b. Do you have a system of individual mentors for individual students, who | Yes. See above. |
can serve as counselors as well as guides for academic and professional development?
- Are these faculty members or students, or both?

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<th>The mentors are faculty members with the exception of the clinical supervisors at externship sites (who are all licensed and certified audiologists).</th>
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<td>We are considering the possibility of assigning two year 2 or year 3 students to serve as resources to incoming students beginning in Fall 2020. This was discussed at the recent faculty meeting and included the input of the student representatives to the program Executive Committee.</td>
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c. How are faculty/students assigned as mentors/advisors?

| The EO assigns the faculty advisors for each cohort and the advisor to the SAA. Students select their capstone research mentor from the roster of program faculty. The co-coordinators of clinical education determine placements at clinical internship and externship sites based on student skills, student needs, site requirements, fit of skills to site, and student input. |

d. How often do students meet with their mentors/advisors throughout the semester?
- Does your program have a policy on this?
- Do you think the current frequency is optimal?

| Students meet with the faculty advisor at least once a semester for registration advisement and meet individually as needed by appointment. Meetings with capstone advisors are jointly determined by the student and faculty member in accordance to the needs of the student and progress with the project. Students are with their internship/externship supervisors each day at their site. Formal mid semester and end of semester evaluation meetings are required. This process is also in accordance with the program’s accrediting body, the Council on Academic Accreditation in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association. |

e. Does advising/mentoring continue when students select a supervisor for their dissertation/capstone/thesis project?
- Or does the supervisor take on the role of mentor/advisor?

| Advising/mentoring continues after students select a capstone mentor. |

f. What system do you have in place to ensure that advisors/mentors (and students generally) are aware of what is expected of an advisor/mentor, and of academic requirements and regulations?

| The program utilizes graduation audit forms that students complete each semester with their advisor, which show the sequence of curriculum courses. Further, students and faculty are provided with copies of the program student handbook and have access to the GC handbook and bulletin. |

g. What system do you have in place to ensure that advisors/mentors (and | These resources are listed in the student handbook, the GC handbook and are on the GC website. Faculty are alerted to changes during faculty meetings as well. |
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<td><strong>h. Do you have systematic procedures in place for student and advisor/mentor reports on student progress?</strong></td>
<td>The graduation audit form addresses this. In addition, the transcript of each student is checked prior to the First and Second Examination.</td>
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<td><strong>i. Do you have annual (or semester) evaluations of student progress, and how is this administered?</strong></td>
<td>This is completed each semester by the individual advisor. Feedback is provided at the advisement meeting. In addition, clinical progress is documented by mid- and end-of-semester evaluations. Clinical experience hours are evaluated via the contact hour and cumulative hour logs. Clinical competencies are entered by the internship and externship site clinical educator who review student progress and goals.</td>
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<td><strong>j. Do you have separate teaching mentors?</strong></td>
<td>N.A. This is a clinical program.</td>
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<td><strong>k. How are your policies on mentoring/advising made available to students and faculty (e.g., are they made available in your student handbook or online)?</strong></td>
<td>Written materials include an annually-revised student handbook and clinic manual. In addition, there is a program orientation for new students. Cohort meetings with the EO/DEO and year 2 and year 3 students take place at least once a semester.</td>
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| **l. Results of mentoring survey and plans for implementing changes to advising/mentoring procedures in the future.** | A survey was sent to students in the program. 19 students have responded to date and responses were as follows: **Q1. Which year are you in the program?**  
- Year 1 (21.05%)  
- Year 2 (31.58%)  
- Year 3 (15.79%) |   |
Q2. A suggestion was made at the last faculty meeting that the program assign 1-2 peer mentors from existing cohorts to each incoming cohort, who can be a resource for the new students. Do you believe this is a good idea?

-Yes (94.74%)

Q3. Are you aware that you can schedule an appointment with your academic advisor if you have individual concerns?

-Yes (78.95%)
-No (21.05%)

Most No responses were from Year 1 and Year 2 students.

Q4. In previous years, academic advisors were randomly assigned each year. A change was instituted in the past 2 years in an attempt to increase continuity, so that each cohort has an advisor that knows them and can more easily track their progress through the program. The Executive Officer now serves as the advisor to first year students. Beginning in year 2, a mentor is assigned to each cohort and that mentor follows believe this is a positive change?

-Yes (78.95%)

Yes respondees thought that this would increase consistency and mentoring or did not see a downside.

Of No responses, students either felt that it made no difference and one would have liked to select his/her own mentor.

Q5. Do you know who to go to if you need academic, clinical or research guidance?

-Yes (73.68%)
-No (26.32%)

All but one No response were from Year 1 and 2 students and the issue appeared to be research guidance. This makes sense because students do not take the capstone research proposal course until Spring of Year 2.

Plans:

1. initiate peer mentoring (beyond what is already provided through the Student Audiology Association) beginning with the incoming class in Fall 2020
2. expand the description of advising/mentoring in the student handbook
|   | 3. reiterate who to go to for academic vs. clinical vs. research guidance in orientation and in the Year 2 and 3 cohort meetings, as well as who to go to with individual concerns |