

SELF-STUDY REPORT INVENTORY

**ACCREDITATION COUNCIL
FOR CANADIAN PHYSIOTHERAPY ACADEMIC PROGRAMS**

**SELF-STUDY REPORT:
Required documentation, forms, and inventory**

PREFACE

The purpose of this document is to facilitate preparation and submission of the Self-Study Report (SSR). Information is provided about

- Documentation that must be submitted with the SSR,
- Standardized ACCPAP forms,
- An inventory of documentation submitted by the program with the SSR as evidence of compliance with ACCPAP Standards and Criteria, and
- An inventory of documentation that the program will provide during the on-site review as evidence of compliance with ACCPAP Standards and Criteria.

1.0 REQUIRED DOCUMENTATION FOR SUBMISSION WITH THE SELF-STUDY REPORT

1.1 Summary of Required Documentation for the Self-Study Report

- i) Program Contact Information* (SSR-Form 1)
- ii) Signature Form* (SSR-Form 2)
- iii) Program Personnel Profile* (SSR-Forms 3.1 and 3.2)
 - A summary of faculty and staff employed by the program, academic and professional qualifications, appointments
- iv) Student Profile* (SSR-Form 4)
 - Number of students enrolled in each year of the program
 - Number of students successfully completing the program and their employment
 - Results of students' performance on Physiotherapy Competency Examination (if applicable); a five year summary including year, number of graduates, number of examination writers, number of passes, number of failures
- v) Course Profile* (SSR-Form 5)
 - Includes a summary of course title, course number, calendar reference/major topics, texts/resources, average student achievement
- vi) Teaching Assignments and Workload
 - Include master timetable and teaching assignments
- vii) Clinical Education Program Profile* (SSR-Form 6)
 - A list of facilities for which there are affiliation agreements with the university to provide clinical education for physiotherapy students
- viii) Financial Summary
- ix) Appendices should include, but need not be limited to
 - A current university calendar
 - Curriculum Vitae of academic faculty
 - List of faculty members who hold part-time and sessional appointments

* Standardized reporting forms provided by ACCPAP

1.1.1 Faculty and Curriculum Vitae

For the purposes of accreditation Academic faculty includes those individuals who:

- are appointed to and paid by the university;
- have at least a .20 appointment in the program;
- hold tenured, tenure track or non-tenure track appointments; and
- have responsibility and authority related to curriculum development, instructional design and delivery, and evaluation of outcomes.

These individuals should be included in the faculty full-time equivalent (FTE) calculation. Those who teach in the program and are cross appointed should not be included in the faculty FTE calculations.

A template for curriculum vitae is not provided by ACCPAP, as each institution will have a preferred format. However, it is expected that curriculum vitae will include the following information about the faculty member:

- name and rank;
- educational degrees including field of study, date awarded, and institution;
- professional qualifications and memberships, including positions/offices held;
- courses taught and students supervised for theses at both the undergraduate and graduate levels;
- publications including those in refereed and non-refereed journals, books or other publications;
- funding including research and non-research grants or contracts;
- presentations;
- honours and awards; and
- service contributions, including participation on University or other committees.

⇒ Curriculum vitae for all full-time faculty must be submitted as an appendix to the program's Self-Study Report.

⇒ A list of those faculty members who hold part-time and sessional appointments should be included as an appendix to the Self-Study Report. Curriculum vitae for these individuals should be provided for the Peer Review Team on-site.

2.0 REQUIRED FORMS FOR SUBMISSION WITH THE SELF-STUDY REPORT

**ACCREDITATION COUNCIL
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Program Contact Information

Name of Program: _____

Address: _____

Program
Telephone: _____

Program Fax: _____

Program
Web Address: _____

University
Web Address: _____

Contact Person
Name: _____

Title: _____

Telephone: _____

Fax: _____

E-mail: _____

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Signature Form

The _____

Name of Institution

submits the following documentation in partial fulfillment of the ACCPAP requirements for accreditation of the physical therapy education program.

The information submitted in this Self-Study Report is a true and accurate description of the institution and the physical therapy education program with respect to the information requested.

*Administrative Official of the Faculty in which
the program is located*

Chief Executive Officer of the Institution

Title

Title

Signature

Signature

Date

Date

Chair/ Director of Program

Title

Signature

Date

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Program Personnel Profile

Personnel Category	Academic Year					
Full-time Faculty* (FTF)						
Part-time Faculty (PTF)						
Full-time equivalent faculty ¹						
FTF on sabbatical						
FTF on other leave						
Teaching Assistants						
Teaching Assistant Hours						
Full-time equivalent Support Staff						
Other staff:						

* For the purposes of accreditation *faculty* includes Academic Faculty defined as follows:

Academic Faculty includes those individuals who are appointed to and paid by the university and have at least a .20 appointment in the program. Academic Faculty members will typically have full-time appointments, although some may have part-time appointments; they may hold tenured, tenure track or non-tenure track appointments. Academic Faculty members have responsibility and authority related to curriculum development, instructional design and delivery, and evaluation of outcomes.

¹ Calculation of Full-Time Equivalent (FTE) Positions:

Excluded from the calculation are those who:

- i) Provide supervision for students during field placements, i.e., clinical instructors; and
- ii) Teach courses outside of the program.

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Program Faculty* Profile

Information provided for years _____ to _____	Academic Appointment Categories				
	Professor	Associate Professor	Assistant Professor	Lecturer/ Instructor	Other
Number of faculty²					
Tenured					
Tenure Track					
Limited Term					
Other					
Number of vacancies					
Terminations					
New Hirings					

- * For the purposes of accreditation Academic faculty includes those individuals who:
- are appointed to and paid by the university;
 - have at least a .20 appointment in the program;
 - hold tenured, tenure track or non-tenure track appointments; and
 - have responsibility and authority related to curriculum development, instructional design and delivery, and evaluation of outcomes.

² Please include names of faculty members in each category

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Student Profile

Academic Year	Student Enrollment				Degrees Conferred	
	Year 1	Year 1	Year 3	Year 4	Baccalaureate	Post-Bacc

3.0 INVENTORY OF EVIDENCE SUBMITTED / AVAILABLE ON-SITE³

STANDARD 1 PROGRAM GOVERNANCE AND RESOURCES		
Standard / Criteria	Evidence Submitted (Label evidence with a cross-reference to criteria)	Evidence Available On-Site (Label evidence with a cross-reference to criteria)
1.1 (Core)		
1.2 (Core)		
1.3 (Core)		
1.4		
1.5		
1.6		

³ If course outlines are submitted as evidence for a criterion, it is recommended that the number of the specific course to which the criterion refers be provided to assist in cross-referencing the documents with the Self-Study Report.

STANDARD 2 PROGRAM DEVELOPMENT AND EVALUATION

Standard / Criteria	Evidence Submitted (Label evidence with a cross- reference to criteria)	Evidence Available On-Site (Label evidence with a cross- reference to criteria)
2.1		
2.2		
2.3		
2.4		
2.5		
2.6		
2.7 (Core)		

STANDARD 3 FACULTY		
Standard / Criteria	Evidence Submitted (Label evidence with a cross-reference to criteria)	Evidence Available On-Site (Label evidence with a cross-reference to criteria)
3.1		
3.2		
3.3		
3.4		
3.5		
3.6		

STANDARD 4 STUDENTS		
Standard / Criteria	Evidence Submitted (Label evidence with a cross-reference to criteria)	Evidence Available On-Site (Label evidence with a cross-reference to criteria)
4.1		
4.2		
4.3		
4.4		
4.5		

STANDARD 5 ACCOUNTABILITY		
Standard / Criteria	Evidence Submitted (Label evidence with a cross-reference to criteria)	Evidence Available On-Site (Label evidence with a cross-reference to criteria)
5.1		
5.2		
5.3		
5.4		

STANDARD 6 PHYSIOTHERAPY COMPETENCIES

Standard / Criteria	Evidence Submitted (Label evidence with a cross- reference to criteria)	Evidence Available On-Site (Label evidence with a cross- reference to criteria)
6.1		
6.2		
6.3		
6.4		
6.5		
6.6		