



Commission on Accreditation  
in Physical Therapy Education

**STANDARDS AND REQUIRED ELEMENTS FOR ACCREDITATION OF  
PHYSICAL THERAPIST EDUCATION PROGRAMS**

(Adopted 10/31/2023)

**Standard 1: PT**

The program has established achievement measures and program outcomes related to its mission and goals.

Refer to the Glossary for CAPTE's definition wherever an asterisk (\*) follows a term.

**Required Elements**

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

**Evidence of Compliance**

Narrative:

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

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 1B** The program has documented goals\* that are based on its mission and that reflect contemporary\* physical therapist education, research, and practice.

**Evidence of Compliance**

Narrative:

- Provide student, graduate,\* faculty and program goals that are reflective of the program's stated mission and that contribute to the achievement of expected program outcomes.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**



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**1C** The program meets required achievement measures.

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

### Evidence of Compliance

Portal fields:

- Provide graduation data for the most recent two years for which there is full data in the portal section titled Graduation Rate Data for the years identified on the portal (follow Self-Study Report instructions). Identify the number of cohorts admitted each year; data will be required for each cohort.

Narrative:

- Only comment needed is to refer to the Graduation Rate Table.
- If outcomes fall below 80%, provide assessment in Standard 2.

**For initial accreditation only:** Indicate that there are no graduates and provide the expected time frame to collect and analyze graduate data. Provide the Retention Rate Table (forms packet) as an appendix.

**For developing programs only:** Indicate that there is no expectation for this Element at the time of Candidacy. Since the Portal requires a response for each narrative field, indicate that there is no expectation for this Element at the time of Candidacy.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

**1C2** Ultimate licensure pass rates\* are at least 85%, averaged over two years. **Note:** The Federation of State Boards of Physical Therapy labels this "weighted average ultimate pass rate." When two years of data are not available, the one-year ultimate pass rate must be sufficient to allow the program to meet the expectation for an ultimate two-year licensure pass rate\* of at least 85%.

### Evidence of Compliance



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Narrative:

- Provide the program's most current licensure pass rates through the Federation of State Board of Physical Therapy (FSBPT):
  - First-time pass rates for all cohorts who have graduated in the past two academic years.
  - Two-year ultimate pass rate based on the following data:
    - Number of graduates who took the exam at least once.
    - Number of graduates who passed the exam after all attempts.
  - If program graduates do not routinely take the National Physical Therapy Examination, provide equivalent data.
  - If outcomes fall below 85%, provide assessment in Standard 2.

**For Initial accreditation only:** Identify that there are no graduates and provide the expected time frame to collect and analyze graduate data.

**For developing programs only:** Indicate that there is no expectation for this Element at the time of Candidacy. Since the Portal requires a response for each narrative field, indicate that there is no expectation for this Element at the time of Candidacy.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

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

### Evidence of Compliance

Narrative:

- Provide the two-year employment rate for the last two academic years for each cohort based on the number of graduates who sought employment as a physical therapist and the number of graduates employed within one year of graduation.
- If outcomes fall below 90%, provide assessment in Standard 2.

**For initial accreditation only:** Indicate that there are no graduates and provide the expected time frame to collect and analyze graduate data.

**For developing programs only:** Indicate that there is no expectation for this Element at the time of Candidacy. Since the Portal requires a response for each narrative field, indicate that there is no expectation for this Element at the time of Candidacy.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**



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(Adopted 10/31/2023)

### Standard 2: PT

The program is engaged in effective, ongoing, formal, and comprehensive assessment and planning, for the purpose of program improvement to meet the current and projected needs of the program.

#### Required Elements

- 2A** The program has a written and ongoing strategic plan\* that guides its future development. The strategic planning process takes into account program assessment, changes in higher education, the health care environment, and the nature of contemporary physical therapy practice.

#### Evidence of Compliance

Narrative:

- Describe and analyze the strategic planning process, including the opportunities for party of interest participation.
- Analyze how the process takes into account changes in higher education, the health care environment, and the nature of contemporary physical therapy practice.
- Describe any changes planned for the next three to five years based on the assessment.

**For initial accreditation only:** The Self-Study Report should provide evidence of strategic plan implementation and analysis to date.

**For developing programs only:** The Application for Candidacy must include a written strategic plan.

**Appendices and On-site Material:** See Self-Study Report or Application for Candidacy Instructions and Forms



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- 2B** ~~The program promotes a culture of justice, \* equity, \* diversity, \* inclusivity\* (or JEDI), belonging, \* and anti-racism.\*~~

### **Evidence of Compliance**

#### **Narrative:**

- ~~• Describe how the program defines diversity as it relates to the program's mission and goals.~~
- ~~• Describe how the program's mission, goals, and outcomes align with promoting a culture of JEDI, belonging, and anti-racism.~~
- ~~• Provide two **total** examples of how the program incorporates JEDI, belonging, and anti-racism.~~
- ~~• Describe the data collected, or that will be collected, to determine the extent to which the program promotes a culture of JEDI, belonging and anti-racism.~~
- ~~• Analyze the data collected, if available, to determine the extent to which the program promotes a culture of JEDI, belonging, and anti-racism.~~
- ~~• Describe the program's opportunities and challenges as they relate to JEDI, belonging, and anti-racism that have been identified through analysis of the data collected.~~

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 2C** The program has documented and implemented ongoing, formal, and comprehensive program assessment processes designed to determine program effectiveness and used to foster program improvements that are aligned with the program mission, goals, and outcomes, and demonstrate contemporary practice.

### **Evidence of Compliance**

#### **Narrative:**

- Provide a description of the overall assessment process, which includes, but is not limited to, the areas outlined in Elements 2D1-2D9 and 2E that summarize the information in the Program Assessment Matrix.
- Describe how the program's assessment processes are aligned with the mission and goals of the program and demonstrate contemporary practice.
- Describe the overall opportunities and challenges identified through analysis of cumulative assessment data. If other opportunities and challenges have been identified, describe them and provide the source of evidence that led to that determination.
- Describe **two** examples of change resulting from the assessment process within the last **four** years. For each example, describe the rationale for the change and describe the process, timeline, and results (if available) of reassessment to determine if the change resulted in program improvement.
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**For initial accreditation only:** The Self-Study Report should provide evidence of strategic plan implementation and analysis to date.

**For developing programs only:** Address the first **three** bullets only. Note: Candidacy programs are not required to have collected assessment data.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 2D** For each of the following, provide an analysis of data collected and the conclusions drawn to determine how the program's continuous assessment process meets the program mission, goals, needs and outcomes.

**For initial accreditation only:** The Self-Study Report should provide evidence of strategic plan implementation and analysis for Elements 2D1-2D9.

**For developing programs only:** The Application for Candidacy should describe the ongoing, formal program assessment process that will be used for implementation and analysis for Elements 2D1-2D9.

- 2D1** The admissions process, criteria, and prerequisites meet the needs and expectations of the program.

### Evidence of Compliance

Narrative:

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

**For developing programs only:** In the Application for Candidacy, address the first bullet only and describe the ongoing, formal program assessment process that will be used to determine if the admissions process, criteria and prerequisites meet the needs and expectations of the program.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**



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**2D2** Program enrollment appropriately reflects available resources, program outcomes, and local, regional, and national workforce needs.

### Evidence of Compliance

#### Narrative:

- Provide an analysis of data collected and the conclusions drawn to determine the optimal program enrollment, considering resources, program outcomes, and local, regional, and national workforce needs.
- Identify data collected, student achievement and outcomes, and graduate outcomes used to describe conclusions reached, and describe or identify changes made related to program enrollment to address the findings or conclusions.
- If any changes have been made, provide a timeline for implementation, including meeting the respective Element, and for reassessment of the effectiveness of changes.
- If any student achievement measures (Elements 1C1 and 1C2) or expected program outcomes fall below the CAPTE-required or program-expected levels or if there is a downward trend, document the process used to assess and address the performance deficits. Identify data collected, describe conclusions reached, and describe or identify changes made related to the admissions process, criteria, prerequisites, and student support to address the findings or conclusions. Provide a timeline for implementation, including meeting the respective Element, and for reassessment of the effectiveness of changes.

**For developing programs only:** In the Application for Candidacy address the first bullet only and describe the ongoing, formal program assessment process that will be used to determine if program enrollment appropriately reflects available resources, program outcomes, and workforce needs.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

**2D3** The collective core,\* associated,\* and clinical education faculty\* possess the expertise to meet program and curricular needs and expected program outcomes.

### Evidence of Compliance

#### Narrative:

- Describe how the collective core, associated, and clinical education faculty is sufficient in number and expertise to meet all program and curricular needs and is aligned with the program outcomes related to **all** of the bullets below:
  - Student advising and mentorship.
  - Admissions and recruitment activities.
  - JEDI, belonging, and anti-racism.



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- Educational administration.
- Curriculum development and student assessment.
- Instructional design.
- Associated faculty coordination.
- Clinical education program coordination.
- Shared program and institutional governance.
- Clinical practice.
- Evaluation of expected student outcomes.
- Analyze the data collected and the conclusions drawn to determine the extent to which the collective core and associated faculty meet curricular needs and expected program outcomes.
- Analyze the effectiveness of the faculty-to-student lab ratios in meeting program outcomes.
- Analyze the data collected and the conclusions drawn to determine the extent to which the clinical education faculty meet curricular needs and expected program outcomes.
- If any student achievement measures (Elements 1C1 and 1C2) or expected program outcomes fall below the CAPTE-required or program-expected levels or if there is a downward trend, document the process used to assess and address the performance deficits. Identify data collected, describe conclusions reached, and describe or identify changes made related to the admissions process, criteria, prerequisites, and student support to address the findings or conclusions. Provide a timeline for implementation, including meeting the respective Element, and for reassessment of the effectiveness of changes.

**For developing programs only:** In the Application for Candidacy address the following:

- Describe the ongoing, formal program assessment process that will be used to determine if the collective core, associated, and clinical education faculty meet program and curricular needs.
- Provide an assessment of the extent to which the collective core, associated and clinical education faculty will meet program and curricular needs for the first two years of the program.  
**Note:** This Element refers to the assessment of the collective faculty. Information regarding the process to assess individual faculty is addressed in Standard 4. Candidacy programs are to analyze data if available. Indicate instances where data is not yet available and why. Include how the collective core, associated, and clinical education faculty will meet the program and curricular needs in the first two years of the program.
- Identify the formula used to determine the percentage of time each core faculty member will spend in the different requested areas. **Note:** there is an expectation that a consistent formula be used; provide a rationale if any individual faculty member's workload deviates from this formula.
- Identify the core faculty employed to date, including the program director and clinical education coordinator, and describe how they meet program needs for content expertise in the program.
- Identify the core and associated faculty hired to cover all courses in the first two years of the program. **Note:** The program must have, or have contracts with, sufficient qualified faculty to implement the complete first two years of the program.
- Identify the number and qualifications of the core faculty necessary for the full implementation of the program that is reflective of content expertise needed and all the faculty activities delineated in the Element.
- Provide evidence that the timeline of hire for contracted faculty is adequate to allow faculty preparation for their respective responsibilities in the program.



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- Identify the planned core faculty:student ratio\* and the planned average faculty:student lab ratio.
- Describe how the individual faculty workloads, including teaching assignments, for the core faculty will be adequate to meet the program needs, for the first two years of the program and at full program implementation, with regard to:
  - Student advising and mentorship.
  - Admissions and recruitment activities.
  - Educational administration
  - JEDI, belonging, and anti-racism.
  - Curriculum development and student assessment.
  - Instructional design.
  - Coordination of the activities of the associated faculty.
  - Coordination of the clinical education program.
  - Shared program and institutional governance.
  - Clinical practice.
  - Evaluation of expected student outcomes.
- Describe plans and timelines that are supported in the budget, for hiring an adequate number of additional qualified core and associated faculty during the implementation of the program.
- Provide faculty workload equivalent calculations\* for each faculty member on the individual Core Faculty Detail page(s).
- Provide information related to teaching responsibilities for each course in the appended Plan of Study.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

**2D4** Students demonstrate entry-level clinical performance during clinical education experiences prior to graduation.

### Evidence of Compliance

Narrative:

- Describe the mechanisms used to determine entry-level performance of students during clinical education experiences prior to graduation.
- Provide evidence that each student who completed the program within the last year demonstrated entry-level clinical performance by the end of their last clinical education experience.
- If applicable, describe mechanisms utilized when CI assessment suggested less than entry-level performance and how the program managed each situation when a student did not meet entry-level clinical performance.
- If any student achievement measures (Elements 1C1 and 1C2) or expected program outcomes fall below the CAPTE-required or program-expected levels or if there is a downward trend, document the process used to assess and address the performance deficits. Identify data collected, describe conclusions reached, and describe or identify changes made related to the



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admissions process, criteria, prerequisites, and student support to address the findings or conclusions. Provide a timeline for implementation, including meeting the respective Element, and for reassessment of the effectiveness of changes.

**For initial accreditation only:** Indicate that students have not yet completed their last clinical education experience and provide the expected time frame to collect and analyze this data. **Note:** The program will be required to provide additional information prior to CAPTE's initial accreditation decision; please refer to Part 8 of CAPTE's Rules of Practice and Procedures, accessible at [www.capteonline.org](http://www.capteonline.org), for detailed information about what must be provided and the timing of the request.

**For developing programs only:** In the Application for Candidacy address the first bullet only and describe mechanisms that will be utilized when clinical instructor (CI) assessment suggest less than entry-level performance and how the program will manage each situation when a student does not meet entry-level clinical performance.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

**2D5** Program graduates\* (post-degree conferral) meet the expected outcomes as defined by the program.

### Evidence of Compliance

Narrative:

- For each program graduate goal, list the expected outcomes that support the goal.
- For each outcome, provide the expected level of achievement and describe the process the program uses to determine if the expectation has been met.
- Analyze data collected from graduates and their employers to determine the extent to which the graduates meet the program's expected graduate outcomes.
- If the program has more than one cohort, provide an analysis for each cohort.
- If any student achievement measures (Elements 1C1 and 1C2) or expected program outcomes fall below the CAPTE-required or program-expected levels or if there is a downward trend, document the process used to assess and address the performance deficits. Identify data collected, describe conclusions reached, and describe or identify changes made related to the admissions process, criteria, prerequisites, and student support to address the findings or conclusions. Provide a timeline for implementation, including meeting the respective Element, and for reassessment of the effectiveness of changes.

**For initial accreditation only:** In the Self-study Report, indicate that there are no graduates, provide a response to the first two bullets, and provide the expected time frame to collect and analyze graduate data.

**For developing programs only:** In the Application for Candidacy, address the first two bullets only.



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- 2D6** Program resources are meeting, and will continue to meet, current and projected program needs including, but not limited to financial resources, administrative support staff and technology support staff, facilities, space, equipment, technology, instruction materials, library and learning resources, and student services.

### Evidence of Compliance

Portal fields:

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

Narrative:

- Describe **each** program resource and analyze data collected to determine the extent to which **each** resource is meeting, and will continue to meet, current and projected program needs including:
  - Financial resources.
  - Administrative and technology support staff.
  - Facilities.
  - Equipment.
  - Technology.
  - Instruction materials.
  - Library and learning resources.
  - Student services.
- If any student achievement measures (Elements 1C1 and 1C2) or expected program outcomes fall below the CAPTE-required or program-expected levels or if there is a downward trend, document the process used to assess and address the performance deficits. Identify data collected, describe conclusions reached, and describe or identify changes made related to the admissions process, criteria, prerequisites, and student support to address the findings or conclusions. Provide a timeline for implementation, including meeting the respective Element, and for reassessment of the effectiveness of changes.

**For developing programs only:** In the Application for Candidacy address the following:

- Describe **each** program resource and analyze data collected to determine the extent to which **each** resource is meeting, and will continue to meet, current and projected program needs including:

Financial resources:



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- Financial resources are adequate to achieve the program's stated mission, goals, and expected program outcomes and to support the academic integrity and continuing viability of the program.
- Portal fields:
  - In the portal, provide three years of allocations and expense data in the Portal section entitled *Income Statement*. Data must be provided for the academic year of the Candidacy Visit and each academic year through the full implementation of the program (e.g., through graduation of the charter class). The Portal will request the identification of the actual academic years being reported. The form, Allocations and Expense Statements, can be used to collect the required data.

**Note:** Adequate financial resources are expected to be available to meet the increasing demands of the program as additional faculty, staff and students are involved in the program.

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

### Administrative assistance staff and technology support personnel:

- The current and planned secretarial/administrative and technical support available to the program, including the secretarial/administrative support available for the clinical education program to meet expected program outcomes.
- Provide the plans with timelines that are supported in the budget for hiring additional secretarial/administrative and technical support staff during the implementation of the program.

### Space/facilities

- The classroom, laboratory and storage space needed for the first year of the program and confirm that the completed space will be available and usable when needed by students.
- All classroom, laboratory, and storage space needed for the full implementation of the program and provide a timeline for occupancy.
- Any classroom and laboratory space that is dedicated to the program.
- The adequacy of faculty and staff office spaces to facilitate student advising, confidential meetings, office equipment, documents storage, and confidential materials security.
- The space is supportive of effective teaching and learning: access to current technology, access to safety features, good repair, cleanliness, temperature control, etc.
- The adequacy of opportunities students will have access to laboratory space outside of scheduled class time for practice of clinical skills.
- The adequacy of equipment and space to meet the needs of each core faculty member, including space need for core faculty to fulfill their scholarly agendas\*.
- Provide documentation of plans for occupancy of the research space as the



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core faculty are hired through the full implementation of the program.

- If plans for space are delayed, provide the contingency plan to ensure adequate and appropriate space for the first year of the program that will be available at the time of the Candidacy Visit.

**Note:** CAPTE expects that, at a minimum, the program has appropriate space and equipment to implement the first year of the program at the time of Application for Candidacy submission. If plans for space are delayed, contingency plans must be in place that ensures adequate and appropriate space for the first year of the program that will be available by the time of the Candidacy Visit.

### Equipment.

- Equipment and materials available for the support of the program, including equipment and supplies loaned by vendors or by facilities other than the institution.
- Indicate whether the program has acquired, or has on order, equipment, technology, and materials needed to meet the curricular goals of the first year of the program.
- The process used to ensure that equipment is in safe working order, sufficient in number, reflective of contemporary PT practice, and available when needed.
- Access to equipment being borrowed/loaned or used off-site.
- Provide a plan for acquisition of equipment and materials for the continued implementation of the program, including the timeline to acquire the additional items.
- The contingency plan should borrowed/loaned equipment not be available for remediation and testing.
- The opportunities students have for access to equipment and materials for practice outside of scheduled class times.
- The equipment and materials available are sufficient to meet the needs of students according to the maximum planned class size.

### Technology

- The instructional technology resources available to meet the needs of the first year of the program.
- The adequacy of the available instructional technology.
- Use of technology for instructional and other purposes in the first year of the program and when the program is fully implemented.
- Provide a plan for the acquisition of technology through the full implementation of the program.

### Instruction materials, Library and learning resources, Student services.

- The library resources currently available, including the accessibility of these resources.



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- The adequacy of the library resources and remote accessibility for the program needed to meet the goals of the program, faculty, and students for the full implementation of the program.
- Provide the plan to acquire and/or provide access to the needed learning resources in a timely manner.
- The academic, counseling, health, disability, and financial aid services that will be available to program students, including the accessibility of these services for the physical therapist students.

**Note:** Accessibility of these services for students taking distance education courses is requested in 618.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 2D7** Program policies and procedures, as well as relevant institutional policies and procedures, meet program needs. This includes analysis of the extent to which program practices adhere to policies and procedures.

### Evidence of Compliance

Narrative:

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

**For developing programs only:** In the Application for Candidacy address the following:

- Provide a process for analysis of the information to be collected and that will be used to determine the extent to which program policies and procedures, as well as relevant institutional policies and procedures, meet program needs. This includes analysis of the extent to which practices adhere to policies and procedures.

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- 2D8** The clinical sites available to the program are sufficient to provide the quality, quantity, and variety of expected experiences to prepare students for their roles and responsibilities as physical therapists.

### Evidence of Compliance

#### Narrative:

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

#### **For developing programs only:** In the Application for Candidacy address the following:

- Describe the process that will be used by the program to determine that the clinical education sites of experiences for the students are consistent with the goals of the clinical education portion of the curriculum and with the objectives\* of the individual clinical education course in the curriculum.
- Describe how the program will ensure a sufficient number and variety of clinical education sites to support the goals of the clinical education portion of the curriculum and to meet the objectives of the individual clinical education courses in the curriculum.
- Confirm that, at a minimum, there are sufficient clinical placements for 150% of the charter class size that will be appropriate for the first full-time\* clinical education experience and any part-time experiences that precede it. For example, if the planned charter class size is 40, the program is expected to have fully executed written agreements with enough facilities and site-specific Letters of Intent to ensure 60 full-time clinical experiences in practice areas that support the first year of the program. At a minimum, this must include the first full-time clinical experience and any part-time experiences that precede it.
- Describe the program's expectations for the type of experience(s) appropriate for the first full-time clinical education experience and any part-time clinical experiences that may precede it.
- Provide a summary of the number and array of clinical experiences that are expected to be available from the clinical facilities with which fully executed contracts and Letters of Intent (LOI) exist.
- Provide a summary of the number and array of clinical experiences the program expects will be needed for each clinical education course in order to meet the expectations of Element 6H and the expectations of the program – when the program is fully implemented.
- Provide a detailed plan for obtaining sufficient additional clinical sites/placements to ensure all students meet the expectations of Element 6H and the expectations of the program.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**



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- 2D9** There are effective written agreements between the institution and the clinical education sites that are current and describe the rights and responsibilities of both parties. At a minimum, agreements address the purpose of the agreement; the objectives of the institution and the clinical education site in establishing the agreement; the rights and responsibilities of the institution and the clinical education site, including those related to responsibility for patient and client care and to responsibilities for supervision and evaluation of students; and the procedures to be followed in reviewing, revising, and terminating the agreement.

### **Evidence of Compliance**

Narrative:

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

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 2E** The curriculum assessment plan is written and addresses the curriculum as a whole. The assessment plan includes assessment of individual courses and clinical education. The plan incorporates consideration of the dynamic nature of the profession and the health care delivery system. Assessment data are collected from appropriate parties of interest including, at a minimum, program faculty, current students, graduates of the program and at least one other parties of interest group such as employers of graduates, consumers of physical therapist services, peers, or other health care professionals. Clinical education assessment includes, at a minimum, the quality, quantity, variety of sites, and the appropriate length and placement within the curriculum to prepare students for their roles and responsibilities as physical therapists.

### **Evidence of Compliance**

Narrative:

- Identify the parties of interest from whom data is collected, the method(s) used to collect data, and the timing of the collection.
- Describe how the curriculum assessment process considers the dynamic nature of the profession and the health care delivery system.



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- Provide evidence that student achievement measures (Elements 1C1 and 1C2) are used to assess the curriculum.
- Provide evidence that graduate outcomes (Element 1C3) are used to assess the curriculum.
- Provide evidence that the curricular assessment includes a review of the Required Elements in Elements 6A through 6H.
- Provide a summary and analysis of the outcomes from the most recent curriculum assessment, including clinical education.
- Describe how the clinical education component is assessed, including, at a minimum, an assessment of the quality, quantity, and variety of clinical sites and the appropriate length and placement within the curriculum to prepare students for their roles and responsibilities as physical therapists.
- Describe **two** curricular changes, including changes to clinical education, in response to the summary and analysis made within the last four years.

**For developing programs only:** In the Application for Candidacy address the following:

- Identify the parties of interest from whom data is collected, the educational resources used, the method(s) used to collect data, and the timing of the collection.
- Describe how the curriculum assessment process considers the dynamic nature of the profession and the health care delivery system.
- Describe the assessment process as to how student achievement measures (Elements 1C1 and 1C2) will be used to assess the curriculum.
- Describe the assessment process as to how graduate outcomes (Element 1C3) will be used to assess the curriculum.
- Describe the process as to how the curricular assessment will include a review of the Required Elements in Elements 6A through 6H.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**



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## STANDARDS AND REQUIRED ELEMENTS FOR ACCREDITATION OF PHYSICAL THERAPIST EDUCATION PROGRAMS

(Adopted 10/31/2023)

### Standard 3: PT

The institution and program operate with integrity. Integrity is the consistent and equitable implementation of policies and procedures (institution, program, and CAPTE), with demonstrated focus on quality assurance and improvement.

#### Required Elements

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

#### Evidence of Compliance

##### Upload evidence of the following:

- Identify the jurisdiction's agency from which the institution has authority to offer the program and award the degree.
- If the institution is in a collaborative arrangement with another institution to award degrees, provide the above for the degree-granting institution.
- Indicate if the institution has authorization to provide clinical education experiences in other states, where required.
- If the program utilizes distance education,\* indicate that the institution has authorization to provide distance education in other states, where required.

**Note:** States and institutions that are recognized by the State Authorization Reciprocity Agreement meet the conditions related to distance education and clinical education experiences.

**For developing programs only:** In the Application for Candidacy address if jurisdiction's approval is not necessary, provide the reason why it is not necessary. For private institutions, identify the most recent USDE Financial Responsibility Composite score. **Note:** Evidence of authorization to provide clinical experiences in other states must be available for review by the Candidacy Program Reviewers during the on-site visit. Authorization must be in the form of an official letter or email from the appropriate state agency directed to the institution/program. If no authorization is required, evidence that it is not required must be provided in the form of an official letter or email from the appropriate state agency directed to the institution/program. Students cannot be placed in clinical experiences until state authorization(s) is(are) obtained.



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- 3B** The sponsoring institution(s) is accredited by an agency or association recognized by the U.S. Department of Education or by the Council for Higher Education Accreditation.

### Evidence of Compliance

#### Upload evidence of the following:

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

**For developing programs only:** In the Application for Candidacy address all the bullets above and identify the accreditation approval needed to offer the professional physical therapy program. State the date that such approval was received. If institutional accrediting agency approval is not necessary, provide the reason why it is not necessary.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**



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(Adopted 10/31/2023)

- 3C** Institutional policies related to academic standards support academic and professional judgments of the physical therapist program core faculty. The core faculty determine student progression through all stages of the program.

### Evidence of Compliance

Narrative:

- Provide institutional policies and practices that allow for faculty to employ academic freedom when making decisions.
- Describe how the institution supports the professional judgment of the program faculty regarding academic regulations and professional behavior expectations of students.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 3D** Policies and procedures exist to facilitate equal opportunity and nondiscrimination for faculty, staff, prospective and enrolled students, and the public (i.e., vendors, standardized patients, other visitors).

### Evidence of Compliance

Narrative:

- Provide the institution's equal opportunity and nondiscrimination statement(s).
- Describe how the nondiscrimination statement and policy are made available to faculty, staff, prospective and enrolled students, and the public (i.e., vendors, standardized patients, other visitors).

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 3E** Policies, procedures, and practices that affect the rights, responsibilities, safety, privacy, and dignity of program faculty and staff are written, disseminated, and applied consistently and equitably.

### Evidence of Compliance

Portal Fields:

- Provide faculty workload data for each faculty member on the individual Core Faculty Detail page.

Narrative:



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- Provide institutional and program policies, procedures, and practices that affect the rights, responsibilities, safety, privacy, and dignity of program faculty and staff.
- Describe how the program policies, procedures, and practices are made available to faculty and staff.
- Provide evidence that the core faculty workloads are within the defined institutional and program workload policies.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 3F** Program specific policies and procedures are compatible with institutional policies and with applicable law.

### Evidence of Compliance

Narrative:

- Describe how the program policies and procedures are compatible with applicable state and federal laws and regulations (e.g., Title IX, Health Insurance Portability and Accountability Act of 1996, NC-SARA).
- List the program-specific policies and procedures that differ from those of the institution (e.g., admissions procedures, grading policies, policies for progression through the program, policies related to clinical education, faculty workload policies) and describe how the policies and procedures differ and why.
- Describe how institutional approval is obtained for program policies and procedures that differ from those of the institution.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 3G** Policies, procedures, and practices exist for handling complaints, including a prohibition of retaliation following submission of a complaint. The policies are written, disseminated, and applied consistently and equitably. Records of complaints about the program, including the nature of the complaint and the disposition of the complaint, are maintained by the program.

### Evidence of Compliance

Narrative:

- Provide the relevant institutional or program policy(s) and procedure(s) that addresses handling complaints (e.g., complaints from prospective and enrolled students, faculty, staff, clinical education sites, employers of graduates, the general public).



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- This institutional or program policy(s) and procedure(s) should include the prohibition of retaliation.
- Describe how the policies are disseminated and applied consistently and equitably.
- Describe how the policies and procedures for handling complaints are made available to internal and external parties of interest.
- Describe how the party of interest would file a complaint.
- Provide the URL from the program or institutional website where policies for handling complaints are located.
- Describe how the records of complaints are, or would be, maintained by the program.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**



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(Adopted 10/31/2023)

### Standard 4: PT

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

#### Required Elements

##### Individual Academic Faculty\*

- 4A** Each core faculty\* member has doctoral preparation,\* contemporary expertise\* in assigned teaching areas, and demonstrated effectiveness in teaching and evaluation of student learning. In addition, core faculty\* who are physical therapists hold an active, unencumbered PT license in any United States jurisdiction and are in compliance with the state practice act in the jurisdiction where the program is located. For CAPTE-accredited programs outside the United States, core faculty who are PTs are licensed or regulated in accordance with their country's regulations. (**Proviso:** CAPTE began enforcing the requirement for doctoral preparation of all core faculty effective Jan. 1, 2020, except for individuals who were enrolled in an academic doctoral degree\* program on that date, in which case the effective date will be extended to Dec. 31, 2025; this will be monitored in the Annual Accreditation Report).

#### Evidence of Compliance

##### Narrative:

- Provide a brief statement describing the jurisdictional requirements for faculty engaging in teaching and scholarship in the jurisdiction where the program is located. Include URL, verification, or other evidence.
- The program is to demonstrate compliance with the jurisdiction's practice act.
- The only additional response needed in the 4A text box is to refer to the Core Faculty Detail Section for each core faculty member.

##### Portal fields are on the Core Faculty Information page.

- In completing the Qualifications box on this portal page:
  - Identify each core faculty's doctoral preparation.
  - Describe the individual's effectiveness in **both** teaching and evaluation of student learning (e.g., peer evaluations, student evaluations).
  - For core faculty who are PTs, identify if each holds an active, unencumbered PT license in any United States jurisdiction and in compliance with the state practice act in the jurisdiction where the program is located.



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- Identify teaching assignments by prefix, number, and title, and indicate content assigned and role in course.
- Provide evidence of the individual's contemporary expertise\* specific to assigned teaching content in the DPT program. This evidence **may** include:
  - Education (including post-professional academic work, residency, fellowship, and continuing education).
  - Clinical expertise specifically related to teaching areas (e.g., certification as a clinical specialist, residency, fellowship).
  - Consultation and service related to teaching areas.
  - Course materials that reflect the level and scope of contemporary knowledge and skills (e.g., course objectives, examinations, assignments, readings/references, learning experiences).
  - Other evidence that demonstrates contemporary expertise, for example:
    - Scholarship (e.g., publications, grant activities, and presentations related to teaching areas).
    - Written evidence of evaluation of course materials by a content expert.
    - Independent study and evidence-based review that results in critical appraisal and in-depth knowledge of subject matter (include description of resources used and time frame for study).
    - Formal mentoring (include description of experiences, time frame, and qualifications of mentor).

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

**NOTE: The program director\* will attest that each core faculty member who is a physical therapist (by name) is within the guidelines and requirements of the practice act in the jurisdiction where the program is located.**

**NOTE: Core Faculty Qualifications: Changes in Standards and Elements from 2016 to 2024: Core and Associated Faculty Qualifications**

"The 2016 standard/element 4A states: "In addition, core faculty who are PTs and who are teaching clinical PT content hold an active unrestricted PT license in any US jurisdiction and the state where the program is located if required by that state's jurisdiction". There is a change in the requirement as stated in the 2024 standard/element 4A: "In addition, core faculty who are physical therapists hold an active unencumbered PT license in any US jurisdiction and are in compliance with the state practice act in the jurisdiction where the program is located." Effective for the 2024 standards, a core faculty member who is foreign trained as a PT and uses the PT credential must be licensed in the US and be compliant with the state practice act where the program is located. A core faculty who is foreign trained as a PT and who is not licensed in the US may teach in a program if they have contemporary expertise in their assigned teaching



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areas. They will be classified as non-PT core faculty members. The program will present information to demonstrate compliance with the US jurisdiction requirement.”

- 4B** Each core faculty member has a well-defined, ongoing scholarly agenda\* that reflects contributions to the profession and is aligned with the mission of the institution.

### Evidence of Compliance

Narrative:

- Briefly describe how each core faculty's scholarly agenda is aligned with the institution's mission.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

**Required Faculty Scholarship Form** has been modified to indicate that a minimum of five and a maximum of 10 peer-reviewed products in the last 10 years should be listed-

- 4C** Each core faculty member has a record of institutional and/or professional service\* that is consistent with the institution's mission and expectations and with the program's mission and goals.

### Evidence of Compliance

Narrative:

- Describe the institution's mission and expectations as they relate to faculty service.
- Describe the program's mission and goals as they relate to faculty service.
- Describe how each core faculty member's service activities align with and contribute to the institution's mission and expectations and to the program's mission and goals.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 4D** Each associated faculty member has contemporary expertise in assigned teaching areas and demonstrated effectiveness **both** in teaching and in evaluation of student learning.

### Evidence of Compliance

Narrative:



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

**For developing programs only:** Note all associated faculty needed to teach in the first two years of the program must be employed or contracted by the program at the time of Application for Candidacy submission.

### Portal fields are on the **Associated Faculty Information** page.

- In completing the Qualifications box on this portal page:
  - Describe the individual's effectiveness in **both** teaching and in evaluation of student learning.
  - Associated faculty who are PTs hold an active, unencumbered PT license in any United States jurisdiction and are in compliance with the practice act in the jurisdiction where the program is located.
  - Identify teaching assignments by prefix, number, and title, and indicate content assigned and role in course.
  - Provide evidence of the individual's contemporary expertise specific to assigned teaching content. This evidence can include:
    - Education (including post-professional academic work, residency, fellowship, and continuing education).
    - Clinical expertise specifically related to teaching areas (e.g., certification as a clinical specialist, residency, fellowship).
    - Consultation and service related to teaching areas.
    - Course materials that reflect the level and scope of contemporary knowledge and skills (e.g., course objectives, examinations, assignments, readings/references, learning experiences).
  - Other evidence that demonstrates contemporary expertise, for example:
    - Scholarship (e.g., publications, grant activities, and presentations related to teaching areas).
    - Written evidence of evaluation of course materials by a content expert.
    - Independent study and evidence-based review that results in critical appraisal and in-depth knowledge of subject matter (include description of resources used and time frame for study).
    - Formal mentoring (include description of experiences, time frame, and qualifications of mentor).



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**NOTE:** Changes in Standards and Elements from 2016 to 2024: Core and Associated Faculty Qualifications

The 2016 standard/element 4A states: "In addition, core faculty who are PTs and who are teaching clinical PT content hold an active unrestricted PT license in any US jurisdiction and the state where the program is located if required by that state's jurisdiction". There is a change in the requirement as stated in the 2024 standard/element 4A: "In addition, core faculty who are physical therapists hold an active unencumbered PT license in any US jurisdiction and are in compliance with the state practice act in the jurisdiction where the program is located." Effective for the 2024 standards, a core faculty member who is foreign trained as a PT and uses the PT credential must be licensed in the US and be compliant with the state practice act where the program is located. A core faculty who is foreign trained as a PT and who is not licensed in the US may teach in a program if they have contemporary expertise in their assigned teaching areas. They will be classified as non-PT core faculty members. The program will present information to demonstrate compliance with the US jurisdiction requirement. The change in the standard also applies to associated faculty who are foreign trained.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

**4E**



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### Evidence of Compliance

Narrative:

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

**For developing programs only:** In the Application for Candidacy address the first bullet. Describe the process that is and will be used to link faculty development plans to the assessment of the individual and to program improvement (e.g., if one or more faculty members receives student feedback regarding poor test item writing, the faculty development plan(s) should include instruction in development of test items) and describe assessment done to date to determine core faculty development needs prior to the implementation of the program.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

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

### Evidence of Compliance

Narrative:

- Describe the process used to determine the associated faculty development needs, individually and, when appropriate, collectively.



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- Provide **two** examples within the past three years of development activities used by the program to address identified needs of associated faculty. (Note: CAPTE does not require that **each** associated faculty member participate in a development activity in the past three years. This requirement pertains to the aggregate of associated faculty).

**For developing programs only:** Address the following:

- Describe the formal processes for regular evaluation of associated faculty.
- Describe the process used to determine the associated faculty development needs, individually and, when appropriate, collectively.
- Describe assessment done to date to determine associated faculty development needs prior to the implementation of the program.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

### Program Director

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

- Is a physical therapist who holds an active, unencumbered PT license in any United States jurisdiction and is in compliance with the practice act in the jurisdiction where the program is located. For CAPTE-accredited programs outside the United States, the program director is licensed or regulated as a PT in accordance with their country's regulations.
- Has earned an academic doctoral degree or previous CAPTE-granted exemption.
- Holds the rank of associate professor, professor, clinical associate professor, or clinical professor.
- Has a minimum of six years of full-time\* higher education experience, with a minimum of three years of full-time experience as a core faculty member in a CAPTE-accredited entry-level physical therapist education program.

### Evidence of Compliance

Narrative:

- Describe how the program director meets **all** of the following qualifications:
  - Holds an active, unencumbered PT license in any United States jurisdiction and is in compliance with the state practice act in the jurisdiction where the program is located.
  - Has an earned academic doctoral degree or previous CAPTE-granted exemption.
  - Has the rank of associate professor, professor, clinical associate professor, or clinical professor.



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- Has a minimum of six years of full-time higher education experience, with a minimum of three years of full-time experience as a core faculty member in a CAPTE-accredited entry-level physical therapist education program.
- Has experience/professional development/education in administration, management, and leadership. Experience and professional development derived from the clinic is acceptable.
- Professional development and/or education in **all** of the following: educational theory and methodology, instructional design, student evaluation, and outcome assessment.
- Has experience in fiscal management. Experience derived from the clinic is acceptable.
- Has experience or formal training in program evaluation, assessment, and curriculum development.
- Is familiar with CAPTE accreditation requirements and has experience with other accreditation and/or regulatory agencies. Experience derived from the clinic is acceptable.
- Has prior engagement at the academy/academic institutional level (i.e., faculty senate).

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

**4H** The program director provides effective leadership for the program, including responsibility for communication, program assessment and planning, fiscal management, and faculty evaluation/professional development.

### Evidence of Compliance

Narrative:

- Describe the effectiveness of the mechanisms used by the program director to communicate with program faculty and other individuals and departments (e.g., admissions, library), involved with the program.
- Describe the effectiveness of the mechanisms used by the program director to communicate with external parties of interest (e.g., advisory board, community partners, clinical faculty) involved with the program.
- Describe the responsibility, role, and effectiveness of the program director for assessment and planning.
- Describe how the workload allocates sufficient time for administrative responsibilities.
- ~~• Describe the effectiveness of the program director in promoting a culture of JEDI, belonging,\* and anti-racism\* as they relate to faculty, staff, students, and other parties of interest.~~
- Describe the responsibility, role, and effectiveness of the program director in fiscal planning and allocation of resources, including long-term planning.
- Describe the responsibility, role, and effectiveness of the program director for faculty evaluations/professional development.
- Describe the process used to assess the program director as an effective leader.
- Provide **two** examples within the last five years of effective leadership, which **may** relate to:
  - A vision for physical therapist professional education.



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- Understanding of and experience with curriculum content, design, and evaluation.
- Employing strategies to promote and support professional development.
- Proven effective interpersonal and conflict management skills.
- Ability to facilitate change.
- Negotiation skills (relative to planning, budgeting, funding, program faculty status, program status, employment and termination, space, and appropriate academic and professional benefits).
- Effective experience in strategic planning.
- Active service on behalf of physical therapy professional education, higher education, the larger community, and organizations related to their academic interest.
- Effective management of human and fiscal resources.
- Commitment to lifelong learning.
- Active role in institutional governance.
- Program accomplishments.

**For developing programs only:** Describe the responsibilities and effectiveness of the program director to date for each of the bullets above.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 4I** The program director has **appropriate** decision-making authority over the financial/budgetary resources to achieve the program's stated mission, goals, and expected program outcomes and to support the academic integrity and continuing viability of the program.

### Evidence of Compliance

Narrative:

- Describe the mechanisms that are in place for participation in shared decision-making processes between the program director and the institution, to ensure that the program director has administrative oversight and **appropriate** decision-making authority over the financial/budgetary resources related to the program.
- Describe the mechanisms that are in place for the program director to receive feedback from the institution (i.e., chair, dean, provost) regarding the input the program director provides in the shared decision-making process.
- Describe the responsibility and effectiveness of the program director in fiscal planning and allocation of resources, including long-term planning of the program.
- Describe the program director's role in financial management of the program, including:
  - Input into tuition rates and fee structures related to the program.
  - Input into financial aid processes related to the program.
  - Input into program expense decisions related to personnel.
  - Input into program expense decisions external to personnel (e.g., equipment, supplies).
  - Input into the size of the program cohort and number of cohorts.



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- The ability to advocate for additional resources where appropriate.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 4J** The program director is responsible for compliance with accreditation policies and procedures. Program policies, procedures, and practices provide for compliance with the accreditation policies and procedures including:
- **4J1** Maintenance of accurate information, easily accessible to the public, on the program website regarding accreditation status (including CAPTE logo and required accreditation statement), and current student achievement measures.
  - **4J2** Timely submission of required fees and documentation, including reports of graduation rates, performance on state licensing examinations, and employment rates.
  - **4J3** Following policies and procedures of CAPTE as outlined in the CAPTE Rules of Practice and Procedure.
  - **4J4** Timely notification of expected or unexpected substantive change(s) within the program and of any change in institutional accreditation status or legal authority to provide postsecondary education.
  - **4J5** Coming into compliance with accreditation Standards and Required Elements within two years of being determined to be out of compliance.

### Evidence of Compliance

Narrative:

- If one or more of these activities have been delegated to include another individual by the program director, identify the individual(s).

**For developing programs only:** Developing programs are not authorized to use the CAPTE logo; the CAPTE logo may only be used by accredited programs.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

### Director of Clinical Education\*

- 4K** The director of clinical education is a physical therapist who holds an active, unencumbered PT license in any United States jurisdiction and is in compliance with the practice act in the jurisdiction where the program is located and has a minimum of three years of full-time post-licensure clinical practice. Two years of clinical practice experience must include experience as a site coordinator of clinical education or clinical instructor in physical therapy, or a minimum of two years of experience in teaching, curriculum development, and administration in a physical therapist education program.



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(Adopted 10/31/2023)

For CAPTE-accredited programs outside the United States, the clinical education coordinator is licensed or regulated in accordance with their country's regulations.

### Evidence of Compliance

Narrative:

- Identify the core faculty member(s) who is (are) designated as the director of clinical education. If this individual has a different title in your program, describe it.
- If more than one core faculty member is assigned as a director of clinical education, describe the role and responsibilities of each.
- Describe how the director(s) of clinical education the following qualifications:
  - Has doctoral preparation.
  - Holds an active, unencumbered PT license in any United States jurisdiction and is in compliance with the practice act in the jurisdiction where the program is located.
  - Has a minimum of three years of full-time (or equivalent) post-licensure clinical practice.
  - Has a minimum of two years of clinical practice as an SCCE or CI or two years of experience in teaching, curriculum development, and administration in a physical therapist education program.

### Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms

- 4L** The director(s) of clinical education is effective in clinical teaching and mentoring, and in developing, conducting, and coordinating the clinical education program.

### Evidence of Compliance

Narrative:

- Describe the effectiveness of the director(s) of clinical education in planning, developing, coordinating, and facilitating the clinical education program, including effectiveness in:
  - Organizational, interpersonal, problem-solving, and counseling skills.
  - Ability to work with clinical education faculty (SCCEs and CIs) to address the ~~diverse~~ **varied** learning needs of the students.
- ~~• Describe how the director of clinical education fosters a culture that promotes JEDI, belonging, and anti-racism in the clinical environment.~~
- Describe the process used to inform students and clinical faculty in the program's nondiscrimination policies and to monitor adherence to these policies during clinical education experiences.
- Describe the mechanisms used to communicate information about clinical education with core faculty, clinical education sites, clinical education faculty (SCCEs and CIs), and students:
  - Describe how the clinical education faculty are informed of their responsibilities.
  - Describe the timing of communications related to clinical education to the core faculty, clinical education sites, clinical education faculty (SCCEs and CIs), and students.



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(Adopted 10/31/2023)

- Describe the process used to monitor that the academic regulations are upheld.
- Describe the methods used to assign students to clinical education experiences.
- Describe how the program works to ensure that the supervision and feedback provided to students are appropriate for each student in each clinical education experience.
- Describe how the need for an altered level of clinical supervision and feedback is determined, communicated to the clinical education faculty, and monitored during the experience.
- Describe the mechanism used to provide clinical teaching and mentoring to clinical faculty.
- Has a workload that allows sufficient release time for administrative responsibilities.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

### Collective Academic Faculty

- 4M** The collective core and associated faculty include an effective blend of individuals with doctoral preparation (including at least 50% of core faculty with an academic doctoral degree) and individuals with clinical specialization sufficient to meet program goals and expected program outcomes as related to program mission, institutional expectations, and assigned program responsibilities. **A DPT, either entry-level or post-professional, does not, by itself, meet the 50% requirement. Note:** The 50% requirement can also be fulfilled by the following: a minimum of 40% of the core faculty **have completed** an academic doctoral degree, and 10% of the core faculty **are actively enrolled** in an academic doctoral degree program. For programs with 10 or fewer core faculty, a maximum of one core faculty member may count for the 10% exception.

### Evidence of Compliance

Narrative:

- Indicate the percentage of core faculty who hold an academic doctoral degree.
- Indicate if any core faculty are actively enrolled in an academic doctoral degree. Identify name, where they are enrolled, and their expected date of degree completion.
- **Indicate if any core faculty have completed the ABPTRFE Faculty (non-clinical) Residency program. Identify individual, where residency completed, and date of residency completion.**
- Describe the blend of clinical specialization within the core and associated faculty in the program.
- Describe the effectiveness of the blend to meet program goals and expected outcomes of the program's mission and the institutional expectations related to assigned teaching, scholarship, and service.

**For developing programs only:** Address all bullets above and these two additional:

- For the first two years of the program:
  - Describe how the current blend of core and associated faculty meets the needs of the program and ensures the achievement of all program activities.



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- Identify how the program meets the expectation for at least 50% of the core faculty holding an academic doctoral degree.
- For full program implementation:
  - Describe the expected faculty composition for the full cohort of core and associated faculty and provide a specific timeline for hiring these individuals.
  - Describe how the program will continue to meet the expectation for at least 50% of the core faculty holding an academic doctoral degree.
  - Describe how the expected blend of core and associated faculty will meet the needs of the program and ensure the achievement of all program activities.
  - Describe the plans to acquire additional faculty for future cohorts.

**Note:** At the time of Application for Candidacy submission, the institution must employ at least three qualified full-time core faculty, including the program director and director of clinical education, and have, or have contracts with sufficient qualified faculty to implement the complete first two years of the program. The projected composition of the core and associated faculty necessary for the full implementation of the program must be determined, be reflective of the variety of faculty responsibilities delineated in Element 2D3 and be consistent with the institution's expectations for faculty qualifications. In addition, at least 50% of the core faculty hold academic doctoral degrees for both the current and projected composition.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 4N** The collective core faculty hold primary responsibility (in collaboration with appropriate communities of interest) for initiating, adopting, evaluating, and upholding academic regulations specific to the program and compatible with institutional policies, procedures, and practices. The regulations address:
- Admission requirements.
  - Grading policy.
  - Minimum performance levels, including those relating to professional and ethical behaviors.
  - Student progression through the program.
  - Development, review, and revision of the curriculum with input from other appropriate communities of interest.

### Evidence of Compliance

Narrative:

- Describe the process by which academic regulations specific to the program are developed, adopted, and evaluated by the core faculty.
- Describe the responsibility of the core faculty for the development, review, and revision of the curriculum plan.
- Provide two examples within the past five years of involvement by communities of interest in curriculum development, review, and revision.



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

### Evidence of Compliance

Narrative:

- Describe the processes and criteria used by the core faculty to determine that students are professional, competent, and safe in the skills identified by the core faculty and that the students are ready to engage in clinical education.
- Describe how the program ensures that critical safety elements are identified in the competency testing process.
- Describe what happens if a student is found to not be safe and ready to progress to clinical education.
- Describe the mechanisms used to communicate to students and clinical education faculty the specific skills in which students must be competent and safe.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

### Clinical Education Faculty

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

### Evidence of Compliance

Narrative:

- Describe how the program determines that clinical instructors are meeting the expectations of this Element, including:
  - The program's expectations for the clinical competence of CIs.
  - The program's expectations for clinical teaching effectiveness of CIs.
  - How the clinical education sites are informed of these expectations.
  - How these expectations are monitored.
- Identify the assessment tool(s) used during clinical education experiences and describe how CIs are trained in the appropriate use of the tool(s).
- Describe how the program determines that the tool used for the evaluation of student performance in the clinical setting has been completed correctly.

**For developing programs only:** Address the plans for meeting each of the bullets above.



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## STANDARDS AND REQUIRED ELEMENTS FOR ACCREDITATION OF PHYSICAL THERAPIST EDUCATION PROGRAMS

(Adopted 10/31/2023)

### Standard 5: PT

The program recruits, admits, and graduates students consistently using equitable program policies, procedures, and practices.

#### Required Elements

- 5A** The program has written policies, procedures, and practices that are related to student **recruitment** and **admission** and are based on appropriate and equitable criteria and applicable law and meet the needs of the program.

#### Evidence of Compliance

Narrative:

- Identify where all program policies, procedures, and practices related to student recruitment and admission are located.
- Describe how program policies, procedures, and practices recruit and admit students that are consistent with the mission and goals of the institution and program.
- ~~Describe how the program supports JEDI, belonging, and anti-racism through its recruitment and admissions policies, procedures, and/or practices.~~
- Describe how the program policies, procedures, and practices maintain planned class size and identify related policies to prevent over enrollment.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 5B** Prospective and enrolled students are provided with relevant information about the institution and program. Materials related to the institution and program are accurate, comprehensive, current, and provided to students in a timely manner.

#### Evidence of Compliance

Narrative:

- Describe how and when the following information is provided to prospective and enrolled students:
  - Catalogs.



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(Adopted 10/31/2023)

- Recruitment and admissions information, including admissions criteria, transfer of credit policies, and any special considerations used in the process.
- Academic calendars.
- Grading policies.
- Technical standards or essential functions, if used.
- Acceptance and matriculation rates.
- Student outcomes including, but not limited to, the most current two-year data available for graduation rates, employment rates, and first-time and ultimate pass rates on licensing examinations.
- Costs of the program including tuition, institutional fees, programs fees, course fees, clinical education, and refund policies.
- Student Financial Fact Sheet.
- Information and/or resources related to student debt.
- Availability of financial aid.
- Enrollment agreement\*, if used.
- Process for filing a complaint with CAPTE.
- Job/career opportunities.
- Availability of student services.
- Health and professional liability insurance requirements.
- Information about the curriculum.
- Information about the clinical education program requirements, including travel expectations to clinical sites.
- Required health information.
- Potential for other clinical education requirements, such as drug testing and criminal background checks.
- Access to and responsibility for the cost of emergency services during off-campus educational experiences.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 5C** The program has written policies, procedures, and practices that address the **rights, responsibilities, safety, privacy, and dignity of program students** and are applied consistently and equitably as students progress through the program.

### Evidence of Compliance

Narrative:

- Identify where all program policies, procedures, and practices that address the rights, responsibilities, safety, privacy, and dignity of the students are located.
- Describe how program policies and procedures that affect students are disseminated to students and program faculty.



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- Describe how the program ~~assures the support of~~ supports JEDI, belonging, and anti-racism through its program policies, procedures, and/or practices that address the rights, responsibilities, safety, privacy, and dignity of program students.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 5D** The program has written policies, procedures, and practices that address **remediation** and **dismissal** while optimizing student success and retention. Remediation, retention, and dismissal policies, procedures, and practices are based on appropriate and equitable criteria and applicable law.

### Evidence of Compliance

Narrative:

- Identify where all program policies, procedures, and practices related to student remediation, retention, and dismissal are located.
- Describe the mechanism by which students receive regular reports of academic and clinical performance and progress:
  - Describe the program policies, procedures, and practices that relate to remediation, retention, and dismissal when unsafe practices are identified and/or knowledge, skills, and/or abilities are deficient.
  - ~~Describe how the program supports JEDI, belonging, and anti-racism through its program policies, procedures, and practices related to remediation, retention, and dismissal.~~
  - Describe the resources available to support and optimize student success for those students that require remediation and/or are at risk of dismissal.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

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

### Evidence of Compliance

Narrative:

- Identify whether enrollment agreements are used.
- If used:
  - Provide evidence that the agreements are consistent across enrollees for a given cohort.



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(Adopted 10/31/2023)

- Describe the institutional accrediting agency and state requirements for using enrollment agreements and explain how the current agreement complies with these requirements.
- Indicate when in the enrollment process the student is required to sign the agreement.
- Provide evidence that, prior to having to sign the enrollment agreement, prospective students are provided with:
  - Catalogs.
  - Recruitment and admissions information, including admissions criteria, transfer of credit policies, and any special considerations used in the process.
  - Academic calendars.
  - Grading policies.
  - Technical standards or essential functions, if used.
  - Acceptance and matriculation rates.
  - Student outcomes including, but not limited to, the most current two-year data available for graduation rates, employment rates, and first-time and ultimate pass rates on licensing examinations.
  - Costs of the program including tuition, institutional fees, programs fees, course fees, clinical education, and refund policies.
  - Student Financial Fact Sheet.
  - Information and/or resources related to student debt.
  - Availability of financial aid.
  - Enrollment agreement, if used.
  - Process for filing a complaint with CAPTE.
  - Job/career opportunities.
  - Availability of student services.
  - Health and professional liability insurance requirements.
  - Information about the curriculum.
  - Information about the clinical education program requirements, including travel expectations to clinical sites.
  - Required health information.
  - Potential for other clinical education requirements, such as drug testing and criminal background checks.
  - Access to and responsibility for the cost of emergency services during off-campus educational experiences.

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(Adopted 10/31/2023)

**Standard 6: PT**

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

**Required Elements**

- 6A** The comprehensive curriculum plan includes the didactic and clinical education components of the curriculum. It is based on information about the contemporary practice of physical therapy; standards of practice; current literature, documents, publications, and other resources related to the profession, to the delivery of health care services, to physical therapy education, and to educational theory; and the mission of the program.

The curriculum includes the didactic and clinical portions of the DPT program. The entire curriculum consists of a minimum of 96 weeks (of instruction completed in a minimum of six semesters or the equivalent). The clinical education portion includes a minimum of 30 weeks of full-time clinical education experiences, based on a minimum of 32 hours/week.

Upon satisfactory completion of the program the institution awards/confers the Doctor of Physical Therapy, or DPT, as the entry-level degree for physical therapists.

**Evidence of Compliance**

**Narrative:**

- Describe how the curriculum plan is based on information about the contemporary practice of physical therapy; standards of practice; and current literature, documents, publications, and other resources related to the profession, to physical therapist professional education, and to educational theory.
- Describe how the curriculum plan relates to the mission of the program.
- Identify the length of the program in semesters (or equivalent) and in semester credit hours\* (or equivalent).
- Identify the number of weeks of full-time clinical education.
- State the degree conferred.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**



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(Adopted 10/31/2023)

- 6B** The curriculum includes an expectation that students enter the professional program with a baccalaureate degree.

As an alternate pathway prior to entering the physical therapy program, students may complete three years of undergraduate education that includes in-depth upper division study in one discipline comparable to a minor at the institution.

### Evidence of Compliance

Narrative:

- If the program requires **all** students to hold an earned baccalaureate degree prior to admission, a statement to that effect is the only response required.
- If the program allows an alternate pathway so that students are not required to hold an earned baccalaureate degree prior to admission, provide evidence that students enter the program with a balance of coursework, including upper division courses in at least one content area that is the equivalent of a minor at the institution.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 6C** The prerequisite coursework is determined by the program's curriculum plan.

### Evidence of Compliance

Narrative:

- Identify the prerequisite coursework required for admission into the DPT program.
- Describe the rationale for inclusion of each specific prerequisite course, including the knowledge and skills that students are expected to possess upon entrance into the PT specific courses in the program.
- Analyze the adequacy of the prerequisite coursework to prepare students to be successful in the program.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 6D** The curriculum is a series of organized, sequential, and integrated courses designed to facilitate achievement of the expected student outcomes, including the expected student learning outcomes described in Standard 7.

- The curriculum is based on an educational philosophy that translates into learning experiences.



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- The learning objectives are stated in behavioral terms that reflect the breadth and depth of the course content, including the expected level of student performance.
- The instructional methods are based on the nature of the content, the needs of the learners, and the defined expected student outcomes.
- The learning experiences lead to achievement of the expected student outcomes for individuals across the life span and continuum of care, including individuals with chronic illness.
- The curriculum includes health care disparities\*, social determinants of health\* **in the communities served**, and JEDI, belonging, and anti-racism.
- Assessment of student learning processes determine whether students achieve the learning objectives, occur on a regular basis, include the cognitive, psychomotor, and affective domains as related to learning objectives and include expectations for safe practice during all activities.
- The clinical education component includes organized and sequential experiences coordinated with the didactic component of the curriculum. Clinical education includes both integrated and full-time terminal experiences.

### Evidence of Compliance

#### Narrative:

- Describe the educational philosophy of the curriculum.
- Describe how the organization, sequencing, and integration of courses facilitate student achievement of the expected outcomes.
- Describe how course objectives, in the aggregate, are written in behavioral (measurable and observable) terms.
- Describe the instructional methods and learning experiences that facilitate student achievement of the objectives.
- Describe how the learning experiences lead to achievement of the expected student outcomes for individuals across the life span and continuum of care, including individuals with chronic illness.
- Describe how the curriculum provides learning opportunities regarding health care disparities **and social determinants of health in the communities served**, and JEDI, belonging, and anti-racism.
- Describe the formative and summative evaluation mechanisms that measure student achievement of objectives.
- Describe how the clinical experiences and didactic curriculum are organized, sequenced, and integrated. Clinical education includes both integrated and full-time terminal experiences.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

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



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### Evidence of Compliance

Narrative:

- Only response needed is to refer to the course syllabi.

**Note:** Each syllabus **must** include at least the following:

- Title and number.
- Description.
- Department offering course.
- Credit hours.\*
- Instructor(s).
- Contact hours (lecture and laboratory).
- Course prerequisites.
- Course objectives.
- Schedule, outline of content, ~~and assigned instructor for each class and lab session.~~
- Description of learning activities (e.g., case studies, videos, presentations, group work, assignments,).
- Mode of delivery (e.g., in person, hybrid, synchronous, asynchronous).
- Describe the substantive and regular interaction that occurs with each mode of delivery.
- Methods of student evaluation/grading.
- Learning resources (e.g., textbooks, e-books, videos).

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

**For initial accreditation only:** provide the curriculum and syllabi for the charter class as CAPTE must make an accreditation decision based on their curriculum. If curricular changes have occurred since the program started, provide a summary of the changes and the rationale for the changes in Element 2E.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 6F** The didactic and clinical education curriculum includes intra-professional\* (PT/PTA) and interprofessional\* (PT with other professions/disciplines) learning activities that are based on best-practice and directed toward the development of intra-professional and interprofessional competencies including, but not limited to, values/ethics, communication, professional roles and responsibilities, and teamwork.

### Evidence of Compliance

Narrative:



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## STANDARDS AND REQUIRED ELEMENTS FOR ACCREDITATION OF PHYSICAL THERAPIST EDUCATION PROGRAMS

(Adopted 10/31/2023)

- For **intra-professional** education (didactic and clinical) describe the intentional learning activities that:
  - Involve students, faculty, and/or PT/PTA clinicians.
  - Address the effectiveness of the learning activities in preparing students and graduates for team-based PT/PTA collaborative care.
  - Include the responsibilities and legal aspects of the direction and supervision of physical therapist assistants.
- For **interprofessional** education (didactic and clinical) describe the intentional learning activities that address:
  - Values and ethics.
  - Communication.
  - Professional roles and responsibilities.
  - Teamwork.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

**6G** If the curriculum includes courses utilizing distance education, the program provides the following evidence.

**Note:** The USDE has updated the definition of Distance Education. Please see the Glossary for the updated definition.

### Evidence of Compliance

Narrative:

- Describe the use of distance education in the curriculum, if any. If no distance education is used, state as such.
- Provide evidence that faculty teaching by distance is effective in the provision of distance education within the curriculum.
- Describe how the program ensures substantive, regular, monitored, and **planned** interactions between students and faculty.
- Describe the mechanism(s) used to confirm student identity during course activities and when testing occurs at a distance.
- Describe the mechanism(s) used to maintain test security and integrity when testing occurs at a distance.
- Describe how students participating in distance education have access to academic, health, counseling, disability, and financial aid services.

**For developing programs only: If distance education is to be utilized,** describe the planned use for each bullet above.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**



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## STANDARDS AND REQUIRED ELEMENTS FOR ACCREDITATION OF PHYSICAL THERAPIST EDUCATION PROGRAMS

(Adopted 10/31/2023)

- 6H** The clinical education component of the curriculum includes clinical education experiences for each student that encompass health and wellness, prevention, management of patients/clients with diseases and conditions representative of those commonly seen in practice across the life span and the continuum of care; in practice settings representative of those where physical therapy is practiced.

### Evidence of Compliance

#### Narrative:

- Describe the clinical education practice settings in which **all** students are required to participate.
- Describe how the program monitors that each student has the required experiences.
- Describe the expectations for management of all aspects of patient and client services as appropriate to the specific clinical experience across the life span and continuum of care.

#### **For developing programs only:** Address the bullets below:

- Describe the clinical education practice settings in which **all** students are required to participate that are appropriate for the first full-time and any part-time clinical experiences.
- Describe how the program will monitor that each student has the required experiences.
- Describe the expectations for management of all aspects of patient and client services as appropriate to the specific clinical experience across the life span and continuum of care.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**



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## STANDARDS AND REQUIRED ELEMENTS FOR ACCREDITATION OF PHYSICAL THERAPIST EDUCATION PROGRAMS

(Adopted 10/31/2023)

### Standard 7: PT

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

**NOTE:** The [Guide to PT Practice 4.0](#) and the [FSBPT Content Analysis](#) are two reference documents for this section. CAPTE expects programs to identify any additional resources that assisted the program in curriculum assessment and development.

### Required Elements

**7A** The physical therapist professional curriculum includes content and learning experiences in the biological, physical, behavioral, and movement sciences necessary for entry-level practice.

Topics covered include:

- Anatomy, physiology, pathology, and cellular/tissue health throughout the life span for the included body systems:
  - Cardiovascular.
  - Endocrine and metabolic.
  - Gastrointestinal.
  - Genital and reproductive.
  - Hematologic.
  - Hepatic and biliary.
  - Immune.
  - Integumentary.
  - Lymphatic.
  - Musculoskeletal.
  - Neurological.
  - Pulmonary.
  - Renal and urologic systems.
- Body system interactions.
- Differential diagnosis.
- Health and surgical conditions seen in physical therapy.
- Genetics.
- Exercise science.
- Biomechanics.



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- Kinesiology.
- Neuroscience.
- Motor control and motor learning.
- Diagnostic imaging.
- Nutrition.
- Pharmacology.
- Pain and pain experiences.
- Psychosocial aspects of health and disability.

### Evidence of Compliance

Narrative:

- Describe where and how each of the delineated biological, physical, behavioral, and movement sciences content areas is included in the professional curriculum. Do not include prerequisite courses.
- Provide **two to five** examples of course objectives that demonstrate the progression to the highest expected level of student performance, including course **prefix and number, course name, objective number, and the full wording of the objective.**

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 7B** The physical therapist professional curriculum includes content and learning experiences in ethics, values, professional responsibilities, service, and leadership in the ever-changing health care environment.
- 7B1** Practice in a manner consistent with all principles of the APTA Code of Ethics for the Physical Therapist and the Core Values for the Physical Therapist and Physical Therapist Assistant.
- 7B2** Provide learning experiences to develop service and leadership skills and abilities that address the following:
- Legislative and political advocacy.
  - Community collaboration.
  - Health care disparity.
- 7B3** Practice within the legal framework of one's jurisdiction(s) and relevant federal and state requirements.

### Evidence of Compliance for Elements 7B1-7B3

Narrative:



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(Adopted 10/31/2023)

- Describe where and how the physical therapist professional curriculum includes content and learning experiences in ethics, values, responsibilities, service, and leadership in the ever-changing health care environment.
- Provide **two to five** examples of course objectives that demonstrate the progression to the highest expected level of student performance, including course **prefix and number, course name, objective number, and the full wording of the objective.**

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 7C** The physical therapist professional curriculum provides learning experiences in lifelong learning, education, and health care disparities in the ever-changing health care environment.
- 7C1** Provide learning experiences in contemporary physical therapy knowledge and practice including:
- Evidence-informed practice.\*
  - Interpretation of statistical evidence.
  - Clinical reasoning and decision making.
  - Scholarly inquiry.
- 7C2** Provide teaching and learning experiences to improve skills and abilities to educate and communicate in a manner that meets the needs of the patient, caregiver, and other health care professionals.
- 7C3** Provide learning experiences that advance the students' understanding of health care disparities in relation to physical therapy.
- Recognize and adjust personal behavior to optimize inclusive and equitable patient care **across the lifespan, care environments, and conditions representative of those seen in practice.** ~~and patient care environments.~~

### Evidence of Compliance

Narrative:

- Describe where and how the physical therapist professional curriculum includes content and learning experiences in lifelong learning, teaching and learning, and health care disparities in the ever-changing health care environment.
- Provide **two to five** examples of course objectives that demonstrate the progression to the highest expected level of student performance, including course **prefix and number, course name, objective number, and the full wording of the objective.**



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## STANDARDS AND REQUIRED ELEMENTS FOR ACCREDITATION OF PHYSICAL THERAPIST EDUCATION PROGRAMS

(Adopted 10/31/2023)

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

- 7D** The physical therapist professional curriculum includes content and learning experiences designed to prepare students to achieve educational outcomes required for entry-level practice of a physical therapist for patient and client management in the **ever-changing health care environment**.

### Evidence of Compliance

Narrative:

- Identify the sources that inform the decision-making process to determine curricular content as a whole, such as professional resources and organizations, parties of interest feedback, and networking.
- For each of the following 7D Elements:
  - Describe where the content is presented in the curriculum and provide example(s) and descriptions(s) of the learning experiences that are designed to meet the practice expectations (i.e., describe where and how the content is taught throughout the curriculum).
  - Provide **two to five** examples of course objectives that demonstrate the progression to the highest expected level of student performance, including course **prefix and number, course name, objective number, and the full wording of the objective**. Include objectives from clinical education courses, if applicable.
  - Describe outcomes data that may include qualitative and/or quantitative evidence, which demonstrates the level of actual student achievement for each practice expectation 7D1-7D25.

**For initial accreditation only**, describe the planned outcome and how the program will determine the actual level of student achievement for each practice expectation.

**Appendices and On-site Material: See Self-Study Report or Application for Candidacy Instructions and Forms**

### Patient and Client Management

#### Screening and Examination

- 7D1** Complete an examination and screening to inform patient and client management:
- Perform a comprehensive subjective examination.
  - Perform a systems review.



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## **STANDARDS AND REQUIRED ELEMENTS FOR ACCREDITATION OF PHYSICAL THERAPIST EDUCATION PROGRAMS**

(Adopted 10/31/2023)

- Select and administer age-appropriate tests and measures that assess each of the following throughout the life span:
  - Cardiovascular system.
  - Pulmonary system.
  - Neurological system.
  - Musculoskeletal system.
  - Integumentary and lymphatic systems.
  - Growth and human development.
  - Pain and pain experiences.
  - Psychosocial aspects.
  - Mental health aspects.
- Determine when patients and clients need further examination or consultation by a physical therapist or referral to other professional(s).
- Provide physical therapist services through direct access.

### **Evaluation**

- 7D2** Evaluate data from the examination (history, health record, systems review, and tests and measures) to make clinical judgments.

### **Diagnosis**

- 7D3** Describe a patient's or client's impairments to body functions and structures, activity limitations, and participation restrictions according to the International Classification of Function, Disability, and Health (ICF).
- 7D4** Determine a diagnosis that guides future patient and client management.

### **Prognosis and Plan of Care**

- 7D5** Determine a prognosis that includes patient and client goals and expected outcomes within available resources (including applicable payment sources) and specify expected length of time to achieve the goals and outcomes.
- 7D6** Establish a safe and effective plan of care in collaboration with appropriate parties of interest, including patients and clients, caregivers, payers, other professionals, and other appropriate individuals.



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## **STANDARDS AND REQUIRED ELEMENTS FOR ACCREDITATION OF PHYSICAL THERAPIST EDUCATION PROGRAMS**

(Adopted 10/31/2023)

- 7D7** Determine and supervise the components of the plan of care that may be directed to the physical therapist assistant based on:
- Team-based care.
  - The needs of the patient or client.
  - The education, training, and competence of the PTA.
  - Jurisdictional law and payor policies.
  - Facility policies.
- 7D8:** Determine and supervise activities that may be directed to unlicensed support personnel based on:
- The needs of the patient or client.
  - The education, training, and competence of the unlicensed personnel.
  - Jurisdictional law and payor policies.
  - Facility policies.
- 7D9** Create a discontinuation of the episode of care plan that optimizes success for the patient in moving along the continuum of care.

### **Interventions**

- 7D10** Select and perform physical therapy interventions for each of the following to achieve patient and client goals and outcomes:
- Cardiovascular conditions
  - Pulmonary conditions.
  - Neurological conditions.
  - Musculoskeletal conditions.
  - Integumentary and lymphatic conditions.
  - Metabolic conditions.
  - Human development.
  - Pain and pain experiences.

### **Management of the Delivery of Physical Therapy Services**

- 7D11** Monitor and adjust the plan of care to optimize patient or client health outcomes.
- 7D12** Assess patient outcomes, including the use of appropriate standardized tests and measures that address impairments of body functions and structures, activity limitations, and participation restrictions.



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## STANDARDS AND REQUIRED ELEMENTS FOR ACCREDITATION OF PHYSICAL THERAPIST EDUCATION PROGRAMS

(Adopted 10/31/2023)

- 7D13** Educate others, using teaching methods that are commensurate with the needs of the learner, including participation in the clinical education of students. Incorporate cultural humility\* and social determinants of health when providing patient and/or caregiver education.
- 7D14** Manage the delivery of care consistent with administrative policies and procedures of the practice environment, including environmental emergencies.\*
- 7D15** Complete documentation related to Elements 7D1-7D13 that follows guidelines and specific documentation formats required by jurisdiction's practice act, the practice setting, and other regulatory agencies.
- 7D16** Participate in the case management process.

### Health Care Activities

- 7D17** Participate in activities for ongoing assessment and improvement of quality services.
- 7D18** Participate in patient-centered interprofessional collaborative practice.
- 7D19** Use health informatics\* in the health care environment.
- 7D20** Assess health care policies and their potential impact on the ever-changing health care environment and practice.

### Community Health

- 7D21** Provide physical therapy services informed by cultural humility that address primary,\* secondary,\* and tertiary\* prevention, health promotion, and wellness to individuals, groups, and communities.
- 7D22** Provide physical therapy services that address:
  - ~~JEDI, belonging, and anti-racism.~~
  - Health care disparities\* and social determinants of health.

### Practice Management

- 7D23** Assess, document, and minimize safety risks of individuals and the health care provider:
  - Design and implement strategies to improve safety in the health care setting as an individual and as a member of the interprofessional health care team.



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**STANDARDS AND REQUIRED ELEMENTS FOR ACCREDITATION OF  
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(Adopted 10/31/2023)

- Follow the safety policies and procedures of the facility.
- 7D24** Participate in the financial management of the practice setting, including accurate billing and payment for services rendered.
- 7D25** Participate in practice management activities that **may** include marketing, public relations, regulatory and legal requirements, risk management, staffing, and continuous quality improvement.