



College of Health Sciences

Academic Affairs Committee  
120 Wethington Building  
Lexington, KY 40536-0200

September 20, 2011

To: Sharon Stewart, Ed.D. – *Interim Dean of the College of Health Sciences*  
Gilson Capilouto, Ph.D. – *Interim Associate Dean for Academic Affairs*

From: Richard Andreatta, Ph.D. - *Chair – CHS Academic Affairs Committee*

RE: Proposal to rename Division of CD and to make a change in the Masters program curriculum.

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The Academic Affairs Committee approves the (1) request to rename the division from Communication Disorders to *Communication Sciences & Disorders*, and (2) the Masters curriculum changes proposed by the faculty of the Division of Communication Disorders as submitted by Dr. Jody Deem, director of CD. The committee has carefully reviewed this document and recommends approval of both proposed changes in their entirety.

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To: Janice Kuperstein, Chair  
Department of Rehabilitation Sciences

From: Jodelle Deem, Ph.D., Director  
Division of Communication Sciences & Dis.

Date: 8/31/11

### **Introduction**

The Division of Communication Sciences and Disorders is submitting two formal changes in this curriculum packet. The first is a request for an “official” change of the Program name from “Division of Communication Disorders” to “Division of Communication Sciences and Disorders”. This request reflects “typical” program names around the nation. Most programs have changed their name to include the word “science” in some form in the description.

The second part of this curriculum change is a request to discontinue fluency disorders (CD 674) as a required course for the Master’s degree and replace it with a required course titled *Low Incidence Disorders* (CD 675). This change reflects a change in the current state of practice within the discipline of communication disorders as well as feedback from program graduates. Advances in practice have resulted in a significant decrease in the population of individuals being seen for management of fluency disorders. Conversely, graduating students have requested that we include additional topic areas in the curriculum such as cleft lip and palate, and vent/trach. related communication disorders, among others. *Low Incidence Disorders* will be a one credit course that can be repeated. It will require a subtitle each time it is offered to identify the specific content. Students will be required to take *Low Incidence Disorders* three times across the span of their graduate curriculum for a total of three credits. Additionally, we are requesting that the course be repeatable up to 4 credits. Our graduate students are required to take a one credit hour graduate elective. Faculty members may want to offer additional *Low Incidence* topics as a graduate elective under this course number.

### **Resources Available for Delivery of the Proposed Curricular Changes**

This proposal represents a credit neutral curriculum change. Students are now required to take CD 674 (Fluency Disorders) for three (3) credits. Under this proposal they will take CD 675, *Low Incidence Disorders*, for one credit each across a minimum of three semesters. Current members of the CD Faculty have sufficient expertise and time (credit hour neutral) to deliver the content required of the new course.

### **Representative Syllabus**

We have included a representative syllabus (Fluency Disorders) with this proposal. Other topics chosen for *the Low Incidence Disorders* course will follow the same syllabi format and adhere to university guidelines.

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## CHANGE MASTERS DEGREE PROGRAM FORM

### 1. GENERAL INFORMATION

College:	Health Sciences	Department:	Rehabilitation Sciences
Current Major Name:	Communication Disorders	Proposed Major Name:	Communication Sciences and Disorders
Current Degree Title:	MSCD	Proposed Degree Title:	MSCSD
Formal Option(s):	N/A	Proposed Formal Option(s):	N/A
Specialty Fields w/in Formal Option:	N/A	Proposed Specialty Fields w/in Formal Options:	N/A
Date of Contact with Associate Provost for Academic Administration <sup>1</sup> :		8/10/11	
Bulletin (yr & pgs):	2011, 141-143	CIP Code <sup>1</sup> :	51.0204
Today's Date:		8/30/11	
Accrediting Agency (if applicable):	ASHA		
Requested Effective Date:	<input checked="" type="checkbox"/> Semester following approval.		OR <input type="checkbox"/> Specific Date <sup>2</sup> :
Dept. Contact Person:	Jodelle Deem	Phone:	859-218-0557
Email:	jfdeem1@uky.edu		

### 2. CHANGE(S) IN PROGRAM REQUIREMENTS

		<u>Current</u>	<u>Proposed</u>
1.	Number of transfer credits allowed (Maximum is Graduate School limit of 9 hours or 25% of course work)	9	9
2.	Residence requirement (if applicable)	N/A	N/A
3.	Language(s) and/or skill(s) required	Undergraduate degree in communication disorders or equivalent; 2.75 GPA and submission of GRE scores.	<i>Unchanged</i>
4.	Termination criteria	Program adheres to UK Graduate School termination guidelines	<i>Unchanged</i>
5.	Plan A Degree Plan requirements <sup>3</sup> (thesis)	30 graduate credit hours and successful completion of a Master's thesis	<i>Unchanged</i>
6.	Plan B Degree Plan requirements <sup>3</sup> (non-thesis)	30 graduate credit hours and successful completion of comprehensive exams	<i>Unchanged</i>
7.	Distribution of course levels required	Follows Graduate School criteria	<i>Unchanged</i>

<sup>1</sup> Prior to filling out this form, you MUST contact the Associate Provost for Academic Administration (APAA). If you do not know the CIP code, the APAA can provide you with that during the contact.

<sup>2</sup> Program changes are typically made effective for the semester following approval. No changes will be made effective until all approvals are received.

<sup>3</sup> If there is only one plan for the degree, plans involving a thesis (or the equivalent in studio work, etc.) should be discussed under Plan A and those not involving a thesis should be discussed under Plan B.

### CHANGE MASTERS DEGREE PROGRAM FORM

(At least one-half must be at 600+ level & two-thirds must be in organized courses.)			
8.	Required courses (if applicable)	30 semester hours required chosen from the following: CD 621, 647, 648, 661, 670, 674, 677, 701, 710, 744, 745	<i>30 semester hours required chosen from the following: CD 621, 647, 648, 661, 670, 675, 677, 701, 710, 744, 745</i>
9.	Required distribution of courses within program (if applicable)	N/A	N/A
10.	Final examination requirements	Successful completion of comprehensive examinations or Master's thesis	<i>unchanged</i>
11.	Explain whether the proposed changes to the program (as described in sections 1 to 10) involve courses offered by another department/program. <u>Routing Signature Log must include approval by faculty of additional department(s).</u>		
	N/A		
12.	List any other requirements not covered above?		
	None		
13.	Please explain the rationale for changes. If the rationale involves accreditation requirements, please include specific references to those requirements.		
	<p>The program faculty members wish to discontinue use of CD 674 as a required course as fluency is now considered a 'low incidence' communication disorder. The content from this course is being absorbed into a broader, new course with a focus on other low incidence disorders as well. Rather than taking CD 674 - Fluency Disorders for three credits, students will take CD 675 - Low Incidence Communication Disorders across three semesters for a minimum of one credit each semester. Low Incidence Communication Disorders will require a subtitle each time it is offered. Students will take the CD 675 course for one semester as fluency disorders, for one semester as disorders of cleft lip and palate, and for one semester as communication disorders related to ventilators and tracheostomies. However, topics may change with current trends in the practice of communication disorders. This will result in no change in the number of required hours for the Masters' degree.</p>		

# CHANGE MASTERS DEGREE PROGRAM FORM

## Signature Routing Log

### General Information:

Proposal Name: Change of Master's Degree Program in Communication Disorders

Proposal Contact Person Name: Jodelle F. Deem Phone: 859-218-0557 Email: jfdeem1@uky.edu

### INSTRUCTIONS:

Identify the groups or individuals reviewing the proposal; note the date of approval; offer a contact person for each entry; and obtain signature of person authorized to report approval.

### Internal College Approvals and Course Cross-listing Approvals:

Reviewing Group	Date Approved	Contact Person (name/phone/email)	Signature
Janice Kuperstein, Ph.D., Chair, Department of Rehabilitation Sciences	9/2/11	Janice Kuperstein / 859-218-0593 / jkupe0@uky.edu	
CHS Academic Affairs Committee	9/20/11	Richard Andreatta / 859-218-0523 / richard.andreatta@uky.edu	
CHS Office of the Dean	10/01/11	Sharon Stewart / 218-0480 / srstew01@uky.edu	
		/ /	
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### External-to-College Approvals:

Council	Date Approved	Signature	Approval of Revision <sup>4</sup>
Undergraduate Council			
Graduate Council			
Health Care Colleges Council	11/15/11	Heidi Anderson	
Senate Council Approval		University Senate Approval	

Comments:

<sup>4</sup> Councils use this space to indicate approval of revisions made subsequent to that council's approval, if deemed necessary by the revising council.