

OCCUPATIONAL THERAPIST ASSISTANT & PHYSIOTHERAPIST ASSISTANT EDUCATION ACCREDITATION PROGRAM

ACCREDITATION STANDARDS

What's New in the 2012 Standards?

A. Background

The Occupational Therapist Assistant and Physiotherapist Assistant Education Accreditation Program (OTA & PTA EAP) is responsible for the accreditation of physiotherapist assistant and occupational therapist assistant education programs in Canada.

The OTA & PTA EAP is a collaborative initiative among three stakeholder organizations: Canadian Association of Occupational Therapists (CAOT), Physiotherapy Education Accreditation Canada (PEAC), and the Canadian Occupational Therapist Assistant & Physiotherapist Assistant Educators Council (COPEC). CAOT and PEAC are the accreditation agencies for Canadian Occupational Therapist and Physiotherapist Education Programs respectively. COPEC is the organization of educators of Canadian OTA & PTA Programs.

The pilot version of the OTA & PTA EAP accreditation standards were developed through an iterative process consisting of multi-stakeholder input using focus groups and an electronic survey, and guided by the Standards Development Working Group. The standards were based on a 5+1 framework¹ which includes five standards considered common to accreditation of professional education programs and a sixth standard, the "+1" component of the model, which relates specifically to the profession. They included aspects of the CAOT and PEAC education accreditation standards and incorporated the OTA and PTA competency profiles. The pilot OTA & PTA EAP Accreditation Standards were finalized in December 2010 and used for the pilot accreditation reviews in early 2012.

B. Comparison of Standards and Evaluative Criteria Pilot (2010) & 2012

Based on evaluative feedback and documentation from the pilot process, the pilot Standards have been evaluated, reviewed, and revised by the Joint Accreditation Committee (JAC) of the OTA & PTA EAP, and approved by PEAC and CAOT; the OTA & PTA EAP has made the following changes to the accreditation standards and criteria:

- i. Revision and reorganization of some of the criteria to be more clear and concise
- ii. Revision of explanatory notes for each of the evaluative criteria to provide clarification about the intent of the criteria such as the rationale and linkages between the standards, criteria, and evidence (*revisions not included in this document but available in the 2012 Accreditation Standards document*).

¹ Gelmon, S., O'Neil, E., Kimmey, J., and the Task Force on Accreditation of Health Professions Education. (1999). Strategies for Change and Improvement: The Report of the Task Force on Accreditation of Health Professions Education. San Francisco: Center for the Health Professions, University of California at San Francisco.

iii. Addition of six Core Criteria

i. Revision and reorganization of some of the criteria to be more clear and concise.

Standard 1

Pilot	2012
1.1 The educational program is situated in an institution authorized under applicable law to provide postsecondary education	1.1 The educational program is situated in an institution authorized under applicable law to provide postsecondary education in Canada
1.2 The program's vision, mission, goals and objectives reflect expectations of the educational institution, the profession(s) and the public	1.2 The program's vision, mission, goals and philosophy reflect expectations of the educational institution, the profession(s) and the public
1.8 There is a formal plan for the curriculum 1.8.1 The methods of teaching are consistent with stated learning goals and objectives 1.8.2 The curriculum integrates academic and clinical/fieldwork education 1.8.3 Clinical/fieldwork education includes a minimum of 500 hours in the clinical setting with no less than 30% of the total time in each discipline. (Now 3.4.1 and 3.4.2)	1.8 There is a formal plan for the curriculum 1.8.1 The curriculum is grounded in a conceptual framework. 1.8.2 The curriculum conceptual framework is consistent with current educational pedagogy. 1.8.3 The methods of teaching are consistent with stated learning goals and objectives. 1.8.4 The curriculum integrates academic and clinical /fieldwork education. 1.8.5 The curriculum clearly delineates practice roles between OT/OTA and PT/PTA.

Standard 2

Pilot	2012
2.1 The number and qualifications of faculty meet the program's mission, goals, and objectives through education administration, curriculum development, instructional design and delivery, and evaluation of outcomes. • The occupational therapy component of the curriculum is supervised and taught by an occupational therapist, while the physiotherapy component is supervised and taught by a physiotherapist.	2.1 The number and qualifications of faculty meet the program's mission, goals, and objectives through education administration, curriculum development, instructional design and delivery, and evaluation of outcomes. 2.1.1 The occupational therapy content of the curriculum is overseen and taught by a registered occupational therapist with relevant academic and professional qualifications. 2.1.2 The physiotherapy content is overseen and taught by a registered physiotherapist with relevant academic and professional qualifications. 2.1.3 The faculty member responsible for overseeing clinical/fieldwork education is a registered occupational therapist or physiotherapist with relevant academic and professional qualifications.
2.2 The educational institution and the program encourage and support career development of faculty relevant to their roles in the program, including support for new/junior faculty.	2.2 The educational institution and the program encourage and support career development of faculty relevant to their roles in the program, including support for new/junior faculty. 2.2.1 The rights and privileges of faculty are equitable with other faculty in the institution
2.3 Faculty members are evaluated in accordance with institutional policies and with reference to clearly outlined criteria using multiple sources of information. The rights and privileges of faculty are equitable with other faculty in the institution.	2.3 Faculty members are evaluated in accordance with institutional policies and with reference to clearly outlined criteria using multiple sources of information.

Pilot	2012
2.5 The program faculty have responsibility to contribute to the effective operation of the program and to ensure program policies are implemented.	2.5 The program faculty are responsible for contributing to the effective operation of the program and for ensuring that program policies are implemented.
2.6 The program supports innovation, advancement and improvement in educational activities conducted by faculty.	2.6 The program supports faculty in innovation, advancement and improvement in educational activities.
2.7 The faculty member responsible for overseeing clinical/fieldwork education is a registered occupational therapist or physiotherapist with relevant academic and professional qualifications.	Removed – content now in 2.1.3

Standard 3

Pilot	2012
3.1 The program ensures effective administration and coordination of student education throughout the course of study.	3.1 The program ensures effective administration and coordination of student education throughout the course of study. 3.1.1 The confidentiality of student academic records is assured.
3.3 There is an overall plan for educational goals and students' achievement that includes: <ul style="list-style-type: none"> • clearly defined outcome-based competencies; • fair, transparent, and timely evaluation criteria; and • opportunities for feedback to students about their strengths and areas for improvement and remediation. 	3.3 There is an overall plan for educational goals and students' achievement that includes: <ul style="list-style-type: none"> • clearly defined outcome-based competencies consistent with national competency frameworks; • fair, transparent, and timely evaluation criteria; and • opportunities for feedback to students about their strengths and areas for improvement and remediation.
3.4 The program provides clinical education/fieldwork experiences in occupational therapy and physiotherapy that enable students to achieve the learning outcomes.	3.4 The program provides clinical education/fieldwork experiences in occupational therapy and physiotherapy that enable students to achieve the learning outcomes. 3.4.1 Clinical/fieldwork education includes a minimum of 500 hours in the clinical setting 3.4.2 Clinical/fieldwork education includes no less than 30% of the total time in each discipline. 3.4.3 A registered occupational therapist faculty member is available to students and preceptors on issues related to occupational therapy practice in fieldwork. Similarly, a registered physiotherapist faculty member is available to students and preceptors on issues related to physiotherapy practice in fieldwork

Standard 4

Pilot	2012
4.3 The program analyzes and synthesizes program evaluation data to identify need for change.	4.3 The program analyzes and synthesizes program evaluation data to identify need for change. 4.3.1 The program identifies, monitors, and evaluates indicators of students' and graduates' progress and uses these data for planning and development. 4.3.2 The program reviews admission criteria, graduation and attrition data and analyzes and responds to trends.

4.5 The program identifies, monitors, and evaluates indicators of students' and graduates' success and uses these data for planning and development.	4.5 Removed (content in 4.3)
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Standard 5

Pilot	2012
5.3 The program provides an environment that is safe and protects the rights of all individuals, including students, faculty, staff and others participating in associated activities.	5.3 The program provides a culture and environment that is safe and protects the rights, privacy and confidentiality of all individuals, including students, faculty, staff and others participating in associated activities.
5.4 The program has an admissions process that is fair, transparent and timely.	5.4 The program has an admissions process that is fair, transparent and timely. 5.4.1 There is a transparent appeals process

Standard 6

OTA Competencies

Pilot	2012
OTA 6.2.2 Anticipate, identify, prevent and resolve conflict.	NEW OTA 6.2.2 Participates actively as an interprofessional team member.
	OTA 6.2.3 Anticipates, identifies, prevents and resolves conflict.
OTA 6.3.3 Recognizes and respects established organizational quality improvement activities.	OTA 6.3.3 Recognizes, respects and participates in established organizational quality improvement activities.
OTA 6.4.2 Applies change process as determined by the supervising occupational therapist.	OTA 6.4.2 Assists clients in making life changes in support of their health goals as determined by the supervising occupational therapist.
OTA 6.4.3 Work collaboratively to ensure the health needs of individual clients are met	OTA 6.4.3 Considers the impact of the determinants of health on the well-being of clients served.
OTA 6.5.2 Participates in the learning process for other learners within their service.	OTA 6.5.2 Modifies service delivery based on personal reflection and external feedback under the supervision of the occupational therapist.
OTA 6.5.3 Applies information into practice under the supervision of the occupational therapist.	OTA 6.5.3 Supports the supervising therapist in applying an evidence informed approach in their services.
OTA 6.6.4 Performs within the limits of personal competence within the broad practice contexts.	OTA 6.6.4 Performs within the limits of personal competence within their own professional scope.
	NEW OTA 6.7.6 Participates in the learning process for clients, team members, peers, students and any other learners within their service.

Standard 6

PTA Competencies

Pilot	2012
PTA 6.2.2 Anticipate, identify, prevent and resolve conflict.	NEW PTA 6.2.2 Participates actively as an interprofessional team member.
	PTA 6.2.3 Anticipates, identifies, prevents and resolves conflict.
PTA 6.3.3 Recognizes and respects established organizational quality improvement activities.	PTA 6.3.3 Recognizes, respects and participates in established organizational quality improvement activities.

Pilot	2012
PTA 6.4.2 Applies change process as determined by the supervising physiotherapist.	PTA 6.4.2 Assists clients in making life changes in support of their health goals as determined by the supervising physiotherapist.
PTA 6.4.3 Work collaboratively to ensure the health needs of individual clients are met	PTA 6.4.3 Considers the impact of the determinants of health on the well-being of clients served.
PTA 6.5.2 Participates in the learning process for other learners within their service.	PTA 6.5.2 Modifies service delivery based on personal reflection and external feedback under the supervision of the physiotherapist.
PTA 6.5.3 Applies information into practice under the supervision of the physiotherapist.	PTA 6.5.3 Supports the supervising therapist in applying an evidence informed approach in their services.
PTA 6.6.4 Performs within the limits of personal competence within the broad practice contexts.	PTA 6.6.4 Performs within the limits of personal competence within their own professional scope.
	NEW PTA 6.7.5 Participates in the learning process for clients, team members, peers, students and any other learners within their service.

iii. Addition of six Core Criteria

It was decided that compliance with six of the criteria is essential for accreditation. Education programs must demonstrate compliance with the following criteria. Non compliance will result automatically in Probationary Accreditation, or Non Accreditation.

- Criterion 1.1 **CORE** The educational program is situated in an institution authorized under applicable law to provide postsecondary education in Canada
- Criterion 1.4 **CORE** The program lead is a registered occupational therapist or physiotherapist who has the ability to provide leadership for the faculty, staff, and students and management of the program.
 - 1.4.1 The program lead has adequate authority and resources to administer the program
- Criterion 1.5 **CORE** The program has adequate financial resources to achieve its stated goals and objectives and assure its continuing operation
- Criterion 2.1 The number and qualifications of faculty meet the program's mission, goals, and objectives through education administration, curriculum development, instructional design and delivery, and evaluation of outcomes.
 - 2.1.1 **CORE** The occupational therapy content of the curriculum is overseen and taught by a registered occupational therapist with relevant academic and professional qualifications.
 - 2.1.2 **CORE** The physiotherapy content is overseen and taught by a registered physiotherapist with relevant academic and professional qualifications.
- Criterion 3.4 The program provides clinical education/fieldwork experiences in occupational therapy and physiotherapy that enable students to achieve the learning outcomes.
 - 3.4.1 **CORE** Clinical/fieldwork education includes a minimum of 500 hours in the clinical setting

C. Summary

The Occupational Therapist Assistant and Physiotherapist Assistant Education Accreditation Program is pleased to publish these 2012 Accreditation Standards and extends their thanks to the members of Physiotherapy Education Accreditation Canada, the Canadian Association of Occupational Therapists, the Joint Accreditation Committee, and the Canadian Occupational Therapist and Physiotherapist Assistant Educators Council for their work in reviewing and recommending revisions, and to the education programs and PRT members who participated in the pilot reviews and provided valuable feedback.