

Last updated: 2/20/2024

Contact: accreditation@apta.org

**SELF-STUDY REPORT (SSR)**

**INSTRUCTIONS AND FORMS**

**FOR BOTH**

**PTA and PT PROGRAMS**

**February 2024**

**The instructions and forms contained in this document are NOT to be used in the development of an Application for Candidacy.**

**NOTE: ALL NEW REQUIRED FORMS MUST BE UTILIZED FOR ANY SUBMISSION APRIL 1, 2024. PROGRAMS ARE ENCOURAGED TO USE THE NEW FORMS NOW.**

Commission on Accreditation in Physical Therapy Education

American Physical Therapy Association

3030 Potomac Ave., Suite 100

Alexandria, Virginia 22305-3085

(703) 706-3245

accreditation@apta.org

**SELF-STUDY REPORT INSTRUCTIONS**

This document is for BOTH PTA and PT programs that are developing a Self-study Report. It is NOT to be used in the development of an Application for Candidacy.

**IMPORTANT****:**Directions for using the new Portal will be made available on the CAPTE Resource page.

**PREVIEWING THE SELF-STUDY REPORT**

Programs can only print preview the Self-study Report during development by selecting the Print Preview button on the SSR grid page. Programs cannot download or see the appendices until the Report is submitted and Accreditation Staff has reviewed.

**SUBMISSION OF THE SELF-STUDY REPORT**

The Self-Study Report must be submitted on the Portal at least seventy-five (75) days before the scheduled on-site visit. No paper submissions will be accepted. The new Portal will not provide validation errors as in the past; programs need to ensure that submissions are complete. The CAPTE Accreditation Portal can be accessed at: <https://capteportal.capteonline.org/Login.aspx?ReturnUrl=/Default.aspx?selmenid=men1>**.**

Access to the Portal requires a username and password that has been established by the program director. Additional login credentials for other designated program personnel can be requested by the program director. Designated program personnel must create a record by clicking on the ‘Get Started’ button: <https://capteportal.capteonline.org/Login.aspx?ReturnUrl=/Logout.aspx>. Once a record has been created, reach out to accreditation@apta.org and request that this new user be connected to program’s record.

All materials must be provided in English, regardless of whether the program is offered in a different language.

**SIGNATURE PAGE**

The editable Signature Page can be accessed from the CAPTE Resource page for accredited programs page at <https://www.capteonline.org/faculty-and-program-resources/accredited-programs>. A completed signature page should be appended to the Preface portion of the SSR.

**STANDARDS & REQUIRED ELEMENTS**

The Self-Study Report is divided into eight Standards:

1. Mission, Goals, Outcomes
2. Assessment, Planning
3. Institution & Program Integrity
4. Program Faculty
5. Students
6. Curriculum Plan
7. Curricular Content
8. Resources

Required Elements are included under each Standard. Evidence requested for Portal Fields and Narrative responses is included in the appropriate (PTA or PT) *Standards and Required Elements for Accreditation* (found on the CAPTE Resource page for accredited programs). The lists of required SSR [**Appendices**](#AppendixList) and [**Materials Provided On-Site**](#RequiredVisitMaterialsList) are included in this document. Instructions for preparing and submitting these documents should be carefully reviewed before beginning development of the report.

**PREFACE**

The Preface, which precedes the Narrative, provides a brief historical overview of the program. It serves as the introduction to the Self-study Report and is required. Only upload and attach requested preface appendices (Signature Page and [SSR Check-In Form](#SSRCheckInList)) to the Preface.

**NARRATIVE**

Each Element requires a Narrative response, even if only to enter NA (not applicable). THE PORTAL DOES NOT PROVIDE VALIDATION ERRORS IF RESPONSES ARE MISSING. Check your work carefully. If applicable, the response can refer the reader to a previous Element of the SSR. Each Narrative response is now limited to 25,000 characters. Although this allows for long narratives, care should be taken to:

* 1. provide ONLY the requested information in a concise manner;
	2. not repeat information; refer the reader back to previously provided information;
	3. not repeat terms that are unnecessary. For example, use ‘students’ rather than ‘students in the program’; use ‘program’ rather than the ‘physical therapy program’ or ‘Potomac College's physical therapist assistant program’; and
	4. define abbreviations used.

Narrative responses must first be created in Word (or equivalent) and only pasted into the Portal when complete. A template for writing drafts is available to programs on the <https://www.capteonline.org/faculty-and-program-resources/accredited-programs>. The Portal **can now** bold, underline, italicize, but **not** highlight or colorize characters/words. Ensure that **no** HMTL or hyperlinks are present (see URL statement below).

Tables and Charts CANNOT be provided in a Narrative response. While a table or chart can be uploaded as an Appendix, there must still be a response in the narrative text box that refers the reader to see the uploaded table or chart.

The Narrative should be more than a directory to the Appendices. Unless specifically requested in the evidence list, the Narrative portion of the Self-study Report needs to stand on its own as an accurate description of the program, with the Appendices serving to provide the substantiating evidence which supports or expands upon compliance. Specific and accurate references to the Appendices must be made within the Narrative responses. Each reference must be followed by the specific page number(s) where the content can be found. NOTE: Each individual appendix should only be uploaded once, under the appropriate SRE. If necessary, only refer to the previously uploaded appendix in additional narrative(s). DO NOT UPLOAD A DOCUMENT MORE THAN ONCE. See [Appendix List](#AppendixList) for direction on what appendix links to what element. Each blank document will have to have a different name, so please add a number to the end of the file name. Example: BlankDocument2.pdf, BlankDocument3.pdf.

**URLs**

URLs should **not** be included in narrative responses of the Self-study Report. Instead, the program should indicate that there is a specific URL associated with the element and then include the specific document/webpage name with corresponding URL in the new [**URL Listing Table**](#URLListingTable).

**Reviewers must have access to all requested information. Do not include URLs that go to password protected webpages. In addition, URLs by themselves are not sufficient** for required appendices as CAPTE needs to maintain a record of the information it uses during its review. Therefore, a PDF of the requested information, bookmarked if applicable, must be provided. **At a minimum, provide a bookmarked PDF that includes: the cover page of the document (if applicable), a table of contents (if one exists), and copies of the web pages related to the Required Element(s) being addressed.**

Questions? Contact the Department of Accreditation staff at accreditation@apta.org or 800-999-2782, ext. 3244 or 703-706-3244 or the appropriate PT or PTA program manager or specialist.

**ITEMS REQUIRED FOR A COMPLETE SELF-STUDY REPORT**

The forms needed for the Self-study Report and Program Review are listed below. Templates of the required forms are also available at <https://www.capteonline.org/faculty-and-program-resources/accredited-programs>.

[General instructions](#GenInstructions) are provided along with the actual forms or specific information requested. While most forms/information is the same for both PTA and PT programs, individualized information is provided, where applicable. Please do not hesitate to contact staff members in the Accreditation Department for assistance if needed.

|  |
| --- |
| 1. **Appendix List**
 |
|  | **Required for:** | **Instructions** | **Attach in Portal to** |
| [**Appendix List**](#AppendixList) | Both PTA & PT | [Link to instructions](#InstructionsAppendices) | N/A |

|  |
| --- |
| 1. **REQUIRED FORMS: UPLOADED AS PDFs TO THE PORTAL EXCEPT THE SSR CHECK-IN FORM AS A WORD DOCUMENT**
 |
|  | **Required for:** | **Instructions** | **Attach in Portal**  |
| [**Program Assessment Matrix**](#AssessmentMatrix) | Both PTA & PT | [Link to instructions](#InstructionsAssessmtMatrix) | Element 2A  |
| [**CV: Required format**](#CV)**-2022 version** | Both PTA & PT | [Link to instructions](#InstructionsCV) | Core or Associated Faculty Detail Page |
| **\***[**Scholarship Form**](#ScholarshipForm)**-2023 version** | PT ONLY | [Link to instructions](#InstructionsScholarship) | Core Faculty Detail Page |
| [**Policy Location Chart**](#PolicyLocationChart) | Both PTA & PT | [Link to instructions](#InstructionsPolicyLocationChart) | Multiple Elements, see Appendix List (Attach in Portal to First Related Element only) |
| [**Retention Rate**](#RetentionRateTable)(Initial Accreditation ONLY)  | Both PTA & PT | [Link to instructions](#InstructionsRetentionRate) | 1C1 |
| [**7A**](#Chart7APT)&[**7C**](#Chart7CPT) Charts | PT ONLY | [Link to instructions](#Instructions7abcCharts) | 7A & 7C, respectively |
| [**7B PTA**](#Chart7BPTA) &[**7B PT**](#Chart7BPT)Chart | Both PTA & PT | [Link to instructions](#Instructions7abcCharts) | 7B |
| [**Clin Ed Placements Available**](#ClinEdPlacementsAvailable) | Both PTA & PT | [Link to instructions](#InstructionsClinEdAvailPlacements) | 8F |
| [**SSR Check In Form**](#SSRCheckInList)**-2023 version** | Both PTA & PT | [Link to instructions](#InstructionsSSRCheckIn) | Preface- **Word** format is required |
| [**Core**](#CoreFacultyWorkloadDistributionForm) &[**Associate**](#AssociatedFacultyWorkloadDistributionFor) Faculty Workload Forms | Both PTA & PT | [Link to instructions](#WorkloadFormsInstructions) | 3C (Attach in Portal to First Related Element only) |
| [**Plan of Study**](#RequiredPlanofStufy)**-2022 version** | Both PTA & PT | [Link to instructions](#PlanofStudyInstructions) | 6D (PTA) & 6E (PT) |
| [**URL Listing Table**](#URLListingTable) | Both PTA & PT | [Link to instructions](#URLinstructions) | Related Elements(Attach in Portal to First Related Element only) |

**\*Note:** Information regarding CAPTE’s expectations for scholarship are found in the CAPTE Position Paper on scholarship, which can be accessed at <https://www.capteonline.org/faculty-and-program-resources/resource_documents/accreditation-handbook>.

|  |
| --- |
| **3. FORMS/INFORMATION PROVIDED TO FACILITATE COLLECTION OF DATA THAT IS ENTERED INTO PORTAL FIELDS** |
| [**General Info Section of SSR**](#GenInfoSection) | [Link to instructions](#InstructionsGenInfo) |
| [**Core or Associated Faculty Information Sheet**](#FacInfoSheet) | [Link to instructions](#InstructionsFaculty) |
| [**Curriculum List/Course Details**](#CourseList) | [Link to instructions](#InstructionsCourses) |
| [**Graduation Rate Table**](#GradRateTable) | [Link to instructions](#InstructionsGradRateTable) |
| [**Allocations & Expense Statements**](#AllocationExpenseForm) | [Link to instructions](#InstructionsBudgetForm) |
| [**7D – Sample Narrative response**](#Element7DExample) | [Link to instructions](#Element7DExample) |

|  |
| --- |
| **4. REQUIRED FORMS AND ON-SITE MATERIAL: ALL FORMS AND ON-SITE MATERIALS MUST BE PROVIDED ELECTRONICALLY TO THE PROGRAM REVIEWERS USING A VIRTUAL PLATFORM AT LEAST 14 DAYS PRIOR TO THE VISIT.** |
|  | **Used for** |  | **Required Format** |
| [**General Information Form**](#GenInfoForm) | Both PTA & PT | [Link to instructions](#InstructionsGenInfoForm) | Electronic **Word** versions Files named using naming conventions |
| [**Persons Interviewed Form**](#PersonsInterviewedForm) | Both PTA & PT  | [Link to instructions](#InstructionsOnSiteMaterials) |
| [**Materials Provided On-Site**](#RequiredVisitMaterialsList) | Both PTA & PT | [Link to instructions](#InstructionsOnSiteMaterials) |

**INSTRUCTIONS**

**1.** **REQUIRED APPENDICES**

**\*\* IMPORTANT APPENDICES INSTRUCTIONS\*\*** All programs **MUST** follow the information provided here, including using the required naming convention for EACH appendix. Failure to use required file names will result in Accreditation staff un-submitting the Self-study Report so that the program can make the necessary corrections, including deleting files that are named incorrectly and attaching files with correct name to the appropriate Element(s). Programs will be given **24 hours** to correct the Self-study Report. Should it be necessary for staff to reject the Self-study Report as submitted, notification will be sent to the program director and the dean/person to whom the program director reports. Failure to comply with the request for corrections within the specified timeframe could result in the initiation of an administrative probation action by Accreditation staff.

**The** [**Appendix List**](#AppendixList)**:**

* delineates the REQUIRED appendices;
* identifies the REQUIRED naming conventions for each required appendix; and
* identifies the related Element(s) each required appendix must be attached to on the Portal.
* All appendices must be provided in a PDF (or equivalent) format. If only available via URL, the program should indicate that there is a specific URL associated with the element and then include the specific document/webpage name with corresponding URL in the new [URL Listing Table](file:///%5C%5Captaaws-file%5Caccred%5CFORMS%5CSSRs%5C2016%20Standards%5C2023%20SSR%20INSTRUCTIONS%20FORMS%5Cdrafts%20of%202023%20instruction%20forms%5C%20%5Cl%20). In addition, provide a bookmarked PDF that includes: the cover page of the document (if applicable), a table of contents (if one exists) and copies of webpages related to the Required Element(s) being addressed.
* Any appendix is uploaded to the Portal ONLY one time. The program should refer to any document previously uploaded in subsequent narratives only.
* If an appendix needs to be deleted, the program must reach out to CAPTE to have this deleted. Provide the specific file names you need deleted in an email.
* Do not upload appendices from the Preface screen/page – except for appendices specifically requested to be attached to the Preface.
* Appendices not included in the Required Appendix List can be provided. File names should reflect the content of the specific document. **Do not include** material designated as On-Site Materials.
	+ Do not include the Element number unless the document is a continuation of a narrative response.
	+ Do not include the name of the institution, program, etc. Appendices are available to reviewers in alphabetical order, so extraneous words can hinder the ability of the reviewer to find documents.
* After submission of the Self-study Report,additional documents can be added only by **emailing the document(s) to accreditation staff**. The following naming conventions must be used in file names:
	+ Between SSR submission and on-site visit, begin file name with AddMat\_, for example AddMat\_file name.pdf
	+ After on-site visit and before CAPTE review, begin the file name with IR\_, for example IR\_file name.pdf.
	+ If the document is a revised version from that provided originally in the Self-study Report, include the revision date in the file name; e.g., AddMat\_CV-Smith Mary Revised April 1 2021.pdf.
		- IMPORTANT NOTE: Should a file need to be deleted, send an email to accreditation@apta.org that includes the specific file name(s).
	+ To download appendices, the new Portal creates a “Bundle” to access all documents.
	+ No new documents will be allowed within thirty (30) days of the CAPTE meeting at which the program is being reviewed, unless specifically requested by the Commission. File names for materials requested by the Commission should begin with ExtraMat, for example, ExtraMat\_Scholarship-Jones, Sara Revised April 1 2021.pdf.

**2. REQUIRED FORMS: UPLOADED AS PDFs TO THE PORTAL**

[**Program Assessment Matrix:**](#AssessmentMatrix) This form must be used to document the program's assessment process for the items delineated in Elements 2B1-2B5. If the program wishes, additional items assessed by the program may be added. All unused/empty rows must be deleted prior to attaching the form to Element 2A.

[**Curriculum Vitae (CV):**](#CV) This is the required format that must be used by all core faculty and those associated faculty who are involved in 50% or more of the contact hours of a course. Do include CVs for those working as Lab Assistants in courses where they are responsible for working with students 50% or more of lab contact hours. On the Portal, a CV is uploaded on the Faculty Information page for each faculty/lab assistant member. This is a requirement in order to save the information on the page.

**A consistent CV format must be used for all faculty**. It is acceptable to make minor changes to the format; however, all CVs must follow the same format. Delete any categories that do not apply or indicate n/a (not applicable). For example, providing information from the earliest to the most recent instead of the requested most recent to earliest (i.e., scholarship, employment). Note a new version dated 8/2022 is included in this document.

The last section, **Current Teaching Responsibilities in the Entry-Level Program for Academic Year of Program Review**, must include current teaching responsibilities at your institution and must include the type and role (as defined below) for each course. Do not include past teaching responsibilities or current activities at other institutions.

Role and Type Definitions:

**Type**: Primary and Other: Identify the faculty member(s) who teach in the course.

**Role:** Choose the faculty role that most closely describes the individual’s role in the course from the following options. If necessary, describe different roles in 4A.

Course Coordinator: The individual responsible for the course, when the course involves additional faculty member(s) (e.g., lab assistants, lecturers responsible for large sections (blocks) of the course, guest lecturers, etc.).

Instructor: The individual responsible for the entire course when only that individual is involved, whether or not the course has a laboratory component.

Lecturer: The individual responsible for providing instruction, other than laboratory experiences, in a course with multiple faculty.

Lab Director: The individual responsible for the coordinating laboratory component, but with no responsibilities in the course other than coordination of the laboratory component.

Lab Assistant: The individual who assists the Course Coordinator or Lab Director in the laboratory setting.

**For To Be Determined (TBD) faculty:** No CV will be required on the Portal for any faculty member that is identified as TBD. However, if new core or associated faculty are hired between the submission of the Self-study Report and thirty (30) days before the CAPTE meeting at which the program will be reviewed, a CV and a narrative response to Element 4A (core) or Element 4D (associated) should be emailed to the Accreditation Department staff at accreditation@apta.org.

**General Education Faculty for PTA PROGRAMS ONLY:**

If general education faculty are assigned to teach general education courses, identify the individual as TBD; no additional information or CV will be required. To save the information on the page, a unique page needs to be updated. An example would be CV\_gen ed 1, CV\_gen ed 2., etc. Note that the Portal requires that no two appendices be named the same. Adding an alphanumeric character to distinguish files is recommended.

[**Faculty Scholarship Form**](#ScholarshipForm) **for PT PROGRAMS ONLY:**  This form is required for each core faculty member. On the Portal, the Faculty Scholarship Form (revised 9/2023) is uploaded on the Core Faculty Information page for each core faculty member.

The form is expected to delineate a consistent agenda across principal topics of scholarly inquiry, scholarly accomplishments, goals and activities. All accomplishments should meet the definition of scholarship as defined in the Standards and the CAPTE Position Paper entitled *Physical Therapy Faculty and Scholarship* (accessed at [www.capteonline.org/AccreditationHandbook](http://www.capteonline.org/AccreditationHandbook)). The position paper describes scholarship based on Boyer's model, delineates typical accomplishments, and describes CAPTE’s expectations.

The form should provide evidence of a scholarly agenda; do not include information not requested or that does not represent scholarship (i.e., do not include faculty development or teaching activities) or information that will not demonstrate compliance (i.e., an unfunded grant). Full bibliographic citations must be provided where appropriate. A narrative row is provided to allow clarification when the relationship between principal topics, accomplishments and ongoing activities are not obvious or when the peer-review dissemination format is not obvious. Delete this row if not using.

This form will not be required if the faculty record is marked as a TBD. However, if new core faculty are hired between the submission of the SSR and thirty (30) days before the CAPTE meeting where the program will be reviewed, a scholarship form should be emailed to the Accreditation staff at accreditation@apta.org.

[**Policy Location Chart**](#PolicyLocationChart)**:** This chart identifies where the various program or institutional policies and procedures are found; it includes all policies/procedures specifically requested in the Standards. If a policy/procedure is found in multiple places (e.g., in a handbook and/or on a webpage), all places must be identified. Identify specific page numbers when referencing a document. URLs must be for the specific webpage where the policy/procedure is found, if applicable.

Both the Other Policies.pdf and Policy Location Chart.pdf are to be referenced in each relevant Required Elements. SEE APPENDIX LIST.

[**Retention Rate Table**](#RetentionRateTable)**:** This form is used only by programs undergoing an **initial accreditation** decision.It provides a format for programs that do not yet have any graduates to document the retention rate of students in each class.

**[7A (PT Only)](#Chart7APT),** [**7B (PTA)**](#Chart7BPTA)**,** [**7B (PT)**](#Chart7BPT)**,** [**7C (PT Only**](#Chart7CPT)**) Charts:** Chart formats are provided to identify sample course objectives that reflect the highest expected student performance level for each related content area for Elements 7A, 7B and 7C. **Note**: the 7B charts for PTA and PT programs are different.

[**Clin Ed Available Placements:**](#ClinEdPlacementsAvailable) A required format that identifies, 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 the program’s requests for clinical education placements. On-site documentation to support this data must be available for the team to review.

In addition to this form, the following Elements require clinical education data: 1C4, 2C, 4O, 6J1-6J5 (PTA), 6L1-6L5 (PT) and 8F. Programs are expected to collect sufficient data to demonstrate compliance with these Elements. While CAPTE does not require programs to use any particular documents, various APTA clinical education documents can provide data that addresses requested information. For example, the CPI Web can provide a report with evidence of entry-level performance for both cohorts and individual students (Element 1C4).

[**SSR Check in Form:**](#SSRCheckInList)This document (revised 9/2023), which is used by Accreditation Staff to check in Self-study Reports, is provided here to facilitate a final review prior to submission of the Self-study Report. Prior to Portal submission of the Self-study Report, programs are to use this form to confirm that the report is complete and then upload this form to the Preface. Please ensure the appendices are named as required on the Check- in Form. Save and upload as a **WORD** document; do NOT convert to a PDF.

**[Core Faculty Workload Form:](#CoreFacultyWorkloadDistributionForm)** A required format (8/2022 version) that identifies core faculty workload distribution.

[**Associate Faculty Workload Form:**](#AssociatedFacultyWorkloadDistributionFor)A required format (8/2022 version) that identifies associate faculty workload distribution.

**[Plan of Study: (now a required form):](#RequiredPlanofStufy)** Plan of study table (8/2022 version) that lists courses by term and includes prefix, #, title, credits, and student contact hours broken down by lecture, lab, independent study and clinical hours, plus primary faculty and other instructors. (Forms packet).

**3. THE FOLLOWING FORMS/INFORMATION ARE PROVIDED TO FACILITATE THE COLLECTION OF DATA THAT IS ENTERED INTO PORTAL FIELDS**

[**General Information Section**](#GenInfoSection)**:** A list of the fields found in the General Information Section on the Portal is provided to identify information that is needed.

[**Core and Associated Faculty Information Sheet**](#FacInfoSheet)**:** September 2023 form identifies the faculty data required in the Core Faculty Information and Associated Faculty Information Portal pages. Data may pre-populate from the Annual Accreditation Report (AAR) or other CAPTE documents. As with the General Information Section, if the program has an active AAR and an active Self-study Report on the Portal, changes to one document will be reflected in the other document until one document is submitted.

Revise data as needed and provide responses for the following two additional sections:

1. **Total Classroom Contact Hours in Program Seeking Accreditation**
* Identify the classroom contact hours/term in an academic year for the individual.
	+ For the CEC/ACCE/DCE, determine contact hours for clinical courses based on policies at your institution.
		- Provide an explanation in the narrative response for Element 8A.
* Portal fields are for: fall, winter, spring, and summer.
	+ Enter zero (0) for any term in which the individual has no classroom contact hours.
	+ If a system is used at your institution with greater than four terms, combine terms to equate to typical fall, winter, spring and summer terms and provide an explanation under Element 8A.
1. **Faculty Qualifications**
* Provide the narrative response for Element 4A (core faculty) or Element 4D (associated faculty) regarding the individual’s contemporary expertise to teach each assigned area. Response must identify what the individual teaches, including for lab assistants, and discuss the specific evidence of contemporary expertise related to these areas. In addition, address the individual's effectiveness in teaching and student evaluation.
* This provides a **25,000**-character text box to discuss each individual faculty member.

**Additional notes regarding faculty information**:

**If faculty for a course is unknown**: You will need to create a dummy faculty record. Select Add New Faculty (and then select Core or Associated Faculty) under the Faculty List. The ONLY required field will be Last Name Enter TBD for Last Name. You only need to (and should only) create one 'dummy' core or associated record. **The Portal will not accept multiple documents with the same file name.**

**PTA PROGRAMS ONLY**: **If general education and elective course faculty are not affiliated with the PTA program as core or supporting faculty**: Create one associated faculty record, indicate that the individual is to be determined (TBD), with the first name of TBD and the last name of Gen Ed. This record can be used as the primary faculty member for all relevant general education courses.

**Classify faculty (core vs associated)** based on definitions provided in the Standards. If classification has changed, then select Core or Associated Faculty from the dropdown on type of faculty. Programs should also refer to the Core Faculty Determination Table, <https://www.capteonline.org/faculty-and-program-resources/core-faculty-determination-table>.

**Workload distribution**: While this is data that may pull in from the AAR, it is imperative that the % of workload data be reviewed for consistency across all core faculty and updated to reflect current workload. CAPTE does not have a formula to use in determining the percentage of time but expects programs to use a consistent methodology. (Note: the narrative for Element 3C request the formula the program used to determine these numbers.) Programs are also required to complete the two new required appendices: [core faculty workload table](#CoreFacultyWorkloadDistributionForm) (2024 version) and [associated faculty workload table.](#AssociatedFacultyWorkloadDistributionFor)(2023 version)

The responsibilities or activities for each category are as follows:

* **Teaching:** The percentage(s) is based on contact hours in lecture/lab courses, course preparation, course related advisements, including open lab hours and other outside of regularly scheduled course time.
	+ **Entry level program: enter the percentage of teaching for the entry level PT/PTA program**
	+ **Other program: enter the percentage of teaching for other programs if applicable.**
* **Service**: The percentages are based on the following activities in which faculty may be expected to engage in.
	+ Clinical practice: Enter a percentage for clinical practice ONLY if release time is granted.
	+ Committee work, general advising, etc. Enter the percentage for general advising and committee/service activities that includes institution/program governance, consultation, involvement in professional organizations, and involvement in community organizations.
* **Other:**
	+ **Administrative Responsibilities**: Enter the percentage for which release time is given based on planning, coordination, facilitation, administration, and monitoring of the program and the clinical education component of the curriculum. May also include, but is not limited to, scheduling of classes, scheduling and managing clinical experience, oversite of faculty, coordinating meetings, accreditation responsibilities, etc.
	+ **Scholarship:** (PT Programs only) Enter the percentage for the time dedicated for all scholarly activities. (Refer to Element 4B)
	+ **Enrolled in Degree Program:** Enter the percentage ONLY if release time is granted.

Programs are typically cited when individuals with a similar number of contact hours have a very different percent time devoted to teaching as it makes it difficult for the Commission to understand how workload was determined. If appropriate, provide a rationale for the difference in the narrative response to Element 8A.

Percentages should be provided based on workload policies at your institution. If an activity is not part of the individual's workload, do not include. For example, if clinical practice or enrollment in a degree program is considered part of the individual's workload, then include. If the institution does not consider these activities as part of the individual’s workload, do not include.

**FTE CAPTE calculation**: The following chart is to be used to determine FTE calculations, regardless of how FTEs are determined at your institution. Please note there are two Portal fields for FTEs: FTE (institution) and FTE (program). If the faculty member has no teaching or administrative responsibilities outside of the program, then these numbers would be the same. If the faculty member has teaching or administrative responsibilities outside of the PTA or PT program, then the FTE for the program should reflect the individual's commitment to the program. For example:

* John Doe is a core PTA faculty member, but also is the dean or chair of the unit. He is on a 12-month contract and only teaches one course in each semester.
	+ Institutional FTE = 1.33 FTE
	+ Program FTE = .3 FTE
* Betty Smith is a core PT faculty member on a 12-month contract; half her workload is primarily devoted to scholarship (or service). She teaches one course a semester. (Note: Service and scholarship are considered activities devoted to the program.)
	+ Institutional FTE = 1.33 FTE
	+ Program FTE = 1.33 FTE
* Jane White is a PTA core faculty member on a 9-month appointment; half of her teaching load is devoted to teaching in another program
	+ Institutional FTE = 1 FTE
	+ Program FTE = .5 FTE

**FTE CAPTE Calculations**: In order to foster consistency of data, the Commission requires that FTE allocations be calculated based on the following schedule:

|  |  |
| --- | --- |
| **Full-Time Appointments** | **FTE for PT and PTA Programs** |
| 12-month appointment or 10-month appointment with routine additional 2-month summer appointment | 1.33 |
| 11-month appointment or 9- or 9.5-month appointment with routine additional 2- or 3-month summer appointment | 1.22 |
| 10-month appointment | 1.11 |
| 9-to-9.5-month appointment | 1.0 |
| 8-month appointment | .80 |
| 7-month appointment | .78 |
| 6-month appointment | .67 |
| 5-month appointment | .56 |
| 4.5-month appointment | .5 |
| 4-month appointment | .45 |
| 3-month appointment | .34 |

|  |  |
| --- | --- |
| **Part-Time Appointments (including part-time core, associated/adjunct faculty)**Calculated based on the length of the appointment and the extent of contribution to the program; program determines the extent of contribution.  | **FTE for PT and PTA Programs** |
| Half-time for 12 months | 0.67 |
| Half-time for 9 months | 0.5(1.00 x 0.5) |
| One course (determined to be 30% contribution) in a 4.5-month semester | .15(0.5 x 0.3) |

[**Course List/Course Details**](#CourseList): On the Portal, a course list is created by completing a course detail page for each course. In order to **save** each individual course page, the syllabus and sample exam must be uploaded when entering the data. Revise as necessary by editing the course detail page for the appropriate course. The list of requested data and instructions for completing the Course Detail Page is described [below](#CourseList). Data may prepopulate from previous entries; it is recommended that you first review the pre-populated course list, which includes course details, to determine the extent of needed revisions.

**PTA Programs:** include all courses that are required for the degree, including prerequisite, general education, and technical education courses.

**PT early assurance/ undergraduate admission programs**: only include courses in the professional phase of the program.

[**Graduation Rate Table**](#GradRateTable)**:** Two years of data are to be provided regardless of the degree conferred. The Graduation Rate Table is provided for the collection of data. The formula within this table must be used to determine the graduation rate; the Portal will auto calculate the graduation rate as a percentage. The Portal will require specific years based on a formula that allows 150% of the time to complete the program. If more current data is available, include the data in the narrative response to element 1C1 and attach this table as an appendix.

Please refer to this table for current formula.

If multiple cohorts are accepted in an academic year, the portal will require separate data for each cohort. CAPTE defines a cohort of students as a group of students who matriculate into the professional/technical courses at the same time with the expectation that they will also complete the program at the same time.

If there are no graduates during the reporting time, the response to Portal question #1.1 should be marked ‘No’.

[**Allocation and Expense Statements:**](#AllocationExpenseForm) The budget form is divided into two sections: Allocations and Operating Expenses sections. Data for the following three academic years must be provided:

* Academic Year prior to the program review,
* Academic Year of the program review; and
* Academic Year after the program review.

An allocation refers to: the amount of money allocated to the program each year; **it does NOT refer to the total income to the institution that is generated by the program (unless the program gets that amount).** Generally, the amount of money allocated to the program covers all program expenses. Unless the program literally has no money, the amount entered in the allocation sections on the Portal **should never total zero** ($00.00).

If the allocations and operating expenses provided are for multiple programs, provide an explanation in the narrative response to Element 8C regarding the resources available for each program.

The Commission is aware that the actual budget forms reviewed on-site by the team may have different categories.

**ON-SITE FORMS REQUIRED BY THE START OF THE VISIT**

The following three forms **MUST** be provided to the Program Reviewers **as electronic Word documents** using a virtual platform determined by the program at **least 14 days prior to the visit**. In addition to the forms, programs also will need to provide electronic access to all On-site Materials using the virtual platform. If Document Reviewers have asked the program to submit additional information, these items must be provided electronically to the On-site Reviewers at least one day prior to the start of the on-site visit.

[**General Information Form:**](#GenInfoForm)

This form provides an overview of your program and is required even if there have been no changes since submission of your Self-study Report.

[**Persons Interviewed Form**](#PersonsInterviewedForm)**:**

This form identifies the names, credentials, and titles (or areas of responsibility) of those individuals whom the On-site Reviewers will interview during the site visit and becomes part of the Program Review Report. The program can update this form as the on-site visit date nears or the program should update this form as the on-site visit concludes and provide the on-site reviewers with a final version of the form.

[**Materials Provided On-Site Form:**](#RequiredVisitMaterialsList)

This form identifies the materials that are expected to be available on site for the team to review and becomes part of the Program Review Report. The items listed on this form are required and must be made available 14 days prior to the on-site visit, unless the item does not exist, in which case, the form should indicate that the item does not exist (i.e., N/A). The program should add to the form any additional materials being made available on-site and provide the on-site reviewers with a final version of the form.

Sharing of Materials Virtually:

Possible options for sharing documents with the team include, but are not limited to, a learning management system (e.g., Blackboard or Canvas) or a cloud-based secure document-sharing platform. Confidential documents that cannot be shared virtually, such as student and faculty files, should be noted on the Materials Provided On-Site Form and will need to be available during the on-site visit. Required material and documents that may be too large to share virtually, such as clinical contracts, can have samples included in the virtual submission of documents to the team members. The entire set of confidential files and large documents will then be reviewed during the on-site visit.

[Go to Appendix Instructions](#InstructionsAppendices)

| **row** | **Attach (Refer) to Element(s)** | **APPENDIX LIST (February 2024)****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**](#SSRCheckInList)**,** provided as a **Word** document | SSR Check In.doc |
| **3** | **1C1** | **For Initial Accreditation only:** [Retention Rate Table](#RetentionRateTable) (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](#AssessmentMatrix) (forms packet) | Program Assessment Matrix.pdf |
| **6** | **2C** | Curriculum Assessment Matrix (no required format) | Curriculum Assessment Matrix.pdf |
|  | **2C** | **For Initial Accreditation Only:** If appropriate, provide revised syllabi as appendix to 2C; file name should clearly indicate what it is: e.g., S-PT999 Revised Class of 2023.CAPTE has to determine if the program experienced by the charter class should be accredited. Therefore, course syllabi in Course List and ALL 7A-D responses MUST represent curriculum experienced by the charter class. Revised syllabi are to be added as an appendix to 2C. | Syllabus‐Course Prefix & Number Revised Class of 20XX.pdf(for example: Syllabus‐PT999 Revised Class of 2023.pdf) |
| **7** | **2A (2C)** | Survey forms used to collect data from stakeholders; combine into one PDF | Survey Forms.pdf |
| **8** | **2D** | Planning document (no required format) | 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](#PolicyLocationChart) (forms packet) the policiesand 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** | **3C (4A, 8A)** | [Core Faculty Workload Form](#CoreFacultyWorkloadDistributionForm) – 2/2024)(Forms packet). | Workload Form – Core Faculty.pdf |
| **12** | **3C (4D)** | [Associate Faculty Workload Form](#AssociatedFacultyWorkloadDistributionFor) (Forms packet). | Workload Form – Associate Faculty.pdf |
| **13** | **3D** | Include in [Policy Location Chart](#PolicyLocationChart) (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 |
| **14** | **3C (3E, 4E, 4F, 4H)** | Include in [Policy Location Chart](#PolicyLocationChart) (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 |
| **15** | **3C (3D, 3E, 4E, 4F, 4H)** | Institutional Faculty Handbook if available  | Handbook Institution Faculty.pdf |
| **16** | **3C (3D, 3E, 4E, 4F, 4H)** | Program Faculty Handbook, if available | Handbook Program Faculty.pdf |
| **17** | **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 |
| **18** | **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 |
| **19** | **3H** | Include in [Policy Location Chart](#PolicyLocationChart) (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 |
| **20** | **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 |
| **21** | **4J (4O)** | Include in [Policy Location Chart](#PolicyLocationChart) (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 |
| **22** | **4J (4O)** | Clinical Education Handbook, if available | Clinical Education Handbook.pdf |
| **23** | **4N** | Include in [Policy Location Chart](#PolicyLocationChart) (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 |
| **24** | **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 Be Competent.pdf |
| **25** | **5A** | Include in [Policy Location Chart](#PolicyLocationChart) (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 |
| **26** | **5A** | Student Recruitment Materials, if available | Student Recruitment Materials.pdf |
| **27** | **5B** | Indicate where each of the items identified in the narrative is located; include the name 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. At a minimum, provide a bookmarked PDF that includes: the cover page of the document (if applicable), a table of contents (if one exists), and copies of web pages related to the Required Element(s) being addressed | Relevant Student Information.pdf |
| **28** | **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. If only available via URL, put URL on a Word document and upload as an appendix. Be sure the URL is not password protected. | Catalog Undergraduate.pdfCatalog Graduate.pdf |
| **PT: 5B (6E, 6N)** |
| **29** | **5C** | Copy of enrollment agreement, if used | Enrollment agreement.pdf |
| **30** | **5D** | Include in [Policy Location Chart](#PolicyLocationChart) (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 |
| **31** | **5D (5E)** | Institutional Student Handbook | Handbook Institution Student.pdf |
| **32** | **5D (5E)** | Program Student Handbook, if available | Handbook Program Student .pdf |
| **33** | **5E** | Include in [Policy Location Chart](#PolicyLocationChart) (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 |
| **34** | **PTA**:**6D (7A, 7B, 7C, 7D)** | [Plan of study](#RequiredPlanofStufy) that list courses by term and includes prefix, #, title, credits, and student contact hours broken down by lecture, lab, independent study and clinical hours, plus primary faculty and other instructors. (Forms packet).1. Curriculum Table (optional for 7Ds)

**FOR INITIAL ACCREDITATION ONLY:** if the curriculum has changed since the start of the program, provide a 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.pdf7D PTA Curriculum Table.pdf7D PT Curriculum Table.pdfUse the relevant form & name |
| **PT:****6E (7A, 7B, 7C, 7D)** |
| **35** | **6J-PTA or 6L- PT, (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 (PTA) or 6L1-6L5 (PT). 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 |
| **36** | **PT ONLY****7A** | **PT ONLY:** [7A PT Content Chart](#Chart7APT) (forms packet), to identify sample objectives at the highest expect level for each content area delineated in Element 7A. | 7A PT Content Chart.pdf |
| **37** | **7B** | **Use the appropriate chart,** [7B PTA Content Chart](#Chart7BPTA) (forms packet) **OR** [7B PT Content Chart](#Chart7BPT) (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 |
| **38** | **PT ONLY****7C** | **PT ONLY:** [7C Content Chart](#Chart7CPT) (forms packet) that identifies sample objectives at the highest expect level for each content area delineated in Element 7C. | 7C PT Content Chart.pdf |
| **39** | **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. At least one objective for each of the separate items. In order to accommodate this additional information, the narrative response for these elements can be provided as an appendix. Be sure the curriculum map contains an item for each intervention or test and measure. | 7D PTA Curriculum Table.pdf (optional) |
| **40** | **8F** | [Clinical Education Sites Available Form](#ClinEdPlacementsAvailable) (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 |
| **41** | **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 |
| **42** | **8H** | Identify where information related to academic, counseling, health, disability, and financial aid services is available to students. | Policy Location Chart.pdf |
| **43** | **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.** |  |
| **44** | **Related Elements** | [URL Listing Table](#URLListingTable) (forms packet)  | URL Listing Table.pdf |
| **45** | **Related Elements; DO NOT ATTACH to elements:****4A, 4D, 4G, 4I, 4K** | [CV](#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. **DO** include CVs for those working as Lab Assistants in courses where they are responsible for working with students 50% or more of lab contact hours. Ensure faculty teaching assignments are inclusive and current in the final section of each individual CV. | CV‐Last Name First Name.pdf(for example: CV‐Smith Mary.pdf) |
| **46** | **PT ONLY****Related Element:****4B** | [Core Faculty Scholarship Form](#ScholarshipForm) (forms packet September 2023 version); 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) |
| **47** | **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. | Syllabus‐Course Prefix & Number.pdf(for example: Syllabus‐PTA256.pdf) |
| **47** | **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, CIET or PTA Mac. Note: The Portal will not require an exam for any course identified as a clinical education course. **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 staff to determine how best to provide exams for the current curriculum. | Exam‐Course Prefix & Number.pdf(for example: Exam‐PTA256.pdf) |

**Program Assessment Matrix: Required Form (April 2015)**

|  |  |  |
| --- | --- | --- |
|  | **Required Element** |  |
| **2B1** | **Admissions process meet the needs and expectations of the program** | **Individual responsible for coordinating this assessment component:** | **Timeline:**  |
| **Sources of Information &/or Tools Used to Collect Data:**  |
| **Summary and Analysis of Data Collected:**  |
| **2B1** | **Admissions criteria and prerequisites meet the needs and expectations of the program** | **Individual responsible for coordinating this assessment component:** | **Timeline:**  |
| **Sources of Information &/or Tools Used to Collect Data:**  |
| **Summary and Analysis of Data Collected:**  |
| **2B2** | **Program enrollment appropriately reflects available resources, program outcomes and workforce needs** | **Individual responsible for coordinating this assessment component:** | **Timeline:**  |
| **Sources of Information &/or Tools Used to Collect Data:**  |
| **Summary and Analysis of Data Collected:**  |
| **2B3** | **Collective core faculty meet program and curricular needs.**  | **Individual responsible for coordinating this assessment component:** | **Timeline:**  |
| **Sources of Information &/or Tools Used to Collect Data:**  |
| **Summary and Analysis of Data Collected:**  |
| **2B3** | **Associated faculty meet program and curricular needs.**  | **Individual responsible for coordinating this assessment component:** | **Timeline:**  |
| **Sources of Information &/or Tools Used to Collect Data:**  |
| **Summary and Analysis of Data Collected:**  |
| **2B3** | **Clinical education faculty meet program and curricular needs.**  | **Individual responsible for coordinating this assessment component:** | **Timeline:**  |
| **Sources of Information &/or Tools Used to Collect Data:**  |
| **Summary and Analysis of Data Collected:**  |
| **2B4** | **Program resources: financial resources** | **Individual responsible for coordinating this assessment component:** | **Timeline:**  |
| **Sources of Information &/or Tools Used to Collect Data:**  |
| **Summary and Analysis of Data Collected:**  |
| **2B4** | **Program resources: staff (administrative/secretarial & technical support)**  | **Individual responsible for coordinating this assessment component:** | **Timeline:**  |
| **Sources of Information &/or Tools Used to Collect Data:**  |
| **Summary and Analysis of Data Collected:**  |
| **2B4** | **Program resources: space** | **Individual responsible for coordinating this assessment component:** | **Timeline:**  |
| **Sources of Information &/or Tools Used to Collect Data:**  |
| **Summary and Analysis of Data Collected:**  |
| **2B4** | **Program resources: equipment, technology & materials** | **Individual responsible for coordinating this assessment component:** | **Timeline:**  |
| **Sources of Information &/or Tools Used to Collect Data:**  |
| **Summary and Analysis of Data Collected:**  |
| **2B4** | **Program resources: library and learning resources** | **Individual responsible for coordinating this assessment component:** | **Timeline:**  |
| **Sources of Information &/or Tools Used to Collect Data:**  |
| **Summary and Analysis of Data Collected:**  |
| **2B4** | **Program resources: student services (academic, counseling, health, disability, and financial aid services)** | **Individual responsible for coordinating this assessment component:** | **Timeline:**  |
| **Sources of Information &/or Tools Used to Collect Data:**  |
| **Summary and Analysis of Data Collected:**  |
| **2B5** | **Program policies and procedures, as well as relevant institutional policies and procedures meet program needs** | **Individual responsible for coordinating this assessment component:** | **Timeline:**  |
| **Sources of Information &/or Tools Used to Collect Data:**  |
| **Summary and Analysis of Data Collected:**  |
| **2B5** | **Analysis of the extent to which program practices adhere to policies and procedures** | **Individual responsible for coordinating this assessment component:** | **Timeline:**  |
| **Sources of Information &/or Tools Used to Collect Data:**  |
| **Summary and Analysis of Data Collected:**  |
| **Additional rows provided if program wants to report on the assessment of other areas. Delete if not using.** |
|  |  | **Individual responsible for coordinating this assessment component:** | **Timeline:**  |
| **Sources of Information &/or Tools Used to Collect Data:**  |
| **Summary and Analysis of Data Collected:**  |
|  |  | **Individual responsible for coordinating this assessment component:** | **Timeline:**  |
| **Sources of Information &/or Tools Used to Collect Data:**  |
| **Summary and Analysis of Data Collected:**  |
|  |  | **Individual responsible for coordinating this assessment component:** | **Timeline:**  |
| **Sources of Information &/or Tools Used to Collect Data:**  |
| **Summary and Analysis of Data Collected:**  |
|  |  | **Individual responsible for coordinating this assessment component:** | **Timeline:**  |
| **Sources of Information &/or Tools Used to Collect Data:**  |
| **Summary and Analysis of Data Collected:**  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| **CORE FACULTY WORKLOAD DISTRIBUTION FORM (Feb 2024)** |  |
| **CORE FACULTY NAME** | **FTE (CAPTE Calculations)** | **FTE for Program** | **TEACHING** | **SERVICE** | **\*Administrative Responsibilities** | **Scholarship****(Pt Programs Only)** | **Enrolled In Degree Program (for which release time is given)** | **TOTAL** | **OVERLOAD ( % time beyond normal/contracted workload)** |
| **Total contact hours per term in program seeking accreditation** | **Teaching in entry-level program (includes. preparation and course-related advisement)** | **Teaching in other programs** | **Clinical Practice (for which release time is given)**  | **Committee Work, General Advising, etc.** |
|  |  |  | Fall | Winter | Spring | Summer | % time | % time | % time | % time | % time | % time | % time | % time | % time |
| In alphabetical order |  |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |
|  |   |  |  |  |  |  |   |   |   |   |   |   |   |   |  |

|  |
| --- |
| **ASSOCIATED WORKLOAD DISTRIBUTION FORM (Aug 2022)** |
| **FACULTY** **NAME** | **TEACHING** |
| **FTE (CAPTE calculations)** | **Total Contact Hours in Entry Level Program per Term** |
| **In Alphabetical Order** |  | **Fall** | **Winter** | **Spring** | **Summer** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**CURRICULUM VITAE (Required Form) (Aug 2022)**

Name

Name of Institution

Education: post high school, from most recent to earliest

Degree

Institution

Major

Date awarded (month/year) or anticipated to be awarded

Number of credits for education content courses or granted exception date (PTA only)

Licensure Information:

State and Registration Number:

Certifications (eg, ABPTS):

Employment and Positions Held: from most recent to earliest

Title/position

Faculty rank, if applicable

Tenure status or other institutional status, if applicable

Institution

City and State

Duration (from – to -)

Peer Reviewed Publications: from the most recent to the earliest (include those accepted for publication but not yet published but indicate as such).Include papers in journals, A-V materials published, monographs, chapters in books, and books; **provide full bibliographic citation.**

Peer Reviewed Scientific and Professional Presentations: from the most recent to the earliest

Presenter(s)

Title

Occasion

Date

Funded/In Review Grant Activity:

Authorship/participation

Amount of funding awarded

Nature of project

Date and source

Current/Active Research Activity:

Authorship

Nature

Funding (external, grant, internal)

Membership in Scientific/Professional Organizations:

Organization

Duration (from – to -)

Position, if applicable

Consultative and Advisory Positions Held:

Title or nature

Agency

Duration (from – to -)

Community Service:

Title or nature

Agency

Duration (from – to --)

Services to the University/College/School on Committees/Councils/Commissions:

University-wide

Dates

Memberships & chairmanships, if applicable

School

Dates

Memberships & chairmanships, if applicable

Department

Dates

Memberships & chairmanships, if applicable

Honors and Awards:

Title or nature

Awarding agency

Date

Continuing Education Attended: list ONLY courses taken within the last five (5) years that specifically relate to responsibilities in the entry-level program.

Current Teaching Responsibilities in the Entry-Level Program for Academic Year of Program Review: list in sequence, by term (do NOT include courses taught at other institutions!) and include the type and role associated with each course.

FACULTY SCHOLARSHIP FORM (Required Form) (September 2023)

Provide 5-10 selected activities during past ten (10) year period

|  |
| --- |
| **Core Faculty Name and Credentials:** **Date Form Completed:** **Date of Hire:** **Total years as a core faculty member in any PT program:**  |
| **Principal Topics of Scholarly Inquiry** |  |
| **Peer Reviewed Scholarly Accomplishments Completed During the Past 10 years.****Cite scholarly accomplishments that have been disseminated in a peer-reviewed format. Provide complete bibliographic citations for all publications or presentations. For other types of accomplishments, provide a brief description that includes the dissemination format and peer review process.****Guidance:** **1. Platform presentation or poster or abstract from one study or scholarly accomplishment = 1 product.****2. Two or more platform presentations and/or posters and/or abstracts from one study or scholarly accomplishment = 1 product.****3. One manuscript and one platform presentation and/or poster and/or abstract from one study or scholarly accomplishment = 2 products.****Use only abbreviations that would be widely known.** **If new faculty do not have a minimum of 5 scholarly products, identify their research mentor and plans for coming into compliance with this Element (4B).**  | Provide a minimum of 5 and a maximum of 10 **selected** examples that are aligned with your scholarly agenda. |
| **Specific Measurable Scholarship Goals** **These goals should minimally reflect 2 accomplishments that will be disseminated in a peer review format within the next 4 years.****Number each goal.** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Ongoing/Planned Scholarly Activities Related To Above Goals** **For each of the above goals, list the related ongoing or planned scholarly activities including the project title and your role in the project.****Add rows as necessary** | **Related Goal #(s)** | **Project Title**  | **Role in Project** |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Narrative** **Scholarly accomplishments are expected to relate to the principal topics of scholarly inquiry, scholarship goals and scholarly activities. All accomplishments should meet the definition of scholarship as defined in the Self-study Report and the Position Paper.** **If these relationships are not obvious, provide a narrative description.****For new faculty who do not have a minimum of scholarly products, identify their research mentor and planned activities to come into compliance with Element 4B.** |  |

| **Policy Location Chart (Required Form) (January 2019)** |
| --- |
| **Related Element(s)** | **Policy Is Related to:** | **Policies & Procedures Related to:** | **Name of document(s) policy located in** | **Page # AND****URL as applicable** | **When Is information Provided to Stakeholders** |
| **3C** | Faculty | Faculty responsibility for determining & implementing academic standards |  |  |  |
| **3C** | Faculty | Faculty roles |  |  |  |
| **3C** | Faculty | Faculty workload |  |  |  |
| **3D** | Faculty & Staff | Equal opportunity and nondiscrimination for faculty and staff |  |  |  |
| **3D** | Students | Equal opportunity and nondiscrimination for prospective/enrolled students |  |  |  |
| **3E** | Faculty & Staff | Due process |  |  |  |
| **3E** | Faculty & Staff | Confidentiality of records and other personal information |  |  |  |
| **3E** | Core Faculty | Personnel policies, including merit, promotion, and tenure |  |  |  |
| **3E** | Core Faculty | Faculty evaluation and development |  |  |  |
| **3E** | Core Faculty | 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 |  |  |  |
| **3E** | Associated Faculty | Policies applicable to associated faculty; including faculty evaluation and development |  |  |  |
| **3E** | Clinical Education Faculty | Policies applicable to clinical education faculty |  |  |  |
| **3E** | Staff | Policies related to staff |  |  |  |
| **3E** | Patients / human subjects | Other relevant policies including patients and human subjects used in demonstrations and practice for educational purposes |  |  |  |
| **3F** | Outside complaints | Handling complaints that fall outside the realm of due process, including a prohibition of retaliation following complaint submission |  |  |  |
| **3H1****thru****3H5** | Faculty | Maintaining compliance with accreditation policies and procedures. Note: it is acceptable for these to be part of a job description. |  |  |  |
| **4J** | Clinical Education: students | Clinical Education policies for students; Tools used to assess performance of students |  |  |  |
| **4J** | Clinical Education: CIs | Clinical instructor qualifications; Clinical instructor responsibilities; andTools used in assessing the performance of clinical instructor |  |  |  |
| **4N** | Core Faculty Setting Policies Related to Clinical Education | Core faculty developing and implementing: Expectations for students to demonstrate that they are competent and safe prior to engaging in clinical education; and Core faculty determining which skills students must demonstrate competent and safe performance prior to engaging in clinical education |  |  |  |
| **4O** | Clinical Education: CI Qualifications | Expectations for clinical instructor qualifications |  |  |  |
| **5A** | Admissions | Student recruitment and admission, including but not limited to:• student recruitment;• maintenance of planned class size; and • prevention of over-enrollment |  |  |  |
| **5D** | Students | Due process |  |  |  |
| **5D** | Students | Confidentiality of records and other personal information |  |  |  |
| **5D** | Students | Safety of students when in the role of subjects or patient-simulators |  |  |  |
| **5D** | Students | Calibration and safety check of laboratory equipment; and Use and maintenance of equipment |  |  |  |
| **5D** | Students (Clin Ed)  | What student information is shared with the clinical facility (e.g., criminal background check, academic standing) and the process used to share this information |  |  |  |
| **5D** | Students | Requests for accommodation (in the classroom or clinical education) for students with disabilities |  |  |  |
| **5D** | Students | Information provided to students regarding potential health risks they may encounter throughout the education program and in clinical practice |  |  |  |
| **5D** | Students | Governing use of standard precaution |  |  |  |
| **5D** | Students | Governing the storage and use of any hazardous materials |  |  |  |
| **5D** | Students | Safety regulations and emergency procedures |  |  |  |
| **5D** | Students | Clinical education experiences, including HIPAA and a patient’s right to refuse treatment by a student |  |  |  |
| **5D** | Students | Laboratory access by students outside scheduled class time |  |  |  |
| **5E** | Students  | Student retention, progression and dismissal |  |  |  |
| **8H** | Students | Identify where information related to academic, counseling, health, and disability services is available to students |  |  |  |
| **8H** | Students | Identify where information related to financial aid services is available to students |  |  |  |

**RETENTION RATE TABLE (Feb 2021)**

***This table is REQUIRED for INITIAL ACCREDITATION DECISIONS as the program does not have any graduates at the time the Self-Study Report is submitted.***

*CAPTE occasionally will also request it from accredited programs.*

 *Report on all cohorts in separate columns; delete columns if not needed.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  | **Month/Year of Matriculation (mm/yy):** |  |  |  |
|  | **Month/Year of Expected On Time Graduation (mm/yy):** |  |  |  |
| **A** | Number of **NEW** Students Admitted to Original Cohort in each reporting year who enrolled in the first term of the professional/technical program.This number is to be based on the # of **NEW** students who started the first term of the professional/technical program and were still matriculated **AFTER DROP/ADD. NEW STUDENTS ONLY—DO NOT COUNT RE-ENTRY/DECELERATED STUDENTS** |  |  |  |
|  | **Of the number of students reported in A,** what is the number of students: |  |  |  |
| **B** | Who are expected to graduate on time |  |  |  |
| **C** | Who are expected to graduate within 150% of the time to normally complete the program |  |  |  |
| **D** | Who left the program because they did not meet academic standards, including clinical standards  |  |  |  |
| **E** | Who have left the program due to non-academic reasons (e.g., on active military duty, had health or family issues, changed mind, transferred) |  |  |  |
|  | **Retention Rate: (B+C)/(A - E)** |  |  |  |

**Plan of Study- 2022 version**

**­­­**

|  |  |  |
| --- | --- | --- |
| **COURSES** (list in sequence by term as in the plan of study) | **SCHEDULED STUDENT CONTACT HOURS PER TERM** | **FACULTY** CC= Course CoordinatorI=Instructor (responsible entire course)L=Lecturer (provides instruction)LD=Lab DirectorLA=Lab AssistantIf need, classify other role(s) and explain in narrative |
| **Year of term** (e.g., 1, 2, 3); **Number of term** (e.g., 1, 2, 3, 4, 5)  | Course prefix & Number | Course Title | Length of Course In weeks (Incl. exam week) | Credits | Classroom (e.g., lecture, seminar, tutorial) | Laboratory | Distance Education | Other (e.g., independent study) | Clinical Education | **Faculty member with primary responsibility for the course****Provide****ROLE: Name** | **Other Faculty who participate in the course (see instructions for which faculty to include)** **Provide****ROLE: Name** |
|  |  |   |  |  |  |  |  |  |  |   |   |
|  |  |   |  |  |  |  |  |  |  |   |   |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |

**7A Chart: PT ONLY**

| **7A PT CONTENT CHART (Required) (January 2019)** |
| --- |
| **Content Area** | **Provide a maximum of 3-5 examples of course objectives demonstrating the highest expected level;** **Include: Course Prefix & #, Objective #, Wording of Objective** |
| Anatomy |  |
| Physiology |  |
| Genetics |  |
| Exercise Science |  |
| Biomechanics |  |
| Kinesiology  |  |
| Neuroscience |  |
| Pathology |  |
| Pharmacology |  |
| Diagnostic Imaging |  |
| Histology |  |
| Nutrition |  |
| Psychosocial aspects of health & disability |  |

**7B Chart: PTA Version**

| **7B PTA CONTENT CHART (Required) (January 2019)** |
| --- |
| **Content Area** | **Provide a maximum of 3-5 examples of course objectives demonstrating the highest expected level (where provided in the curriculum with at least one objective at the highest level);** **Include: Course Prefix & #, Objective #, Wording of Objective** |
| Cardiovascular Systems |  |
| Endocrine & Metabolic Systems |  |
| Gastrointestinal System |  |
| Genital & Reproductive Systems |  |
| Hematologic system |  |
| Hepatic & Biliary Systems |  |
| Immune System |  |
| IntegumentarySystem |  |
| Lymphatic System |  |
| MusculoskeletalSystem |  |
| Nervous System |  |
| Respiratory System |  |
| Renal & Urologic systems |  |
| Common Medical & Surgical Conditions |  |

**7B Chart: PT Version**

| **7B PT CONTENT CHART (Required) (January 2019)** |
| --- |
| **Content Area** | **Provide a maximum of 3-5 examples of course objectives demonstrating the highest expected level;** **Include: Course Prefix & #, Objective #, Wording of Objective** |
| Communication |  |
| Ethics & Values |  |
| Management  |  |
| Finance  |  |
| Teaching & Learning |  |
| Law |  |
| Clinical Reasoning |  |
| Evidenced-Based Practice |  |
| Applied Statistics |  |

**7C Chart: PT ONLY**

| **7C PT CONTENT CHART (Required) (January 2019)** |
| --- |
| **Content Area** | **Provide a maximum of 3-5 examples of course objectives demonstrating the highest expected level;** **Include: Course Prefix & #, Objective #, Wording of Objective** |
| Cardiovascular Systems |  |
| Endocrine & Metabolic Systems |  |
| Gastrointestinal System |  |
| Genital & Reproductive Systems |  |
| Hematologic system |  |
| Hepatic & Biliary Systems |  |
| Immune System |  |
| IntegumentarySystem |  |
| Lymphatic System |  |
| MusculoskeletalSystem |  |
| Nervous System |  |
| Respiratory System |  |
| Renal & Urologic systems |  |
| System Interactions |  |
| Differential Diagnosis |  |
| Common Medical & Surgical Conditions |  |

**CLINICAL EDUCATION SITES AVAILABLE FOR ACADEMIC YEAR OF CAPTE ON-PROGRAM REVIEW**

**BASED ON CURRENT CONTRACTUAL ACCESS (Required Form) (November 2015)**

|  |
| --- |
| **Number of Students Currently In** |
| **Year 1** | **Year 2** | **Year 3 (PT only), if applicable** | **Year 4 (PT only), if applicable** |
|  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Clin Ed Course**(Prefix & # & Name)Add rows as needed | **Year in Program (e.g., 1, 2, 3)** | **Term in Program (e.g., 1, 2, 3, 4,)** | **F=Full time****P=Part time** | **Type(s) of Settings**(if different types of experiences can meet the needs of the clin ed course, list separately and provide data for next 3 columns for each type of experience) | **#** **Placements****Needed**  | **#** **Placements confirmed**  | **# of Additional Placements Needed** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

**URL LISTING TABLE** (September 2023)

***This table is REQUIRED for URL addresses of given unique resources on the Web referred to in the time the Self-Study Report is submitted.***

|  |  |  |
| --- | --- | --- |
| **SRE** | **Document/Webpage name** | **URL with hyperlink** |
| 1A | SAMPLE CHARTUniversity Graduate Catalog (Catalog Institution Graduate) | [www.univalexandria.edu/catalog](http://www.univalexandria.edu/catalog)  |

|  |  |  |
| --- | --- | --- |
| **SRE** | **Document/Webpage name** | **URL with hyperlink** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
| **Self-Study Checklist (Required Form – 2 pages; upload as a WORD document) (September 2023)****Programs must complete and attach to the Preface in the Portal**  |
| **Institution** |  | **Date** |  |
| **Prog** | **Staff** | **Format** | **Comment** |
|  |  | Narrative has paragraph & line breaks |  |
|  |  | **Program Information** | **Comment** |
|  |  | Allocations and Expenses form (8C)* Correct years: AY of review, previous AY, next AY
* Data provided each category; Allocations don't indicate 0 dollars
 |  |
|  |  | 1 page list (by term) of the curriculum plan (PTA: 6D; PT: 6E)  |  |
|  |  | Description of program's required clinical experiences (PTA: 6J; PT: 6L) |  |
|  |  | **Narrative description** of where and how content is taught for each practice expectation (7D: PT and PTA); list of learning activities is insufficient |  |
|  |  | A sample (2-5) of course objectives for each 7D practice expectation (if a curricular thread, provide up to 10); **PTA ONLY:** objectives show a progression (introduction to expected level of performance) |  |

|  |  | **Required Appendices & Required Naming Conventions** | Place a √ to confirm file name; if necessary provide different file name | Staff only |
| --- | --- | --- | --- | --- |
|  |  | [7A PT Content Chart.pdf](#Chart7APT) **(PT ONLY)** |  |  |
|  |  | [7B PTA Content Chart.pdf](#Chart7BPTA) OR [7B PT Content Chart.pdf](#Chart7BPT) |  |  |
|  |  | [7C PT Content Chart.pdf](#Chart7CPT) **(PT ONLY)** |  |  |
|  |  | Catalog Undergraduate.pdf |  |  |
|  |  | Catalog Graduate.pdf **(PT ONLY)** |  |  |
|  |  | \*CE Analysis of Student Performance.pdf | **\* Initial Accred ONLY: provided 30 days before CAPTE review** |
|  |  | [CE Sites Available Chart.pdf](#ClinEdPlacementsAvailable) |  |  |
|  |  | CE Student Experiences.pdf |  |  |
|  |  | \*CE Student Experiences.pdf | **\* for Initial Accred this document is provided 30 days before CAPTE review** |
|  |  | \*CE Student Performance Summary.pdf | **\* Initial Accred ONLY: provided 30 days before CAPTE review** |
|  |  | Clin Ed Written Agreement.pdf |  |  |
|  |  | Clinical Education Handbook.pdf |  |  |
|  |  | Curriculum Assessment Matrix.pdf |  |  |
|  |  | [CV‐Last Name First Name.pdf](#CV) |  |  |
|  |  | Exam‐Course Prefix & Number.pdf |  |  |
|  |  | Enrollment agreement.pdf |  |  |
|  |  | Handbook Institution Faculty.pdf |  |  |
|  |  | Handbook Institution Student.pdf |  |  |
|  |  | Handbook Program Faculty.pdf |  |  |
|  |  | Handbook Program Student .pdf |  |  |
|  |  | Organizational Chart.pdf |  |  |
|  |  | Other Policies.pdf |  |  |
|  |  | [Plan of Study.pdf](#RequiredPlanofStufy) |  |  |
|  |  | Planning Document.pdf |  |  |
|  |  | Policies and Procedures Program.pdf |  |  |
|  |  | [Policy Location Chart.pdf](#PolicyLocationChart) |  |  |
|  |  | [Program Assessment Matrix.pdf](#AssessmentMatrix) |  |  |
|  |  | Relevant Student Information.pdf |  |  |
|  |  | \*[Retention Rate.pdf](#RetentionRateTable) | **\* Initial Accred ONLY** |
|  |  | [Scholarship-Last Name First Name](#ScholarshipForm).pdf  |  |  |
|  |  | Syllabus‐Course Prefix & Number.pdf |  |  |
|  |  | Signature Page.pdf |  |  |
|  |  | Skill List-Expected To Be Competent.pdf |  |  |
|  |  | Student Recruitment Materials.pdf |  |  |
|  |  | Survey Forms.pdf |  |  |
|  |  | [URL Listing Table](#URLListingTable)  |  |  |
|  |  | [Workload Form – Core Faculty.pdf](#CoreFacultyWorkloadDistributionForm) |  |  |
|  |  | [Workload Form – Associate Faculty.pdf](#AssociatedFacultyWorkloadDistributionFor) |  |  |

**General Information Section of the SSR (April 2015)**

The following fields are included in this section of the Portal. This information is provided to facilitate the collection of data.

**General Information**

**Academic Calendar/Program Length**

* Type of term (Quarter, Semester, or Trimester)
* Total number of terms to complete degree
* Total number of terms in academic year
* Term length (in weeks)
* Length of professional/technical coursework in weeks (including exam week)

**Clinical Education**

* Total hours of clinical education
* Number of weeks of full-time clinical education

**URLs**

* If the following URL does not correctly identify the location where the required accreditation statement can be found, provide the correct URL
* If the following URL does not correctly identify the location where the required student achievement data can be found, provide the correct URL

**General Information-Faculty**

**Faculty Information**

* Number of PT FULL-TIME core faculty positions
* Number of PT PART-TIME core faculty positions
* Number of Non-PT FULL-TIME core faculty positions
* Number of Non-PT PART-TIME core faculty positions
* \*Number of FTE's the above number of core faculty represent
* Describe the definition of 1 FTE at your institution (i.e., 9-month, 10-month, 11-month, 12-month using the CAPTE formula such as 12 months = 1.33 FTE and 9 months = 1 FTE)

**Current Vacancies**

* Number of current vacancies in currently allocated (budgeted) core faculty positions
* Percent of core faculty positions turned over in last year

**Projected Vacancies**

* Number of projected vacancies in currently allocated positions:

**Associated/Adjunct Faculty**

* Number of associated/adjunct faculty who teach [in] half the contact hours of a course
* \* FTEs represented by the previous number of associated/adjunct faculty

\* See instructions for determining FTEs in the Core or Associated Faculty Information Sheet

**General Information-Students**

Reflects number of students in the technical (PTA) or professional (PT) program. Totals will auto calculate. The total number of men + women **must =** the total for ethnicity/race.

**PTA Programs: Number of Students in the Program**

**Men**

Freshman

Sophomore

**Women**

Freshman

Sophomore

**PT Programs: Number of Students in the Professional Program, enter zero (0) where applicable**

**Men**

Senior

Grad 1

Grad 2

Grad 3

Grad 4

**Women**

Senior

Grad 1

Grad 2

Grad 3

Grad 4

**Ethnicity/Race**

Hispanic/Latino of any race

American Indian/Alaskan Native

Asian

Black or African-American

Native Hawaiian or Other Pacific Islander

White

Two or more races

Unknown

**Core & Associated Faculty Information Sheet (September 2023)**

Include associated/adjunct faculty who teach [in] 50% or more of the contact hours of a course. This includes information for those working as Lab Assistants in courses where they are responsible for working with students 50% or more of lab contact hours. These fields are the same ones as the AAR portal pages.

The following are required fields for all faculty, except where otherwise noted. It is suggested that you print, carefully review and revise as necessary previously submitted Portal responses that pre-populate these fields.

|  |  |
| --- | --- |
| **Field** | **Options, if applicable** |
| **First Name** |  |
| **Last Name** |  |
| **Credentials** |  |
| **Faculty Type**  | Core or Associated |
| **Position**  | Chair/Director; Clin Ed Coordinator, Other Faculty; Director & Clin Ed CoordinatorNote: N/A (select this for associated faculty) |
| **Gender** |  |
| **Months Appointed Per Academic Year** |  |
| **Race** | Hispanic/Latino of any race Native Hawaiian or other Pacific IslanderAmerican Indian/Alaskan Native WhiteAsian Two or more racesBlack or African American Unknown |
| **FTE For Institution** | [See FTE Calculations](#FTECalculations); For term/semester hires use “zero” |
| **FTE For Program** | [See FTE Calculations](#FTECalculations);Do not include teaching or administrative responsibilities outside entry-level program  |
| **Year of Birth** |  |
| **PT or PTA** | PT PTA Both Neither |
| **Highest Earned Clinical Degree (PT/PTA Degree,** **including tDPT degree)** | Associate Bachelor + Transition DPTBaccalaureate Certificate + Transition DPTCertificate Master + Transition DPTMaster Not ApplicableDPTPlease note: this category is to identify the highest earned clinical degree held by faculty who are PT or PTAs. Basic science faculty should choose Not Applicable. |
| **Highest Earned Academic Degree (Degree earned beyond entry-level degree, do NOT include tDPT degree)** | BaccalaureateMaster (advanced)Professional Doctorate (EdD, DrPH, DSc, etc.)Doctor of PhilosophyOther (Not entry-level DPT or tDPT)Not Applicable (use this option if no degree higher than entry-level clinical degree or tDPT degree has been earned) |
| **Discipline of Highest Earned Degree** | AdministrationAnatomyEducation (adult ed, allied health, higher ed, higher ed admin, etc.)Ethics; Humanistic StudiesExercise Physiology; Ex Science; Sports MedGerontologyHealth Sciences; Allied HealthKinesiology; Biomechanics; PathokinesiologyMedicine, Other Health DisciplineMotor Learning Neuroscience; NeuroanatomyNot ApplicableOtherPediatric PT; Special EdPhysical TherapyPhysiologyPublic HealthNot Applicable |
| **Rank** | Lecturer Administrative AppointmentInstructor Clinical Assistant ProfessorAssistant Professor Clinical Associate ProfessorAssociate Professor Clinical ProfessorProfessor OtherGraduate Research/TA(use ‘Other’ for faculty with a rank other than those listed) |
| **Total Years as Faculty** | Portal will only allow a whole number; if less than one year enter “1”.  |
| **Total Years as Faculty in Program** | Portal will only allow a whole number; if less than one year enter “1”.  |
| **Primary Area of Expertise Taught in Program** | Administration/Management NeuroscienceAnatomy NoneCardiopulmonary OtherClinical Education PathologyClinical Medicine PediatricsEducation PhysiologyElectrotherapy/Modalities Professional issues, incl communications, ethicsGeriatrics Psychosocial Aspects of CareIntegumentary ResearchMusculoskeletal Therapeutic ExerciseNeuromuscular |
| **Secondary Area of Expertise Taught in Program**  | Administration/Management NeuroscienceAnatomy NoneCardiopulmonary OtherClinical Education PathologyClinical Medicine PediatricsEducation PhysiologyElectrotherapy/Modalities Professional issues, incl communications, ethicsGeriatrics Psychosocial Aspects of CareIntegumentary ResearchMusculoskeletal Therapeutic ExerciseNeuromuscular |
| **Enrolled in Degree Program** | Yes (Bachelors Program)Yes (Master’s Program)Yes (DPT program – this refers to a tDPT program)Yes (other Doctoral program)No |
| **Certified Clinical Specialist** | Yes No  |
| **Scholarly productivity** | Not involved in scholarship (select this for associated faculty) Actively engaged but product(s) not disseminatedActively engaged, <5 peer reviewed disseminated productsActively engaged, 5-10 peer-reviewed disseminated products in last 10 yrsActively engaged, >10 peer-reviewed disseminated products in last 10 yrs |
| **Tenure Status** | TenuredNot eligible (on clinical track)Non-tenured (on tenure track) Not eligible (for other reasons)No Tenure Track  |
| **Workload Distribution****(Core Faculty only)**(Provide % time involved in **each** area listed – total MUST equal 100%) | **Teaching** **(%)** Entry level Program **(%)** Other Programs **Service** **(%)** Clinical Practice [for which release time is given] **(%)** Committee Work/General Advising, etc**Administrative Responsibilities (%) For which release time is given****Scholarship (%)** [PT Programs Only]**Enrolled in Degree Program (%)** [for which release time is given]CAPTE expects programs to use a consistent formula to determine % time teaching based on contact hours |
| **Total Classroom Contact Hours Per Term** in Program Seeking Accreditation**Note: Core and Associated Faculty** | Fall WinterSpring Summer**Note:** This is not an AAR question; no data will pre-populate |
| **CV/Resume** | Upload CV (required for both core and associated faculty); see naming conventions **Note:** This is not an AAR question |
| **Scholarship Form (Core only)** | Upload Core Faculty Scholarship Form **for PT Core faculty ONLY**, see naming conventions**Note:** This is not an AAR question |
| **Qualifications** (25,000-character limit) | Enter narrative response to Element 4A (core) OR 4D (associated/lab assistants): Identify specific teaching and other responsibilities and describe the individual's contemporary expertise related to each assigned content area. Provide specific evidence! Don't just say Joe Smith has taught this course for the past 5 years OR that Joe Smith has 15 years of clinical experience! For example: provide practice experiences related to teaching responsibilities (list location, types of patients treated, dates of practice). In addition, describe the teaching effectiveness of this individual.**See Elements 4A and 4D for information required**.**Note:** This is not an AAR question; no data will pre-populate |

**COURSE LIST/COURSE DETAILS INSTRUCTIONS (Aug 2022)**

**The following is required for each course; instructions follow:**

 **Course Details**

Prefix & Number Course Title

Year of Term in Which Offered Number of Term in which Offered

Credits Length of Course (in weeks including exam)

Students/class Students/section

Type (Clinical Education Course, Elective, Foundational Content, All other courses, General Education, Technical Education)

Number of Sections

**Scheduled Student Contact Hours**

Classroom Clinical Education

Distance Learning Laboratory

Other

**Course Documentation**

Syllabus Exam

**INSTRUCTIONS**

**COURSE DETAILS**

**Course Prefix and Number:** Include the course prefix and number for each course in the entry level program. For electives, see information below.

**Course Title:** Course title should correspond to the course prefix and number. Provide the full title of the course unless the title exceeds 60 characters, which is the maximum length the Portal will accept.

Year of Term in Which Offered indicates the year in the program that the course is typically taken by students. Use sequential numbers (1, 2, 3, 4). Do NOT use actual years, e.g., NOT 2016. DO NOT USE ‘1’ for the first term of each year! See example below.

Number of Term in Which Offered indicates which term the course is typically taken by students. Use sequential NUMERALS (1, 2, 3, 4, 5, 6, 7, etc.); do not identify fall, spring, summer. If a course is offered more than once, list it only one time, identifying when the course is typically taken.

The following is an example for PTA programs:

|  |  |  |  |
| --- | --- | --- | --- |
| **Course** | **Offered In**Program in this example has 3 terms/year | **Year of Term** | **Number of Term**  |
| PT 120 Anatomy | 1st term of the 1st year | 1 | 1 |
| PSY 101 Psychology | 2nd term of the 1st year | 1 | 2 |
| PTA 201 Pathology | 1st term of the 2nd year  | 2 | 3 |
| PT 263 Clinical Experience III | 3rd term of the 2nd year  | 2 | 5 |

The following is an example for PT programs:

|  |  |  |  |
| --- | --- | --- | --- |
| **Course** | **Offered In**Program in this example has 3 terms/year | **Year of Term** | **Number of Term**  |
| PT 555 Anatomy | 1st term of the 1st year | 1 | 1 |
| PT 715 Clin Experience I | 1st term of the 2nd year | 2 | 4 |
| PT 762 Research Measures | 2nd term of the 2nd year  | 2 | 5 |
| PT 891 Clinical Experience III | 3rd term of the 3rd year  | 3 | 9 |

**Note:** The first two examples provided above could both represent fall courses (if the program has three terms per year). Since the table will sort by term, it is very important that the correct term be entered.

**Credits:** Indicate the total number of credits awarded for the course. The number of credits documented should be a single number and not a range;see information below regarding electives. Portal will not accept a decimal; if course credits contain a decimal, provide the nearest whole number.

**Length of Course (in weeks including exam week):** Identify the number of weeks that the course meets, including exam week. In some situations, this may vary from the standard length of the term. Use whole numbers.

**Students per Class:** total number(s) should reflect planned class size.

**Students per Section:** total number(s) should reflect planned class size.

**Type:** Use the following to determine the type of course.

**PTA Programs:**

**General Education:** prerequisite and general education courses.

**Technical Education:** physical therapist assistant courses.

**Clinical Education**: course where the majority of the time is spent in supervised clinical practice.

**PT Programs:**

**Clinical Education**: course where the majority of the time is spent in supervised clinical practice.

**Elective**[:](#h.4d34og8) List courses only if the credits are required for graduation.

**Foundational Content**: course devoted to foundational content in basic and applied sciences; these are the courses that are addressed in Elements 7A. (e.g., anatomy, physiology, genetics, exercise science, kinesiology, neuroscience, pathology, pharmacology; histology, nutrition and psychosocial aspects of health and disability.)

 Do not use this code if content is combined with non-foundational content; this code is **not** intended for courses that cover foundational PT skills.

**O**-for all other courses in the program; the majority of courses will have this designation!

**Exam and Syllabus:** Upload the syllabus and sample exam(s) for each course in a PDF format. There is only one exam link/course; therefore, for courses that have written and lab practical exams combine into one PDF document a sample: written exam, practical exam, and practical exam grading rubric.If there is no exam given in a course, upload an assignment and its grading rubric. Note that individual course detail pages cannot be saved until the required syllabus is attached.

**PTA PROGRAMS ONLY:**

If PTA program faculty are assigned to teach general education courses for students enrolled in the program, a copy of the syllabus and a sample exam for each general education course they teach must be provided on the Course Details Page.

If general education faculty are assigned to teach general education courses for students enrolled in the program, no syllabus or exam is required for CAPTE review. Since the Portal will require a document to be attached to each syllabus and exam link, create one blank document/course and name DoNotBotherToOpen\_1.pdf, DoNotBotherToOpen\_2.pdf, DoNotBotherToOpen31.pdf, etc. and attach one to each of the appropriate for general education courses. Note that the Portal will not accept two files named the same.

**SCHEDULED STUDENT CONTACT HOURS**

Provide the scheduled contact hours (as a whole number) for the ENTIRE TERM for:

* **Classroom**: lecture, seminar/discussions, tutorials, etc. which do **not** have a laboratory component and are held in-person with face-to-face instruction.
* **Laboratory:** can also include laboratory experiences in which the student has an opportunity to interact or observe patients regardless of if this opportunity occurs on campus or in a clinical setting.
* **Clinical Education**: use 40 hours/week to calculate contact hours for all full-time experiences.
* **Other:** includes independent study; use the number of credits assigned to the course as the number of contact hours per week (e.g., a two-credit independent study course taught over 15 weeks would be documented as 30 contact hours).

**Distance Learning** includes **online courses** or courses **with online content.** According to theCAPTE Rules of Practice, Subpart 9.7(a)(1)(i-ii):

i. CAPTE defines distance education as education that uses one or more of the technologies listed in items (a) through (d) to deliver instruction to students who are separated from the instructor and to support regular and substantive interaction between the students and the instructor, either synchronously or asynchronously. The technologies may include:

a. The internet.

b. One-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices.

c. Audioconferencing.

d. Video cassettes, DVDs, and CD-ROMs, if the cassettes, DVDs, or CD-ROMs are used in a course in conjunction with any of the technologies listed in paragraphs (a) through (c). [CFR\_602.3]

ii. For the purposes of this section, the following definitions pertain:

a. 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 interaction between the student and the faculty member(s).

b. Distance education program: a program in which 50% or more of the required courses (not including clinical education courses) are distance education courses. (34.C.F.R 602.22(A)(1)(ii)(c).

c. An instructor is an individual responsible for delivering course content and who meets the qualifications for instruction established by an institution’s accrediting agency.

d. Substantive interactions are engaging students in teaching, learning, and assessment, consistent with the content under discussion, and also includes at least two of the following:

1. Providing direct instruction.

2. Assessing or providing feedback on a student’s coursework.

3. Providing information or responding to questions about the content of a course or competency.

4. Facilitating a group discussion regarding the content of a course or competency.

5. Other instructional activities approved by the institution’s or program’s accrediting agency.

e. Regular interaction involves.

1. Substantive interactions between the student and faculty on a predictable and scheduled basis commensurate with the length of time and the amount of content in the course or competency.

2. Monitoring the student’s academic engagement and success and ensuring that the instructor is responsible for promptly and proactively engaging in substantive interaction with the student when needed on the basis of such monitoring, or upon request of the student.

* Use the following to calculate contact hours:
	+ The **lecture contact hours** for a course in which **all** content is completed online with no scheduled classroom meetings should be documented as if the course were taught in a lecture format. For example, a three-credit course taken online would have 45 distance education contact hours (3 X 15 = 45).
	+ The **lecture contact hours** for a course in which **some** content is completed online and which also has scheduled classroom meetings should be documented as having both classroom and distance education contact hours. For example, a three-credit course with 15 scheduled contact hours in the classroom and the remainder of the course taken online should be documented as having 15 contact hours in classroom and 30 contact hours online.
	+ The **lecture contact hours** for a course **with a laboratory component** should be documented as above. It is assumed that no contact hours designated as **laboratory contact hours** would be taken online; therefore, the actual laboratory contact hours should be documented.

The total number of contact hours per term is calculated by multiplying the number of contact hours per week by the total number of weeks in the course. For example, a 4-credit course with 3 contact hours of lecture and 3 contact hours of laboratory per week taught over a 15-week period would have 45 contact hours documented in the lecture column and 45 hours documented in the laboratory column. **Do not include the exam week.**

In documenting contact hours, include only those contact hours used in the calculation of credits for the course. Do not include contact hours for unscheduled or extra laboratory practice time or contact hours for tests, exams, or laboratory practical examinations done outside of scheduled class and laboratory time.

**For electives:**

* List courses only if the credits are required for graduation.
* Each course must have a faculty member associated with it. For courses where faculty may vary, enter the faculty member(s) teaching in the academic year of the program review. If faculty members are unknown/undecided, create and use a ‘dummy’ faculty member named: TBD
* If the credits are required for graduation but credits vary for a course, provide the minimum number of credits required for the degree.
* **PT ONLY:** For electives where the credit is required for graduation and students have a choice from multiple courses, list each course name in a separate row but do not indicate a course number(provide prefix only).
* **PTA ONLY:** If more than one course may be taken to fulfill the degree requirements, choose the course most commonly taken by students to fulfill the degree requirements. If the most commonly taken course is not known, choose one course from among the possible courses students can take. For example, if PSYCH 110 or 115 can be taken to fulfill the degree requirements, choose either PSYCH 110 or PSYCH 115, but not both.
* For contact hours when credit is required for graduation andstudents have a choice from multiple courses, provide contact hours for the first course listed. Do not provide a range. Enter 0 (zero) for all other courses.

**GRADUATION RATE TABLE (**September 2023**)**

**Use this table to collect data for the last two graduating cohorts.** The Portal will auto calculate the graduation rate as a percentage for each year based on the formula provided in this document. If the program admits more than one cohort per academic year, provide the data for **each cohort separately.** The Portal will require data for each cohort based on the response to G1.1a

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Graduation Rate Calculation Form** | **Select ’View’ to access graduation rate questions** |  |
|  | **Graduation Rate Instructions** |  | Program Response |
| G1.1 | Was there a graduating cohort in calendar year [year being requested] | Response should be Yes or No. |  |
| G1.1a | If yes, how many cohorts graduated in the year being reported? | **FOR PROGRAMS WITH MULTIPLE COHORTS GRADUATING during the YEAR being reported, complete a separate form for each cohort.**  |  |
|  | If the program graduated more than 1 cohort, indicate which cohort this form is reporting on. | Will need to complete a separate form for each cohort**.** |  |
| G1.2 | Number of **NEW** Students Admitted to Original Cohort of the graduating Class of [year being reported on] who enrolled in the first term of the professional/technical program. | This number is to be based on the # of students who started the first term of the professional/technical program AFTER DROP/ADD. **NEW STUDENTS ONLY—DO NOT COUNT RE-ENTRY/DECELERATED STUDENTS** |  |
|  | NUMBER OF STUDENTS IN ORIGINAL COHORT WHO GRADUATED IN CALENDAR YEAR [year being reported on]: |  |  |
| G1.3 | Number of students who graduated at the Normally Expected Time. |  |  |
| G1.4 | Number of students who graduated within 150% of Program Length. |  |  |
|  | NUMBER OF STUDENTS IN ORIGINAL COHORT WHO DID NOT COMPLETE THE PROGRAM WITHIN 150% OF PROGRAM LENGTH DUE TO: |  |  |
| G1.5a | Academic or Clinical Deficit |   |  |
| G1.5b | Died/Severely Disabled/Active Military Duty/Health/Family Issues/Other not related to academic or clinical deficit |  |  |
| G1.6 Calculation | GRADUATION RATE  | CALCULATION (G1.3 + G1.4) / (G1.2 – G1.5b) |  |

**BUDGET: ALLOCATION AND EXPENSE STATEMENTS (Sept 2022)**

|  |  |  |  |
| --- | --- | --- | --- |
| **CATEGORY** | **PREVIOUS ACADEMIC YEAR** | **ACADEMIC YEAR OF REVIEW** | **ACADEMIC YEAR AFTER THE REVIEW****EVEN IF NOT YET SUBMITTED** |
|  | ACTUAL**Identify AY:** | **BUDGETED****Identify AY:** | **PROPOSED****Identify AY:**  |
| **ALLOCATION(S) TO PROGRAM** (Would Never Be Zero) |
| **Source:****Source:****Source:** | $ $ $  | $ $ $  | $ $ $  |
| **TOTAL ALLOCATIONS $:****(Amount allocated to program)** **(Auto-Calculates on Portal)** | **$** | **$** | **$** |
| **OPERATING EXPENSES** |
| **SALARY EXPENSES, excluding benefits**Core Faculty Associated Faculty Staff | Core Faculty FTEs:\_\_\_\_\_$ $  | Core Faculty FTEs:\_\_\_\_\_$ $  | Core Faculty FTEs:\_\_\_\_\_$ $  |
| **TOTAL $** | **$** | **$** | **$** |
| **FACULTY DEVELOPMENT**Faculty Development | $  | $  | $  |
| **TOTAL $** | **$** | **$** | **$** |
| **CLINICAL EDUCATION** Clinical Faculty DevelopmentTravel to Clinical sitesOther  |  $ $ $  |  $ $ $  |  $ $ $  |
| **TOTAL $** | **$** | **$** | **$** |
| **OPERATIONAL**SuppliesCommunication (Phone, mail, etc.)Reproduction (Xeroxing, slides, photo, etc.) | $ $ $  | $ $ $  | $ $ $  |
| **TOTAL $** | **$** | **$** | **$** |
| **EQUIPMENT**RepairsAcquisitionRental | $ $ $  | $ $ $  | $ $ $  |
| **TOTAL $** | **$** | **$** | **$** |
| **OTHER (Specify)** 1.2. | $ $  | $ $  | $ $  |
| **TOTAL $** | **$** | **$** | **$** |
| **TOTAL OPERATING EXPENSES(Auto-Calculates)** | **$**  | **$**  | **$**  |

**Element 7D: Sample Narrative Response**

**A curriculum table can be used to provide this information, but all columns of the table must fit on ONE page in a font size that is legible.**

The following is an example of a response that addresses the **first** item in the narrative evidence list that asks for a description of where and how the content is taught throughout the curriculum. It is intended to show the format needed; it is NOT intended to represent CAPTE’s expectations for the Element!

If a narrative is used rather than a table, this example provides insight into what is expected.

**7D7** **Communicate effectively with all stakeholders, including patients/clients, family members, caregivers, practitioners, interprofessional team members, consumers, payers, and policymakers.**

**Learning Experiences**: Communication is a thread throughout the curriculum. PT523, Professional Seminar I (term 2) introduces communication concepts through lecture & reading assignments, followed by small group discussions analyzing video tape communications. Case studies are used in lab activities in all patient management courses (terms 2, 3, 4, & 5) that provide the student with opportunities to practice patient and caregiver instruction. Basic skills are built upon as cases become increasingly complex; examples include patients with dementia, from different cultural backgrounds, and for whom English is not their first language. Written communication, including note writing, is addressed in PT 623, Professional Seminar II (term 3). Practical exam rubrics in patient management courses include written, verbal and non-verbal communication categories. PT 655 (term 4), which addresses adult neurological conditions, includes a lab session with a speech language pathologist where students interact with persons with communication disorders. PT 786, Professional Seminar III (term 5) includes activities where students practice writing letters and reports to doctors related to patient progress. This course also includes role playing for contacting physicians to report evaluation results and discuss changing a patient’s treatment. Effective communication is expected in all four clinical education courses (terms 3, 4 and 6) where students have the opportunity to communicate with patients, family members, practitioners, and interprofessional team members.

What NOT to do:

**Learning Experiences**: do not just include a list such as lecture, lab, role playing, written assignments, or clinical experiences without further explanation.

**GENERAL INFORMATION FORM** SSR/OSV (Aug 2022)

**(This a required 2-page form, even if there are no changes.)**

One (1) electronic (**Word**) copy of this form is to be provided to the Team Leader at the start of the visit.

|  |
| --- |
| **INSTITUTION** |
| Institution name |  |
| **Name of Chief Executive Officer** |  |
| **Administrative title** |  |
| **Unit or school in which the program resides**  |  |
| **Name of administrative official of the unit or school in which the program resides** |  |
| **Administrative title** |  |
| **PROGRAM DIRECTOR** |
| **Name of Academic Administrator** |  |
| **Administrative title** |  |
| **PROGRAM** |
| **Title of program** |  |
| **Degree awarded** |  |
| **CURRICULUM DESIGN CHARACTERISTICS** |
| **Identify type of term:****eg, Semesters, Quarters** |  | **# of terms in academic year** |  | **Total # of terms to complete degree** |  |
| **Length of professional/technical coursework in weeks (including exam week; count exam week as one week)** |  |
| **CLINICAL EDUCATION** |
| **Total hours of clinical education**  |  | **# of weeks of full-time clinical education** |  |

|  |
| --- |
| FACULTY |
| **Number of core faculty positions** | **PT full-time core** |  | **Non-PT full-time core** |  |
| **PT part-time core** |  | **Non-PT part-time core** |  |
| **Number of vacancies in currently approved (or) funded core faculty positions** | Full-time  |  |  |
| Part-time FTEs |  |
| **FTE for associated faculty (in 50% or > of course)** |  |
| List the names and credentials of core and associated/adjunct faculty members who currently teach in the entry-level program. Identify the FTE (using CAPTE calculation) for each person. [(See instructions regarding calculation of FTE allocations.)](#FTECalculations) (insert rows as needed) |
| **CORE FACULTY** |
| **NAME** | **FTE** | **NAME** | **FTE** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| ASSOCIATED FACULTY(those that have responsibilities in 50% or more of a course, including lab assistants) |
| **NAME** | **FTE** | **NAME** | **FTE** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| STUDENTS**Number of students in the professional/technical program** |
| **First Year (PTA programs)** |  | **Grad 1 (PT programs)** |  |
| **Second Year (PTA programs)**  |  | **Grad 2 (PT programs)** |  |
|  |  | **Grad 3 (PT programs)** |  |
| **Fourth UG Year (PT programs 3+3)** |  | **Grad 4 (PT programs)** |  |
| **OUTCOME DATA****Provide data for last class(es) for which stabilized data is available.** |
|  | **For the most recent cohort** | **For the most recent two cohorts** |
| **Data being reported for**  | **Class of:**  |  | **Classes of:**  |  |
| **Graduation rate** (see definitions) | **Graduation rate**  | % | Graduation rate  | % |
| **Performance on Licensure Exam**(regardless of degree offered) | **Number of graduates who took the examination at least once** |  | **Total number of graduates who took the examination at least once** |  |
| **Number of graduates who passed the exam after all attempts** |  | **Total number of graduates who passed the exam after all attempts** |  |
| **Pass rate based on above numbers** | % | **Pass rate based on above numbers** | % |
| **Employment rate** (see definitions) | **Employment rate**  | % | Employment rate  | % |

**PERSONS INTERVIEWED FORM (Required On-site Form)** (9/1/22)

**Name of Institution:**

**The program** is to list the **names, credentials, and titles** (or areas of responsibility) of those individuals with whom the team is scheduled to meet during the site visit of the physical therapy education program. One electronic (**Word**) copy of this form is to be provided to the Team Leader 14 days prior to the start of the visit. Add/delete categories as appropriate for your program.

**The team** is to update the list to reflect who was actually interviewed. In addition, **PLACE AN ASTERISK (\*)** beside the name of each person who attends the Exit Summary.

**Administrative Officers (CEO, CAO, Dean, etc):**

**Program Director:**

**Core Faculty: (for this list, do not include the program director)**

**Associated Faculty:**

**General Education/Supportive Faculty (PTA PROGRAMS ONLY):**

**Clinical Education Faculty (CCCEs and CIs):**

**Students enrolled in the first year of the program:**

**Students enrolled in the second year of the program:**

**Students enrolled in the third year of the program (PT PROGRAMS ONLY):**

**Recent graduates of the program:**

**Employers of graduates of the program:**

**Attended the Open Session, if applicable:**

**Attended the Exit Summary only, if applicable:**

**For Use During On-Site** **(July 2022)**

**Program:** In the PROVIDED column, identify the file name and, if applicable, the location of each document. If not providing an item, indicate in the Program Provided column: **NA** if not applicable for your program.

**Review team:** In TEAM REVIEWED column, indicate with an “**X**” if reviewed, **NR** if not reviewed, **NA** if not applicable or **NF** if not found. For **NF,** include a comment under the applicable element.

**Programs are responsible for ensuring virtual/electronic access to** **required visit materials listed below, at least 14 calendar days prior to the start of the scheduled visit.** **This will allow team members to review documents** **prior to the visit.** **New or additional materials should only be provided if requested by the team. The Materials Required List must be provided when the team is given access to the materials.**

Possible options for sharing documents include, but are not limited to, a learning management system such as Blackboard, and an online secure document sharing platform.

Confidential documents that cannot be shared virtually, such as student and faculty files, need to be noted on the Required On-Site Materials List form and will need to be available during the on-site visit.

Documents that may be too large to share virtually, such as clinical contracts, can have samples included in the virtual submission of documents to the team members. The entire set of confidential files and large documents will then be reviewed during the on-site visit.

| **Row** | **Element(s)** | **Required Materials List for PT and PTA Programs (July 2022)** | **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. These should include items in addition to those uploaded with the SSR and that are reflective of the program’s responses to 6H (PTA) and 6J (PT).
 |  |  |
| **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 6L, 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** | **8D1, 8D2** | If the program uses rented facilities, provide a copy of the written agreement |  |  |
| **43** | **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 |  |  |
| **44** | **8D4** | Inventory list of equipment |  |  |
| **45** | **8D4** | List of equipment borrowed/loaned or used off-site |  |  |
| **46** | **8E** | List of the library resources related to program needs for both program faculty and students. |  |  |
| **47** | **8F** | List of clinical education sites that have accepted at least one student annually in the last 2 years |  |  |
| **48** | **8F** | Compiled data of available sites for current academic year based on annual clinical experience requests |  |  |
| **49** | **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.) |  |  |