Last updated: 6/10/22

Contact: accreditation@apta.org

**INSTRUCTIONS FOR COMPLETING THE**

**VISIT REPORT**

**FOR**

**PHYSICAL THERAPIST EDUCATION PROGRAMS**

**USING THE STANDARDS AND REQUIRED ELEMENTS**

**GENERAL INTRODUCTION**

**These instructions have been modified to reflect the Standards and Required Elements.** Please review them carefully and contact staff in the Department of Accreditation should you have any questions. Accreditation staff will delete these instructions after the report is submitted.

The Visit Report is used as a data source for CAPTE in their decision-making about the program. This report is used by the team to document the quality of the program relative to the *Standards and Required Elements for Accreditation of Education Programs for the Preparation of Physical Therapists* and not just whether components are present or absent. An effort should be made in completing the Visit Report to assist the reader's understanding of the program as a whole and in context to the environment in which the program operates.

The report submitted by the team should complement and validate, **not duplicate**, the Self-study Report (SSR). **DO NOT CUT AND PASTE DETAILS FROM THE SSR; duplicating the SSR does not provide information learned from the site visit.** In addition, the Visit Report should clarify and interpret questionable areas of the program’s SSR by explaining areas that were unclear or not well developed in the report. These two reports should provide CAPTE with a comprehensive picture of the education program's activities as they relate to its objectives and to the Standards and Required Elements.

The Visit Report should be concise but should include enough detail to provide evidence of quality relative to the Standards. The team's report should be free from personal educational philosophy, prescriptive terms, and value-laden terms.

The Visit Report should be candid, analytical and provide CAPTE with substance to use in the evaluation of the **quality** of the program. The attached guidelines should be used to develop a Visit Report that will give CAPTE an accurate picture of the program, including its strengths and weaknesses. **It is essentia**l that the Visit Report address any perceived problems identified through review of the Self-study Report by either confirming the existence of the problem or explaining why it is not perceived by the team to be of significant concern. A helpful Visit Report clarifies evidence found on site that is not obvious from a review of the Self-study Report.

The following materials should be requested to be sent for CAPTE review:

1. A requested appendix that should have been in the Self-study Report but wasn't, e.g., a missing CV.

2. Documentary evidence provided during the visit that updates material submitted in the SSR.

3. Information viewed on site that the team believes is **critical** for CAPTE to understand the team's report or to fully understand the program. In this case, the team believes that the Visit Report commentary alone would not provide sufficient information.

Only material which already exists can be requested. Please do not interpret this to mean that all materials that are typically left on site should be sent, e.g., all exams, faculty evaluations, completed assessments of program graduates. Do not take copies of materials with you. Feel free to contact staff during the visit if you are not sure if a request should be made.

Should the team determine it necessary for the program to provide additional material, it must be noted in **two** places in the Visit Report: under the appropriate Element and on the Additional Materials Requested by the On-site Review Team Form found at the end of the report. When requesting additional materials, the reason for the request must be included; e.g., Program is requested to provide a revised CV for Fred Smith with their response to this report because the one in the self-study is incomplete.

Please encourage the program to wait until they receive a copy of the Visit Report before uploading additional materials on the Portal and then, to follow the instructions on the form. **A copy of the form is to be left with the program administrator**; this may be handwritten. A typed list must be included in the Visit Report.

**GUIDELINES FOR DEVELOPING THE VISIT REPORT**

1. **Please keep the following in mind:**

 a. Although CAPTE alone determines compliance, the on-site review team does make judgments about the quality of the program.

 b. These judgments **must** be made in the context of the program’s/institution’s mission and program outcomes, which have intentionally been reordered to be at the beginning of the SSR.

 c. In order to help CAPTE determine compliance, the team's comment should not just state your conclusion. Instead, the comment **must** identify the information that leads to your conclusion.

 d. Only substantive issues/concerns/problems related to the Standards and Required Elements should be delineated. Minor issues or issues that are not relevant to compliance **should not be addressed.** For example:

Substantive issue: On paper, there appears to be an adequate number of clinical sites; however, review of clinical placements for the past 2 cohorts indicated that more than 25% of each cohort did not have all 4 of the program’s required clinical experiences.

Not a substantive issue: On paper, there appears to be an adequate number of clinical sites; however, students noted that their choices are limited in the local vicinity of the University. [Note: This is not substantive unless the program has promised students local clinical experiences! There is no requirement that placements be local.]

 e. CAPTE can only use information that is part of the official record and that the program has had an opportunity to respond to. The Commission cannot use new information obtained during discussions between the team leader and a Commissioner prior to CAPTE review of the program.

2. **Visit Report Submission**

 a. At the start of the visit, the program administrator is to provide the team leader with the following forms as a hard copy **and** as an electronic Word document.

* **General Information Form**
* **Persons Interviewed Form**
* **Materials Provided On Site Form**

b. These forms are to be updated during the visit to reflect who were actually interviewed, identifying those who attended the Exit Summary, and indicating which on-site materials were reviewed.

c. The Team Leader is responsible for emailing as attachments the following **within 10 days of the visit**:

* + Visit Report
	+ General Information Form
	+ Updated Persons Interviewed Form
	+ Materials Provided On Site Form
	+ Scanned copy of the signature page (if unable to scan, please mail).

**Except for the scanned signature page, all documents must be submitted as a Word document.**

**If you should need more time** or have any difficulties with the document, please contact Accreditation staff.

**Email all documents to:**

 **For PTA Visits:** **teresaemmons@apta.org**

 **For PT Visits:** **michaelchevalier@apta.org**

An electronic copy should be kept, along with all program materials, until receipt of the Summary of Action following the Commission's review of the first Compliance Report at which time you should destroy all materials related to the program. If the program initially had a split Compliance Report, you should keep all materials until the Summary of Action following the Commission's review of the second Compliance Report. Accreditation staff will remind you when it is time to destroy all materials.

1. **Visit Report Format:**

The Standards and the Visit Report only delineate the requested narrative evidence. For programs, the [Appendix](#AppendixList) and [On-site Materials](#OnSiteMaterialsList) Lists are included in the SSR Instructions and Forms packet. To facilitate your review, these two lists are found at the end of these instructions. These guidelines are provided to assist your determination if complete information was provided by the program. However, keep in mind that it is the wording of the Element, **and not the evidence list**, that delineates compliance.

Staff will delete the Evidence List from the Visit Report during final editing.

1. **Writing the Visit Report**

a. Provide the team’s findings relative to each Element:

* + Verify the SSR response, identifying sources of information utilized;
	+ Verify that any requested policies or documents ‘live’ where the SSR indicates they can be found;
	+ Clarify the SSR response, if necessary, identifying the sources of information;
	+ Identify any missing evidence; indicate if able to verify on-site, identifying the sources of information.

Please note that, if the SSR does not contain all requested evidence, the Commission will determine if compliance can be determined with the information provided. Programs have been encouraged to provide full information.

* + Provide an assessment on what the program/institution does, keeping in mind:
		- * If it makes sense in light of their mission;
			* Program outcomes; and
			* If what they do works for the program
	1. The team’s comments should be placed directly after the Element to which the comment refers. Type in your response to the right of the arrow (►) under “TEAM COMMENTS”; for example:

TEAM COMMENTS:

►*Your comments start here*.

* 1. After each team comment, there are two places **for the program** to add commentary: INSTITUTION COMMENTS and IDENTIFY ADDITIONAL MATERIALS UPLOADED, IF ANY. The latter is not for the team to identify additional requested information. If the team has requested additional materials, it should be noted under the Team Comments section. **These two sections will be the only places the program can make changes to the Visit Report; the rest of the document will be password protected.**

d. Do not worry about formatting or page breaks since codes are embedded in the document to facilitate format correction during editing by the Department staff.

1. Provide **An Overview of the Quality of the Physical Therapy Education Program** at the beginning of the Visit Report. Remember that the **Overview** serves as the basis for the Exit Summary and, therefore, **should not be a repeat** of the team's specific findings relative to individual Elements. Instead it should provide summaries of each Standard that provides a sense of the overall quality of the program. Any problem identified in the Overview **must** also be addressed in the response to the related Element. And visa versa, if substantive issues are identified under an Element, general statements regarding the issue must also be included in the Overview. Programs should not be left with the impression of no issues, if in fact one exists.
2. **For the 7Ds:** The practice expectations in 7D have been placed into a table that is part of the final Visit Report. **This is the only place for the team to comment on individual practice expectations.** Based on your review of all materials and on-site interviews, please indicate if the objectives and learning experiences **for each practice expectation** are reflective of entry level practice (can use yes/no or √). A comment is **only** needed when the practice expectation:
	* is a strength of the program as identified through your review of the SSR, interviews, or outcome data; or
	* it does not appear to be sufficiently addressed in the objectives or learning experiences.

Given the limited time during the site visit, the team is NOT expected to review examples of learning experiences for **each** 7D. CAPTE wants to know if the description of where and how the practice expectation is covered in the curriculum, along with the examples of learning experiences described in the SSR, provide a picture of entry-level performance? If not, discussing how the content is taught with students, graduates, and faculty can assist the team in determining what was not well documented in the SSR verus what is not well covered in the curriculum.

Comments should include the source(s) of information used. Practice expectations that are identified by students, graduates, clinical instructors, or employers as not being satisfactorily addressed **should be discussed further** with core faculty in order for your response to elaborate on what and how the content is included in the curriculum. **Please provide the team’s assessment regarding how well the practice expectation is covered, not just the comments from those interviewed.** An example of how to complete the [7D Table](#Chart) is provided in this document.

7. Complete the **Additional Materials Requested by the On-site Review Team** **form**, located at the end of the Visit Report. If additional materials are not being requested, note that on the form. Otherwise, list what is being requested and leave one copy of the completed form with the program administrator. **Only** **materials that already exist and that were reviewed** **by the team should be requested on the form, unless requesting missing materials that should have been in the Self-study Report.**

8. Complete the signature page, which is the last page of the report.

9. DO **NOT** LEAVE A COPY OF THE REPORT WITH THE PROGRAM. It will be sent by the Department of Accreditation at APTA to the program for their review and comment.

**Appendix List is from the Instructions and Forms packet: Yellow highlighting reflects recent changes that program may or may not have had at the time the SSR was developed**

| **row** | **Attach to Element(s)** | **APPENDIX LIST (July 2016)****Required Self-study Report Appendices for BOTH PTA & PT Programs** | **Required File Name** |
| --- | --- | --- | --- |
| **1** | **Preface** | **Signature Page** | Signature Page.pdf |
| **2** | **Preface** | **Self-study Report Check In Form,** provided as a **Word** document. | SSR Check In.doc |
| **3** | **1C1** | **For Initial Accreditation only:** Retention Rate Table (forms packet) | Retention Rate.pdf |
| **4** | **1C4** | **For Initial Accreditation Only:**  See Part 8 in CAPTE's Rules of Practice andProcedure for clinical education data required **no later than thirty (30) days prior to the CAPTE meeting.****Two of the three required document are included here; see Element 8F for the third document. Email the required materials to** **accreditation@apta.org:**(1) A copy of the summary page of each student’s most recent evaluation (mid‑term or final); and(2) An analysis of the performance of students (in aggregate) in clinical education based on feedback provided by clinical educators.For programs using the web version of the CPI, reports can be generated  | CE Student PerformanceSummary.pdf;CE Analysis of StudentPerformance.pdf |
| **5** | **2A** | Program Assessment Matrix (forms packet) | Program Assessment Matrix.pdf |
| **6** | **2C** | Curriculum Assessment Matrix | Curriculum Assessment Matrix.pdf |
| **7** | **2C** | Survey forms used to collect data from stakeholders; combine into one PDF | Survey Forms.pdf |
| **8** | **2D** | Planning document | Planning Document.pdf |
| **9** | **3C** | Provide an organizational chart that includes the location of the program within the organizational structure of the institution. | Organizational Chart.pdf |
| **10** | **3C** | Include in Policy Location Chart (forms packet) the **policies and procedures** **related to academic standards, faculty roles, and faculty workload.** Identify, as applicable, where the policies are found, including the name of the document, page number and/or URL. | Policy Location Chart.pdf(Blank chart is found in Instructions & Forms.doc)  |
| **11** | **3D** | Include in Policy Location Chart (forms packet) the **policies and procedures related to** **equal opportunity and nondiscrimination for faculty, staff and prospective/enrolled students**. Identify, as applicable, where they are found, including the name of the document, page number and/or URL. | Policy Location Chart.pdf |
| **12** | **3E, 4E, 4F, 4H** | Include in Policy Location Chart (forms packet) the **policies and procedures related to the rights, responsibilities, safety, privacy, and dignity of program faculty and staff.** Identify, as applicable, where they are found, including the name of the document, page number and/or URL. At a minimum, provide policies/procedures that relate to:• Policies related to due process;• Policies describing confidentiality of records and other personal information;• Policies applicable to core faculty, including but not limited to:* Personnel policies, including merit, promotion, tenure;
* Faculty evaluation and development;
* Policies related to and opportunities for the participation of core faculty in the governance of the program and institution, including the responsibility for academic regulations specific to the program and the curriculum;
* Program planning; and
* Fiscal planning and allocation of resources.

• Policies applicable to associated faculty;• Policies applicable to clinical education faculty;• Policies related to staff; and• Other relevant policies including patients and human subjects used in demonstrations and practice for educational purposes. | Policy Location Chart.pdf |
| **13** | **3C, 3D, 3E, 4E, 4F, 4H** | Institutional Faculty Handbook | Handbook Institution Faculty.pdf |
| **14** | **3C, 3D, 3E, 4E, 4F, 4H** | Program Faculty Handbook, if available | Handbook Program Faculty.pdf |
| **15** | **3C, 3D, 3E, 8A** | If the policies delineated in these Elements are not found in supporting documents or are located in a Union Contract, provide a copy of the relevant policies or Contract provisions in the bookmarked document titled: Other Policies.pdf. (Do not provide entire Contract) | Other Policies.pdf |
| **16** | **3C, 3E, 3F, 3H1‐3H5, 4E, 4F, 4L,****4M, 4N, 5A, 5C, 5E** | Program Policies and Procedures Manual, if available | Policies and Procedures Program.pdf |
| **17** | **3H** | Include in Policy Location Chart (forms packet) the **policies and procedures related to maintaining compliance with accreditation policies and procedures.** Identify, as applicable, where they are found, including the name of the document, page number and/or URL. Note: it is acceptable for these to be part of a job description. | Policy Location Chart.pdf |
| **18** | **3H, 4J, 4N, 4O, 5A,****5D, 5E** | If the policies delineated in these Elements are not found in supporting documents, provide a copy of the relevant policies in the bookmarked document titled: Other Policies.pdf. | Other Policies.pdf |
| **19** | **4J, 4O** | Include in Policy Location Chart (forms packet) the **policies and procedures****related to clinical education** including, but not limited to, policies:• for students;• related to clinical instructor qualifications;• related to clinical instructor responsibilities; and• tools used in assessing the performance of students and the clinical instructor.Identify, as applicable, where they are found, including the name of the document, page number and/or URL. | Policy Location Chart.pdf |
| **20** | **4J, 4O** | Clinical Education Handbook, if available | Clinical Education Handbook.pdf |
| **21** | **4N** | Include in Policy Location Chart (forms packet) the **policies and procedures****related to:****• expectations for students to demonstrate that they are competent and safe prior to engaging in clinical education**; **and**• **the skills students must demonstrate competent and safe performance prior to engaging in clinical education.**Identify, as applicable, where they are found, including the name of the document, page number and/or URL. If information is included in course syllabi, identify which syllabi. | Policy Location Chart.pdf |
| **22** | **4N** | List of the skills in which students are expected to be able to perform safely and competently. If this information is found in program document(s) or course syllabi, identify the document(s) where this information is made available to students. | Skill List\_Expected To BeCompetent.pdf |
| **23** | **5A** | Include in Policy Location Chart (forms packet) the **policies and procedures****related to student recruitment and admission,** including but not limited to:• student recruitment, and• maintenance of planned class size and prevention of over‐enrollment. Identify, as applicable, where they are found, including the name of the document, page number and/or URL. | Policy Location Chart.pdf |
| **24** | **5A** | Student Recruitment Materials, if available | Student Recruitment Materials.pdf |
| **25** | **5B** | Indicate where each of the items identified in the narrative is located; include thename of document(s) and the page number and/or specific URL reference(s) where the policies can be found. If the items are not located in supporting document(s), provide a copy of the relevant information; a URL by itself is NOT sufficient for requested items. | Relevant Student Information.pdf |
| **26** | **PTA**: **5B, 6D, 6L** | Relevant Catalog(s) **Note:** At the very least, all Catalog pages relevant to the program must be combined and provided as a PDF; **URLs by themselves are insufficient as a permanent record is required.** | Catalog Undergraduate.pdfCatalog Graduate.pdf |
| **PT: 5B, 6E, 6N** |
| **27** | **5C** | Copy of enrollment agreement, if used. | Enrollment agreement.pdf |
| **28** | **5D** | Include in Policy Location Chart (forms packet) the **policies and procedures****related to students including, but not limited to:**• Policies related to due process;• Policies describing confidentiality of records and other personal information;• Safety of students when in the role of subjects or patient‐simulators;• Policies related to calibration and safety check of laboratory equipment;• Policies on what student information is shared with the clinical facility (e.g., criminal background check, academic standing) and the process used to share this information;• Policies addressing requests for accommodation (in the classroom or clinical education) for students with disabilities;• Information provided to students regarding potential health risks they may encounter throughout the education program and in clinical practice;• Policies governing use of standard precautions;• Policies governing the storage and use of any hazardous materials;• Safety regulations and emergency procedures;• Policies governing the use and maintenance of equipment;• Policies related to clinical education experiences, including HIPAA and a patient’s right to refuse treatment by a student; and• Policies regarding laboratory access by students outside scheduled class time. | Policy Location Chart.pdf |
| **29** | **5D, 5E** | Institutional Student Handbook | Handbook Institution Student.pdf |
| **30** | **5D, 5E** | Program Student Handbook, if available | Handbook Program Student .pdf |
| **31** | **5E** | Include in Policy Location Chart (forms packet) the **policies and procedures related to student retention, progression and dismissal**. Identify, as applicable, where they are found, including the name of the document, page number and/or URL. | Policy Location Chart.pdf |
| **32** | **PTA**:**6D, 7A, 7B, 7C, 7D** | One page plan of study that list courses by term and includes prefix, #, title, credits, and student contact hours broken down by lecture, lab, independent study and clinical hours.**FOR INITIAL ACCREDITATION ONLY: if the curriculum has changed since the start of the program, provide a one page plan of study for each cohort, clearly identifying which graduating cohort the plan of study is for. Contact Accreditation Department staff if you have any questions.**  | Plan of study.pdf |
| **PT:****6E, 7A, 7B, 7C, 7D** |
| **33** | **6J, 8F** | For the most recent graduating class, a table that demonstrates that each student has completed the clinical education experiences required by the program, as well as the expectations in Element 6J1‐6J5. Documentation for each student should include the name of the facility **and** type(s) of experience (e.g., in-patient, out-patient, acute care, rehabilitation, home care, pediatrics, etc.). **For Initial Accreditation Only: Provide the above information for the charter class. (see Part 8 of CAPTE's Rules of Practice and Procedure that is required no later than 30 days prior to CAPTE meeting)** | CE Student Experiences.pdf |
| **34** | **PT ONLY****7A** | **PT ONLY:** 7A PT Content Chart (forms packet), to identify sample objectives at the highest expect level for each content area delineated in Element 7A. | 7A PT Content Chart.pdf |
| **35** | **7B** | **Use the appropriate chart,** 7B PTA Content Chart (forms packet) **OR** 7B PT Content Chart (forms packet) to identify sample objectives at the highest expect level for each content area delineated in Element 7B. | Use the relevant form & name:7B PTA Content Chart.pdf7B PT Content Chart.pdf |
| **36** | **PT ONLY****7C** | **PT ONLY:** 7C Content Chart (forms packet) that identifies sample objectives at the highest expect level for each content area delineated in Element 7C | 7C PT Content Chart.pdf |
| **37** | **PTA ONLY****7D23 a-n and 7D24 a-i** | **Responses to 7D23a-i and 7D24 a-n are to address each narrative bullet item for each intervention or test and measure identified.**  For example, response for 7D23c-Biophysical Agents is to address each narrative bullet for biofeedback, electrotherapeutic agents, compression therapies, cryotherapy, hydrotherapy, superficial and deep thermal agents, traction, and light therapies listed. **In order to accommodate this additional information, the narrative response for these elements can be provided as an appendix. And may be provided in a chart format provided that the chart is formatting in a manner that facilitates review.** | Name each appendix for the specific element, for example:7D23a Narrative Response.pdf |
| **38** | **8F** | Clinical Education Available Sites Form (forms packet) that demonstrates, for each clinical education experience, the number of clinical sites needed and the number of clinical sites available to the program based on the aggregate results of requests for clinical education placements. **This information should be based on experiences routinely available to the program and not the maximum sites available through a contract with the facility/corporation. See Self-study Report On-site Materials for documentation needed to support this information.**  | CE Sites Available.pdf |
| **39** | **8G** | List the document(s) where the blank, sample program or university‐specific written agreement can be found. Include the name of the document(s) and page number(s) and/or specific URL reference(s). If not located in supporting document(s), provide the blank sample program or university‐specific written agreement. | CE Written Agreement.pdf |
| **40** | **8H** | Identify where information related to academic, counseling, health, disability, and financial aid services is available to students. | Policy Location Chart.pdf |
| **41** | **Related Elements** | **The following appendices are NOT attached to individual Elements but are uploaded as per the Self-study Report instructions. The related elements are provided here to inform programs as to how these documents are used by the Reviewers** |  |
| **42** | **Related Elements; DO NOT ATTACH to elements:** **4A, 4D, 4G, 4I, 4K** | CV (forms packet); **uploaded on the appropriate Core Faculty Information Page OR Associated Faculty Information Page**; the latter for each associated faculty member who is involved in 50% or more of the contact hours of a course. | CV‐Last Name First Name.pdf(for example: CV‐Smith Mary.pdf) |
| **43** | **PT ONLY****Related Element:****4B** | Core Faculty Scholarship Form (forms packet); uploaded on the Core Faculty Information page for each core faculty member. Where appropriate, use the narrative row of the form to clarify the peer-reviewed mechanism for completed and planned products.  | Scholarship-Last Name First Name.pdf (for example: Scholarship-Smith Mary.pdf) |
| **44** | **Related Elements; DO NOT ATTACH to elements:****PTA:****4A, 4D, 6D, 6E,** **6F, 6G, 7A, 7B, 7C, 7D****PT:****4A, 4D, 6E, 6F,****6G, 6H, 7A, 7B, 7C, 7D** | Course syllabi; **uploaded on the Course Details page for each course**. See the relevant Element 6E for what each syllabus must contain:PTA = Element 6EPT = Element 6G**FOR INITIAL ACCREDITATION ONLY: if there have been changes in the curriculum since the program started -- develop the course list and provide syllabi for the curriculum experienced by the charter class as CAPTE must determine if the program experienced by the charter class will be accredited. Contact Accreditation Department staff to determine how best to provide the current curriculum.****IMPORTANT: These files will only be available in the WinZip of appendix items and not on the downloaded report.** | S‐Course Prefix & Number.pdf(for example: S‐PTA256.pdf) |
| **45** | **Related Elements; DO NOT ATTACH to elements:** **PTA:****4A, 4D, 4N, 6H****PT:****4A, 4D, 4N, 6J** | A sample examination for each course; **uploaded on the Course Details page for each course**. A cumulative final, if given, is preferred. If no examination is given in the course: upload an assignment and its grading rubric.**For lab courses that include practice of clinical skills**: provide a sample practical examination **and** its grading rubric. **PTA Programs ONLY:** In addition, if the program teaches students to perform mobilizations, include all practical exams and grading rubrics related to this content.If a course has written and practical exams, a sample written and practical exam, with the grading rubric for the practical exam, are to be combined into one PDF document, **bookmarked,** and **uploaded** **on** **the** **Course** **Detail** **Page** **for** **each relevant** **course**.**For clinical education courses**: only upload the student performance evaluation instrument if it is NOT the CPI or PTA Mac. **Note**: The Portal will not require an exam for any course identified as a clinical education course. If a validation error occurs indicating an exam is required for a clinical education course, check that the course has been coded correctly.**FOR INITIAL ACCREDITATION ONLY: if the curriculum has changed since the start of the program, provide exams for the curriculum experienced by the charter class as CAPTE must determine if the program experienced by the charter class will be accredited. Contact Accreditation Department staff to determine how best to provide exams for the current curriculum.****These files will only be available in the WinZip of appendix items and not on the downloaded report.** | E‐Course Prefix & Number.pdf(for example: E‐PTA256.pdf) |

**On-site Material List is from the Instructions and Forms packet**

| **Row** | **Element(s)** | **Required Materials List for PT and PTA Programs (4/8/21)** | **PROGRAM PROVIDED: Indicate file name and, if applicable, folder name, see instructions if not provided** | **TEAM REVIEWED** |
| --- | --- | --- | --- | --- |
| **1** | **1C2** | FSBPT, or appropriate licensing agency, reports on performance of program graduates on the licensing exam |  |  |
| **2** | **1C4** | Data demonstrating each student who completed the program within the last year demonstrated entry-level performance by the end of their last clinical experience |  |  |
| **3** | **1C5** | Summary of graduate data collected in the past 2 years |  |  |
| **4** | **1C6** | Summary of data collected in the past 2 years related to the program meeting its expected outcomes |  |  |
| **5** | **2A** | Minutes of meetings at which program assessment is discussed |  |  |
| **6** | **2A, 2B1, 2B2, 2B3, 2B4, 2B5, 2C** | Summary of assessment data collected in the last 4 years |  |  |
| **7** | **2C** | Minutes of meetings in which curriculum evaluation, including clinical education, is addressed |  |  |
| **8** | **2D** | Minutes of meetings in which program planning is discussed |  |  |
| **9** | **3A** | Copy of authorization(s) to provide post-secondary education and the physical therapist assistant program (PTA Programs) or the professional physical therapy program (PT Programs) |  |  |
| **10** | **3A** | Copy of state authorizations for clinical education experiences that occur out of state |  |  |
| **11** | **3B** | Copy of cover letter of most recent institutional accreditation action. If the institution’s accreditation status is other than full accreditation, provide a copy of the most recent accrediting agency report on the institutional accreditation status. |  |  |
| **12** | **3C, 3E, 8A** | Collective Bargaining Agreement or Union Contract, if applicable |  |  |
| **13** | **3F** | Records of complaints if any |  |  |
| **14** | **4A, 4E** | Faculty/course evaluations for core faculty, which may be redacted |  |  |
| **15** | **4A, 4D****6G, 6H & 7D (PTA)****6I, 6J & 7D (PT)** | **For each course**, provide: * two different samples of course materials, including but not limited to: assignments, class activities (role playing, group discussions, discussion boards, etc.), lecture outlines, PowerPoint presentations, handouts, lab activities.

two different examples of evaluation mechanisms used by the program to measure students’ achievement of course objectives, including but not limited to: skill checks, practical exams, assignments, and the corresponding grading rubrics for each example  |  |  |
| **16** | **4A, 4G, 4I** | Evidence of licensure to practice in any United States jurisdiction for core faculty who are PTs/PTAs and are teaching clinical content; for the program director; and for the clinical education coordinator. For CAPTE accredited programs outside the United States, evidence of licensure or regulated in accordance with their country's regulations |  |  |
| **17** | **4D 4F** | If associated faculty are utilized, faculty/course evaluations for associated faculty, which may be redacted |  |  |
| **18** | **4E** | At least two examples of completed core faculty development plans, which may be redacted |  |  |
| **19** | **4F** | If applicable, an example of completed associated faculty development plans, which may be redacted |  |  |
| **20** | **4H** | Evaluations of the program director |  |  |
| **21** | **4J** | Evaluations of the clinical education coordinator(s) from multiple sources (eg, students, clinical education faculty) |  |  |
| **22** | **4J** | List of clinical faculty development that has occurred within the last 3 years |  |  |
| **23** | **4J** | Sample communications within the last year between the clinical education coordinator(s) and the clinical sites and between the ACCE/DCE and the students |  |  |
| **24** | **4J** | Sample completed tool(s) used within the last year to assess student performance during clinical experiences |  |  |
| **25** | **4L** | Minutes of meetings at which academic regulations are discussed |  |  |
| **26** | **4M** | Minutes of meetings at which the curriculum is discussed |  |  |
| **27** | **4N** | Minutes of meetings prior to student engagement in clinical education where the core faculty determine the:• expectations for safety in student performance; and• list of skills in which students are expected to be able to perform safely and competently |  |  |
| **28** | **4N** | Two sample graded practical exam rubrics for each course that includes the practice of clinical skills |  |  |
| **29** | **4O** | Examples of completed tools used to evaluate clinical teaching effectiveness of CIs |  |  |
| **30** | **4O** | Summary data of clinical education faculty assessments |  |  |
| **31** | **4O** | Summary of data collected about the qualifications of the clinical education faculty (e.g., years of experience, specialist certification, or other characteristics expected by the program) for the clinical education faculty in the active clinical education sites |  |  |
| **32** | **5B** | Financial Aid Brochure, if one exists |  |  |
| **33** | **5C** | If an enrollment agreement is used, provide signed enrollment agreements for ALL enrolled students; provide by cohort in alpha order by last name of student. Provide an alpha list, by cohort, of the last name of all students enrolled in the program. |  |  |
| **34** | **5D** | Records of ongoing calibration and safety check of laboratory equipment |  |  |
| **35** | **6A** | If there is a state-mandated curriculum plan, provide a copy |  |  |
| **36** | **PTA 6G, 7D****PT 6I, 7D** | Examples of teaching materials that support instructional methods described in narrative |  |  |
| **37** | **PTA 6H****PT 6J** | Comprehensive exam at end of program or comprehensive exams administered at different points in the program, if given |  |  |
| **38** | **PTA 6I****PT 6K** | Sample evaluations of courses and faculty for distance education courses, which may be redacted |  |  |
| **39** | **PTA 6J, 8F****PT 6K, 8F** | Clinical education files for clinical sites used, or planned to be used, by currently enrolled students. At a minimum, clinical education files are expected to include a current Clinical Site Information Form or equivalent data and student evaluations of clinical experiences |  |  |
| **40** | **8B** | Job descriptions of secretarial/administrative and technical support staff |  |  |
| **41** | **8C** | Program budget documents |  |  |
| **42** | **8D** | **VIRTUAL VISITS ONLY:** Narrated video of facilities; if the campus is open. If unable to provide the video as part of Required Materials prior to the virtual visit, provide, if possible, as part of Additional Materials for CAPTE review at least 30 days before the CAPTE meeting at which the program will be reviewed.  If unable to provide for CAPTE review, tour of facilities will occur during the follow-up on-site visit. |  |  |
| **43** | **8D1, 8D2** | If the program uses rented facilities, provide a copy of the written agreement |  |  |
| **44** | **8D4** | If the program uses loaned equipment or uses equipment at facilities other than at the institution and, if there are written agreements for use of this equipment, provide a copy of the written agreement |  |  |
| **45** | **8D4** | Inventory list of equipment |  |  |
| **46** | **8D4** | List of equipment borrowed/loaned or used off-site |  |  |
| **47** | **8E** | List of the library resources related to program needs for both program faculty and students. |  |  |
| **48** | **8F** | List of clinical education sites that have accepted at least one student annually in the last 2 years |  |  |
| **49** | **8F** | Compiled data of available sites for current academic year based on annual clinical experience requests |  |  |
| **50** | **8F, 8G** | Provide a current (unexpired) written agreement for all active clinical sites. (Active clinical sites are those sites the program expects to use for students currently enrolled in the program.) |  |  |

**7D Chart**

**The following are several examples of how this chart could be completed for different scenarios of the same Element.**

|  |  |  |
| --- | --- | --- |
|  The practice expectations in 7D have been placed into a table that is part of the final Visit Report. **This is the only place for the team to comment on individual practice expectations.** Based on your review of all materials and on-site interviews, please indicate if the objectives and learning experiences **for each practice expectation** are reflective of entry level practice (can use yes/no or √).  | **Indicate if reflective of entry level practice** | **COMMENT:****Comment is needed only when the practice expectation is a strength of the program OR does NOT appear to be sufficiently addressed in objectives or learning experiences or based on interviews. Summarize the sources of information that led you to this opinion, for example, include comments from interviews or other supporting evidence (history of student performance, graduate or employer survey data, course materials from either the SSR or viewed on site, etc.)** **If more specific objectives are found during your review, identify the course and objective #(s).****FOR ALL OTHERS, NO COMMENT IS NEEDED.** |
| Objectives  | Learning experiences  |
| 7D8 Identify, respect, and act with consideration for patients’/clients’ differences, values, preferences, and expressed needs in all work-related activities. |  √ |  √ |  |
| 7D8 Identify, respect, and act with consideration for patients’/clients’ differences, values, preferences, and expressed needs in all work-related activities. |  √ |  √ | On-site interviews with employers and clinical education faculty indicated that this is a strength.  |
| 7D8 Identify, respect, and act with consideration for patients’/clients’ differences, values, preferences, and expressed needs in all work-related activities. |  √ |  √ | Objectives and learning experiences in the narrative are not directly related to this Element. However, review of syllabi indicated that objectives 4 & 5 in PT 978 (Seminar I) and objectives 2 & 9 in PT 988 (Seminar II) appropriately cover this practice expectation. On-site discussions with students, faculty and alumni confirm learning experiences. The program has been requested to provide a description of related learning experiences with their response to this report. |
| 7D8 Identify, respect, and act with consideration for patients’/clients’ differences, values, preferences, and expressed needs in all work-related activities. |   |  √ | Course objectives provided are not related to this Element. Discussions with faculty and students confirmed the learning experiences described in the SSR.  |

**COMMISSION ON ACCREDITATION IN PHYSICAL THERAPY EDUCATION**

**AMERICAN PHYSICAL THERAPY ASSOCIATION**

3030 Potomac Ave., Suite 100

Alexandria, Virginia 22305-3085

## VISIT REPORT

of

NAME OF INSTITUTION

NAME OF PHYSICAL THERAPY PROGRAM

DATE OF ON-SITE VISIT

This report represents the views of the on-site review team and was prepared after careful study of the program's Self-study Report and the information received and materials reviewed during the site visit. The Program Administrator and the chief administrative officers of the institution are requested to review copies of the report and may comment on it before it is considered by the APTA Commission on Accreditation in Physical Therapy Education (CAPTE).

This report is a confidential document prepared as an educational service for the benefit of the program in physical therapy and for use by the Commission on Accreditation in Physical Therapy Education in determining an accreditation status based on compliance with the *Standards and Required Elements for Accreditation of Physical Therapists Education Programs.*

The United States Department of Education (USDE) requires all recognized accrediting agencies to provide for the public correction of incorrect or misleading information an institution or program releases about accreditation or pre-accreditation status, contents of reports of on-site reviews, and accrediting or pre-accrediting actions with respect to the institution or program. [34 CFR 602.23(d) and 602.23(e)] The institution and program must make accurate public disclosure of the accreditation or pre-accreditation status awarded to the program. If the institution or program chooses to disclose any additional information within the scope of the USDE rule, such disclosure also must be accurate. Any public disclosure of information within the scope of the rule must include the agency’s street address, email address and phone number: Commission on Accreditation in Physical Therapy Education, 3030 Potomac Ave., Suite 100, Alexandria, Virginia 22305-3085; accreditation@apta.org; (703) 684-2782 or (703) 706-3245. If the Department of Accreditation finds that an institution or program has released incorrect or misleading information within the scope of the USDE rule, then it, acting on behalf of CAPTE, will make public correction, and it reserves the right to disclose this Visit Report in its entirety for that purpose.

ON-SITE REVIEW TEAM'S FINDINGS RELATED TO THE

STANDARDS AND REQUIRED ELEMENTS FOR ACCREDITATION OF PHYSICAL THERAPISTS EDUCATION PROGRAMS

**AN OVERVIEW OF THE QUALITY OF THE**

**PHYSICAL THERAPY EDUCATION PROGRAM**

**Note to team: Accreditation Staff will place the three forms you receive at the start of the visit into this report; therefore you MUST receive a Word version in addition to a paper copy. The team leader should email these forms to staff when the Visit Report is sent. This includes the:**

1. **General Information Form**
2. **Person's Interviewed Form**
3. **Materials Provided On-site Form**

**Brief description of the history of the program**

**Brief description of the program:** include setting, number of students, degree offered, number of faculty, the basic curricular model.

*Provide a summary of the team’s findings relative to each of the Standard delineated below. This should be a summary and not a restatement of the comments under the specific Elements. Any significant problem identified in the report must be included; the program should not be surprised when they receive the full report.* ***Confidential information obtained from review of faculty files must NOT be included in the overview OR in the full report.***

**STANDARD 1: MISSION, GOALS, OUTCOMES**

**STANDARD 2: ASSESSMENT, PLANNING**

**STANDARD 3: INSTITUTION & PROGRAM: INTEGRITY**

**STANDARD 4: PROGRAM FACULTY**

**STANDARD 5: STUDENTS**

**STANDARD 6: CURRICULUM PLAN**

**STANDARD 7: CURRICULAR CONTENT**

**STANDARD 8: RESOURCES**

***Please note:*** *Any problem identified in the Overview* ***must also*** *be addressed in the response to the related standard. In addition, avoid extreme or excessive use of analogies or comments not grounded in fact as described in the findings related to the specific standard. This includes terms like “excellent” and “extraordinary.” Avoid prescriptive statements ('the program should do ….) as CAPTE is not prescriptive*

**Standard 1**

**The program meets graduate achievement measures and program outcomes related to its mission and goals.**

**REQUIRED ELEMENTS:**

**1A** The mission[[1]](#footnote-1) of the program is written and compatible with the mission of the institution, with the unit(s) in which the program resides, and with contemporary preparation[[2]](#footnote-2) of physical therapists.

Evidence of Compliance:

Narrative:

* Provide the mission statements for the institution, the unit(s) in which the program resides, and the program.
* Describe the congruency of the program’s mission statement with the institution and unit(s) missions.
* Describe the consistency of the program’s mission with contemporary professional expectations for the preparation of physical therapists.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**1B** The program has documented goals[[3]](#footnote-3) that are based on its mission, that reflect contemporary physical therapy education, research and practice, and that lead to expected program outcomes.

Evidence of Compliance:

Narrative:

* Provide the goals, including those related to:
	+ Students and graduates (e.g., competent practitioners, leaders in the profession);
	+ Faculty (e.g., adding to the body of knowledge in physical therapy, achieving tenure and/or promotion, involvement in professional associations, improving academic credentials); and/or
	+ The program (e.g., contributing to the community, development of alternative curriculum delivery models).
* Describe how the goals reflect the program’s stated mission.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**1C** The program meets required student achievement measures[[4]](#footnote-4) and its mission and goals as demonstrated by actual program outcomes.

**1C1** Graduation rates[[5]](#footnote-5) are at least 80% averaged over two-years. If the program admits more than one cohort per year, the two year graduation rate for each cohort must be at least 80%. When two years of data are not available, the one-year graduation rate must be sufficient to allow the program to meet the expectation for a two-year graduation rate of at least 80%.

Evidence of Compliance:

Portal Fields:

* Provide graduation data for the most recent two years for which there is full data in the section entitled Graduation Rate Data for the years identified on the Portal. Use the Graduation Rate Table (forms packet) to collect the graduation data. Identify the number of cohorts admitted each year; data will be required for each cohort.

Narrative:

* Identify the 2-year graduation rate calculated by the data entered into the Graduation Rate Data Section on the Portal.
* If the program graduates more than one cohort of students in an academic year, provide an analysis comparing the outcomes of the different cohorts.
* **For Initial Accreditation only:** indicate that there are no graduates and provide the expected timeframe to collect and analyze graduate data. Provide the Retention Rate Table (forms packet) as an appendix.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**1C2** Ultimate licensure pass rates[[6]](#footnote-6) are at least 85%, averaged over two years. When two years of data are not available, the one-year ultimate rate must be sufficient to allow the program to meet the expectation for an ultimate two-year licensure pass rate of at least 85%.

Evidence of Compliance:

Narrative:

* Provide the most current licensure pass rate data available for your program through the Federation of State Boards of Physical Therapy (FSBPT):
	+ First time pass rates for the past two academic years.
	+ Two-year ultimate pass rate based on the following data:
		- Number of graduates who took the examination at least once;
		- Number of graduates who passed the exam after all attempts;

\*\* **NOTE**: if licensure pass rates for graduates in the last academic year have not yet stabilized provide the data for the past three years and the two-year rate for the cohorts for which the data has stabilized.

* + If program graduates do not routinely take the FSBPT exam, provide equivalent data.
	+ **For Initial Accreditation only:** identify that there are no graduates and provide the expected timeframe to collect and analyze graduate data.

 Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**1C3** Employment rates[[7]](#footnote-7)are at least 90%, averaged over two years. If the program admits more than one cohort per year, the two year employment rate for each cohort must be at least 90%. When two years of data are not available, the one-year employment rate must be sufficient to allow the program to meet the expectation for a two-year employment rate of at least 90%.

Evidence of Compliance:

Narrative:

* Provide the two-year employment rate for the last two academic years for each cohort based on the number of graduates who sought employment and the number of graduates employed within one year of graduation.
* **For Initial Accreditation only: i**ndicate that there are no graduates and provide the expected timeframe to collect and analyze graduate data.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**1C4** Students demonstrate entry-level clinical performance during clinical education experiences prior to graduation.

Evidence of Compliance:

Narrative:

* Describe the mechanisms used to determine entry-level performance of students during clinical education experiences prior to graduation.
* Provide evidence that each student who completed the program within the last year demonstrated entry-level clinical performance by the end of their last clinical education experience.
	+ If applicable, describe mechanisms utilized when CI ratings suggested less than entry-level performance and how the program managed each situation when a student did not meet entry-level clinical performance.
* **For Initial Accreditation only**: indicate that students have not yet completed their last clinical education experience and provide the expected timeframe to collect and analyze this data. Note: the program will be required to provide additional information prior to CAPTE’s initial accreditation decision; please refer to Part 8 of CAPTE’s Rules of Practice and Procedure, accessible at [www.capteonline.org](http://www.capteonline.org), for detailed information about what must be provided and the timing of the request.

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**1C5** The program graduates meet the expected outcomes as defined by the program.

Evidence of Compliance:

Narrative:

* For each goal related to program graduates delineated in Element 1B, list the expected outcomes that support the goal.
* For each outcome, provide the expected level of achievement and describe the process the program uses to determine if the expectation has been met.
* Based on the graduate (not student) data collected from the various stakeholders identified in Element 2C, provide a summary of the data and an analysis of the extent to which the graduates meet the program’s expected graduate student outcomes.
* If the program has more than one cohort, provide an analysis for each cohort.
* **For Initial Accreditation only**: indicate that there are no graduates, provide response to first two bullets and provide the expected timeframe to collect and analyze graduate data.

Note: Graduates are former students who have earned the DPT degree from the program.

 Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**1C6** The program meets expected outcomes related to its mission and goals.

Evidence of Compliance:

Narrative:

* For all other program goals delineated in Element 1B, list the expected outcomes that support the goal.
* For each outcome, provide the expected level of achievement and describe the process the program uses to determine if the expectation has been met.
* Based on the data collected from the various stakeholders identified in Element 2C, provide a summary of the data and an analysis of the extent to which the program meets its expected outcomes related to its mission and goals.
* If the program has more than one cohort, provide an analysis for each cohort.
* **For Initial Accreditation only:** provide response to first two bullets and indicate the expected timeframe to collect and analyze the program’s expected outcome data.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**Standard 2:**

**The program is engaged in effective, on-going, formal, comprehensive processes for self-assessment and planning for the purpose of program improvement.**

**REQUIRED ELEMENTS:**

**2A** The program has documented and implemented on-going, formal, and comprehensive program assessment processes that are designed to determine program effectiveness and used to foster program improvement.

Evidence of Compliance:

Narrative:

* Provide a description of the overall assessment process which includes, but is not limited to, the areas outlined in Elements 2B1-2B5 and 2C that summarizes the information in the program assessment matrix.
* Describe the overall strengths and weaknesses identified through analysis of cumulative assessment data. If other strengths and weakness have been identified, describe them and provide the source of evidence that led to that determination.
* Describe two examples of changes resulting from the assessment process within the last four years. For each example, describe the rationale for the change and describe the process, timeline and results (if available) of re-assessment to determine if the change resulted in program improvement.

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**2B** For each of the following, the program provides an analysis of relevant data and identifies needed program change(s) with timelines for implementation and reassessment. The assessment process is used to determine the extent to which:

 **2B1** the admissions process, criteria and prerequisites meet the needs and expectations of the program.

Evidence of Compliance:

Narrative:

* Provide an analysis of data collected and the conclusions drawn to determine the extent to which the admission process, criteria and prerequisites meet the needs and expectations of the program.
* If any student achievement (Elements 1C1, 1C2, 1C3, 1C4) or expected program outcomes fall below the CAPTE required or program expected levels or if there is a downward trend, document the process used to assess and address the performance deficits. Identify data collected, describe conclusions reached, and describe or identify changes made related to the admissions process, criteria, and prerequisites to address the findings or conclusions. Provide a timeline for implementation, including meeting the respective Element, and for reassessment of the effectiveness of changes.

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **2B2** program enrollment appropriately reflects available resources, program outcomes and workforce needs.

Evidence of Compliance:

Narrative:

* Provide an analysis of data collected and the conclusions drawn to determine the optimum program enrollment considering resources, program outcomes and workforce needs.
* If any student achievement (Elements 1C1, 1C2, 1C3, 1C4) or expected program outcomes fall below the CAPTE required or program expected levels or if there is a downward trend, document the process used to assess and address the performance deficits. Identify data collected, describe conclusions reached, and describe or identify changes made related to program enrollment to address the findings or conclusions. Provide a timeline for implementation, including meeting the respective Element, and for reassessment of the effectiveness of changes.

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **2B3** the collective core, associated and clinical education faculty meet program and curricular needs.

Evidence of Compliance:

Narrative:

* Provide an analysis of data collected and the conclusions drawn to determine the extent to which the collective core and associated faculty meet program and curricular needs.
* Provide an analysis of data collected and the conclusions drawn to determine the extent to which the collective clinical education faculty meet program and curricular needs.
* If any student achievement (Elements 1C1, 1C2, 1C3, 1C4) or expected program outcomes fall below the CAPTE required or program expected levels or if there is a downward trend, document the process used to assess and address the performance deficits. Identify data collected, describe conclusions reached, and describe or identify changes made related to the collective core, associated, and clinical education faculty to address the findings or conclusions. Provide a timeline for implementation, including meeting the respective Element, and for reassessment of the effectiveness of changes.

NOTE**:** This element refers to the assessment of the collective faculty. Information regarding the process to assess individual faculty is addressed in Standard 4.

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **2B4** program resources are meeting, and will continue to meet, current and projected program needs including, but not limited to, financial resources, staff, space, equipment, technology, materials, library and learning resources, and student services.

Evidence of Compliance:

Narrative:

* Provide an analysis of the data collected and the conclusions drawn to determine the extent to which program resources are meeting, and will continue to meet, current and projected program needs including, but not limited to: financial resources, staff, space, equipment, technology, materials, library and learning resources, and student services (academic, counseling, health, disability, and financial aid services).
* If any student achievement (Elements 1C1, 1C2, 1C3, 1C4) or expected program outcomes fall below the CAPTE required or program expected levels or if there is a downward trend, document the process used to assess and address the performance deficits. Identify data collected, describe conclusions reached, and describe or identify changes made related to program resources to address the findings or conclusions. Provide a timeline for implementation, including meeting the respective Element, and for reassessment of the effectiveness of changes.

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **2B5** program policies and procedures, as well as relevant institutional policies and procedures meet program needs. This includes analysis of the extent to which program practices adhere to policies and procedures.

Evidence of Compliance:

Narrative:

* Provide an analysis of the information collected and the conclusions drawn to determine the extent to which program policies and procedures, as well as relevant institutional policies and procedures, meet program needs. This includes analysis of the extent to which practices adhere to policies and procedures.
* If any student achievement (Elements 1C1, 1C2, 1C3, 1C4) or expected program outcomes fall below the CAPTE required or program expected levels or if there is a downward trend, document the process used to assess and address the performance deficits. Identify data collected, describe conclusions reached, and describe or identify changes made related to program policies, procedures, and practices to address the findings or conclusions. Provide a timeline for implementation, including meeting the respective Element, and for reassessment of the effectiveness of changes.

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**2C** The curriculum assessment plan is written and addresses the curriculum as a whole. The assessment plan includes assessment of individual courses and clinical education. The plan incorporates consideration of the changing roles and responsibilities of the physical therapy practitioner and the dynamic nature of the profession and the health care delivery system. Assessment data are collected from appropriate stakeholders including, at a minimum, program faculty, current students, graduates of the program, and at least one other stakeholder group such as employers of graduates, consumers of physical therapy services, peers, or other health care professionals. The assessment addresses clinical education sites including, at a minimum, the number and variety and the appropriate length and placement within the curriculum.

Evidence of Compliance:

Narrative:

* Describe how the curriculum assessment process considers the changing roles and responsibilities of the physical therapist practitioner and the dynamic nature of the profession and the health care delivery system.
* Provide evidence that student achievement (Elements 1C1, 1C2, 1C3, 1C4) and graduate outcomes are used to assess the curriculum.
* Provide evidence that the curricular assessment includes a review of the required elements in Elements 6A through 6M.
* Describe how the clinical education component is assessed, including at minimum, the assessment of the number and variety of clinical sites and the appropriate length and placement within the curriculum.
* Identify the stakeholders from whom data is collected, the method(s) used to collect data, and the timing of the collection.
* Provide a summary of the outcome from the most recent curriculum assessment, including clinical education.
* Describe any curricular changes, including to clinical education, made within the last four years and provide the rationale for the change(s).

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**2D** The program has implemented a strategic plan that guides its future development. The plan takes into account program assessment results, changes in higher education, the health care environment and the nature of contemporary physical therapy practice.

Evidence of Compliance:

Narrative:

* Describe the strategic planning process, including the opportunities for core faculty participation.
* Describe how the process takes into account changes in higher education, the health care environment and the nature of contemporary physical therapy practice.
* Describe any changes planned for the next 3-5 years.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**Standard 3:**

**The institution and program operate with integrity.**

**REQUIRED ELEMENTS:**

**3A** The sponsoring institution(s) is (are) authorized under applicable state law or other acceptable authority to provide postsecondary education and has degree granting authority. In addition, the institution has been approved by appropriate state authorities to provide the physical therapy education program.

Evidence of Compliance:

Narrative:

Narrative:

* Identify the state agency from which the institution has authority to offer the program and award the degree.
* If the institution is in a collaborative arrangement with another institution to award degrees, provide the above for the degree granting institution.
* Indicate if the institution has authorization to provide clinical education experiences in other states, where required.
* If the program utilizes distance education[[8]](#footnote-8), indicate that the institution has authorization to provide distance education in other states, where required.

NOTE: States and institutions that are recognized by SARA meet the conditions related to distance education and clinical education experiences.

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**3B** The sponsoring institution(s) is (are) accredited by an agency or association recognized by the US Department of Education (USDE) or by the Council for Higher Education Accreditation (CHEA).

Evidence of Compliance:

Narrative:

* For the degree granting institution, provide the accrediting agency name and the date that the current institutional accreditation status was granted.
* Provide evidence that the institution’s accreditation is in good standing. When sanctions, warning, probation, show cause or pending termination have been issued by the accrediting agency, explain the reasons for the accreditation status and the impact on the program.
* If in a collaborative arrangement, provide the above for the degree-granting institution.
* For institutions in countries other than the United States that are not accredited by an agency or association recognized by the US Department of Education (USDE) or by the Council for Higher Education Accreditation (CHEA):
	+ Identify the agency or agencies that provide the authorization for the institution to provide (1) post-secondary education and (2) the professional physical therapy program and indicate the dates such authorization was received. Provide contact information, including address, phone number and email address.
	+ State the institution’s current accreditation status or provide documentation of a regular external review of the institution that includes the quality of its operation, the adequacy of its resources to conduct programs in professional education, and its ability to continue its level of operation.
	+ Provide evidence that the accrediting agency fulfills functions similar to those agencies or associations recognized by the US Department of Education (USDE) or by the Council for Higher Education Accreditation (CHEA). If the institution has an accreditation or external review status other than full accreditation of approval, describe the impact, if any, of the current institutional status on the program.

 Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**3C** Institutional policies[[9]](#footnote-9) related to academic standards and to faculty roles and workload are applied to the program in a manner that recognizes and supports the academic and professional aspects of the physical therapy program, including, but not limited to, providing for reduction in teaching load for administrative functions.

Evidence of Compliance:

Portal Fields:

* Provide faculty workload data for each faculty member on the individual Core Faculty Detail page.
* Provide information related to teaching responsibilities in the Course Details page for each course.

Narrative:

* Describe how the institution supports the professional judgment of the core faculty regarding academic regulations and professional behavior expectations of students.
* Provide the specific location where institution and, if applicable, program workload policies are found.
* If the workload policies for program faculty differ from institution policies, describe how they differ.
* Provide the formula used by the program to determine faculty workload. If no formula exists, then provide the mechanism used to determine faculty workload.
* Describe how university-wide and/or unit-wide faculty roles and workload expectations are applied to the physical therapist education program so that they take into consideration:
	+ Administrative responsibilities of core faculty;

Provide examples of functions to be considered for release time (e.g., program administration, clinical education administration, development of Self-study Report, assessment activities);

* + Requirements for scholarship, service, and maintenance of expertise in contemporary practice in assigned teaching areas;
	+ Complexity of course content, number of students per class or laboratory, and teaching methodology;
	+ The relationship between credit hours and contact hours for classroom and laboratory for determining workload; and
	+ The unique needs of physical therapy education, similar to those of other professional education programs, where core faculty ensure the integration and coordination of the curricular content, mentor associated faculty, conduct and coordinate a clinical education program, manage admission processes, etc.

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**3D** Policies and procedures[[10]](#footnote-10) exist to facilitate equal opportunity and nondiscrimination for faculty, staff and prospective/enrolled students.

Evidence of Compliance:

Narrative:

* Provide (quote) the institution’s equal opportunity and nondiscrimination statement(s).
* Describe how the nondiscrimination statement and policy are made available to faculty, staff, prospective/enrolled students and the public.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**3E** Policies, procedures, and practices[[11]](#footnote-11) that affect the rights, responsibilities, safety, privacy, and dignity of program faculty[[12]](#footnote-12) and staff are written, disseminated, and applied consistently and equitably.

Evidence of Compliance:

Narrative:

* Provide an example of how policies are applied equitably.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**3F** Policies, procedures, and practices exist for handling complaints[[13]](#footnote-13) that fall outside the realm of due process[[14]](#footnote-14), including a prohibition of retaliation following complaint submission. The policies are written, disseminated, and applied consistently and equitably. Records of complaints about the program, including the nature of the complaint and the disposition of the complaint, are maintained by the program.

Evidence of Compliance:

Narrative:

* Provide the relevant institutional or program policy and procedure that addresses handling complaints that fall outside due process (e.g., complaints from prospective, clinical education sites, employers of graduates, the general public).
* Identify where the policy and procedure for handling complaints that fall outside the realm of due process is available to internal and external stakeholders.

Provide the URL from the program’s or institutional website the statement is located.

* Describe how the records of complaints are, or would be, maintained by the program.

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**3G** Program specific policies and procedures are compatible with institutional policies and with applicable law.[[15]](#footnote-15)

Evidence of Compliance:

Narrative:

* List the program-specific policies and procedures that differ from those of the institution (e.g., admissions procedures, grading policies, policies for progression through the program, policies related to clinical education) and describe how the policies and procedures differ and why.
* For program policies and procedures that differ from those of the institution:
	+ If applicable, explain how the program determines that program policies and procedures comply with applicable law.
	+ Describe how institutional approval is obtained for program policies and procedures that differ from those of the institution.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**3H** Program policies, procedures, and practices provide for compliance with accreditation policies and procedures including:

**3H1** maintenance of accurate information, easily accessible[[16]](#footnote-16) to the public, on the program website regarding accreditation status (including CAPTE logo and required accreditation statement) and current student achievement measures;

**3H2** timely submission of required fees and documentation, including reports of graduation rates, performance on state licensing examinations, and employment rates;

**3H3** following policies and procedures of CAPTE as outlined in the CAPTE Rules of Practice and Procedure;

**3H4** timely notification of expected or unexpected substantive change(s) within the program and of any change in institutional accreditation status or legal authority to provide post-secondary education; and

**3H5** coming into compliance with accreditation Standards and Required Elements within two years of being determined to be out of compliance.[[17]](#footnote-17)

Evidence of Compliance:

Narrative:

* Identify who is responsible for maintaining compliance with accreditation policies and procedures.
* Provide recent examples that demonstrate adherence to established policies and procedure.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**Standard 4:**

**The program faculty are qualified for their roles and effective in carrying out their responsibilities.**

**REQUIRED ELEMENTS:**

**Individual Academic Faculty[[18]](#footnote-18)**

**4A** Each core faculty[[19]](#footnote-19) member, including the program director and clinical education coordinator, has doctoral preparation[[20]](#footnote-20), contemporary expertise[[21]](#footnote-21) in assigned teaching areas, and demonstrated effectiveness in teaching and student evaluation. In addition, core faculty who are PTs and who are teaching clinical PT content hold an active, unrestricted PT license in any United States jurisdiction and the state where the program is located if required by that state’s jurisdiction. For CAPTE accredited programs outside the United States, core faculty who are PTs and who are teaching clinical PT content are licensed or regulated in accordance with their country's regulations. (PROVISO: CAPTE began enforcing the requirement for doctoral preparation of all core faculty effective January 1, 2020, except for individuals who are enrolled in an academic doctoral degree[[22]](#footnote-22) program on that date, in which case the effective date will be extended to December 31, 2025; this will be monitored in the Annual Accreditation Report.)

Evidence of Compliance:

Narrative:

* The only response needed in the 4A text box is to refer the reader to the Core Faculty Detail Section for each core faculty member.

Portal Fields: on the Core Faculty Information Page:

* In completing the Qualifications box on this Portal page:
	+ Identify each core faculty’s doctoral preparation.
	+ Describe the individual’s effectiveness in teaching and student evaluation;
	+ For core faculty who are PTs and are teaching clinical PT content, identify if each holds an active, unrestricted PT license in any United States jurisdiction and the state where the program is located, if required by that state’s jurisdiction. Note: If clinical practice is required for licensure and the individual is not engaged in clinical practice, provide a statement to that effect and provide the reference in the State Practice Act that would preclude licensure;
	+ Identify teaching assignments by prefix, number and title and indicate content assigned and role in course; and
	+ Provide evidence of the individual’s contemporary expertise specific to assigned teaching content in the DPT program. This evidence can include:
		- Education (including post-professional academic work, residency, and continuing education);
		- Clinical expertise (specifically related to teaching areas; e.g.: certification as a clinical specialist, residency);
		- Consultation and service related to teaching areas;
		- Course materials that reflect level and scope of contemporary knowledge and skills (e.g., course objectives, examinations, assignments, readings/references, learning experiences); and
		- Other evidence that demonstrates contemporary expertise, for example
			* Scholarship (publications and presentations related to teaching areas);
			* Written evidence of evaluation of course materials (e.g., course syllabus, learning experiences, assessments of student performance) by a content expert;
			* Independent study and evidence-based review that results in critical appraisal and in-depth knowledge of subject matter (include description of resources used and time frame for study); and
			* Formal mentoring (include description of experiences, time frame and qualifications of mentor).

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**4B** Each core faculty member has a well-defined, ongoing scholarly agenda[[23]](#footnote-23) that reflects contributions to: (1) the development or creation of new knowledge, OR (2) the critical analysis and review of knowledge within disciplines or the creative synthesis of insights contained in different disciplines or fields of study, OR (3) the application of findings generated through the scholarship of integration or discovery to solve real problems in the professions, industry, government, and the community, OR (4) the development of critically reflective knowledge about teaching and learning, OR (5) the identification and resolution of pressing social, civic, and ethical problems through the scholarship of engagement.

Evidence of Compliance:

Narrative:

* Briefly describe how the core faculty scholarly agendas fit within the context of the program’s or institution’s mission and expected outcomes.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**4C** Each corefaculty member has a record of institutional or professional service[[24]](#footnote-24).

Evidence of Compliance:

Narrative:

* Describe the program’s and/or the institution’s expectations related to service accomplishments for core faculty.
* Briefly summarize core faculty members’ service activities.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**4D** Each associated[[25]](#footnote-25) faculty member has contemporary expertise in assigned teaching areas and demonstrated effectiveness in teaching and student evaluation.

Evidence of Compliance:

Narrative:

* For each associated faculty who is involved in less than 50% of a course, provide the following information: name and credentials, content taught, applicable course number(s) and title(s), total contact hours, and source(s) of contemporary expertise specifically related to assigned responsibilities.
* For associated faculty who are involved in 50% or more of the course including lab assistants in courses where they are responsible for working with students for 50% or more of lab contact hours, the only response needed in the 4D text box is to refer the reader to the Associated Faculty Detail Section for each associated faculty member.

Portal Fields: on the Associated Faculty Information Page:

* In completing the Qualifications box on this Portal page:
	+ Describe the individual’s effectiveness in teaching and student evaluation;
	+ Identify teaching assignments by prefix, number and title and indicate content assigned and role in course; and
	+ Provide evidence of the individual’s contemporary expertise specific to assigned teaching content. This evidence can include:
		- Education (including post-professional academic work, residency, and continuing education);
		- Licensure, if required by the state in which the program is located;
		- Clinical expertise (specifically related to teaching areas; e.g.: certification as a clinical specialist, residency);
		- Consultation and service related to teaching areas;
		- Course materials that reflect level and scope of contemporary knowledge and skills (e.g., course objectives, examinations, assignments, readings/references, learning experiences); and
		- Other evidence that demonstrates contemporary expertise, for example:
			* Scholarship (publications and presentations related to teaching areas);
			* Written evidence of evaluation of course materials (e.g., course syllabus, learning experiences, assessments of student performance) by a content expert;
			* Independent study and evidence-based review that results in critical appraisal and in-depth knowledge of subject matter (include description of resources used and time frame for study); and
			* Formal mentoring (include description of experiences, time frame and qualifications of mentor).

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**4E** Formal evaluation of each core faculty member occurs in a manner and timeline consistent with applicable institutional policy. The evaluation includes assessments of teaching, scholarly activity and service, and any additional responsibilities. The evaluation results in an organized faculty development plan that is linked to the assessment of the individual core faculty member and to program improvement.

Evidence of Compliance:

Narrative:

* Describe the faculty evaluation process, including how it addresses teaching, service, scholarship and any additional responsibilities.
* Provide a recent (within past five years) example for each core faculty of faculty development activities that have been based on needs of the faculty and for program improvement.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**4F** Regular evaluation of associated faculty occurs and results in a plan to address identified needs.

Evidence of Compliance:

Narrative:

* Describe the process used to determine the associated faculty development needs, individually and, when appropriate, collectively.
* Describe and provide examples of development activities used by the program to address identified needs of associated faculty.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**Program Director[[26]](#footnote-26)**

**4G** The program director demonstrates the academic and professional qualifications and relevant experience in higher education requisite for providing effective leadership for the program, the program faculty, and the students. These qualifications include all of the following:

* is a physical therapist who holds an active, unrestricted PT license in any United States jurisdiction and the state where the program is located if required by that state’s jurisdiction. For CAPTE accredited programs outside the United States, the program director is licensed or regulated as a PT in accordance with their country's regulations;
* has an earned academic doctoral degree or previous CAPTE-granted exemption;
* holds the rank of associate professor, professor, clinical associate professor, or clinical professor;
* has a minimum of six years of full-time[[27]](#footnote-27) higher education experience, with a minimum of three years of full-time experience as a core faculty member in a CAPTE accredited entry-level physical therapist education program.

Evidence of Compliance:

Narrative:

* Describe how the program director meets the following qualifications:
	+ is a physical therapist;
	+ holds an active, unrestricted PT license in any United States jurisdiction and the state where the program is located, if required by that state’s jurisdiction. Note: If clinical practice is required for licensure and the individual is not engaged in clinical practice, provide a statement to that effect and provide the reference in the State Practice Act that would preclude licensure;
	+ has an earned academic doctoral degree or previous CAPTE-granted exemption;
	+ has the rank of associate professor, professor, clinical associate professor, or clinical professor; and
	+ has a minimum of six years of full-time higher education experience, with a minimum of three years of full-time experience as a core faculty member in a CAPTE accredited entry-level physical therapist education program.

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**4H** The program director provides effective leadership for the program including, but not limited to, responsibility for communication, program assessment and planning, fiscal management, and faculty evaluation.

Evidence of Compliance:

Narrative:

* Describe the effectiveness of the mechanisms used by the program director to communicate with program faculty and other individuals and departments (admissions, library, etc.) involved with the program.
* Describe the responsibility, authority and effectiveness of the program director for assessment and planning.
* Describe the responsibility, authority and effectiveness of the program director in fiscal planning and allocation of resources, including long-term planning.
* Describe the responsibility, authority and effectiveness of the program director for faculty evaluation.
* Describe the process used to assess the program director as an effective leader.
* Provide evidence of effective leadership which might relate to:
	+ A vision for physical therapist professional education;
	+ Understanding of and experience with curriculum content, design, and evaluation;
	+ Employing strategies to promote and support professional development;
	+ Proven effective interpersonal and conflict management skills;
	+ Abilities to facilitate change;
	+ Negotiation skills (relative to planning, budgeting, funding, program faculty status, program status, employment and termination, space, and appropriate academic and professional benefits);
	+ Effective experience in strategic planning;
	+ Active service on behalf of physical therapist professional education, higher education, the larger community, and organizations related to their academic interest;
	+ Effective management of human and fiscal resources;
	+ Commitment to lifelong learning;
	+ Active role in institutional governance; and
	+ Program accomplishments.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**Clinical Education Coordinator[[28]](#footnote-28)**

**4I** The clinical education coordinator is a physical therapist who holds an active, unrestricted PT license in any United States jurisdiction and the state where the program is located if required by that state’s jurisdiction, and has a minimum of three years of full-time post-licensure clinical practice. Two years of clinical practice must include experience as a CCCE or CI in physical therapy, or a minimum of two years of experience in teaching, curriculum development and administration in a physical therapy education program. For CAPTE accredited programs outside the United States, the clinical education coordinator is licensed or regulated in accordance with their country's regulations.

Evidence of Compliance:

Narrative:

* Identify the core faculty member(s) who is/are designated as the clinical education coordinator.
* If more than one core faculty member is assigned as a clinical education coordinator, describe the role and responsibilities of each.
* Describe how the clinical education coordinator meets the following qualifications:
	+ Is a physical therapist;
	+ Holds an active, unrestricted PT license in any United States jurisdiction and the state where the program is located if required by that state’s jurisdiction. Note: If clinical practice is required for licensure and the individual is not engaged in clinical practice, provide a statement to that effect and provide the reference in the State Practice Act that would preclude licensure;
	+ A minimum of three years of full time (or equivalent) post-licensure clinical practice; and
		- A minimum of two years of clinical practice as a CCCE and/or CI or two years of experience in teaching, curriculum development and administration in a PT program.

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**4J** The clinical education coordinator is effective in developing, conducting, and coordinating the clinical education program.

Evidence of Compliance:

Narrative:

* Describe the process to assess the effectiveness of the clinical education coordinator(s).
* Describe the effectiveness of the clinical education coordinator(s) in planning, developing, coordinating, and facilitating the clinical education program, including effectiveness in:
	+ Organizational, interpersonal, problem-solving and counseling skills; and
	+ Ability to work with clinical education faculty (CCCEs and CIs) to address the diverse needs of the students.
* Describe the mechanisms used to communicate information about clinical education with core faculty, clinical education sites, clinical education faculty (CCCEs and CIs), and students.
	+ Describe how the clinical education faculty are informed of their responsibilities.
* Describe the timing of communications related to clinical education to the core faculty, clinical education sites, clinical education faculty (CCCEs and CIs), and students.
* Describe the process used to monitor that the academic regulations are upheld.
* Describe the methods used to assign students to clinical education experiences.
* Describe how the program works to ensure that the supervision and feedback provided to students is appropriate for each student in each clinical education experience, assuming that the student is progressing through the program in the expected manner.
* Describe how the need for an altered level of clinical supervision and feedback is determined, communicated to the clinical education faculty, and monitored during the experience.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**Collective Academic Faculty**

**4K** The collective core and associated faculty include an effective blend of individuals with doctoral preparation (including at least 50% of core faculty with academic doctoral degrees) and individuals with clinical specialization sufficient to meet program goals and expected program outcomes as related to program mission, institutional expectations and assigned program responsibilities.

Evidence of Compliance:

Narrative:

* Describe the institutional expectations for doctoral preparation of faculty.
* Indicate the percentage of core faculty who hold an academic doctoral degree. If less than 50% of the core faculty hold an academic doctoral degree, provide the plan and timeline to meet this expectation.
* Describe the blend of clinical specialization of the core and associated faculty in the program.
* Describe the effectiveness of the blend to meet program goals and expected outcomes as related to program mission and institutional expectations and to meet assigned program responsibilities.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**4L** The collective core faculty initiate, adopt, evaluate, and uphold academic regulations specific to the program and compatible with institutional policies, procedures and practices. The regulations address, but are not limited to, admission requirements; the clinical education program; grading policy; minimum performance levels, including those relating to professional and ethical behaviors; and student progression through the program.

Evidence of Compliance:

Narrative:

* Describe the process by which academic regulations specific to the program are developed, adopted and evaluated by the core faculty.
* Describe the process used to verify that the academic regulations are upheld.
* Describe the process that would be used to address violations of academic regulations. Provide examples, if available.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**4M** The collective core faculty have primary responsibility for development, review and revision of the curriculum with input from other appropriate communities of interest.

Evidence of Compliance:

Narrative:

* Describe the responsibility of the core faculty for the development, review, and revision of the curriculum plan.
* Provide examples of community of interest involvement in curriculum development, review and revision.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**4N** The collective core faculty are responsible for assuring that students are professional, competent, and safe and ready to progress to clinical education.

Evidence of Compliance:

Narrative:

* Describe how the core faculty determine in which skills students are expected to be competent and safe.
* Describe the processes used by the core faculty to determine students are professional, competent and safe in the skills identified by the core faculty and that the students are ready to engage in clinical education.
* Describe how the program ensures that critical safety elements are identified in the competency testing process.
* Describe how grading procedures for the competency testing process ensure students are not placed in the clinical setting without being determined to be competent and safe.
* Describe the criteria upon which the determination is made that each student is ready to engage in clinical education.
* Describe what happens if a student is found to not be safe and ready to progress to clinical education.
* Describe the mechanisms used to communicate to students and clinical education faculty the specific skills in which students must be competent and safe.

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**Clinical Education Faculty[[29]](#footnote-29)**

**4O** Clinical instructors are licensed physical therapists, with a minimum of one year of full time (or equivalent) post-licensure clinical experience, and are effective role models and clinical teachers.

Evidence of Compliance:

Narrative:

* Describe how the program determines that clinical instructors are meeting the expectations of this criteria, including but not limited to:
	+ the program’s expectations for the clinical competence of the CIs;
	+ the program’s expectations for clinical teaching effectiveness of the CIs;
	+ how the clinical education sites are informed of these expectations; and
	+ how these expectations are monitored.
* Summarize the qualifications of the CIs who provided clinical instruction for at least 160 hours to the same student in the last academic year (e.g., years of experience, specialist certification, or other characteristics expected by the program).
* Describe the program’s expectations for clinical teaching effectiveness of the CIs.
* If not using the Web CPI, identify how CIs are trained in completing the tool to assess student performance.
* Describe how the program determines that the tool used for the evaluation of student performance in the clinical setting has been completed correctly.
* Summarize the teaching effectiveness, including the ability to assess and document student performance, of the CIs who provided clinical instruction for at least 160 hours to the same student in the last academic year.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**Standard 5:**

**The program recruits, admits and graduates students consistent with the missions and goals of the institution and the program and consistent with societal needs for physical therapy services for a diverse population.**

**REQUIRED ELEMENTS:**

**5A** Program policies, procedures, and practices related to student recruitment and admission are based on appropriate and equitable criteria and applicable law, are written and made available to prospective students, and are applied consistently and equitably. Recruitment practices are designed to enhance diversity[[30]](#footnote-30) of the student body.

Evidence of Compliance:

Narrative:

* Provide the planned class size and the rationale for it.
* Describe procedures for recruitment of students.
* Describe the admissions criteria for the program, including any special considerations used by the program.
* Describe the admission procedures.
* Describe procedures to maintain planned class size. Identify related policies to prevent over enrollment.
* Describe how the program ensures that the admission procedures are applied equitably, including how prospective students’ rights are protected.
* Describe the program process for determining the acceptance of credit in transfer from other institutions.
* Describe the efforts of the program to recruit a diverse student population.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**5B** Prospective and enrolled students are provided with relevant information about the institution and program that may affect them including, but not limited to, catalogs, handbooks, academic calendars, grading policies, total cost to student, financial aid, the program’s accreditation status, the process to register a complaint with CAPTE, outcome information, and other pertinent print and/or electronic information. Materials related to the institution and program are accurate, comprehensive, current, and provided to students in a timely manner.

Evidence of Compliance:

Narrative:

* Describe how the following information is provided to prospective and enrolled students:
	+ Catalogs;
	+ Recruitment and admissions information, including admissions criteria, transfer of credit policies and any special considerations used in the process;
	+ Academic calendars;
	+ Grading policies;
	+ Technical standards or essential functions, if used;
	+ Acceptance and matriculation rates;
	+ Student outcomes including, but limited to, the most current two year data available for graduation rates, employment rates, pass rates on licensing examinations (first-time and ultimate);
	+ Costs of the program (including tuition, fees, and refund policies);
	+ Financial aid; and
	+ Enrollment agreement, if used.
* Describe how the following information is communicated to enrolled students including:
	+ Process for filing complaint with CAPTE;
	+ Job/career opportunities;
	+ Availability of student services;
	+ Health and professional liability insurance requirements;
	+ Information about the curriculum;
	+ Information about the clinical education program, including travel expectations to clinical sites;
	+ Required health information;
	+ Potential for other clinical education requirements, such as drug testing and criminal background checks; and
	+ Access to and responsibility for the cost of emergency services in off-campus educational experiences.

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**5C** Enrollment agreements[[31]](#footnote-31), if used, comply with institutional accrediting agency and state requirements and are only executed with a prospective student after disclosure of the information delineated in 5B and formal admission to the program has occurred.

Evidence of Compliance:

Narrative:

* Identify whether enrollment agreements are used.
* If used, provide evidence that the agreements are consistent across enrollees for a given cohort.
* If used:
	+ Describe the institutional accrediting agency and state requirements for using enrollment agreements and explain how the current agreement complies with these requirements;
	+ Indicate when in the enrollment process the student is required to sign the agreement; and
	+ Provide evidence that, prior to having to sign the enrollment agreement, prospective students are provided with:
		- Catalogs;
		- Recruitment and admissions information, including transfer of credit policies and any special considerations used in the process;
		- Academic calendars;
		- Grading policies;
		- Accreditation status of the institution and the program, including contact information for CAPTE;
		- Technical standards or essential functions, if available;
		- Acceptance and matriculation rates;
		- Student outcomes, including graduation rates, employment rates, pass rates on licensing examinations, and other outcome measures;
		- Costs of the program (including tuition, fees, and refund policies);
		- Any additional fees associated with verification of identity for distance education purposes;
		- Financial aid; and
		- Enrollment agreement.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**5D** Policies, procedures, and practices that affect the rights, responsibilities, safety, privacy, and dignity of program students are written and provided to students and applied consistently and equitably.

Evidence of Compliance:

Narrative:

* Describe how policies and procedures that affect students are disseminated to students and program faculty.
* Provide examples of situations that illustrate the equitable application of policies that relate to the rights of students.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**5E** Policies, procedures, and practices related to student retention,[[32]](#footnote-32) student progression[[33]](#footnote-33) and dismissal through the program are based on appropriate and equitable criteria and applicable law, are written and provided to students, and are applied consistently and equitably. Retention practices support a diverse student body.

Evidence of Compliance:

Narrative:

* Describe the mechanism by which students receive regular reports of academic performance and progress.
* Describe the mechanism by which students receive regular reports of their clinical performance and progress, including the minimal expectations of the program for frequency of these reports.
* Describe the resources available to support student retention and progression of students through the program.
* Describe remediation activities, if provided, when knowledge, behavior or skill deficits, or unsafe practices are identified.
* Describe how retention practices support a diverse student body.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**Standard 6:**

**The program has a comprehensive curriculum plan.**

**REQUIRED ELEMENTS:**

**6A** The comprehensive curriculum plan[[34]](#footnote-34) is based on: (1) information about the contemporary practice[[35]](#footnote-35) of physical therapy; (2) standards of practice; and (3) current literature, documents, publications, and other resources related to the profession, to the delivery of health care services, to physical therapy education, and to educational theory.

Evidence of Compliance:

Narrative:

* Describe how the curriculum plan is based on information about the contemporary practice of physical therapy; standards of practice; and current literature, documents, publications, and other resources related to the profession, to physical therapy professional education, and to educational theory.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**6B** The curriculum plan includes an expectation that students enter the professional program with a baccalaureate degree. Alternatively, students may have three years of undergraduate education that includes in-depth upper division study in one discipline comparable to a minor at the institution prior to entering the professional program.

Evidence of Compliance:

Narrative:

* If the program requires a baccalaureate degree prior to admission, a statement to that effect is the only response required.
* If the program does not require a baccalaureate degree prior to admission, provide evidence that students enter the program with a balance of course work, including upper division courses in at least one content area that is the equivalent of a minor at the institution.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**6C** The specific prerequisite course work is determined by the program’s curriculum plan.

Evidence of Compliance:

Narrative:

* Identify the prerequisite course work and describe the rationale for inclusion of each specific prerequisite course, including the knowledge and skills that students are expected to possess upon entrance into the professional program.
* Analyze the adequacy of the prerequisite course work to prepare students to be successful in the professional program.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**6D** The curriculum plan includes a description of the curriculum model[[36]](#footnote-36) and the educational principles on which it is built.

Evidence of Compliance:

Narrative:

* Describe the curriculum model and the educational principles of the curriculum.
* Provide examples of how the educational principles translate into learning experiences.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**6E** The curriculum plan includes a series of organized, sequential and integrated courses designed to facilitate achievement of the expected student outcomes, including the expected student learning outcomes described in Standard 7. The curriculum includes organized sequences of learning experiences that prepare students to provide physical therapy care to individuals with diseases/disorders involving the major systems[[37]](#footnote-37), individuals with multiple system disorders, and individuals across the lifespan and continuum of care, including individuals with chronic illness. The clinical education component provides organized and sequential experiences coordinated with the didactic component of the curriculum. Clinical education includes both integrated[[38]](#footnote-38) and full-time[[39]](#footnote-39) terminal experiences.

Evidence of Compliance:

Narrative:

* Describe how the courses are organized, sequenced, and integrated, including clinical education.
* Provide the rationale for the model used to integrate the didactic and clinical education portions of the curriculum; include a description of the course work that prepares students for each clinical education experience.
* Provide examples of sequential and integrated learning experiences that prepare students to provide care to individuals with orthopedic, neurological, and cardiopulmonary conditions and to geriatric and pediatric populations.
* Describe how the organization, sequencing, and integration of courses facilitate student achievement of the expected outcomes.
* **For Initial Accreditation ONLY:** if curricular changes have occurred since the program started, provide the requested information based on the curriculum experienced by the charter class. Summarize curricular changes, including rationale for changes, in Element 2C.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**6F** The didactic and clinical curriculum includes interprofessional education[[40]](#footnote-40); learning activities are directed toward the development of interprofessional competencies including, but not limited to, values/ethics, communication, professional roles and responsibilities, and teamwork. NOTE: This element will become effective January 1, 2018.

Narrative:

* Describe learning activities that involve students, faculty and/or practitioners from other health care professions.
* Describe the effectiveness of the learning activities in preparing students and graduates for team-based collaborative care.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**6G** The curriculum plan includes course syllabi that are comprehensive and inclusive of all CAPTE expectations.

Evidence of Compliance:

Narrative:

* Only response needed is to refer the reader to the course syllabi that are accessed from the WinZip file.
* **Note**: for **Initial Accreditation ONLY:** provide the curriculum and syllabi for the charter class as CAPTE must make an accreditation decision based on their curriculum. If curricular changes have occurred since the program started, provide a summary of the changes and the rational for the changes in Element 2C. Contact Accreditation Staff to discuss how to provide syllabi for current curriculum.
* **NOTE:** Each syllabus must include at least the following:
	+ title and number;
	+ description;
	+ department offering course;
	+ credit hours;
	+ instructor(s);
	+ clock hours (lecture and laboratory) and schedule;
	+ course prerequisites;
	+ course objectives;
	+ outline of content and assigned instructor;
	+ description of teaching methods and learning experiences;
	+ methods of student evaluation/grading; and
	+ textbook and other learning resources.

Appendices & On-site Material: See instructions for development of reports

**Note**: If the program or institution requires a syllabus format that does not include all of the above, the required syllabi plus an addendum is acceptable. For the purpose of accreditation review, all of the above are required.

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**6H** The curriculum plan includes learning objectives[[41]](#footnote-41) stated in behavioral terms that reflect the breadth and depth[[42]](#footnote-42) of the course content and describe the level of student performance expected.

Evidence of Compliance:

Narrative:

* Describe the adequacy of the objectives, in the aggregate, to reflect the depth and breadth needed to meet expected student performance outcomes.
* Describe the extent to which course objectives, in the aggregate, are written in behavioral (measurable and observable) terms.
* Provide two examples of how expected competencies (as delineated by learning objectives) progress from introduction of core knowledge in didactic courses to demonstration of performance in the academic setting to the expected level of clinical performance.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**6I** The curriculum plan includes a variety of effective instructional methods[[43]](#footnote-43) selected to maximize learning. Instructional methods are chosen based on the nature of the content, the needs of the learners, and the defined expected student outcomes.

Evidence of Compliance:

Narrative:

* Describe the variety of instructional methods and learning experiences used in the curriculum to facilitate students’ achievement of the objectives.
* Describe the rationale for the selection of instructional methods and learning experiences used in the curriculum.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**6J** The curriculum plan includes a variety of effective tests and measures[[44]](#footnote-44) and evaluation processes[[45]](#footnote-45) used by faculty to determine whether students have achieved the learning objectives. Regular, individual testing and evaluation of student performance in the cognitive, psychomotor, and affective domains is directly related to learning objectives and includes expectations for safe practice during clinical education experiences.

Evidence of Compliance:

Narrative:

* Describe the variety of evaluation mechanisms, including formative and summative, used by the program to measure students’ achievement of objectives. Describe the timing of student evaluation across the curriculum, in didactic, laboratory, and clinical education courses, including demonstrating that performance based competencies are assessed in the academic setting prior to clinical performance.
* Describe how the program ensures that evaluations used by the program to evaluate student performance are appropriate for the instructional content and for the expected level of student performance.
* Identify instrument(s) used to assess student performance during clinical education experiences.
* Describe how the program ensures that students have achieved the objectives stated for each clinical education experience.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**6K** If the curriculum plan includes courses offered by distance education[[46]](#footnote-46) methods, the program provides evidence[[47]](#footnote-47) that:

Evidence of Compliance:

Narrative:

* Describe the use of distance education methods in the curriculum, if any. If no distance education methods are used, state that for each Element 6K1 through Element 6K8.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **6K1** faculty teaching by distance are effective in the provision of distance education;

Evidence of Compliance:

Narrative:

* Provide evidence that faculty teaching by distance are effective in the provision of distance education.

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **6K2** the rigor[[48]](#footnote-48) of the distance education courses is equivalent to that of site-based courses;

Evidence of Compliance:

Narrative:

* Describe how the program ensures the rigor of the distance education courses.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **6K3** student performance meets the expectations of the faculty as described in course syllabi and demonstrated in student assessment;

Evidence of Compliance:

Narrative:

* Describe how the program ensures student performance in distance education courses meets the expectations described in course syllabi.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **6K4** there is a mechanism for determining student identity during course activities and when testing occurs at a distance;

Evidence of Compliance:

Narrative:

* Describe the mechanism(s) used to determine student identity during course activities and when testing occurs at a distance.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **6K5** there is a mechanism for maintaining test security and integrity when testing occurs at a distance;

Evidence of Compliance:

Narrative:

* Describe the mechanism(s) used to maintain test security and integrity when testing occurs at a distance.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **6K6** there is a mechanism for maintaining student privacy as appropriate;

Evidence of Compliance:

Narrative:

* Describe the mechanism(s) used to maintain student privacy during distance education courses (e.g., distribution of grades on tests and assignments).

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **6K7** students have been informed of any additional fees related to distance education; and

Evidence of Compliance:

Narrative:

* Identify additional student fees, if any, for distance education courses.
* If there are additional student fees for distance education courses, describe how and when students are informed of the fees.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **6K8** distance education students have access to academic, health, counseling, disability and financial aid services commensurate with services that students receive on campus.

Evidence of Compliance:

Narrative:

* Describe how distance education students have access to academic, health, counseling, disability and financial aid services.
* Compare the academic, health, counseling, disability and financial aid services available to students taking distance education courses to those that are available for students taking on-site courses.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**6L** The curriculum plan includes clinical education experiences[[49]](#footnote-49) for each student that encompass, but are not limited to:

 **6L1** management of patients/clients with diseases and conditions representative of those commonly seen in practice across the lifespan and the continuum of care;

Evidence of Compliance:

Narrative:

* Describe the program’s expectations for types of patients and treatment that each student will have worked with by the end of the program.
* Describe the program’s expectations for management of patients/clients across the lifespan and continuum of care.
* Describe how the program monitors that each student has the required experiences.
* Describe the range of experiences other than those required that students have had.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **6L2** practice in settings representative of those in which physical therapy is commonly practiced;

Evidence of Compliance:

Narrative:

* Describe the range of practice settings available.
* Describe the clinical education practice settings in which students are required to participate.
* Describe how the program monitors that each student has the required experiences.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **6L3** involvement in interprofessional practice[[50]](#footnote-50)

Evidence of Compliance:

Narrative:

* Describe the program’s expectation for opportunities for involvement in interprofessional practice during clinical education experiences.
* Provide evidence that students have opportunities for interprofessional practice.

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **6L4** direction and supervision of the physical therapist assistant and other physical therapy personnel; and

Evidence of Compliance:

Narrative:

* Describe the program’s expectation for opportunities for direction and supervision of physical therapist assistants and other physical therapy personnel during clinical experiences.
* Provide evidence the students have an opportunity for direction and supervision of PTAs or other physical therapy personnel.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **6L5** other experiences that lead to the achievement of the program’s defined expected student outcomes.

Evidence of Compliance:

Narrative:

* Describe the program’s expectation for other clinical education experiences that lead to the achievement of the program’s expected student outcomes.
* Provide evidence that the students have these experiences.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**6M** The series of courses included in the professional curriculum is comprised of at least 90 semester credit hours (or the equivalent) and is completed (including clinical education) in no less than 6 semesters[[51]](#footnote-51) or the equivalent. The clinical education component of the curriculum includes a minimum of 30 weeks/1,050 hours of full-time clinical education experiences.

Evidence of Compliance:

Narrative:

* Identify the length of the program in semesters (or equivalent) and in semester credit hours (or equivalent).
* Identify the number of weeks of full time clinical education.
* If program is offered part-time, provide evidence that the credits and contact hours are the same as for the full-time programs.

Appendices & On-site Material: See SSR Instructions & Forms

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**6N** The institution awards the Doctor of Physical Therapy (DPT) as the first professional degree for physical therapists at satisfactory completion of the program.

Evidence of Compliance:

Narrative:

* State the degree granted.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**Standard 7**

**The curriculum includes content, learning experiences, and student testing and evaluation processes designed to prepare students to achieve educational outcomes required for initial practice in physical therapy and for lifelong learning necessary for functioning within an ever-changing health care environment.**

**REQUIRED ELEMENTS:**

**7A** The physical therapist professional curriculum includes content and learning experiences in the biological, physical, behavioral and movement sciences necessary for entry level practice. Topics covered include anatomy, physiology, genetics, exercise science, biomechanics, kinesiology, neuroscience, pathology, pharmacology, diagnostic imaging, histology, nutrition, and psychosocial aspects of health and disability.

Evidence of Compliance:

Narrative:

* Describe where and how each of the delineated biological and physical sciences content areas is included in the professional curriculum. Do not include prerequisite courses.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**7B** The physical therapist professional curriculum includes content and learning experiences in communication, ethics and values, management, finance, teaching and learning, law, clinical reasoning, evidenced-based practice and applied statistics.

Evidence of Compliance:

Narrative:

* Describe where and how each of the delineated content areas is included in the professional curriculum.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**7C** The physical therapist professional curriculum includes content and learning experiences about the cardiovascular, endocrine and metabolic, gastrointestinal, genital and reproductive, hematologic, hepatic and biliary, immune, integumentary, lymphatic, musculoskeletal, nervous, respiratory, and renal and urologic systems; system interactions; differential diagnosis; and the medical and surgical conditions across the lifespan commonly seen in physical therapy practice.

Evidence of Compliance:

Narrative:

* Describe where and how each of the delineated clinical sciences content areas is included in the professional curriculum.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**7D** The physical therapist professional curriculum includes content and learning experiences designed to prepare students to achieve educational outcomes required for initial practice of physical therapy. Courses within the curriculum include content designed to prepare program students to:

Evidence of Compliance:

Narrative:

* For each of the following elements:
	+ Describe where the content is presented in the curriculum and provide example(s)/descriptions(s) of the learning experiences that are designed to meet the practice expectations (i.e., describe where and how the content is taught throughout the curriculum);
	+ Provide a 2-5 examples of course objectives that demonstrate the highest expected level of student performance, include course **prefix and number, course name, objective number and the full wording of the objective.** Include objectives from clinical education courses, if applicable. If the expectation is a curricular theme, examples of course objectives from multiple courses are required, up to a maximum of 10 objectives; and
	+ Describe outcome data that may include qualitative and/or quantitative evidence, which demonstrates the level of actual student achievement for each practice expectation 7D1-7D43. **For Initial Accreditation ONLY**, describe the planned outcome and how the program will determine the actual level of student achievement for each practice expectation **For Initial Accreditation ONLY:** if curricular changes have occurred since the program started, provide the requested information based on the curriculum experienced by the charter class. Contact Accreditation Staff to discuss what additional information should be provided for the current curriculum.
* If the program teaches content beyond what is addressed in Elements 7D1-7D43, identify the content, where and how it is taught and the highest expected performance level. If being taught to competency, identify how and where competency is tested.

Appendices & On-site Material: See SSR Instructions & Forms

**Note to team: add a team comment box here if there is a need for a comment that pertains to all or most of the 7Ds**

| The practice expectations in 7D have been placed into a table that is part of the final Visit Report. **This is the only place for the team to comment on individual practice expectations.** Based on your review of all materials and on-site interviews, please indicate if the objectives and learning experiences **for each practice expectation** appear to be reflective of entry level practice (can use yes/no or √).  | **Indicate if reflective of entry level practice** | **COMMENT:****Comment is needed only when the practice expectation is a strength of the program OR does NOT appear to be sufficiently addressed in objectives or learning experiences or based on interviews. Summarize the sources of information that led you to this opinion, for example, include comments from interviews or other supporting evidence (history of student performance, graduate or employer survey data, course materials from either the SSR or viewed on site, etc.)** **If more specific objectives are found during your review, identify the course and objective #(s).****FOR ALL OTHERS, NO COMMENT IS NEEDED.** |
| --- | --- | --- |
| Objectives  | Learning experiences  |
| Professional Ethics, Values and Responsibilities 7D1 Adhere to legal practice standards, including all federal, state, and institutional regulations related to patient/client care and fiscal management. |  |  |  |
| 7D2 Report to appropriate authorities suspected cases of abuse of vulnerable populations |  |  |  |
| 7D3 Report to appropriate authorities suspected cases of fraud and abuse related to the utilization of and payment for physical therapy and other health care services. |  |  |  |
| 7D4 Practice in a manner consistent with the APTA *Code of Ethics*. |  |  |  |
| 7D5 Practice in a manner consistent with the APTA *Core Values*. |  |  |  |
| 7D6 Implement, in response to an ethical situation, a plan of action that demonstrates sound moral reasoning congruent with core professional ethics and values.  |  |  |  |
| 7D7 Communicate effectively with all stakeholders, including patients/clients, family members, caregivers, practitioners, interprofessional team members, consumers, payers, and policymakers. |  |  |  |
| 7D8 Identify, respect, and act with consideration for patients’/clients’ differences, values, preferences, and expressed needs in all professional activities. |  |  |  |
| 7D9 Access and critically analyze scientific literature. |  |  |  |
| 7D10 Apply current knowledge, theory, and professional judgment while considering the patient/client perspective, the environment, and available resources. |  |  |  |
| 7D11 Identify, evaluate and integrate the best evidence for practice with clinical judgment and patient/client values, needs, and preferences to determine the best care for a patient/client. |  |  |  |
| 7D12 Effectively educate others using teaching methods that are commensurate with the needs of the learner, including participation in the clinical education of students. |  |  |  |
| 7D13 Participate in professional and community organizations that provide opportunities for volunteerism, advocacy and leadership. |  |  |  |
| 7D14 Advocate for the profession and the healthcare needs of society through legislative and political processes. |  |  |  |
| 7D15 Identify career development and lifelong learning opportunities, including the role of the physical therapist in the clinical education of physical therapist students. |  |  |  |
| Patient/Client ManagementScreening 7D16 Determine when patients/clients need further examination or consultation by a physical therapist or referral to another health care professional. |  |  |  |
| Examination, Evaluation and Diagnosis 7D17 Obtain a history and relevant information from the patient/client and from other sources as needed. |  |  |  |
| 7D18 Perform systems review[[52]](#footnote-52) |  |  |  |
| 7D19 Select, and competently administer tests and measures[[53]](#footnote-53) appropriate to the patient’s age, diagnosis and health status including, but not limited to, those that assess: |  |
| 1. Aerobic Capacity/Endurance
 |  |  |  |
| 1. Anthropometric Characteristics
 |  |  |  |
| 1. Assistive Technology
 |  |  |  |
| 1. Balance
 |  |  |  |
| 1. Circulation (Arterial, Venous, Lymphatic)
 |  |  |  |
| 1. Self-Care and Civic, Community, Domestic, Education, Social and Work Life
 |  |  |  |
| 1. Cranial and Peripheral Nerve Integrity
 |  |  |  |
| 1. Environmental Factors
 |  |  |  |
| 1. Gait
 |  |  |  |
| 1. Integumentary Integrity
 |  |  |  |
| 1. Joint Integrity and Mobility
 |  |  |  |
| 1. Mental Functions
 |  |  |  |
| 1. Mobility (including Locomotion)
 |  |  |  |
| 1. Motor Function
 |  |  |  |
| 1. Muscle Performance (including Strength, Power, Endurance, and Length)
 |  |  |  |
| 1. Neuromotor Development and Sensory Processing
 |  |  |  |
| 1. Pain
 |  |  |  |
| 1. Posture
 |  |  |  |
| 1. Range of Motion
 |  |  |  |
| 1. Reflex Integrity
 |  |  |  |
| 1. Sensory Integrity
 |  |  |  |
| 1. Skeletal Integrity
 |  |  |  |
| 1. Ventilation and Respiration or Gas Exchange
 |  |  |  |
| 7D20 Evaluate data from the examination (history, health record, systems review, and tests and measures) to make clinical judgments. |  |  |  |
| 7D21 Use the International Classification of Function (ICF) to describe a patient's/client’s impairments, activity and participation limitations. |  |  |  |
| 7D22 Determine a diagnosis that guides future patient/client management. |  |  |  |
| Prognosis and Plan of Care 7D23 Determine patient/client goals and expected outcomes within available resources (including applicable payment sources) and specify expected length of time to achieve the goals and outcomes. |  |  |  |
| 7D24 Establish a safe and effective plan of care in collaboration with appropriate stakeholders, including patients/clients, family members, payors, other professionals and other appropriate individuals |  |  |  |
| 7D25 Determine those components of the plan of care that may, or may not, be directed to the physical therapist assistant (PTA) based on (a) the needs of the patient/client, (b) the role, education, and training of the PTA, (c) competence of the individual PTA, (d) jurisdictional law, (e) practice guidelines policies, and (f) facility policies |  |  |  |
| 7D26 Create a discontinuation of episode of care plan that optimizes success for the patient in moving along the continuum of care. |  |  |  |
|  |  |  |  |
| Intervention[[54]](#footnote-54)7D27 Competently perform physical therapy interventions to achieve patient/client goals and outcomes. Interventions include: |  |
| 1. Airway Clearance Techniques
 |  |  |  |
| 1. Assistive Technology: Prescription, Application, and, as appropriate, Fabrication or Modification
 |  |  |  |
| 1. Biophysical Agents
 |  |  |  |
| 1. Functional Training in Self-Care and in Domestic, Education, Work, Community, Social, and Civic Life
 |  |  |  |
| 1. Integumentary Repair and Protection
 |  |  |  |
| 1. Manual Therapy Techniques (including mobilization/manipulation thrust and nonthrust techniques)
 |  |  |  |
| 1. Motor Function Training (balance, gait, etc.)
 |  |  |  |
| 1. Patient/Client education
 |  |  |  |
| 1. Therapeutic Exercise
 |  |  |  |
| Management of Care Delivery7D28 Manage the delivery of the plan of care that is consistent with professional obligations, interprofessional collaborations, and administrative policies and procedures of the practice environment. |  |  |  |
| 7D29 Delineate, communicate and supervise those areas of the plan of care that will be directed to the PTA. |  |  |  |
| 7D30 Monitor and adjust the plan of care in response to patient/client status. |  |  |  |
| 7D31 Assess patient outcomes, including the use of appropriate standardized tests and measures that address impairments, functional status and participation. |  |  |  |
| 7D32 Complete accurate documentation related to 7D15 - 7D30 that follows guidelines and specific documentation formats required by state practice acts, the practice setting, and other regulatory agencies. |  |  |  |
| 7D33 Respond effectively to patient/client and environmental emergencies in one’s practice setting. |  |  |  |
| 7D34 Provide physical therapy services that address primary, secondary and tertiary prevention, health promotion, and wellness to individuals, groups, and communities. |  |  |  |
| 7D35 Provide care through direct access. |  |  |  |
| 7D36 Participate in the case management process. |  |  |  |
| Participation in Health Care Environment7D37 Assess and document safety risks of patients and the healthcare provider and design and implement strategies to improve safety in the healthcare setting as an individual and as a member of the interprofessional healthcare team |  |  |  |
| 7D38 Participate in activities for ongoing assessment and improvement of quality services. |  |  |  |
| 7D39 Participate in patient-centered interprofessional collaborative practice. |  |  |  |
| 7D40 Use health informatics[[55]](#footnote-55) in the health care environment. |  |  |  |
| 7D41 Assess health care policies and their potential impact on the healthcare environment and practice. |  |  |  |
| Practice Management7D42 Participate in the financial management of the practice setting, including accurate billing and payment for services rendered. |  |  |  |
| 7D43 Participate in practice management, including marketing, public relations, regulatory and legal requirements, risk management, staffing and continuous quality improvement. |  |  |  |

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**Standard 8**

**The program resources are sufficient to meet the current and projected needs of the program.**

**REQUIRED ELEMENTS:**

**8A** The collective core faculty is sufficient in number to allow each individual core faculty member to meet teaching, scholarship and service expectations and to achieve the expected program outcomes through student advising and mentorship, admissions activities, educational administration, curriculum development, instructional design, coordination of the activities of the associated faculty, coordination of the clinical education program, governance, clinical practice, and evaluation of expected student outcomes and other program outcomes.

Evidence of Compliance:

Portal Fields:

* Provide faculty workload data for each faculty memberon the individual Core Faculty Detail page(s).
* Provide information related to teaching responsibilities in the Course Details page for each course.

Narrative:

* Describe how the program determines the number of core faculty needed to accomplish all program activities delineated in the element.
* Describe the core faculty resources for the program.
* Identify the core faculty:student ratio[[56]](#footnote-56) and the average faculty:student lab ratio.
* Provide evidence that the core faculty workloads are within the defined workload policies.
* Describe how the faculty teaching and workloads for the program faculty are adequate to meet the program needs with regard to:
	+ teaching including coordination of associated faculty;
	+ scholarship;
	+ program administration;
	+ administration of the clinical education program;
	+ institutional and program committee and governance activities;
	+ student advising;
	+ any expectations related to student recruitment and admissions process; and
	+ other institutional and program responsibilities.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

►

INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**8B** The program has, or has ensured access to, adequate secretarial/administrative and technical support services to meet expected program outcomes.

Evidence of Compliance:

Narrative:

* Describe the secretarial/administrative and technical support available to the program, including the secretarial/administrative support available for the clinical education program.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**8C** Financial resources are adequate to achieve the program’s stated mission, goals, and expected program outcomes and to support the academic integrity and continuing viability of the program.

Evidence of Compliance:

Portal Fields:

* Provide three years of allocations and expense data in the Portal section entitled Income Statement. Data must be provided for the academic year of the visit, the previous academic year and projected data for the next academic year. The form, Allocations and Expense Statements, can be used to collect the required data.

Note: **Allocations refers to the amounts budgeted to the program**; it should never be zero nor should it reflect all tuition dollars collected by the institution unless all tuition dollars are indeed allocated to the program.

Narrative:

* Describe the various revenue sources, including the expected stability of each.
* Describe how allocated funds from each source are used.
* Describe the process used to determine short- and long-term budgetary needs that are tied to the strategic planning process.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**8D** The program has, or has ensured access to, space, equipment, technology and materials of sufficient quality and quantity to meet program goals related to teaching, scholarship and service.

 **8D1** Classroom and laboratory environments are supportive of effective teaching and learning.

Evidence of Compliance:

Narrative:

* Describe the classroom and laboratory space consistently used by the program.
* Describe other classroom and laboratory space used by the program in the past two years, if different than that described in response to the first bullet.
* Describe how the space is supportive of effective teaching and learning: access to current technology, access to safety features, good repair, cleanliness, temperature control, etc.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **8D2** Space is sufficient for faculty and staff offices, student advisement, conducting confidential meetings, storing office equipment and documents, and securing confidential materials.

Evidence of Compliance:

Narrative:

* Describe the space available to the program for faculty and staff offices, student advisement, conducting confidential meetings, storing office equipment and documents, and securing confidential materials.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **8D3** Students have access to laboratory space outside of scheduled class time for practice of clinical skills.

Evidence of Compliance:

Narrative:

* Identify the opportunities students have for access to laboratories for practice outside of scheduled class times.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **8D4** Equipment and materials are typical of those used in contemporary physical therapy practice, are sufficient in number, are in safe working order, and are available when needed.

Evidence of Compliance:

Narrative:

* Provide a general description of the equipment and materials available for the support of the program including equipment and supplies loaned by vendors or by facilities other than the institution.
* Describe the process used to ensure that equipment is in safe working order, sufficient in number and reflective of contemporary PT practice.
* Describe access to equipment being borrowed/loaned or used off-site; describe the contingency plan should borrowed/loaned equipment not be available for remediation and testing.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **8D5** Technology resources meet the needs of the program.

Evidence of Compliance:

Narrative:

* Describe how the program uses technology for instructional and other purposes.
* Describe how the available instructional technology meets the needs of the program.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

 **8D6** Core faculty have access to sufficient space and equipment to fulfill their scholarly agendas.

Evidence of Compliance:

Narrative:

* Describe the scholarship equipment and space needs of each core faculty member.
* Describe the scholarship equipment and space to which core faculty have access.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**8E** The resources of the institutional library system and related learning resource centers are adequate to support the needs and meet the goals of the program, faculty and students.

Evidence of Compliance:

Narrative:

* Describe the adequacy of the library resources, including the technological resources, and related learning resource centers available to the program faculty and students.
* Describe the accessibility of library resources and related learning resource centers to program faculty and students.
* If the educational program has its own facility for books, periodicals, instructional, and audiovisual materials, describe how the facility and materials are in an environment that is conducive to their intended purpose and accessible to students and academic faculty when needed.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**8F** The clinical sites available to the program are sufficient to provide the quality, quantity and variety of expected experiences to prepare students for their roles and responsibilities as physical therapists.

Evidence of Compliance:

Narrative:

* Describe the process used by the program to determine that the clinical education sites offer experiences for the students consistent with the goals of the clinical education portion of the curriculum and with the objectives of the individual clinical education courses in the curriculum.
* Describe how the program ensures a sufficient number and variety of clinical education sites to support the goals of the clinical education portion of the curriculum and to meet the objectives of the individual clinical education courses in the curriculum.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**8G** There are effective written agreements between the institution and the clinical education sites that are current and describe the rights and responsibilities of both parties. At a minimum, agreements address the purpose of the agreement; the objectives of the institution and the clinical education site in establishing the agreement; the rights and responsibilities of the institution and the clinical education site, including those related to responsibility for patient/client care and to responsibilities for supervision and evaluation of students; and the procedures to be followed in reviewing, revising, and terminating the agreement.

Evidence of Compliance:

Narrative:

* Briefly describe the provisions of the clinical education contracts used by the program.
* Describe how the program maintains the currency of written agreements with clinical education sites.
* Describe the process used to ensure that there are current written agreements between the institution and the clinical education sites.

Appendices & On-site Material: See instructions for development of reports

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**8H** Academic services, counseling services, health services, disability services, and financial aid services are available to program students.

Evidence of Compliance:

Narrative:

* Briefly describe the academic, counseling, health, disability, and financial aid services available to program students.

Appendices & On-site Material: See instructions for development of reports

**Note**: Accessibility of these services for students taking distance education courses is requested in 6K8.

TEAM COMMENTS:

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INSTITUTION COMMENTS:

Identify Additional Materials UPLOADED, if any:

**ADDITIONAL MATERIALS REQUESTED BY THE ON-SITE REVIEW TEAM**

**TO BE PROVIDED WITH THE INSTITUTION’S RESPONSE**

**APTA Department of Accreditation**

**The following materials are to be provided to CAPTE as part of the institution’s response to this report.** At the time the Visit Report with Institution Response is submitted, email either michaelchevalier@apta.org (PT Programs) or teresaemmons@apta.org (PTA Programs). **The following instructions must be followed**:

1. **Format:** All documents must be in PDF format and **combined into one PDF submission**. This document must include bookmarks if additional files are attached.
2. **Naming of additional files**: In order to clearly identify that it is part of the institution’s response, the bookmarked file name **must begin with IR** (eg, IR\_CVBrown\_NewCore.pdf). If it is a revised document, then ‘revised’ must also be included in the file name (eg, IR\_RevisedClinEdHdbk.pdf). The additional files should be clearly named so that the reader will know what it is. Do not name by standard, unless it is a revised narrative response.
3. **Highlight Revisions**: Any revised document must have **all revisions highlighted**.
4. **Identified in Visit Report:** The file name (e.g. IR\_Revised CVSmith.pdf) must be included in the Identify Additional Materials Uploaded, if any box under each applicable standard.

**Should the program want to provide materials not requested by the team, these instructions must be followed for all materials being provided AFTER the on-site visit.**

**ADDITIONAL MATERIALS REQUESTED: (if none, state none; DO NOT DELETE page)**

**STANDARD REQUESTED MATERIAL(S)**

**PROGRAM DIRECTORS: IF YOU ARE SCHEDULED FOR AN INITIAL ACCREDITATION DECISION:** Section 8.12(d) of CAPTE Rules of Practice and Procedure requires programs seeking initial accreditation to provide the following information for the charter class no later than thirty (30) days prior to the CAPTE meeting at which the program will be reviewed; the files should be in PDF format with the file names specified below and emailed to michaelchevalier@apta.org and accreditation@apta.org. The due date to receive your program’s materials is \_\_\_\_\_\_\_\_\_\_\_.

(i) **CE Student Experiences.pdf** -- a list of each student’s clinical placements and an indication of the type of experience provided (e.g., in-patient, out-patient, acute care, rehabilitation, home care, pediatrics, etc);

(ii) **CE Student Performance Summary.pdf** -- a summary of each student’s most recent evaluation (mid-term or final); and

(iii) **CE Analysis of Student Performance.pdf** -- an analysis of the performance of students (in aggregate) in clinical education based on feedback provided by clinical educators.

**TEAM LEADERS: IF ADDITIONAL MATERIALS ARE REQUESTED, LEAVE A COPY ON SITE WITH THE PROGRAM AND SUBMIT THIS FORM WITH THE VISIT REPORT. Only material viewed on site or missing from the Self-study Report can be requested**

**Visit Report**

**Representing the**

**Commission on Accreditation in Physical Therapy Education**

**Names and Signatures of the Team**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Institution**

**Name of Physical Therapy Program**

**Date of the On-Site Visit**

**Team Leader**

**Team Member**

**Team Member (Non-PT)**

Each of the above signers hereby reaffirms his/her commitment to maintain the confidentiality of all information relating to the accreditation of this physical therapist education program and promises not to make copies of, disclose, discuss, describe, distribute or disseminate, in any manner whatsoever, either orally or in written form, any confidential information received or generated, and not to use any confidential information for personal or professional benefit or for any other reason, except directly in connection with service to CAPTE.

 **SIGNATURE PAGE**

1. **Mission**: A statement that describes why the physical therapist education program exists, including a description of any unique features of the program. [The mission is distinct from the program’s goals, which indicate how the mission is to be achieved.] [↑](#footnote-ref-1)
2. **Contemporary preparation**: Reflects the minimum skills required for entry-level preparation of the physical therapist and the needs of the workforce as documented by the program. Contemporary preparation requires preparation for evidence based practice. [↑](#footnote-ref-2)
3. **Goals**: The ends or desired results toward which program faculty and student efforts are directed. Goals are general statements of what the program must achieve in order to accomplish its mission. Goals are long range and generally provide some structure and stability to the planning process. In physical therapist education programs, goals are typically related to the educational setting, the educational process, the scholarly work of faculty and students, the service activities of faculty and students, etc. [↑](#footnote-ref-3)
4. **Graduate and Student Achievement Measures:**  The measures of outcome required by USDE (graduation rate, licensure pass rate, employment rate). [↑](#footnote-ref-4)
5. **Graduation Rate**: The percentage of students who are matriculated in the first course in the professional program after the drop/add period and who complete the program. [↑](#footnote-ref-5)
6. **Licensure pass rate**: The percentage of graduates who take and successfully pass the National Physical Therapy Examination (NPTE). Rates are considered to be stabilized one year after graduation. [↑](#footnote-ref-6)
7. **Employment rate**: The percentage of graduates who sought employment that were employed (full-time or part-time) as a physical therapist within 1 year following graduation. [↑](#footnote-ref-7)
8. **Distance Education:** An educational activity characterized by separation of the faculty member from the student by either distance or time or both.  For the purposes of these standards, the following definitions also pertain:

	* Distance Education course:  a course in which 50% or more of the contact hours are completed using distance education modalities and less than 50% of the contact hours include direct (face-to-face) interaction between the student and the faculty member(s).
	* Distance Education program: a program in which 50% or more of the required courses (not including clinical education courses) are distance education courses. [↑](#footnote-ref-8)
9. **Policy**: A general principle by which a program is guided in its management. [↑](#footnote-ref-9)
10. **Procedure**: A description of the methods, activities, or processes used to implement a policy. [↑](#footnote-ref-10)
11. **Practices**: Common actions or activities; customary ways of operation or behavior. [↑](#footnote-ref-11)
12. **Program faculty: A**ll faculty involved with the PT program, including the Program Director, Clinical Education Coordinator, Core Faculty, Associated Faculty, and Clinical Education Faculty. [↑](#footnote-ref-12)
13. **Complaint**: A concern about the program, expressed by students or others with a legitimate relationship to the program, the subject of which is not among those that are addressed through the institution’s formal due processes. [↑](#footnote-ref-13)
14. **Due process**: Timely, fair, impartial procedures at the program or institutional level for the adjudication of a variety of issues including, but not limited to: (1) faculty, staff, and student violations of published standards of conduct, (2) appeals of decisions related to faculty and staff hiring, retention, merit, tenure, promotion, and dismissal, and (3) appeals of decisions related to student admission, retention, grading, progression, and dismissal. Due process generally requires adequate notice and a meaningful opportunity to be heard. [↑](#footnote-ref-14)
15. **Applicable law**: Those federal and state statutes/regulations relevant to physical therapy education (ADA, OSHA, FERPA, HIPAA, Practice Acts, etc.) [↑](#footnote-ref-15)
16. **Easily accessible**: Can be accessed by the public without disclosure of identity or contact information and is no more than one “click” away from the program’s home webpage. [↑](#footnote-ref-16)
17. This is a USDE requirement. [↑](#footnote-ref-17)
18. **Academic faculty**: Those faculty members who participate in the delivery of the didactic (classroom and laboratory) portion of the curriculum. The academic faculty is comprised of the core faculty and the associated faculty. [↑](#footnote-ref-18)
19. **Core faculty**: Those individuals appointed to and employed primarily in the program, including the program director, the director of clinical education (DCE) and other faculty who report to the program director. If not appointed to and employed primarily in the DPT Program, the majority of the individual’s work at the institution must involve the DPT Program. The core faculty have the responsibility and authority to establish academic regulations and to design, implement, and evaluate the curriculum. The core faculty include physical therapists and may include others with expertise to meet specific curricular needs. The core faculty may hold tenured, tenure track, or non-tenure track positions. Members of the core faculty typically have full-time appointments, although some part-time faculty members may be included among the core faculty. [↑](#footnote-ref-19)
20. **Doctoral preparation**: Earned doctorate, including the DPT. [↑](#footnote-ref-20)
21. **Contemporary expertise:** Expertise beyond that obtained in an entry-level physical therapy program that represents knowledge and skills reflective of current practice. Longevity in teaching or previous experience teaching a particular course or content area does not by itself necessarily constitute expertise. [↑](#footnote-ref-21)
22. **Academic doctoral degree:** A PhD or other doctoral degree that requires advanced work beyond the master's level, including the preparation and defense of a dissertation based on original research, or the planning and execution of an original project demonstrating substantial scholarly achievement. Definition adapted from IPED definition found at <http://nces.ed.gov/ipeds/glossary/?charindex=D>; last accessed 1/12/15. [↑](#footnote-ref-22)
23. **Scholarly agenda**: A long-term plan for building lines of inquiry that will result in original contributions to the profession. It should include the principal topics of scholarly inquiry, specific goals that identify the types of scholarship, scholarly activities, and anticipated accomplishments with a timeline. The agenda may also include plans for relevant mentorship and collaboration with colleagues. [↑](#footnote-ref-23)
24. **Service**: Activities in which faculty may be expected to engage including, but not limited to, institution/program governance and committee work, clinical practice, consultation, involvement in professional organizations, and involvement in community organizations. [↑](#footnote-ref-24)
25. **Associated Faculty**: Those individuals who have classroom and/or laboratory teaching responsibilities in the curriculum and who are not core faculty or clinical education faculty. The associated faculty may include individuals with full-time appointments in the unit in which the professional program resides or in other units of the institution, but who have primary responsibilities in programs other than the professional program. [↑](#footnote-ref-25)
26. **Program director**: The individual employed full-time by the institution, as a member of the core faculty, to serve as the professional physical therapist education program’s academic administrator: Dean, Chair, Director, Coordinator, etc. [↑](#footnote-ref-26)
27. **Full time**: 35 hours/week [↑](#footnote-ref-27)
28. **Clinical Education Coordinator**: The core faculty member(s) responsible for the planning, coordination, facilitation, administration, and monitoring of the clinical education component of the curriculum. The clinical education coordinator(s) is/are the faculty member(s) of record for the clinical education courses. NOTE: the term is intentionally generic; programs are free to use any appropriate title. [↑](#footnote-ref-28)
29. **Clinical education faculty**: The individuals engaged in providing the clinical education components of the curriculum, generally referred to as either Center Coordinators of Clinical Education (CCCEs) or Clinical Instructors (CIs). While the educational institution/program does not usually employ these individuals, they do agree to certain standards of behavior through contractual arrangements for their services. The primary CI for physical therapist students must be a physical therapist; however, this does not preclude a physical therapist student from engaging in short-term specialized experiences (e.g., cardiac rehabilitation, sports medicine, wound care) under the secondary supervision of other professionals, where permitted by law. [↑](#footnote-ref-29)
30. **Diversity:** Includes group/social differences (e.g., race, ethnicity, socioeconomic status, gender, sexual orientation, country of origin, as well as cultural, political, religious, or other affiliations) and individual differences (e.g., age, mental/physical ability, personality, learning styles, and life experiences). [↑](#footnote-ref-30)
31. **Enrollment agreements**: Formal contracts between the institution, program, and student which articulate basic legal tenets, assumptions, and responsibilities for all parties identified in a transactional relationship. [↑](#footnote-ref-31)
32. **Retention**: Maintenance of enrollment across multiple terms. [↑](#footnote-ref-32)
33. **Progression**: Ability of students to enroll in subsequent courses based on defined expectations. [↑](#footnote-ref-33)
34. **Curriculum plan**: A plan for the education of learners that includes objectives, content, learning experiences and evaluation methods—all of which are grounded in the mission and expected student outcomes of the program and are based on consideration of educational theory and principles, the nature of contemporary practice, and the learners’ previous experiences. The curriculum plan is part of the overall program plan, the latter of which may include goals related to areas such as program growth, finances, faculty development, faculty scholarship, community involvement, etc. [↑](#footnote-ref-34)
35. **Contemporary practice**: Delivery of physical therapy services as documented in current literature, including the *Guide to Physical Therapist Practice*, the Standards of Practice, and the Code of Ethics. [↑](#footnote-ref-35)
36. **Curriculum model**: A general description of the organization of the professional curriculum content. [↑](#footnote-ref-36)
37. **Major Systems:** Cardiovascular, pulmonary, integumentary, musculoskeletal, neuromuscular systems. [↑](#footnote-ref-37)
38. **Integrated clinical education**: Clinical education experiences that occur before the completion of the didactic component of the curriculum. Options include but are not limited to one day a week during a term, a short full-time experience at the end of a term, a longer full-time experience between two regular terms. Integrated experiences cannot be satisfied with patient simulations or the use of real patients in class; these types of experiences are too limited and do not provide the full range of experiences a student would encounter in an actual clinical setting. Integrated clinical experiences must be satisfied prior to the start of any terminal clinical experiences. [↑](#footnote-ref-38)
39. **Full time terminal clinical education**: Extended full-time experience that occurs at the end of the professional curriculum but may be followed by didactic activity that does not require additional clinical experiences. [↑](#footnote-ref-39)
40. **Interprofessional Education:** Occurs when two or more professions learn with, from and about each other to improve collaboration and the quality of care. (WHO, 2002) [↑](#footnote-ref-40)
41. **Objectives**: Statements specifying desired knowledge, skills, behaviors, or attitudes to be developed as a result of educational experiences. To the extent possible, objectives are expected to be behavioral (e.g., observable and measurable) across all learning domains. [↑](#footnote-ref-41)
42. **Breadth and depth**: Qualities associated with the extent to which a learning experience, or a series of learning experiences, includes: (1) a diversity of subject matter (breadth) and/or (2) a focus on one subject (depth). In the context of physical therapy course content and objectives, breadth is usually demonstrated by objectives that describe the variety of knowledge, behaviors, or skills the student is expected to achieve, while depth is demonstrated by the description of the degree of student achievement expected as described in the objectives (e.g., the taxonomic level within the appropriate domain of learning). [↑](#footnote-ref-42)
43. **Instructional methods**: Classroom, laboratory, research, clinical, and other curricular activities that substantially contribute to the attainment of professional (entry-level) competence. [↑](#footnote-ref-43)
44. **Tests and measures:** Procedures used to obtain data on student achievement of expected learning outcomes. [↑](#footnote-ref-44)
45. **Evaluation processes:** Methods and activities to determine the extent to which student test data relate to overall student performance. [↑](#footnote-ref-45)
46. **Distance Education:** An educational activity characterized by separation of the faculty member from the student by either distance or time or both.  For the purposes of these standards, the following definitions also pertain:

	* Distance Education course:  a course in which 50% or more of the contact hours are completed using distance education modalities and less than 50% of the contact hours include direct (face-to-face) interaction between the student and the faculty member(s).
	* Distance Education program: a program in which 50% or more of the required courses (not including clinical education courses) are distance education courses. [↑](#footnote-ref-46)
47. Assessment of the quality of distance education is required by USDE. [↑](#footnote-ref-47)
48. **Rigor**: Expectations for student assignments, engagement in the course and performance. [↑](#footnote-ref-48)
49. **Clinical education experiences:**  That aspect of the professional curriculum during which student learning occurs directly as a function of being immersed within physical therapist practice. These experiences comprise all of the formal and practical “real-life” learning experiences provided for students to apply classroom knowledge, skills, and professional behaviors in the clinical environment. [↑](#footnote-ref-49)
50. **Interprofessional practice:** “When multiple health workers from different professional backgrounds work together with patients, families, carers [sic], and communities to deliver the highest quality of care” (WHO, 2010). [↑](#footnote-ref-50)
51. **6 semesters:** As of 2014, the average length of professional programs is 8.33 semesters, ranging from 6 to 12 semesters or equivalent. [↑](#footnote-ref-51)
52. **Systems Review:**  Including the cardiovascular/pulmonary system through the assessment of blood pressure, heart rate, respiration rate, and edema; the integumentary system through the gross assessment of skin color, turgor, integrity, and the presence of scar; the musculoskeletal system through the gross assessment of range of motion, strength, symmetry, height, and weight; the neuromuscular system through the general assessment of gross coordinated movement and motor function; and the gross assessment of communication ability, affect, cognition, language, and learning style, consciousness, orientation, and expected behavioral/emotional responses. [↑](#footnote-ref-52)
53. **Test and Measures:** The list is adapted from the *Guide to Physical Therapist Practice (2014).* [↑](#footnote-ref-53)
54. **Interventions:** This list is adapted from the *Guide to Physical Therapist Practice (2014).* [↑](#footnote-ref-54)
55. As **defined** by the U.S. National Library of Medicine, **health informatics** is the interdisciplinary study of the design, development, adoption, and application of IT-based innovations in healthcare services delivery, management, and planning. Medical**Informatics**, physician, **Health** IT.Jan 7, 2014 [↑](#footnote-ref-55)
56. **Core faculty:student ratio:**  When determining this value, use (1) the number of full-time and part-time core faculty positions allocated to the program (regardless of the number of cohorts) and (2) the total number of students enrolled in the professional phase of the program (regardless of the number of cohorts). [↑](#footnote-ref-56)