

OCCUPATIONAL THERAPIST ASSISTANT & PHYSIOTHERAPIST ASSISTANT EDUCATION ACCREDITATION PROGRAM

POLICY & PROCEDURES ACC-03 Pilot: ACCREDITATION DECISIONS (Pilot Standards)

NOTE:

This policy applies to education programs whose onsite accreditation review took place before

For onsite reviews between November 2013 and May 31, 2017, see ACC-03A

For onsite reviews AFTER June 1, 2017 see ACC-03B.

PREAMBLE

Accreditation is a quality review process that involves an integrated system of continuous assessment, evaluation, and improvement to comply with specified accreditation standards. The condition of being accredited provides the public and other stakeholders with assurance that an education program has fulfilled its commitment to educational quality by meeting a set of nationally accepted standards. The accreditation process promotes a high quality of education and supports continued growth and development of educational programs.

The OTA & PTA EAP is a process that adheres to the following values

- Peer-reviewed
- Collaborative
- Respectful of diversity
- Accountable
- Fair and equitable
- Confidential

Policies and procedures related to making decisions about accreditation must be grounded in principles of quality, equity, consistency, transparency, and objectivity. The remainder of this document outlines the policies and procedures related to decisions about accreditation status.

1.0 POLICY

1.1 Accreditation Decisions

There are three options for accreditation decisions

- I. Accreditation,**
- II. Non-accreditation, or**
- III. Deferral of decision.**

The program's compliance with the evaluative criteria in each of the six standards provides the evidence for the accreditation award, and decisions about these options are made based on the following parameters:

- *Issue* - the program is compliant with the criterion; potential exists for non-compliance in future
- *Weakness* - the program is compliant with the criterion; there is insufficient strength of compliance to assure the quality of the program will be maintained
- *Deficiency* - the program does not meet the criterion
- *Comment* – a remark about a matter that does not pertain to a specific evaluative criterion but may impact on quality of the education program

I. Accreditation

1 a. Accreditation Fully Compliant

A program meets 100% of the evaluative criteria (ie. there is evidence to indicate that all criteria in each of the six standards have been met – no deficiencies).

Award: Accreditation
Options: Progress report required only in the event that one or more issues/weaknesses are identified

1 b. Accreditation Partially Compliant

A program meets 80-100% of the evaluative criteria in a minimum of four standards and 50-79% of the evaluative criteria in a maximum of two standards.

Award: Accreditation
Options: Progress reports required until the program demonstrates evidence of full compliance with the evaluative criteria. Failure to demonstrate evidence of progress towards full compliance may result in a change to probationary accreditation. Progress reports are required in 6 to 24 months from the date of the accreditation decision.

1 c. Probationary Accreditation

A program meets less than 50% of the evaluative criteria in one standard or

OR

A program meets less than 80% of the evaluative criteria in three or more standards.

OR

A program fails to demonstrate evidence of progress from partial towards full compliance

Award: Accreditation
Options: A Progress Report will be required within 3 to 12 months of the accreditation award depending on the severity of the identified deficiencies. When a program demonstrates significant progress towards resolution of all outstanding areas, it may lead to an accreditation status with partial or full compliance.

Failure to demonstrate significant progress within the period specified in the Accreditation Review and Status Report will result in non-accreditation

status. If an additional on-site review is required, the program will be responsible to pay for any related expenses.

II. Non-Accreditation

A program does not meet the requirements for probationary accreditation

OR

A program with probationary accreditation has failed to demonstrate sufficient progress within the specified period (ie. Fails to meet requirements of Progress Reports)

Options: A program may re-apply to initiate a full accreditation review at any time following the notice of non-accreditation status. When a program re-applies for a full accreditation review, it will have to provide evidence in its application that the identified areas on noncompliance have been addressed. A program remains non-accredited until a full accreditation review is completed and a change in accreditation status is made.

III. Deferral of Decision

A decision will be deferred if it is deemed that further information is required from the program before a decision can be taken or when extenuating circumstances impact upon the program or accreditation process.

1.2 Responsibility for Decision Making

Peer Review Team (PRT) members are responsible for verifying and supplementing evidence provided by the education program in the Self-Study Report; assessing the program within the context of its environment; and preparing and submitting a report about the program's compliance with the OTA & PTA EAP Accreditation Standards. While Peer Review Team members indicate in the PRT Report the extent of a program's compliance with the accreditation standards, PRT members do not make any recommendations regarding a program's accreditation status.

The Joint Accreditation Committee (JAC) of the Occupational Therapist Assistant and Physiotherapist Assistant Education Accreditation Program (OTA & PTA EAP) has the authority to recommend the accreditation status of an educational program to the Boards of CAOT Board and PEAC. A member of the Joint Accreditation Committee (the Primary Reviewer) is appointed to lead the program review, provide a Primary Reviewer Report, and make a recommendation for a program's accreditation status for discussion during the JAC meeting. If a member of the Peer Review Team is also a member of the JAC, he or she may clarify existing information but must not add new information during the discussion.

The recommendation concerning the program's accreditation award made by the Joint Accreditation Committee is presented for approval/ratification by the Boards of Directors of CAOT and PEAC.

1.3 Documents Used for Decision-Making

Recommendations about a program's accreditation status are made by the JAC based on information from the following sources, which are incorporated into an Accreditation Dossier for consideration by the Joint Accreditation Committee:

- The program's Self Study Report and related evidence,
- The PRT Report,
- The response of the program to the PRT Report, and
- Primary Reviewer Report

1.4 Accreditation Cycle

The accreditation award is for a six-year period which commences on the date that the Boards of CAOT and PEAC approve/ratify the award and terminates six years from that date or the date the new accreditation award is granted.

1.5 Notification of Decisions Taken about a Program's Accreditation Status

Following the accreditation award recommendation and approval/ratification, a letter and the Accreditation Review and Status Report (AR & SR) are sent to the college administrator responsible for the program. Copies of the letter and AR & SR are sent to the program head and any other administrative individuals identified by the program head. Information is also included in the letter about any follow-up requirements on the part of the program.

JAC members will receive notification of delivery of the AR & SR but will not receive a copy. PRT Members will be notified about the recommendation taken by the JAC but will not receive a copy of the AR & SR.

Policy Number: ACC-03 Pilot	
Date of last revision	Associated documents
<i>May 2011</i>	Program Accreditation Handbook
<i>March 2012</i>	
<i>May 2017</i>	PRT Handbook