

# Accreditation Report Rubric

# For Non-Clinical Physical Therapist Residency and Fellowship Programs

Please note: The Accreditation Report Rubric is accessed and completed through ABPTRFE's Accreditation Management System. This paper format is provided for reference purposes only.

# Background

ABPTRFE's accreditation process is grounded in the fundamental principle of peer-review that enables other physical therapists and higher education faculty and administrators to conduct reviews of residency and fellowship programs on behalf of participants. The accreditation process is guided by transparent standards that are collaboratively established by professional peers and member programs.

The initial accreditation process provides ABPTRFE an opportunity to engage in a multi-level review beginning with the Candidacy Review Council. The Candidacy Review Council evaluates a program's Self-Evaluation Report and Exhibits, making recommendations to ABPTRFE on the level of a program's preparedness to undergo a comprehensive onsite visit.

Following a grant of candidacy, residency and fellowship programs prepare for the onsite visit by revising the Self-Evaluation Report and Exhibits based on the feedback received from the Candidacy Review Council through this Accreditation Report Rubric. The onsite team uses this same rubric to determine whether the program successfully implemented and fully demonstrates compliance with the ABPTRFE Quality Standards before making recommendations to the program and ABPTRFE.

For residency and fellowship programs undergoing renewal of accreditation, the site team uses this Accreditation Report Rubric to document a program's ongoing compliance with the ABPTRFE Quality Standards through a review of a program's Self-Evaluation Report, Exhibits, and site visit, before making recommendations to the program and ABPTRFE.

Throughout each step, residency and fellowship programs are provided an opportunity to respond and demonstrate full compliance with any "Needs Improvement" or "Inadequate" findings prior to ABPTRFE's review and making a final accreditation decision.



The Team Lead of the site team is responsible for guiding the site visit in accordance with ABPTRFE's Processes and Procedures and ensures that team members complete their tasks during the site visit.

## Self-Evaluation Report (SER)

The Self-Evaluation Report tells a story about the residency or fellowship program, beginning with its history and mission then focusing on its current state and future. Programs present their passion for offering a quality curriculum that provides physical therapists with the knowledge, skills, and affective behaviors to enhance the practice of physical therapy. Programs craft their story using the Self-Evaluation Report template and Exhibits as a guide while narratively describing how their policies and procedures meet the intent of the ABPTRFE Quality Standards.

#### Instructions

#### **Candidacy Review**

**Candidacy Review Council:** ABPTRFE appoints members to the Candidacy Review Council who are responsible for completing comprehensive reviews of programs seeking candidacy status. Council members use the Accreditation Report Rubric to complete an initial evaluation on whether the program already "Meets Expectations" or is likely to meet expectations once granted candidacy. The Candidacy Review Council uses the Accreditation Report Rubric to provide an initial determination and provide detailed feedback to developing programs on the steps they need to take to demonstrate full compliance with the ABPTRFE Quality Standards.

The Candidacy Review Council member completes all rubric content indicated in **blue** and provides detailed feedback under "Required Actions" for any finding of "Needs Improvement" or "Inadequate". The Candidacy Review Council member completes the "Comments" to provide general guiding feedback to programs on what they are doing well or areas they may consider for further enhancement or improvement—as part of the value in the peer-review process. Rubric content in **green** is for **site visit completion only**.

**Candidacy Absolutes:** ABPTRFE identified a subset of its Quality Standards as absolute that a program seeking candidacy must meet through narrative responses and relevant evidence.

A program seeking candidacy must attest to, and demonstrate, within the Self-Evaluation Report and Exhibits that it meets each absolute.



ABPTRFE will suspend consideration of any program that does not meet all absolutes following the Candidacy Review Process.

# \*While programs must complete the entire SER, those Key Elements in red font denotes Candidacy Absolutes.

**Defined Terms:** Those terms underlined within the ABPTRFE Quality Standards and corresponding Self-Evaluation Report are defined in the Glossary of Terms within the <u>ABPTRFE Processes and Procedures</u>.

#### **Site Visit Review**

**Site Team:** ABPTRFE staff appoints individuals to serve on site teams. Each team member completes the Accreditation Report Rubric based on their respective team roles:

- <u>Team Lead</u>: Compiles the team's reports to provide ABPTRFE with a clear representation of the program's compliance with published Quality Standards. Submits Accreditation Report Rubric to ABPTRFE staff four weeks following the site visit.
- <u>Program Administration/Outcomes</u>: responsible for comprehensively reviewing Quality Standards 1, 4, and 5. Submits Accreditation Report Rubric to the team lead two weeks following the site visit.
- <u>Practice Area Expert</u>: responsible for comprehensively reviewing Quality Standards 2 and 3. Submits Accreditation Report Rubric to the team lead two weeks following the site visit.

The site team completes all rubric content in both **blue** and **green**. The rubric items in green are only reviewed during the site visit.

#### **Finding Guidelines**

- **Exceeds Expectations:** a team member may indicate a finding of exceeds expectations for key elements where programs demonstrate they <u>go beyond the minimum</u> intent of the Quality Standards.
- **Meets Expectations:** a team member may indicate a finding of meets expectations for key elements where programs demonstrate they <u>meet the minimum</u> intent of the Quality Standards.



- **Needs Improvement:** a team member may indicate a finding of needs improvement for key elements where programs demonstrate they <u>partially meet the minimum</u> intent of the Quality Standards.
- **Inadequate:** a team member may indicate a finding of inadequate for key elements where programs demonstrate they <u>do not meet the minimum</u> intent of the Quality Standards.

For all findings of "needs improvement" or "inadequate", the Council and team members are required to indicate the required actions necessary for the program to demonstrate compliance with the deficient key element. Each required action must relate directly back to a Quality Standard or key element.

For <u>required actions</u>, all statements should begin with, "[Insert Name of Program] needs to [insert the action necessary for the program to demonstrate compliance with the Quality Standard or key element.]"

As part of the peer review process, it is important that programs receive suggestions for improving their curriculum and support services. The accreditation process allows programs to benefit from an external review and perspective. Site team members are encouraged to provide suggestions within the report. Suggestions are those recommendations that are not required to meet minimum Quality Standards but are provided to programs as an opportunity for growth and improvement.

For <u>suggestions/comments</u>, all statements should begin with, "[Insert Name of Program] may want to consider [insert the recommendation for improvement].

The team lead is ultimately responsible for making final evaluations on whether programs demonstrate compliance with Quality Standards and whether suggestions/comments are appropriate for inclusion in the final Accreditation Report Rubric. It is within the team lead's discretion to change a determination as necessary based on programs' response and evidence presented during the site visit.

# **Helpful Tips**

• All required actions and comments should be objectively written in third person, narrative format using declarative sentences and simple verbs. The Accreditation Report Rubric should avoid broad generalities and speculative views.



- The Accreditation Report Rubric represents accurate, concise, factual, and thorough presentation of the findings during a candidacy and site visit evaluation.
- When making an overall determination whether programs exceed, meet, need improvement, or are inadequate, the Accreditation Report Rubric should cite evidence of documents reviewed during candidacy or site which led to the specific finding, include specific examples.
- The Accreditation Report Rubric documents attributes and deficiencies using language found in the Quality Standards and key elements. All deficiencies must be documented.
- The Accreditation Report Rubric should focus on identifying the required action necessary for programs to provide evidence or demonstrate compliance with the Quality Standards or key elements. Programs bear the responsibility of demonstrating compliance with the ABPTRFE Quality Standards.
- The Accreditation Report Rubric accurately presents comments, required actions, and suggestions using direct quotations, references, data, and examples from evidence presented or team members' reports.
- The Accreditation Report Rubric should not reference individual team members' reports or contain supporting exhibits.
- The Accreditation Report Rubric does not make recommendations to ABPTRFE concerning the overall accreditation of programs.

#### **Program Assessment**

A. Describe the program's preparedness to undergo this ABPTRFE self-evaluation (accreditation) process, including the engagement of all relevant stakeholders (sponsoring organization, program leadership, etc.).

#### Insert Response

B. Describe the program's process in gathering information and submitting the selfevaluation report (SER) and associated Exhibits, including details on the involvement of the program director, faculty, and staff (identify individuals by name and title) in the process.



Insert Response

#### **Program Profile**

A. Briefly describe the program's history and why it was developed.

Insert Response

B. For Re-Accreditation only, describe any major changes since the program's most recent accreditation review (e.g., admissions, faculty, enrollment, curriculum, or marketing).

Insert Response

C. For Re-Accreditation only, describe how the program continues to address areas identified within any Progress Report or Enhancement Report findings from the program's most recent grant of accreditation, or any other Board correspondence.

Insert Response

#### **Program Organization**

A. Describe the program's organizational structure.

Insert Response

B. List the number of affiliated practice sites.

Insert Response

C. If more than one practice site, indicate if **EVERY** participant rotates to **EVERY** site.

Choose an item.



# **Non-Clinical Quality Standards**

#### **Quality Standard 1: Mission, Goals, and Outcomes**

Residency/Fellowship programs' mission communicates the advancing education offered to increase a physical therapist's efficiency and improve outcomes. The mission identifies the program's defined area of practice and promotes excellence in the field of physical therapy education by graduating competent specialty practitioners. The mission guides the program's operations and future growth. The program's goals direct the efforts necessary for continued viability. The program's outcomes identify the knowledge and competencies participants gain upon program completion. Key indicators demonstrate the achievement of the program's mission, goals, and outcomes.

QUALITY STANDARD I KEY ELEMENTS: A residency/fellowship program meets this quality standard through the effective implementation and consistent documentation of the following key elements:

- 1.1 The <u>mission statement</u> communicates the program's purpose and commitment to providing quality advanced education to physical therapists in a <u>defined area of practice</u>.
- 1.2 The program's mission statement aligns with the sponsoring organization's mission statement.

Exceeds	<b>Meets Expectations</b>		Needs		Inadequate*	
Expectations			Improvement*			
<b>Easily</b> measurable.		Measurable.		<b>Not easily</b> measurable.		Not measurable.
<b>Clearly</b> communicates program's purpose.		<b>Communicates</b> program's purpose.		<b>Unclear</b> on the program's purpose.		Does not communicate the program's purpose.
<b>Clearly</b> identifies the defined area of practice.		<b>Identifies</b> the defined area of practice.		<b>Unclear</b> on the defined area of practice.		<b>Does not</b> identify a defined area of practice.
<b>Clearly</b> communicates commitment to providing quality advanced		Implies commitment to providing quality advanced education to		Unclear commitment to providing quality advanced education to		Does not communicate the program's commitment to providing quality



	education to physical therapists.		physical therapists.		physical therapists.		advanced education to physical therapists.	
	<b>Promotes</b> growth, continuous improvement, and strategic initiatives.		<b>Establishes</b> guidelines for growth, continuous improvement, and strategic initiatives.		Inconsistently supports growth, continuous improvement, and strategic initiatives.		Does not support growth, continuous improvement, or strategic initiatives.	
	Supports the sponsoring organization's mission statement.		Aligns with the sponsoring organization's mission statement.		Inconsistent with the sponsoring organization's mission statement.		<b>Does not</b> align with the sponsoring organization's mission statement.	
Ext	nibit Reference:		Exhibit 2 – Missior	n and	d Goals Chart			
SEF	R Review Findings	•	[Insert for Finding	s fro	m SER review]			
-	e Visit Finding:		[Insert for Finding					
Ree	quired Actions*:				Needs Improveme			
Со	mments:		[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]					
	ogram Response:							
AB	PTRFE Decision:							

1.3 The program identifies <u>goals</u> that are reflective of the defined area of practice. The program goals support the achievement of the mission and communicate the ongoing efforts necessary to support continued sustainability.

Exceeds		ets Expectations	Needs		Inadequate*	
Expectations			Improvement*			
<b>Clearly</b> reflects the defined area of practice.		Reflects the defined area of practice.		Somewhat reflects the defined area of practice.		Does not reflect the defined area of practice.
Well-balanced general aims or purposes of the		Describes the general aims or purposes of the		Describes the general aims or purposes of		Does not describe the general aims or



	Lead to <b>clearly</b>	_	Lead to		Not easily		Not measurable.
	Lead to <b>clearly</b> measurable		Lead to measurable		Not easily measurable.		Not measurable.
	outcomes.		outcomes.				
	<b>Clearly</b> evident framework with specific criteria for determining program outcomes.		Framework used with general criteria for determining program outcomes.		Framework is <b>unclear</b> in determining program outcomes.		Framework not used to determine program outcomes.
	Supports the mission.		Reflects the mission.		Inconsistent with the mission.		Not aligned with the mission.
	Informs curriculum development, continuous improvement efforts, financial stability, <b>strategic</b> <b>planning</b> , and program sustainability.		Informs curriculum development, continuous improvement efforts, financial stability, and program sustainability.		Does not communicate ongoing efforts to support curriculum development, continuous improvement efforts, financial stability, or program sustainability.		Does not support curriculum development, continuous improvement efforts, financial stability, and program sustainability.
	nibit Reference:		Exhibit 2 – Mission				
	R Review Findings: e Visit Finding:		[Insert for Finding [Insert for Finding				
-	quired Actions*:		-		-	nt or	Inadequate1
	mments:		[Insert for Findings of Needs Improvement or Inadequate] [Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]				
-	ogram Response:						
AB	PTRFE Decision:						



1.4 The program develops <u>outcomes</u> that identify measurable behaviors reflective of the defined area of practice which describe the knowledge, skills, and affective behaviors participants gain upon completion of the program.

Exceeds Expectations	Me	ets Expectations	Needs Improvement*	Inadequate*
<b>Clearly</b> reflects the defined area of practice.		Reflects the defined area of practice.	<b>Somewhat</b> reflects the defined area of practice.	Does not reflect the defined area of practice.
Aligns with <b>and</b> supports achievement of the mission and goals.		Supports achievement of the mission and goals.	Inconsistently supports achievement of the mission and goals.	Does not support achievement of the mission and goals.
<b>Clearly</b> identifies the knowledge, skills, and affective behaviors participants achieve.		Identifies the knowledge, skills, and affective behaviors participants achieve.	Somewhat identifies the knowledge, skills, and affective behaviors participants achieve.	Does not adequately identify the knowledge, skills, and affective behaviors participants achieve.
<b>Concise</b> and specific.		Clear and specific.	Overly broad.	Overly comprehensive and not specific.
<b>Clearly</b> measurable.		Measurable.	Somewhat measurable.	Not measurable.
<b>Readily</b> observable.		Observable.	Somewhat observable.	Not observable.
		Focus on learning outcomes rather than curriculum inputs.		Focus on curriculum inputs.
Reflects a single, focused outcome rather than combine		Mostly reflects a single outcome within each statement rather	Majority of program outcome statements	Combines multiple outcomes within single



	multiple	than combining		combine		statements that	
	outcomes	multiple		multiple		results in	
	supporting	outcomes that is		outcomes within		inability to	
	clearly	readily		single		effectively	
	measurable	measurable.		statements		measure.	
	outcome			making it			
	statements.			difficult to			
				measure.			
Ext	nibit Reference:	Exhibit 3 – Assessr	ment	t Table			
SEF	R Review Findings	[Insert for Findings from SER review]					
Sit	e Visit Finding:	[Insert for Findings from Site Visit]					
Ree	quired Actions*:	[Insert for Finding	s of	Needs Improvemer	nt or	Inadequate]	
		[Insert Comments Regardless of Finding on the Program's					
Со	mments:	Overall Compliance with this Standard, including consultative					
		comments.]					
Pro	gram Response:						
AB	PTRFE Decision:						

1.5 The program identifies <u>key indicators</u> it uses to annually monitor and measure the achievement of the program's mission, goals, and outcomes. Key indicators form the basis for evaluating participant performance and determining program effectiveness.

Exceeds Expectations	Me	eets Expectations	Needs Improvement*		Inadequate*	
<b>Clearly</b> identifies key indicators that correspond to mission, goals, and outcomes.		Identifies key indicators that correspond to mission, goals, and outcomes.		<b>Majority</b> of key indicators correspond to mission, goals, and outcomes.		<b>Some</b> key indicators correspond to mission, goals, and outcomes.
<b>Concise</b> and well-defined.		<b>Clear</b> and well- defined.		Somewhat defined.		Unclear.
Easily measurable.		Measurable.		Somewhat measurable.		Not measurable.
<b>Clearly</b> identifies quantitative and qualitative metrics that		Identifies quantitative or qualitative metrics that corresponds to key indicators.		Identifies quantitative or qualitative metrics that correspond to		Metrics do not correspond to key indicators.



	corresponde to							
	corresponds to key indicators.			<b>some</b> key indicators.				
	Data is regularly collected and evaluated throughout the year.	Data annually collected and evaluated.		Data is intermittently collected and evaluated.		Minimal data is collected and evaluated.		
	Data supports efficient evaluation of participant performance.	Data supports evaluation of participant performance.		Data is <b>somewhat</b> sufficient for evaluating participant performance.		Data is insufficient for evaluating participant performance.		
	Data results in <b>clear</b> evidence of program effectiveness.	Data results in evidence of program effectiveness.		Data is somewhat sufficient evidence of program effectiveness.		Data is insufficient evidence of program effectiveness.		
Ext	nibit Reference:	Exhibit 2 – Mission and Goals Chart Exhibit 3 – Assessment Table						
	R Review Findings	[Insert for Findings from SER review]						
	e Visit Finding:	[Insert for Finding						
Rec	quired Actions*:	1		Needs Improvemer				
	mments:	[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]						
	gram Response:							
AB	PTRFE Decision:							

# **Quality Standard 2: Curriculum Design and Instruction**

Residency/Fellowship programs focus on the advancement of physical therapist knowledge and practice. Curriculum design focuses the knowledge, skills, and affective behaviors the participant gains in the defined area of practice that may include, but is not limited to, teaching, research, service, scholarly inquiry, governance and policy, leadership, management, ethical and legal issues. Curriculum design enhances professional competence and emphasizes one-to-one mentoring. Curriculum development follows a structured, systematic process that ensures content validity in a defined area of practice. The curriculum



allows the participant to achieve the program's outcomes through advancing professional competence. The curriculum integrates a variety of educational methods that support the theoretical basis for advanced practice and is supported by best evidence.

QUALITY STANDARD 2 KEY ELEMENTS: A residency/fellowship program meets this quality standard through the effective implementation and consistent documentation of the following key elements:

2.1 **Curriculum Development:** The program's comprehensive curriculum is developed from and addresses the most recent version of the Description of Residency Practice (DRP) or the Description of Fellowship Practice (DFP). All curriculum components complement each other to enhance the participant's learning. The program's curriculum organization ensures congruency between didactic and experiential components. The curriculum provides a structure for the designation of types, lengths, and sequencing of learning experiences that ensures the achievement of the program's outcomes.

Exceeds Expectations	Me	ets Expectations	Needs mprovement*	Inadequate*		
Developed and <b>aligned</b> with the most recent DRP or DFP.		Developed from the most recent DRP or DFP.	Inconsistently developed from the most recent DRP or DFP.	Not developed from the most recent DRP or DFP.		
Curriculum components <b>clearly</b> complement each other to enhance participant learning.		Curriculum components complement each other to enhance participant learning.	Curriculum components <b>primarily</b> complement each other and <b>somewhat</b> enhances participant's learning.	Curriculum components do not complement each other and do not enhance participant learning.		
Organization of didactic and experiential components <b>logically</b> <b>coincide</b> to support effective learning.		Organization of didactic and experiential components support effective learning.	Organization of didactic and experiential components <b>somewhat</b> support learning.	Organization of didactic and experiential components do not effectively support learning.		



	Curriculum structure is <b>optimized</b> to support achievement of program outcomes.		Curriculum structure supports achievement of program outcomes.		Curriculum structure <b>somewhat</b> supports achievement of program outcomes.		Curriculum structure <b>does</b> <b>not</b> support achievement of program outcomes.	
	Structure <b>optimizes</b> designation types, lengths, and sequencing of learning experiences in a <b>logical order</b> that ensures achievement of program outcomes.		Structure designates types, lengths, and sequences of learning experiences in an established sequence that ensures achievement of program outcomes.		Majority of types, lengths, and sequencing of learning experiences directly supports achievement of program outcomes.		Designation types, lengths, and sequencing of learning experiences do not support the achievement of program outcomes.	
Ext	nibit Reference:		Exhibit 3 – Assessr	ment	Table			
SEF	R Review Findings		[Insert for Finding	s fro	m SER review]			
	e Visit Finding:		[Insert for Finding					
Rec	quired Actions*:			Needs Improvemer				
	mments:		[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]					
	ogram Response:							
AB	PTRFE Decision:							

2.1.1 **Program Structure:** The didactic and experiential curriculum permits participants to gain mentored experience as characterized by the Description of Residency Practice (DRP) or the Description of Fellowship Practice (DFP).

Exceeds Expectations		Meets Expectations		Needs Improvement*		Inadequate*	
Didactic and experiential curriculum <b>optimizes</b> participants'		Didactic and experiential curriculum <b>promotes</b> participants'		Didactic and experiential curriculum provides participants		Didactic and experiential curriculum <b>does</b> <b>not</b> allow sufficient	



	experience with diverse practice activities as characterized in the DRP or DFP. Didactic and experiential curriculum <b>integrates</b> exposure to a range of complexity as characterized in the DRP or DFP.		experience with diverse practice activities as characterized in the DRP or DFP. Didactic and experiential curriculum <b>promotes</b> exposure to a range of complexity as characterized in the DRP or DFP.		<b>limited</b> experience with diverse practice activities as characterized by the DRP or DFP. Didactic and experiential curriculum provides <b>limited</b> exposure to a range of complexity as characterized in the DRP or DFP.		experience with diverse practice activities as characterized by the DRP or DFP. Didactic and experiential curriculum <b>does</b> <b>not</b> allow sufficient exposure to a range of complexity as characterized in	
SFI	R Review Findings	•	[Insert for Finding	s fro	m SFR review]		the DRP or DFP.	
	e Visit Finding:	•	[Insert for Finding					
	quired Actions*:				Needs Improvemer	nt or	Inadequate]	
Со	mments:		[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]					
	ogram Response:							
AB	PTRFE Decision:							

2.1.2 **Educational Methods:** The program integrates a variety of educational methods, traditional or innovative, to ensure the participant's advancing level of mastery. Educational methods are appropriate to each of the curriculum content areas and reflective of the program outcomes.

Exceeds Expectations		Meets Expectations		Needs Improvement*		Inadequate*	
Program integrates a variety of educational methods, traditional or innovative, that <b>enhances</b> the		Program integrates a variety of educational methods, traditional or innovative, to <b>promote</b> the		Program integrates <b>limited</b> variety of educational methods to promote the participant's		Program <b>does</b> <b>not</b> integrate a variety of educational methods to promote the participant's	



	participant's advancing level of mastery.		participant's advancing level of mastery.		advancing level of mastery.		advancing level of mastery.
	Educational methods <b>optimize</b> the curriculum content areas.		Educational methods are <b>appropriate</b> to the curriculum content areas.		Educational methods are <b>somewhat</b> <b>appropriate</b> to the curriculum content areas.		Educational methods are <b>not</b> <b>comprehensively</b> <b>appropriate</b> to the curriculum content areas.
	Educational methods are <b>aligned</b> and <b>support</b> the program outcomes.		Educational methods <b>reflect</b> all program outcomes.		Educational methods reflect a majority, <b>but</b> <b>not all</b> the program outcomes.		Educational methods <b>do not</b> reflect the program outcomes.
SEF	Review Findings	:	[Insert for Finding	s fro			
	e Visit Finding:		[Insert for Finding	s fro	m Site Visit]		
Ree	quired Actions*:				Needs Improveme		
Comments:			[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]				
Pro	ogram Response:						
AB	PTRFE Decision:						

2.1.3 **Assessments:** The program implements assessments designed to evaluate the participant's performance based on established measures. The program's formative and summative methods evaluate the participant's mastery of curriculum content based on performance measures and feedback provided in a timely manner. A variety of assessments evaluate the participant's initial and advancing levels of knowledge, practice, application of best evidence, and competence as characterized in the Description of Residency Practice (DRP) or the Description of Fellowship Practice (DFP). At a minimum, one written examination and two <u>performance-based</u> evaluations are required throughout the program.

Exceeds Expectations		Meets Expectations		Needs Improvement*		Inadequate*	
Assessments evaluate the <b>level achieved</b> of the		Assessments evaluate the participant's performance		A <b>majority</b> of assessments evaluate the participant's		Assessments somewhat evaluate the participant's	



participant's performance based on established measures.	based on established measures.	performance based on identified measures.	performance and are not based on identified measures.
Program designs <b>meaningful</b> formative and summative methods to evaluate the participant's mastery of the curriculum.	Program designs <b>effective</b> formative and summative methods to evaluate the participant's mastery of the curriculum.	Program designs formative or summative methods that <b>ineffectively</b> evaluate the participant's mastery of the curriculum.	Program's formative or summative methods <b>do not</b> comprehensively evaluate the participant's mastery of the curriculum.
Program strategically places a variety of assessments that evaluate the participant's initial and advancing levels of knowledge, practice, and application of best practice and competence as characterized by the DRP or DFP.	Program integrates a variety of assessments that evaluate the participant's initial and advancing levels of knowledge, practice, and application of best practice and competence as characterized by the DRP or DFP.	Program integrates <b>limited</b> assessments to evaluate the participant's initial and advancing levels of knowledge, practice, and application of best practice and competence as characterized by the DRP or DFP.	Program <b>does</b> <b>not</b> integrate assessments that evaluate the participant's initial and advancing levels of knowledge, practice, and application of best practice and competence as characterized by the DRP or DFP.
Program requires <b>more</b> <b>than one</b> written examination and/or two performance- based evaluations.	Program requires <b>one</b> written examination and <b>two</b> performance- based evaluations	Program requires one written examination and two performance- based evaluations <b>upon</b>	Program <b>does</b> <b>not</b> require one written examination and two performance- based evaluations



		throughout the	со	mpletion of		throughout the
		program.	th	e program.		program.
Ext	ibit Reference:	Exhibit 3 – Assessr	nent Ta	ble		
SEF	R Review Findings:	[Insert for Findings	s from S	ER review]		
Site	e Visit Finding:	[Insert for Findings from Site Visit]				
Ree	quired Actions*:	[Insert for Findings of Needs Improvement or Inadequate]				
Со	nments:	[Insert Comments Overall Complianc comments.]				<b>•</b>
Pro	gram Response:					
AB	PTRFE Decision:					

- 2.2 **Program Requirements:** The program demonstrates compliance with minimum requirements that provides physical therapists with learning experiences resulting in advanced professional competence.
- 2.2.1 **Program Length:** The program provides a systematic set of learning experiences that address the knowledge, skills, and affective behaviors the participant needs to achieve the program outcomes within a set period of time. Residency/Fellowship programs are completed in no fewer than ten (10) <u>full-time equivalent</u> months and in no more than sixty (60) months.

Exceeds Expectations	Meets Expectations		Needs Improvement*		Inadequate*		
		Systematic set of learning experiences <b>addresses</b> the knowledge, skills, and affective behaviors the participant needs to achieve the program outcomes within a set period of time.			Unclear how the set of systematic learning experiences addresses the knowledge, skills, and affective behaviors the participant needs to achieve the program outcomes within a set period of time.		



		Program is completed in ten full-time equivalent months and does not exceed sixty months.			Program is completed in <b>fewer</b> than ten full-time equivalent months or in more than sixty months.	
SER Review Findings		[Insert for Findings from SER review]				
Site Visit Finding:		[Insert for Findings from Site Visit]				
<b>Required Actions*:</b>		[Insert for Findings of Needs Improvement or Inadequate]				
Comments:		[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]				
Program Response:						
<b>ABPTRFE Decision:</b>						

2.2.2 **Residency Program Hours:** The program offers a comprehensive curriculum that meets minimum required hours within the program's defined area of practice. Residency programs require participants to complete a minimum of 1,800 total program hours including 300 <u>educational hours</u> (e.g., didactic, journal club, research, etc.) and 1,500 <u>practice hours</u> within the defined area of practice (e.g., leadership, faculty job activities) inclusive of 150 hours of 1:1 <u>mentoring</u> throughout the program. The participant is the primary individual completing non-clinical practice area tasks for 100 hours of the minimum 150 mentoring hours.

The participant is the primary individual completing non-clinical practice area tasks for 100 hours of the minimum 150 mentoring hours. Of these 100 hours:

- At least 75 hours must occur in-person (1:1)
- At least 25 hours may occur using synchronous video technology (1:1)

The remaining mentoring hours may occur in-person or using synchronous or asynchronous methodologies without the participant being the primary individual completing non-clinical practice area tasks.

Exceeds Expectations		eets Expectations	Needs Improvement*	Inadequate*
Program		Program		Program
requires		requires		requires
participants to		participants to		participants to



	exceed the		meet a			meet less than
	minimum of		minimum of			the minimum of
	1,800 total		1,800 total			1,800 total
	program hours.		program hours.			program hours.
	Program		Program			Program
	exceeds the		requires a			requires <b>less</b>
	required		minimum 300			than 300
	minimum of 300		educational			educational
	educational		hours.			hours.
	hours.					nours.
	Program		Program			Program
	exceeds the		requires a			requires <b>less</b>
	required		<b>minimum</b> 1,500			<b>than</b> 1,500
	, minimum of		practice hours.			practice hours.
	1,500 practice					
	hours.					
	Program		Program			Program
	exceeds a		requires a			requires <b>less</b>
	required		<b>minimum</b> 150			than 150 hours
	minimum of 150		hours of 1:1			of 1:1 mentoring
	hours of 1:1		mentoring			throughout the
	mentoring		throughout the			program.
	throughout the		program.			
	program.					
	In-person		In-person			In-person
	mentoring is		mentoring is			mentoring is
	conducted when		conducted when			conducted when
	the participant is		the participant is			the participant is
	the primary		the individual			the individual
_	individual		completing non-			completing non-
	completing non-		clinical practice			clinical practice
	clinical practice		area techniques			area techniques
	area techniques		for 75 of the			for less than 75
	for <b>over</b> 75 of		minimum 150			of the 150
	the minimum		mentoring			mentoring
	150 mentoring		hours.			hours.
CEL	hours.		Illocart for Einding	from SEP rovioud		
				s from SER review] s from Site Visit]		
	quired Actions*:				nt or	Inadequate
Net			[Insert for Findings of Needs Improvement or Inadequate]			



Comments:	[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]
Program Response:	
ABPTRFE Decision:	

2.2.3 **Fellowship Program Hours:** The program offers a comprehensive curriculum that meets minimum required hours within the program's defined area of practice. Fellowship programs require participants to complete a minimum of 1,000 total program hours including 150 <u>educational hours</u> (e.g., didactic, journal club, research, etc.) and 850 <u>practice hours</u> within the defined area of practice (e.g., leadership, faculty job activities) inclusive of 150 hours of 1:1 <u>mentoring</u> throughout the program.

The participant is the primary individual completing non-clinical practice area tasks for 75 hours of the minimum 150 mentoring hours. Of these 75 hours:

- At least 50 hours must occur in-person (1:1)
- At least 25 hours may occur using synchronous video technology (1:1)

The remaining mentoring hours may occur in-person or using synchronous or asynchronous methodologies without the participant being the primary individual completing non-clinical practice area tasks.

Exceeds Expectations		ets Expectations	Needs Improvement*	Inadequate*	
Program requires participants to <b>exceed</b> the required minimum of 1,000 total program hours.		Program requires participants to <b>meet</b> a minimum of 1,000 total program hours.		Program requires participants to meet <b>less than</b> the minimum of 1,000 total program hours.	
Program exceeds the required minimum of 150 educational hours.		Program requires a <b>minimum</b> 150 educational hours.		Program requires <b>less</b> <b>than</b> 150 educational hours.	



	Program exceeds the required minimum of 850 practice hours.	Program requires a <b>minimum</b> 850 practice hours.			Program requires <b>less</b> <b>than</b> 850 practice hours.	
	Program exceeds the required minimum of 150 hours of 1:1 mentoring throughout the program.	Program requires a <b>minimum</b> 150 hours of 1:1 mentoring throughout the program.			Program requires <b>less</b> <b>than</b> 150 hours of 1:1 mentoring throughout the program.	
	In-person mentoring is conducted when the participant is the individual completing non- clinical practice techniques for <b>over</b> 50 of the minimum 150 mentoring hours.	In-person mentoring is conducted when the individual completing non- clinical practice area techniques for 50 of the minimum 150 mentoring hours.			In-person mentoring is conducted when the participant is the individual completing non- clinical practice area techniques for <b>less than</b> 50 of the 150 mentoring hours.	
	R Review Findings		s from SER review]			
	e Visit Finding:	[Insert for Finding				
Red	quired Actions*:		s of Needs Improvemer			
Comments:		[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]				
	ogram Response:					
AB	PTRFE Decision:					

2.3 **Program Delivery:** The program is conducted in settings where management and professional staff are committed to seeking excellence in education while maintaining sufficient resources to achieve the mission, goals, and outcomes.

Exceeds	Meets Expectations	Needs	Inadequate*
Expectations		Improvement*	



	All settings promote a <b>consistent</b> <b>culture</b> where management and professional staff are committed to seeking excellence in education.		All settings engage management and professional staff who are committed to seeking excellence in education.		A <b>majority</b> of settings engage management and professional staff who are committed to seeking excellence in education.		Limited number of settings engage management and professional staff who are committed to seeking excellence in education.
	Program takes <b>proactive</b> <b>planning</b> steps to assure sufficient resources to achieve the mission, goals, and outcomes.		Program takes steps to assure sufficient resources to achieve the mission, goals, and outcomes.		Program <b>seeks</b> ongoing resources to achieve the mission, goals, and outcomes.		Program <b>does</b> <b>not maintain</b> sufficient resources to achieve the mission, goals, and outcomes.
			Program ensures that the curriculum and learning experiences are delivered consistently across all practice sites and identify who is responsible for this oversight.				Program <b>does</b> <b>not</b> have mechanisms in place to ensure that the curriculum and learning experiences are delivered consistently across all practice sites and identify who is responsible for this oversight.
	R Review Findings:		[Insert for Findings from SER review]				
-	e Visit Finding:		[Insert for Findings from Site Visit]				
Ree	<b>Required Actions*:</b> [Insert for Findings of Needs Improvement or Inadequate]						Inadequate]



Comments:	[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]
Program Response:	
<b>ABPTRFE Decision:</b>	

2.4 **Mentoring Focus:** The program emphasizes the professional benefit of advanced education through mentoring. The curriculum offers the participant individualized guidance on emerging and current best practices in a defined area of practice. Mentors provide comprehensive oversight and consistent feedback throughout the length of the program focused on advancing the participant's knowledge and expertise in a defined area of practice.

Exceeds		Meets Expectations		Needs		Inadequate*	
Expectations		<u> </u>	I	Improvement*			
Collectively, curriculum components integrate to <b>highlight</b> the professional benefit of advanced education through mentoring.		Program emphasizes the professional benefit of advanced education through mentoring.		Program integrates mentoring as a <b>limited</b> benefit of advanced education.		Program integrates a <b>minimal focus</b> on the professional benefit of advanced education through mentoring.	
Participants receive individualized guidance on emerging and current best practices in a defined area of practice <b>consistently</b> <b>and seamlessly</b> throughout the program.		Participants receive individualized guidance on emerging and current best practices in a defined area of practice at set intervals <b>throughout</b> the program.		Participants receive <b>limited</b> individual guidance not provided at specific intervals on emerging and current best practices in a defined area of practice.		Participants receive <b>inconsistent</b> individual guidance on emerging and current best practices in a defined area of practice.	



	Program		Program		Program		Program	
	systematically		integrates		integrates <b>some</b>		integrates	
	integrates		emerging and		emerging and		limited to no	
	emerging and		best mentoring		best mentoring		emerging and	
	best mentoring		practices		practices		best mentoring	
	practices		throughout the		inconsistently		practices	
	throughout the		curriculum.		throughout the		throughout the	
	curriculum.				curriculum.		curriculum.	
SEF	R Review Findings		[Insert for Findings from SER review]					
Sit	e Visit Finding:		[Insert for Findings from Site Visit]					
Ree	quired Actions*:		[Insert for Findings of Needs Improvement or Inadequate]					
			[Insert Comments	Reg	ardless of Finding of	on th	e Program's	
Со	mments:		<b>Overall</b> Compliand	ce wi	th this Standard, in	clud	ing consultative	
			comments.]					
Pro	ogram Response:							
AB	PTRFE Decision:							

# Site Visit Mentoring Session Observation Evaluation ONLY

Ex	ceeds Expectations	N	leets Expectations	Needs Improvement*		Inadequate*		
Du	ring the mentoring ses	sior	, the mentor displaye	d the following <b>personal characteristics.</b>				
	Recognizes opportunities and engages in ongoing self-reflection and self-development.		<b>Engages</b> in self- reflection and self- development to ensure effectiveness as a teacher.		<b>Inconsistently</b> engages in self- reflection and self- development.		<b>Does not</b> engage in self-reflection and self- development.	
	Seeks opportunities to learn/teach.		Demonstrates willingness to learn/teach.		Inconsistently demonstrates a willingness to learn/teach.		<b>Did not</b> demonstrate a willingness to learn/teach.	
	Seeks opportunities and pursues excellence in teaching and mentoring.		Demonstrates eagerness and excitement to pursue excellence in teaching and mentoring.		<b>Somewhat</b> eager and excited to pursue excellence in teaching and mentoring.		<b>Not</b> eager or excited to pursue excellence in teaching and mentoring.	
	Ongoing enhancement of a trusting		<b>Consistently</b> develops a trusting environment.		<b>Inconsistently</b> develops a trusting environment.		<b>Does not</b> develop a trusting environment.	



		<b></b>							
	environment to								
	promote								
	mentoring.								
The	The mentor displayed the following characteristics related to <b>interactions</b> :								
	Seeks opportunities to optimize educational strategies and enhance communication tailored to the learning context and the learner's needs.		<b>Consistently</b> uses effective communication skills providing clarifications.		<b>Inconsistently</b> uses effective communication skills.		<b>Does not</b> use effective communication skills.		
	Actively encourages learner-centered engagement.		<b>Committed</b> to learner engagement.		Inconsistently demonstrates commitment to learner engagement.		Does not demonstrate learner engagement.		
	<b>Approaches</b> each session with care related to sensitive generational and cultural differences.		<b>Identifies</b> and provides care related to sensitive generational and cultural differences.		<b>Inconsistently</b> identifies and provides care related to sensitive generational and cultural differences.		<b>Does not</b> identify or provide care related to sensitive generational and cultural differences.		
	Seeks feedback for improvement.		<b>Open</b> to feedback.		<b>Guarded</b> when receiving feedback.		<b>Does not</b> accept feedback.		
	<b>Demonstrates</b> <b>expertise</b> in handling complex situations.		Able to handle complex situations.		<b>Inconsistently</b> handles complex situations.		<b>Unable</b> to handle complex situations.		
	Demonstrates		Able to function		Inconsistently		Does not function		
	<b>expertise</b> in functioning competently in uncertain situations.		competently in uncertain situations.		functions competently in uncertain situations.		competently in uncertain situations.		
The	e mentor displayed the	foll	owing characteristics	relat	ed to <b>responsibilitie</b>	s.			



	Seeks to enhance		Demonstrates		Inconsistently		Does not
	mentoring		commitment to		demonstrates		demonstrate
	opportunities.		mentoring.		commitment to		commitment to
			5		mentoring.		mentoring.
	Provides		Provides		Inconsistently		Does not provide
	constructive and		constructive and		provides		constructive and
	effective critique of		useful critique of		constructive and		useful critique of
	the program		the program		useful critique of		the program
	participant's work		participant's work		the program		participant's work
	and enhances		and strategies for		participant's work		and strategies for
	strategies for		change.		and strategies for		change.
	change.				change.		
	Fosters an		Challenges the		Inconsistently		Does not
	environment for the		program		challenges the		challenge the
	program participant		participant to		program		program
	to expand his/her		expand his/her		participant to		participant to
	abilities.		abilities.		expand his/her		expand his/her
					abilities.		abilities.
	Provides timely,		Provides timely,		Inconsistently		Does not provide
	effective, and		<b>clear</b> , and		provides timely,		timely, clear, and
	comprehensive		comprehensive		clear, and		comprehensive
	feedback on the		feedback on the		comprehensive		feedback on the
	program		program		feedback on the		program
	participant's		participant's		program		participant's
	performance and		performance and		participant's		performance and
	development.		development.		performance and		development.
					development.		
	Engages in		Respects and		Inconsistently		Does not respect
	conversations to		fosters the		respects and		or foster the
	further develop the		program		fosters the		program
	program		participant's		program		participant's
	participant's		independence,		participant's		independence,
	independence,		creativity, and		independence,		creativity, and
	creativity, and		uniqueness.		creativity, and		uniqueness.
<b>T</b> 1.	uniqueness.	£ - 11	and a share at a statt		uniqueness.		
Ine	e mentor displayed the	toll		relat		orin	
	Participation		<b>Appropriately</b>		<b>Inconsistently</b>		Does not
	enhances, but does		participates in the		participates in the		participate in the
	<b>not interfere</b> with,		session.		session.		session.
	practice area tasks						



	during the						
	mentoring session.						
	<b>Enhances</b> mentoring opportunities by providing effective supportive, collegial, and respectful feedback.		Provides supportive, collegial, and respectful feedback.		Inconsistently provides supportive, collegial, and respectful feedback.		<b>Does not</b> provide supportive, collegial, and respectful feedback.
	The mentor <b>effectively</b> displays the following six mentor competencies (refer to the <u>APTA Guide</u> <u>to Successful</u> <u>Mentoring</u> for definitions and behaviors that incorporate these competencies).		The mentor displays the following six mentor competencies (refer to the <u>APTA</u> <u>Guide to Successful</u> <u>Mentoring</u> for definitions and behaviors that incorporate these competencies).		The mentor inconsistently displays the following six mentor competencies (refer to the <u>APTA</u> <u>Guide to Successful</u> <u>Mentoring</u> for definitions and behaviors that incorporate these competencies).		The mentor <b>does</b> <b>not</b> display the following six mentor competencies (refer to the <u>APTA</u> <u>Guide to Successful</u> <u>Mentoring</u> for definitions and behaviors that incorporate these competencies).
	Content     Knowledge		Content     Knowledge		<ul> <li>Content Knowledge</li> </ul>		Content     Knowledge
	<ul><li>Learner-</li><li>Directed</li></ul>		Learner-     Directed		Learner-     Directed		Learner-     Directed
	Communication     Expertise		Communication     Expertise		Communication     Expertise		Communication     Expertise
	Professional     Integrity		<ul> <li>Professional Integrity</li> </ul>		<ul> <li>Professional Integrity</li> </ul>		Professional     Integrity
	<ul> <li>Self-Reflection and Lifelong Learning</li> </ul>		<ul> <li>Self-Reflection and Lifelong Learning</li> </ul>		<ul> <li>Self-Reflection and Lifelong Learning</li> </ul>		<ul> <li>Self-Reflection and Lifelong Learning</li> </ul>
SEI	R Review Findings:		[Insert for Findings fr		_		
Sit	e Visit Finding:		[Insert for Findings fr	om	Site Visit]		
Re	quired Actions*:		[Insert for Findings of	f Ne	eds Improvement or I	Inad	equate]
	mments:		Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]				
	ogram Response:						
AB	PTRFE Decision:						



2.5 **Completion:** The program verifies that the participant meets completion requirements. The program director awards a certificate of graduation to the participant who completes the program. The certificate is issued in accordance with the ABPTRFE Policies and Procedures Authorized Statement and signed by the program director and administrators of the sponsoring organization. A certificate is only issued once the participant completes all program requirements.

Exceeds Expectations	Me	eets Expectations	Needs Improvement*	Inadequate*	
		Program follows a process for verifying that participants meet completion requirements.		Program <b>does</b> <b>not</b> have a process for verifying that participants meet completion requirements.	
		Program director awards a certificate of graduation to participants who complete the program.		Program director <b>does</b> <b>not</b> award a certificate of graduation to participants who complete the program.	
		Certificate <b>reflects</b> the ABPTRFE Processes and Procedures Authorized Statement.		Certificate <b>does</b> <b>not</b> reflect the ABPTRFE Processes and Procedures Authorized Statement.	
		Certificate is signed by the program director <b>and</b> appropriate administrators of the		Certificate is not signed <b>by either</b> a program director or appropriate administrators of the	



	•					
	sponsoring			sponsoring		
	organization.			organization.		
	Program issues			Program <b>does</b>		
	certificates once			not follow		
	participants			processes to		
	complete all			issue certificates		
	program			before		
	requirements.			participants		
				complete all		
				program		
				requirements.		
<b>SER Review Findings:</b>	[Insert for Findings from SER review]					
Site Visit Finding:	[Insert for Finding	s from Site Visit]				
<b>Required Actions*:</b>	[Insert for Findings of Needs Improvement or Inadequate]					
	[Insert Comments Regardless of Finding on the Program's					
Comments:	Overall Compliand	e with this Standard, in	clud	ing consultative		
	comments.]					
Program Response:	 					
<b>ABPTRFE Decision:</b>						

#### **Quality Standard 3: Program Delivery, Director, and Faculty**

Residency/Fellowship programs implement consistent procedures for adequately responding to the participant's needs. Admissions criteria allows for equitable evaluation of the participant's ability to be successful in the program and supports the program's mission, goals, and outcomes. A qualified and experienced program director provides effective administrative leadership of faculty and oversees the delivery of a quality curriculum. Adequate support services facilitate the participant's successful completion and achievement of program outcomes.

QUALITY STANDARD 3 KEY ELEMENTS: A residency/fellowship program meets this quality standard through the effective implementation and consistent documentation of the following key elements:

3.1 **Admissions Criteria:** The program publishes equitable and inclusive admissions policies and verifies the participant is eligible to practice based on state requirements. The program implements consistent procedures for evaluating each prospective participant's ability to be successful in the program and achieve their educational goals. Programs advance <u>diversity</u> and promote a culture of <u>inclusion</u> and <u>equity</u>, particularly with groups historically underrepresented in the profession.



Exceeds Expectations	Meets Expectations		Needs Improvement*		Inadequate*		
Program publishes admissions policies that are <b>clear</b> and <b>concise</b> .		Program <b>publishes</b> admissions policies.			Program <b>does</b> <b>not</b> publish admissions policies.		
		Program identifies who is responsible for evaluating prospective participants.			Program <b>does</b> <b>not</b> identify who is responsible for evaluating prospective participants.		
Program implements processes <b>designed</b> to <b>consistently</b> verify participants are eligible to practice based on state requirements.		Program <b>verifies</b> participants are eligible to practice based on state requirements.	Program inconsistently verifies participants are eligible to practice based on state requirements.		Program <b>does</b> <b>not</b> verify participants are eligible to practice based on state requirements.		
Program implements consistent procedures <b>designed</b> to <b>effectively</b> evaluate prospective participants' ability to be successful and achieve their		Program implements <b>consistent</b> procedures to evaluate prospective participants' ability to be successful and achieve their educational goals.	Program inconsistently evaluates prospective participants' ability to be successful and achieve their educational goals.		Program <b>does</b> <b>not</b> evaluate prospective participants' ability to be successful and achieve their educational goals.		



	educational goals.						
SER Review Findings:			[Insert for Findings from SER review]				
Site Visit Finding:			[Insert for Findings	fron	n Site Visit]		
Re	quired Actions*:		[Insert for Findings of Needs Improvement or Inadequate]				
Comments:			[Insert Comments F Overall Compliance comments.]				
Pro	ogram Response:						
AB	PTRFE Decision:						

3.1.1 **Program Contract/Agreement/Letter of Appointment:** The program ensures each participant signs a contract/agreement/letter of appointment prior to commencing the residency/fellowship program. The contract/agreement/letter of appointment is in compliance with the ABPTRFE's <u>Admissions Offer Disclosures Check List</u>.

Exceeds Expectations	Meets Expectations	Needs Improvement*	Inadequate*	
	<ul> <li>Program implements         <pre>procedures to ensure         participants sign a         contract/         agreement/letter of         appointment prior to         commencing the         residency/fellowship         program.</pre></li></ul>	<ul> <li>Program         <ul> <li>inconsistently</li> <li>implements</li> <li>procedures to</li> <li>ensure</li> <li>participants sign</li> <li>a contract/</li> <li>agreement/letter</li> <li>of appointment</li> <li>prior to</li> <li>commencing the</li> <li>residency/fellows</li> <li>hip program.</li> </ul> </li> </ul>	<ul> <li>Program lacks</li> <li>procedures to</li> <li>ensure participants</li> <li>sign a contract/</li> <li>agreement/letter</li> <li>of appointment</li> <li>prior to</li> <li>commencing the</li> <li>residency/fellowshi</li> <li>p programs.</li> </ul>	
	Contract/agreement/letter of appointment <b>complies</b> with the ABPTRFE Admissions Offer Disclosures Check List.	Contract/ agreement/letter of appointment <b>does not comply</b> with the ABPTRFE Admissions Offer Disclosures Check List.		



		Participant Ha complies with ABPTRFE Adm Offer Disclosu List.	n the hissions		Participant Handbook <b>does</b> <b>not comply</b> with the ABPTRFE Admissions Offer Disclosures Check List.			
Exhibit Refere	Exhibit Reference			Exhibit 4 – Admissions Offer Disclosures List Exhibit 5 – Blank Contract/Agreement/Letter of Appointment				
SER Review F	indiı	ngs:	[Insert for Findings from SER review]					
Site Visit Find	ling:		[Insert for Findings from Site Visit]					
<b>Required Act</b>	ions <sup>a</sup>	*• •	[Insert for Findings of Needs Improvement or Inadequate]					
Comments:			-		s Regardless of Findince with this Standard	<u> </u>	<u> </u>	
Program Response:								
ABPTRFE Dec	isior	ו:						

3.2 **Participant Orientation:** The program conducts orientation activities to familiarize the participant with the program requirements including the mission, goals, outcomes, administrative policies, ABPTRFE quality standards, designated learning experiences, and evaluation processes.

Exceeds Expectations		Meets Expectations		Needs Improvement*		Inadequate*	
Program <b>designs</b> and		Program <b>conducts</b>		Program conducts		Program <b>does</b> <b>not</b> conduct	
conducts		orientation		limited		orientation	
effective orientation		activities to familiarize		orientation activities that		activities that familiarize	
activities to		participants with		makes it		participants with	
readily		program		challenging for		the program	
familiarize		requirements		participants to		requirements	
participants with		including the		familiarize		including the	
program		mission, goals,		themselves with		mission, goals,	
requirements		outcomes,		the program		outcomes,	
including the		administrative		requirements		administrative	
mission, goals,		policies,		including the		policies,	
outcomes,		ABPTRFE quality		mission, goals,		ABPTRFE quality	
administrative		standards,		outcomes,		standards,	



	policies, ABPTRFE quality standards, designated learning experiences, and evaluation	designated learning experiences, and evaluation processes.	administrative policies, ABPTRFE quality standards, designated evaluation processes.designated policies, experiences, and evaluation processes.					
	processes.		evaluation processes.					
SEF	<b>R Review Findings:</b>	[Insert for Finding	[Insert for Findings from SER review]					
Sit	e Visit Finding:	[Insert for Finding	[Insert for Findings from Site Visit]					
Ree	quired Actions*:	[Insert for Finding	[Insert for Findings of Needs Improvement or Inadequate]					
Comments:			[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]					
Pro	ogram Response:							
AB	PTRFE Decision:							

- 3.3 **Administrative Policies:** The program publishes equitable administrative policies and implements consistent procedures designed to protect the participant and the program.
- 3.3.1 **Retention Policy:** The program implements appropriate retention policies and procedures including academic and any additional requirements the participant must fulfill to maintain active status through graduation.

Exceeds Expectations	Meets Expectations		Needs Improvement*		Inadequate*	
		Program <b>implements</b> appropriate retention policies and procedures.		Program <b>inconsistently</b> implements appropriate retention policies and procedures.		Program <b>lacks</b> appropriate retention policies and procedures.
		Program's retention policies and procedures include academic <b>and</b>		Program's retention policies and procedures include only academic <b>or</b>		Program's retention policies and procedures <b>do</b> <b>not</b> include academic or



	practice	practice	practice			
	requirements	requirements	requirements			
	participants	participants	participants			
	fulfill to	fulfill to	fulfill to			
	maintain active	maintain active	maintain active			
	status through	status through	status through			
	graduation.	graduation.	graduation.			
SER Review Findings:	[Insert for Findings from SER review]					
Site Visit Finding:	[Insert for Findings from Site Visit]					
<b>Required Actions*:</b>	[Insert for Findings of Needs Improvement or Inadequate]					
	[Insert Comments I	Regardless of Finding o	on the Program's			
Comments:	Overall Compliance	e with this Standard, in	cluding consultative			
	comments.]					
Program Response:						
ABPTRFE Decision:						

3.3.2 **Remediation Policy:** The program implements appropriate remediation policies and procedures including criteria for program dismissal if remediation efforts are unsuccessful. The program establishes methods and timelines to identify and remedy unsatisfactory performance. The remediation policies are distributed to and acknowledged in writing by the participant. The program documents and implements any necessary adjustments to the participant's customized learning plans, including remedial action(s).

Exceeds Expectations	Meets Expectations	Needs Improvement*	Inadequate*	
	<ul> <li>Program applies appropriate remediation policies and procedures including criteria</li> <li>for program dismissal if remediation efforts are unsuccessful.</li> </ul>	<ul> <li>Program</li> <li>inconsistently</li> <li>applies</li> <li>appropriate</li> <li>remediation</li> <li>policies and</li> <li>procedures</li> <li>including criteria</li> <li>for program</li> <li>dismissal if</li> <li>remediation</li> <li>efforts are</li> <li>unsuccessful.</li> </ul>	<ul> <li>Program lacks         <ul> <li>appropriate</li> <li>remediation</li> <li>policies and</li> <li>procedures</li> <li>including criteria</li> </ul> </li> <li>for program         <ul> <li>dismissal if</li> <li>remediation</li> <li>efforts are</li> <li>unsuccessful.</li> </ul> </li> </ul>	



	Program establishes methods and timelines to identify and remedy unsatisfactory performance.		Program <b>does</b> <b>not</b> establish methods or timelines to identify and remedy unsatisfactory performance.		Program <b>lacks</b> methods and timelines to identify and remedy unsatisfactory performance.		
	remediation policies.		Program <b>inconsistently</b> documents participants received the remediation policies.		Program <b>does</b> <b>not</b> document participants received the remediation policies.		
	<ul> <li>Program</li> <li>provides a</li> <li>specific</li> <li>remediation plan</li> <li>to participants</li> <li>that outlines the</li> <li>reason for</li> <li>remediation, the</li> <li>length of</li> <li>remediation, the</li> <li>requirements of</li> <li>meeting</li> <li>remediation, and</li> <li>documents by</li> <li>signature</li> <li>participants'</li> <li>acknowledgement</li> <li>of the</li> <li>remediation plan.</li> </ul>		Program inconsistently provides a specific remediation plan to participants that outlines the reason for remediation, the length of remediation, the requirements of meeting remediation, and documents by signature participants' acknowledgement of the remediation plan.		Program <b>does</b> <b>not</b> provide a specific remediation plan to participants that outlines the reason for remediation, the length of remediation, the requirements of meeting remediation, and documents by signature participants' acknowledgement of the remediation plan.		
SER Review Findings:	[Insert for Findings	[Insert for Findings from SER review]					
Site Visit Finding:	[Insert for Findings	fron	n Site Visit]				
<b>Required Actions*:</b>			leeds Improvement c	or Ina	adequate]		
Comments:	[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]						

## **ABPTRFE**

Program Response:	
<b>ABPTRFE Decision:</b>	

3.3.3 **Termination Policy:** The program implements an appropriate termination policy and procedures including termination of the participant who becomes ineligible to continue in the program (e.g., consistent underperformance or inability to successfully remediate participant). The program establishes procedures and timelines followed for termination. The program identifies the employment status of the participant should program termination occur.

Exceeds Expectations		Meets Expectations		Needs Improvement*		Inadequate*	
Program <b>applies</b> and <b>consistently</b> follows appropriate termination policy and procedures including termination of participants who become ineligible to practice due to loss of license or for identified academic reasons.		Program <b>applies</b> appropriate termination policy and procedures including termination of participants who become ineligible to practice due to loss of license or for identified academic reasons.		Program inconsistently applies appropriate termination policy and procedures including termination of participants who become ineligible to practice due to loss of license or for identified academic reasons.		Program <b>lacks</b> appropriate termination policy and procedures including termination of participants who become ineligible to practice due to loss of license or for identified academic reasons.	
Program implements consistent procedures and timelines followed for termination.		Program establishes procedures and timelines followed for termination.		Program <b>inconsistently</b> follows procedures and timelines followed for termination.		Program <b>lacks</b> established procedures and timelines followed for termination.	
Program implements procedures for		Program <b>identifies</b> the employment		Program <b>does</b> <b>not</b> identify employment		Program <b>lacks</b> procedures for identifying	



	verifying the employment status of participants should program termination occur.		status of participants should program termination occur.		status of participants should program termination occur.		employment status of participants should program termination occur.
SEF	R Review Findings:		[Insert for Findings from SER review]				
Sit	e Visit Finding:		[Insert for Findings from Site Visit]				
Ree	quired Actions*:		[Insert for Finding	s of	Needs Improvemer	nt or	Inadequate]
Comments:			[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]				•
Program Response:							
AB	PTRFE Decision:						

3.3.4 **Grievance Policy:** The program implements an equitable grievance policy including procedures for appeal that ensures due process for the participant, faculty, and staff. Additionally, the program publishes ABPTRFE's grievance policy that a participant can follow if issues are not resolved at the program level.

Exceeds Expectations	Me	eets Expectations	Needs mprovement*	Inadequate*	
		Program <b>implements</b> an equitable grievance policy including procedures for appeal that ensures due process for participants, faculty, and staff.	Program inconsistently implements an equitable grievance policy including procedures for appeal that ensure due process for participants, faculty, and staff.		Program <b>lacks</b> an equitable grievance policy including procedures for appeal that ensure due process for participants, faculty, and staff.
		Program <b>publishes</b> ABPTRFE's grievance policy	Program <b>does</b> <b>not</b> publish ABPTRFE's grievance policy		



	for participants to follow if issues are not resolved at the	for participants to follow if issues are not resolved at the					
	program level.	program level.					
SER Review Findings:	[Insert for Findings from SER review]						
Site Visit Finding:	[Insert for Findings from Site Visit]						
<b>Required Actions*:</b>	[Insert for Findings	of Needs Improvemer	nt or Inadequate]				
Comments:	[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]						
Program Response:							
ABPTRFE Decision:							

3.3.5 **Leave Policy:** The program establishes appropriate professional, family, and sick leave policies including how these leaves could impact the participant's ability to complete the program.

Exceeds Expectations	Me	eets Expectations	Needs Improvement*		Inadequate*
		Program establishes appropriate professional, family, and sick leave policies.		Program <b>does</b> <b>not</b> establish appropriate professional, family, and sick leave policies.	
		Program's professional, family, and sick leave policies <b>include</b> descriptions on how these leaves could impact participants' ability to complete the program.		Program's professional, family, and sick leave policies <b>do</b> <b>not</b> include descriptions on how these leaves could impact participants' ability to complete the program.	
<b>SER Review Findings</b>		[Insert for Finding	s fro	m SER review]	



Site Visit Finding:	[Insert for Findings from Site Visit]
<b>Required Actions*:</b>	[Insert for Findings of Needs Improvement or Inadequate]
Comments:	[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]
Program Response:	
<b>ABPTRFE Decision:</b>	

3.3.6 **Non-Discrimination/Privacy/Confidentiality Policies:** The program documents compliance with applicable federal, state, and local regulations including non-discrimination, privacy, and confidentiality policies. Programs do not discriminate on the basis of race, color, national origin, religion, sex, gender, sexual orientation, disability, age, and other identities and/or statuses.

Exceeds Expectations	Me	ets Expectations	Needs Improvement*		Inadequate*
		Program documents compliance with applicable federal, state, and local regulations including non- discrimination, privacy, and confidentiality policies.			Program <b>does</b> <b>not</b> document compliance with applicable federal, state, and local regulations including non- discrimination, privacy, and confidentiality policies.
		Program creates and follows a process when implementing their non- discrimination policy.			Program does not have or follow a process when implementing their non- discrimination policy.
SER Review Findings	SER Review Findings: [Insert for Finding				· · · · · · · · · · · · · · · · · · ·
Site Visit Finding:		[Insert for Finding	s from Site Visit]		
<b>Required Actions*:</b>		[Insert for Finding	s of Needs Improveme	nt or	Inadequate]



Comments:	[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]
Program Response:	
ABPTRFE Decision:	

3.3.7 **Participant Tracking:** The program maintains a record of current and past program participants.

Exceeds Expectations	Me	ets Expectations		Needs mprovement*	Inadequate*
		Program maintains a record of current and past program participants.		Program inconsistently maintains a record of current and past program participants.	Program <b>does</b> <b>not</b> maintain a record of current and past program participants.
		Program <b>identifies</b> who is responsible for tracking current and past program participants.			Program <b>does</b> <b>not</b> identify who is responsible for tracking current and past program participants.
SER Review Findings	:	[Insert for Finding	s fro	m SER review]	
Site Visit Finding:		[Insert for Finding			
Required Actions*:				Needs Improvemer	
Comments:				ardless of Finding of the this Standard, in	<u> </u>
Program Response:					
<b>ABPTRFE Decision:</b>					

3.4 **Program Director:** The program director possesses the qualifications and experience in operations, financial management, and leadership to administratively oversee all aspects of the program in support of the mission, goals, and outcomes. The program determines the role and responsibilities of the program director.



			eets Expectations		Needs		Inadequate*
	Expectations			I	mprovement*		
	Program director possesses qualifications and <b>extensive</b> prior experience in one or all areas including operations, financial management, and leadership to administratively oversee all aspects of the program in support of the mission, goals, and outcomes.		Program director possesses the qualifications and experience <b>across all</b> areas including operations, financial management, and leadership to administratively oversee all aspects of the program in support of the mission, goals, and outcomes.		Program director possesses the qualifications and experience in <b>some</b> , but not all of the areas including operations, financial management, and leadership to administratively oversee all aspects of the program in support of the mission, goals, and outcomes.		Program director minimally possesses the qualifications and <b>does not</b> possess experience in all areas including operations, financial management, and leadership to administratively oversee all aspects of the program in support of the mission, goals, and outcomes.
			The program <b>identifies</b> and documents the role and responsibilities of the program director.		The program does not fully identify or document the role and responsibilities of the program director.		
Exh	ibit Reference:		Exhibit 6 – Prograi	m Di	rector Curriculum \	/itae	or Resume
SER	Review Findings	:	[Insert for Finding	s fro	m SER review]		
Site	Visit Finding:	[Insert for Finding	s fro	m Site Visit]			
Rec	uired Actions*:	[Insert for Finding	s of	Needs Improvemer	nt or	Inadequate]	
					ardless of Finding o th this Standard, in		
Pro	gram Response:						
AB	PTRFE Decision:						



3.5 **Program Coordinator:** A program coordinator is appointed if a program director is not a licensed physical therapist who obtained a minimum of five years of experience in the program's defined area of practice. The program coordinator is responsible for overseeing the curriculum and ensuring it comprehensively incorporates the requirements in the Description of Residency Practice (DRP) or the Description of Fellowship Practice (DFP). The program determines the roles and responsibilities of the program coordinator.

Exceeds	Me	ets Expectations		Needs	Inadequate*
Expectations				mprovement*	
		Program coordinator (if applicable) <b>oversees</b> the curriculum and ensures it comprehensively incorporates the requirements published in the DRP or DFP.		Program coordinator (if applicable) <b>inconsistently</b> oversees the curriculum and ensures it comprehensively incorporates the requirements published in the DRP or DFP.	
		Program coordinator is a licensed physical therapist who <b>obtained</b> a minimum of five years of experience in the defined area of practice.		Program coordinator is a licensed physical therapist who <b>did not</b> obtain a minimum of five years of experience in the defined area of practice.	
<b>Exhibit Reference:</b>		Exhibit 7 – Program	m Coordinator Curriculum Vitae or Resume		
SER Review Findings: [Insert for Finding			s fro	m SER review]	
Site Visit Finding: [Insert for Finding			s fro	m Site Visit]	
<b>Required Actions*:</b>		[Insert for Finding	s of	Needs Improvemer	nt or Inadequate]
Comments:				ardless of Finding c th this Standard, in	on the Program's cluding consultative

## **ABPTRFE**

Program Response:	
<b>ABPTRFE Decision:</b>	

3.6 **Faculty:** Individuals qualified by education and experience comprise the program's faculty based on their roles and responsibilities. The program's faculty possess the academic background, professional experience, and ongoing professional development to ensure the delivery of quality residency/fellowship education. Programs do not discriminate on the basis of race, color, national origin, religion, sex, gender, sexual orientation, disability, age, and other identities and/or statuses. Programs strive for <u>diversity</u> and a culture of <u>inclusion</u> among faculty, particularly with regard to historically underrepresented groups.

Exceeds Expectations	N	leets Expectations	Needs Improvement*			Inadequate*		
Program engages individuals <b>highly</b> qualified by education <b>and</b> experience based on their roles and responsibilities		Program engages individuals <b>qualified</b> by education <b>and</b> experience based on their roles and responsibilities.		Program engages individuals qualified by either education <b>or</b> experience based on their roles and responsibilities.		Program engages individuals who are <b>not</b> qualified by education <b>or</b> experience based on their roles and responsibilities.		
Faculty possess <b>extensive</b> academic background to ensure the delivery of quality residency/ fellowship education.		Faculty possess academic background to ensure the delivery of quality residency/ fellowship education.		Faculty possess <b>limited</b> academic background to ensure the delivery of quality residency/ fellowship education.		Faculty <b>do not</b> possess academic background to ensure the delivery of quality residency/fello wship education.		
Faculty possess <b>extensive</b> professional		Faculty possess professional experience to ensure the delivery		Faculty possess limited professional experience to		Faculty <b>do not</b> possess professional experience to		



	experience to ensure the delivery of quality residency/ fellowship education.		of quality residency/ fellowship education.		ensure the delivery of quality residency/ fellowship education.		ensure the delivery of quality residency/ fellowship education.	
	Faculty consistently participates in ongoing professional development directly related to program roles and responsibilities to ensure the delivery of quality residency/ fellowship education.		Faculty <b>participates</b> in ongoing professional development to ensure the delivery of quality residency/ fellowship education.		Faculty participate in <b>limited</b> professional development that does not adequately support the delivery of quality residency/ fellowship education.		Faculty <b>do not</b> participate in professional development that supports the delivery of quality residency/ fellowship education.	
	nibit Reference:		Program <b>creates</b> <b>and follows</b> a process for preventing discrimination among faculty. Exhibit 8 – Faculty Qu				Program <b>does</b> <b>not</b> have or follow a process for preventing discrimination among faculty.	
	Review Finding	S:	[Insert for Findings fro		-			
	e Visit Finding: quired Actions*:		[Insert for Findings fr			ade	quatel	
	mments:		[Insert for Findings of Needs Improvement or Inadequate] [Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]					
	ogram Response	:						
AB	PTRFE Decision:							



- 3.6.1 **Quantity:** The program employs a sufficient number of faculty who possess demonstrated expertise in the defined area of practice including the appropriate credentials to support the program's mission, goals, and outcomes. The program's adequate number of faculty allow for:
  - Teaching, mentoring, administration, individual counseling, supervision, research throughout the program, and
  - Faculty activities that contribute to individual professional growth and development.

Exceeds	Meets Expectations		Needs		Inadequate*	
Expectations				mprovement*		
Program engages a sufficient number of faculty and <b>plans</b> for future faculty needs.		Program engages a sufficient number of faculty.		Program engages a <b>limited</b> number of faculty.		Program engages an <b>insufficient</b> number of faculty.
Faculty are sufficient in number to allow for teaching, mentoring, administration, individual counseling, supervision, and research <b>throughout</b> the program to <b>enhance</b> participants learning.		Faculty are sufficient in number to allow for teaching, mentoring, administration, individual counseling, supervision, and research <b>throughout</b> the program.		Faculty are <b>limited</b> in number to sufficiently allow for teaching, mentoring, administration, individual counseling, supervision, and research throughout the program.		Faculty are <b>inadequate</b> in number to sufficiently allow for teaching, mentoring, administration, individual counseling, supervision, and research throughout the program.
Faculty are sufficient in number to participate in activities that <b>enhance</b>		Faculty are sufficient in number to participate in activities that <b>contribute</b> to		Faculty are <b>limited</b> in number to participate in activities that contribute to		Faculty are <b>inadequate</b> in number to participate in activities that contribute to



	individual	individual	individual	individual			
	professional	professional	professional	professional			
	growth and	growth and	growth and	growth and			
	development.	development.	development.	development.			
Ext	nibit Reference:	Exhibit 8 – Faculty	Qualifications Chart				
SEF	SER Review Findings: [Insert for Findings from SER review]						
Sit	e Visit Finding:	[Insert for Finding	s from Site Visit]				
Ree	quired Actions*:	[Insert for Finding	s of Needs Improveme	nt or Inadequate]			
		[Insert Comments	[Insert Comments Regardless of Finding on the Program's				
Со	mments:	Overall Compliance	Overall Compliance with this Standard, including consultative				
		comments.]	comments.]				
Pro	ogram Response:						
AB	PTRFE Decision:						

- 3.6.2 **Qualifications:** Collectively, program faculty have the qualifications necessary to oversee and initiate the learning experiences of the residency/fellowship program to achieve the program goals through effective program development, design, and evaluation of outcomes. Faculty qualifications include the following:
  - Instructional experience,
  - Effective teaching and evaluative skills,
  - Record of involvement in scholarly and professional activities,
  - Academic and experiential qualifications,
  - Diversity of backgrounds appropriate to meet program goals,
  - Expertise in residency/fellowship curriculum development and design, and
  - Expertise in program and participant evaluation.

Judgment about faculty competence in a curricular area for which a faculty is responsible is based on:

- Appropriate past and current involvement in specialist certification and/or advanced degree courses,
- Experience as an academician,
- Research experience, and
- Teaching experience

Exceeds		Me	leets Expectations		Needs		Inadequate*	
Expectations			Improvement*		Improvement*			
	Faculty possess <b>extensive</b>		Faculty <b>possess</b> qualifications		Faculty possess <b>limited</b>		Faculty <b>do not</b> possess the	



	qualifications	pococcan/ to	qualifications	qualifications
	qualifications	necessary to	qualifications	qualifications
	necessary to	oversee and	necessary to	necessary to
	oversee and	initiate the	oversee and	oversee and
	initiate the	learning	initiate the	initiate the
	learning	experiences of	learning	learning
	experiences of	the residency/	experiences of	experiences of
	the residency/	fellowship	the residency/	the residency/
	fellowship	program to	fellowship	fellowship
	program to	support the	program to	program to
	support the	program's	support the	support the
	program's	mission, goals,	program's	program's
	mission, goals,	and outcomes.	mission, goals,	mission, goals,
	and outcomes.		and outcomes.	 and outcomes.
	Faculty possess	Faculty possess	Faculty possess	Faculty <b>do not</b>
	extensive	advanced	limited	possess
	instructional	instructional	advanced	advanced
	experience,	experience,	instructional	instructional
	effective	effective	experience,	experience,
	teaching and	teaching and	effective	effective
	evaluative skills,	evaluative skills,	teaching and	teaching and
	record of	record of	evaluative skills,	evaluative skills,
	involvement in	involvement in	record of	record of
	scholarly and	scholarly and	involvement in	involvement in
	professional	professional	scholarly and	scholarly and
	activities,	activities,	professional	professional
	academic and	academic and	activities,	activities,
	experiential	experiential	academic and	academic and
	, qualifications,	qualifications,	experiential	experiential
	diversity of	diversity of	qualifications,	qualifications,
	backgrounds	backgrounds	diversity of	diversity of
	appropriate to	appropriate to	backgrounds	backgrounds
	meet program	meet program	appropriate to	appropriate to
	goals, expertise	goals, expertise	meet program	meet program
	in residency/	in residency/	goals, expertise	goals, expertise
	fellowship	fellowship	in residency/	in residency/
	curriculum	curriculum	fellowship	fellowship
	development	development	curriculum	curriculum
	and design, and	and design, and	development	development
	expertise in	expertise in	and design, and	and design, and
	, program and	, program and	expertise in	expertise in



	participant		participant		program and		program and
	evaluation.		evaluation.				participant
	evaluation.		evaluation.		participant		
					evaluation.		evaluation.
	Program		Program		Program		Program <b>does</b>
	implements		implements		implements		not implement
	systematic		procedures for		inconsistent		procedures for
	procedures for		judging faculty		procedures for		judging faculty
	judging faculty		curricular area		judging faculty		curricular area
	curricular area		competence		curricular area		competence
	competence		based on		competence		based on
	based on		appropriate past		based on		appropriate past
	appropriate past		and current		appropriate past		and current
	and current		involvement in		and current		involvement in
	involvement in		specialist		involvement in		specialist
	specialist		certification/		specialist		certification/
	certification/		advanced		certification/		advanced
	advanced		degree courses,		advanced		degree courses,
	degree courses,		experience as an		degree courses,		experience as an
	experience as an		academician,		experience as an		academician,
	academician,		research		academician,		research
	research		experience, and		research		experience, and
	experience, and		teaching		experience, and		teaching
	teaching		experience.		teaching		experience.
	experience.				experience.		
Ex	hibit Reference:	E	xhibit 8 – Faculty Q	uali			
-	<b>R Review Findings</b>		Insert for Findings f				
	e Visit Finding:		Insert for Findings f				
	quired Actions*:		Insert for Findings of			or Ir	nadequate]
		1	Insert Comments R				
Со	mments:		Overall Compliance	_			-
		C	comments.]				_
Pr	ogram Response:						
<b></b>	<b>SPTRFE Decision:</b>						

# 3.6.3 **Mentor Qualifications:** Mentors for residency/fellowship programs possess significant and current experience (minimum of 3 years) in the program's area of practice.

Exceeds	<b>Meets Expectations</b>	Needs Improvement*	Inadequate*
Expectations			



	Mentors possess significant and current experience (minimum 3 years) in the program's area of practice.		<b>Not all</b> mentors possess significant and current experience (minimum 3 years) in the program's area of practice.			
Exhibit Reference:	Exhibit 8 – Faculty Qualifications Chart					
<b>SER Review Findings:</b>	[Insert for Findings from SER review]					
Site Visit Finding:	[Insert for Findings from Site Visit]					
<b>Required Actions*:</b>	[Insert for Findings of	of N	eeds Improvement or Inade	equate]		
Comments:	[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]					
Program Response:						
ABPTRFE Decision:						

3.6.4 **Professional Development:** The program provides ongoing professional development experiences for faculty to support their role(s) within the program. Faculty professional development experiences are designed to maintain and improve the effectiveness of the leadership and mentorship that results in program improvement. The program fosters growth in faculty through mentoring for career advancement.

Exceeds Expectations		Meets Expectations		Needs Improvement*		Inadequate*	
Faculty are provided ongoing professional development experiences that directly support their role within the program and <b>enhance</b> identified professional development weaknesses.		Program <b>provides</b> ongoing professional development experiences for faculty to support their role within the program.		Program provides <b>limited</b> professional development experiences for faculty that inconsistently support their role within the program.		Program <b>does</b> <b>not</b> provide professional development experiences for faculty to support their role within the program.	



	Program <b>implements</b> a mentoring program or similar efforts for fostering growth of faculty for career advancement.		Program proactively and consistently encourages mentoring for faculty to further career advancement.		Program inconsistently encourages mentoring for faculty to further career advancement.		Program <b>does</b> <b>not</b> encourage mentoring for faculty to further career advancement.	
-	R Review Findings:		[Insert for Findings from SER review]					
Sit	e Visit Finding:	[	Insert for Findings	fron	n Site Visit]			
Re	quired Actions*:	[	Insert for Findings	of N	leeds Improvement	or Ir	nadequate]	
Со	Comments:		[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]					
Pro	ogram Response:							
AB	PTRFE Decision:							

#### **Quality Standard 4: Program Commitment and Resources**

Residency/Fellowship programs' facilities support excellence in practice and dedication to physical therapy services. The program and sponsoring organization comply with all accreditation and regulatory requirements including other national applicable laws and industry standards. The program maintains sufficient resources to achieve the mission, goals, and outcomes. The program retains sufficient quantity and quality of resources to enable the residency/fellowship program to accomplish its goals. Sufficient resources include adequate learning experiences, faculty, participant support services, staff, finances, access to relevant publications, equipment, materials, and facilities.

QUALITY STANDARD 4 KEY ELEMENTS: A residency/fellowship program meets this quality standard through the effective implementation and consistent documentation of the following key elements:

4.1 **Experiential Learning:** The program's experiential learning activities are varied and sufficient to meet the mission, goals, and outcomes. The program provides sufficient mentored experiences for the defined area of practice as identified in the Description of Residency Practice (DRP) or the Description of Fellowship Practice (DFP).



	Exceeds	Μ	eets Expectations		Needs		Inadequate*	
	Expectations				mprovement*			
	Experiential		Experiential		Experiential		Experiential	
	learning		learning activities		learning		learning	
	activities are		are <b>sufficient</b> in		activities are		activities are	
	abundant in		number and		limited in		insufficient in	
	number and		variety to meet		number and		number and	
	variety to readily		the mission,		variety to meet		variety to meet	
	achieve the		goals, and		the mission,		the mission,	
	mission, goals,		outcomes.		goals, and		goals, and	
	and outcomes.				outcomes.		outcomes.	
	Program		Program provides		Program		Program	
	provides an		sufficient		provided		provides	
	excess of		mentored		limited		insufficient	
	mentored		experiences for		mentored		mentored	
	experiences for		the defined area		experiences for		experiences for	
	the defined area		of practice as		the defined area		the defined area	
	of practice as		identified in the		of practice as		of practice as	
	identified in the		DRP or DFP.		identified in the		identified in the	
	DRP or DFP.				DRP or DFP.		DRP or DFP.	
SE	R Review Findings	: [	Insert for Findings fro	om S	SER review]			
Sit	e Visit Finding:	[	Insert for Findings fro	om S	Site Visit]			
Re	<b>Required Actions*:</b>		Insert for Findings of	Ne	eds Improvement o	or In	adequate]	
			Insert Comments Reg	gard	less of Finding on	the	Program's Overall	
Со	Comments:		Compliance with this	Star	ndard, including co	nsul	tative	
			omments.]					
Pro	ogram Response:							
AB	PTRFE Decision:							

4.2 **Educational Resources:** The program provides the participant and faculty access to current publications and other relevant materials in appropriate media to support the curriculum.

	Exceeds		Meets Expectations		Needs		Inadequate*	
Expectations				Improvement*				
	Program provides participants and		Program provides participants and		Program provides participants and		Program <b>does</b> <b>not</b> provide	
	faculty access to		faculty <b>access</b> to		faculty access to		participants and	
	an <b>excess</b> of		current		limited current		faculty access to	
	current		publications and		publications and		current	



	publications and other relevant materials in appropriate media to support the curriculum.		other relevant materials in appropriate media to support the curriculum.		other relevant materials in appropriate media to support the curriculum.		publications and other relevant materials in appropriate media to support the curriculum.	
	Program <b>implements</b> procedures for regularly reviewing and updating publications and relevant materials.		Program establishes procedures for regularly reviewing and updating publications and relevant materials.		Program <b>inconsistently</b> follows procedures for reviewing and updating publications and relevant materials.		Program <b>does</b> <b>not</b> follow procedures for reviewing and updating publications and relevant materials.	
SEI	R Review Findings:		[Insert for Findings	fron	n SER review]			
Sit	e Visit Finding:		[Insert for Findings	fron	n Site Visit]			
Re	<b>Required Actions*:</b>		[Insert for Findings	of N	leeds Improvement of	or In	adequate]	
Со	mments:		[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]					
Pro	ogram Response:							
AB	PTRFE Decision:							

4.3 **Support Services:** The program and sponsoring organization provides adequate <u>support</u> <u>services</u> that encourage and promote the participant's successful completion.

	Exceeds	Μ	eets Expectations		Needs	Inadequate*	
	Expectations				Improvement*		
	Program and sponsoring organization <b>design</b> <b>meaningful</b> support services that proactively encourage and promote participants' successful completion.		Program and sponsoring organization provide <b>adequate</b> support services that encourage and promote participants' successful completion.		Program and sponsoring organization provide <b>limited</b> support services that somewhat encourage and promote participants' successful completion.	Program and sponsoring organization <b>do</b> <b>not</b> provide support services that encourage and promote participants' successful completion.	
SE	R Review Findings:		[Insert for Findings	fron	n SER review]		



Site Visit Finding:	[Insert for Findings from Site Visit]
<b>Required Actions*:</b>	[Insert for Findings of Needs Improvement or Inadequate]
Comments:	[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]
Program Response:	
<b>ABPTRFE Decision:</b>	

4.4 **Financial Resources:** The program maintains financial resources that are adequate to achieve the mission, goals, and outcomes and supports the academic integrity resulting in continued program sustainability.

	Exceeds	Μ	eets Expectations		Needs		Inadequate*	
	Expectations				Improvement*			
	Program <b>plans</b>		Program		Program		Program	
	for and <b>manages</b>		manages		manages financial		manages financial	
	financial		financial		resources that are		resources that are	
	resources that		resources that are		somewhat		insufficient to	
	support the		adequate to		adequate to		achieve the	
	achievement of		achieve the		achieve the		mission, goals,	
	the mission,		mission, goals,		mission, goals,		and outcomes	
	goals, and		and outcomes		and outcomes		while supporting	
	outcomes		while supporting		while supporting		academic	
	including		academic		academic		integrity resulting	
	academic		integrity that		integrity resulting		in limited	
	integrity that		results in		in limited		program	
	results in		continued		program		sustainability.	
	continued		program		sustainability.			
	program		sustainability.					
	sustainability.							
SE	R Review Findings:		[Insert for Findings	fron	n SER review]			
Sit	e Visit Finding:		[Insert for Findings	fron	n Site Visit]			
Re	quired Actions*:	[Insert for Findings	of N	leeds Improvement	or In	adequate]		
<b>C</b> -	Commente		[Insert Comments F	Rega	rdless of Finding on	the	Program's Overall	
0	Comments:		Compliance with th	is St	andard, including co	nsul	tative comments.]	
Pro	ogram Response:							
AB	PTRFE Decision:							

4.4.1 **Sponsoring Organization:** For the protection of the program participant, the sponsoring organization demonstrates its support of the program, in part, by providing sufficient funding resources to sustain the program.



	Exceeds Expectations	Μ	eets Expectations		Needs Improvement*	Inadequate*	
	Sponsoring organization demonstrates <b>continued</b> support of the program through multiple means, but in part, by providing sufficient funding resources to sustain the program.		Sponsoring organization demonstrates <b>support</b> of the program by providing sufficient funding resources to sustain the program.		Sponsoring organization demonstrates <b>limited</b> support of the program by providing some funding resources to sustain the program.		Sponsoring organization <b>does</b> <b>not</b> demonstrate adequate support of the program and provides limited funding resources to sustain the program.
SE	R Review Findings:		[Insert for Findings	fron	n SER review]		
Sit	e Visit Finding:		[Insert for Findings	fron	n Site Visit]		
Re	quired Actions*:		[Insert for Findings	of N	leeds Improvement	or In	adequate]
Со	Comments:		[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]				
Pro	Program Response:						
AB	PTRFE Decision:						

4.5 **Teach-Out Commitment:** The program and sponsoring organization commits to teaching out participants who are currently enrolled if it is deemed necessary to discontinue offering the program.

Exceeds Expectations	Meets Expe	ctations	Needs Improveme	nt*	Inadequate*
	Program sponsorir organizat demonstr commitm current participar through a out comm	ng tion rates <b>nent</b> to nts a teach-			Program and sponsoring organizations <b>does not</b> demonstrate commitment to current participants and has not implemented a



	teach-out commitment.
Exhibit Reference:	Exhibit 9 – Teach-Out Commitment
SER Review Findings:	[Insert for Findings from SER review]
Site Visit Finding:	[Insert for Findings from Site Visit]
<b>Required Actions*:</b>	[Insert for Findings of Needs Improvement or Inadequate]
Comments:	[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]
Program Response:	
<b>ABPTRFE Decision:</b>	

### **Quality Standards 5: Assessment, Achievement, Satisfaction, and Effectiveness**

Residency/Fellowship programs conduct ongoing evaluation of the mission, goals, outcomes, faculty, curriculum, and participants in a commitment to continuous improvement. The program annually gathers data, monitors results, and analyzes information to determine the extent to which the mission, goals, and outcomes are achieved. The evaluation process is planned, organized, scheduled, and documented to ensure ongoing quality education in a defined area of practice. Participant performance is evaluated initially, on an ongoing basis, and at the conclusion of the program. Participant evaluation data are used to further focus learning and instruction and confirm achievement of the program outcomes. Data collected on the post-graduate performance of the participant is used to evaluate the program's effectiveness and inform curriculum revisions.

QUALITY STANDARD 5 KEY ELEMENTS: A residency/fellowship program meets this quality standard through the effective implementation and consistent documentation of the following key elements:

5.1 **Program Assessment:** The program implements a plan and collects data from <u>key</u> <u>indicators</u> used to annually evaluate the achievement of its <u>mission</u>, <u>goals</u>, and <u>outcomes</u>.

Exceeds Expectations		Meets Expectations		Needs Improvement*		Inadequate*	
Program implements a <b>systematic</b> plan that is understood by program		Program <b>implements</b> a plan.		Program <b>partially</b> implements a plan.		Program <b>does</b> <b>not</b> have a plan.	



	administration				
	and faculty.				
	Program collects data on an ongoing basis throughout the year.		Program collects data <b>annually</b> .	Program <b>randomly</b> collects data.	Program <b>does</b> <b>not</b> collect data.
	Program implements a process for evaluating data throughout the year.		Program <b>evaluates</b> data annually.	Program <b>inconsistently</b> evaluates data annually.	Program <b>does</b> <b>not</b> evaluate data.
	Program's evaluation of data is used to measure achievement of the mission, goals, and outcomes <b>throughout</b> the year.		Program's evaluation of data is used to measure achievement of the mission, goals, and outcomes <b>annually</b> .	Program inconsistently evaluates data used to measure achievement of the mission, goals, and outcomes annually.	Program <b>does</b> <b>not</b> evaluate data used to measure achievement of the mission, goals, and outcomes annually.
	Data <b>drives</b> continuous improvements efforts.		Data <b>informs</b> continuous improvement efforts.	Data <b>minimally</b> used to inform continuous improvement efforts.	Data is <b>not used</b> to inform continuous improvement efforts.
	Program's plan results in <b>comprehensive</b> annual data that clearly demonstrate achievement of the mission, goals, and outcomes.		Program's plan results in <b>annual</b> data that demonstrate achievement of the mission, goals, and outcomes.	Program's plan results in annual data that <b>partially</b> demonstrate achievement of the mission, goals, and outcomes.	Program's plan does not result in annual data that demonstrate achievement of the mission, goals, and outcomes.
Exhibit Reference: Exhibit 2 – Miss			Exhibit 2 – Missior Exhibit 3 – Assessr		



SER Review Findings:	[Insert for Findings from SER review]
Site Visit Finding:	[Insert for Findings from Site Visit]
<b>Required Actions*:</b>	[Insert for Findings of Needs Improvement or Inadequate]
Comments:	[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]
Program Response:	
<b>ABPTRFE Decision:</b>	

5.2 **Participant Progress:** The program establishes a consistent process for tracking the participant's level of achievement of the program outcomes against identified benchmarks. Overall participant progress is assessed at regular intervals to ensure timely completion and appropriate progression of participant advancement.

Exceeds Expectations	Me	eets Expectations	Needs Improvement*	Inadequate*	
Program establishes a <b>systematic</b> and consistent process for tracking participants level of achievement of program outcomes.		Program establishes a <b>consistent</b> process for tracking participants level of achievement of program outcomes.	Program's process <b>inconsistently</b> tracks participants level of achievement of program outcomes.		Program's process <b>does</b> <b>not</b> track participants level of achievement of program outcomes.
Program identifies benchmarks it uses to <b>readily</b> determine the level to which participants achieve the program outcomes.		Program identifies benchmarks it uses to <b>determine</b> the level to which participants achieve the program outcomes.	Program partially identifies benchmarks it uses to determine the level to which participants achieve the program outcomes.		Program <b>does</b> <b>not</b> identify benchmarks it uses to determine the level to which participants achieve the program outcomes.
Data collected on participant		Data collected on participant	Data collected on participant		Data collected on participant



	progress is used to <b>drive</b> continuous curriculum improvement efforts. Program assesses participant progress at <b>specific</b> <b>predetermined</b> intervals designated throughout the curriculum.		progress is used to <b>inform</b> annual curriculum improvement efforts. Program assesses participant progress at <b>regular</b> intervals throughout the curriculum.		progress is inconsistently used to inform curriculum improvement efforts. Program inconsistently assesses participant progress that prevents the ability to ensure timely completion and appropriate progression of		progress is <b>not</b> <b>used</b> to inform curriculum improvement efforts. Program <b>does</b> <b>not</b> assess participant progress and does not ensure timely completion and appropriate progression of participant advancement.
					participant advancement.		
	nibit Reference: R Review Findings		Exhibit 2 – Mission and Goals Chart Exhibit 3 – Assessment Table [Insert for Findings from SER review]				
	e Visit Finding:	-	[Insert for Finding				
	quired Actions*:				Needs Improveme	nt or	Inadequate]
Comments:			[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]				
	ogram Response:						
AB	PTRFE Decision:						

5.3 **Program Director and Coordinator Evaluation:** The program establishes an annual process for evaluating the program director and coordinator (as applicable) including adequate administrative program oversight, evaluation of program participants, and appropriate allocation of resources against identified benchmarks based on responsibilities.

Exceeds Expectations		leets Expectations		Needs Improvement*		Inadequate*	
Program implements a		Program <b>establishes</b> an		Program <b>partially</b>		Program <b>does</b> <b>not</b> establish an	



systematic and consistent annual process for evaluating the program director and coordinator (if applicable).	annual process for evaluating the program director and coordinator (if applicable).	establishes an annual process for evaluating the program director and coordinator (if applicable).	annual process for evaluating the program director and coordinator (if applicable).
Program's evaluation process identifies benchmarks used for demonstrating on a <b>graduated</b> <b>scale</b> administrative program oversight, evaluation of program participants, and appropriate allocation of resources based on responsibilities.	Program's evaluation process identifies benchmarks for <b>demonstrating</b> administrative program oversight, evaluation of program participants, and appropriate allocation of resources based on responsibilities.	Program's evaluation <b>partially</b> identifies benchmarks for demonstrating administrative program oversight, evaluation of program participants, and appropriate allocation of resources based on responsibilities.	Program's evaluation <b>does</b> <b>not</b> identify benchmarks for demonstrating administrative program oversight, evaluation of program participants, and appropriate allocation of resources based on responsibilities.
For programs seeking renewal of accreditation (only if exceeding expectations): Program's evaluation process allows for the identification and adjustment			



of established	
benchmarks	
based on its	
past and	
expected	
performance to	
meet the	
mission, goals,	
and outcomes.	
SER Review Findings:	[Insert for Findings from SER review]
Site Visit Finding:	[Insert for Findings from Site Visit]
<b>Required Actions*:</b>	[Insert for Findings of Needs Improvement or Inadequate]
	[Insert Comments Regardless of Finding on the Program's
Comments:	Overall Compliance with this Standard, including consultative
	comments.]
Program Response:	
<b>ABPTRFE Decision:</b>	

5.4 **Faculty Evaluation:** The program establishes an annual process for evaluating faculty which may include an assessment of teaching ability, professional activities, expertise within the defined area of practice, mentoring, and adequate participant support. When determining faculty effectiveness, the program identifies benchmarks and gathers data from multiple sources. Mentor performance is evaluated through direct observations by the program director/coordinator. Annually, faculty receive feedback results for continuous improvement purposes.

Exe	Exceeds Expectations		Meets Expectations		Needs Improvement*		Inadequate*	
	Program implements a <b>systematic</b> and <b>consistent</b> annual process for evaluating faculty.		Program establishes an annual process for evaluating faculty.		Program <b>partially</b> establishes an annual process for evaluating faculty.		Program <b>does</b> <b>not</b> establish an annual process for evaluating faculty.	
	Program director/ coordinator evaluates mentor performance through direct observations at		Program director/ coordinator <b>evaluates</b> mentor performance		Program director/ coordinator <b>inconsistently</b> evaluates mentor performance		Program director/ coordinator <b>does not</b> evaluate mentor	



	<b>predetermined</b> <b>intervals</b> throughout the curriculum.		through direct observations.		through direct observation.		performance through direct observation.
	Program's evaluation process assesses teaching ability, professional activities, expertise within the defined area of practice, mentoring, and adequate participant support as <b>applicable to the</b> <b>program</b> .		Program's evaluation process assesses teaching ability, professional activities, expertise within the defined area of practice, mentoring, and adequate participant support.		Program's evaluation process <b>inconsistently</b> assesses teaching ability, professional activities, clinical expertise, mentoring, and/or adequate participant support as applicable to the program.		Program <b>does</b> <b>not</b> evaluate teaching ability, professional activities, clinical expertise, mentoring, and/or adequate participant support.
	Program's evaluation process identifies <b>clear</b> and <b>specific</b> benchmarks to readily measure faculty effectiveness.		Program's evaluation process <b>identifies</b> benchmarks to measure faculty effectiveness.		Program's evaluation process <b>partially</b> identifies benchmarks to measure faculty effectiveness.		Program's evaluation process <b>does</b> <b>not</b> identify benchmarks to measure faculty effectiveness.
	Faculty receive <b>ongoing</b> feedback throughout the year for continuous improvement purposes.		Faculty receive <b>annual</b> feedback for continuous improvement purposes.		Faculty receive feedback in <b>inconsistent</b> intervals making it challenging for results to be used for continuous improvement purposes.		Faculty <b>do not</b> receive feedback preventing continuous improvement.
	SER Review Findings: [Insert for Findings from SER review]						
	e Visit Finding:		[Insert for Finding				1
Re	quired Actions*:		[Insert for Finding	gs o	f Needs Improveme	nt o	r Inadequate]



Comments:	[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]
Program Response:	
ABPTRFE Decision:	

5.5 **Participant Post-Completion Performance:** The program regularly collects information about the post-completion performance of the residency/fellowship graduate which is used for program evaluation and continuous improvement.

Exe	Exceeds Expectations		Meets	Needs		Inadequate*	
			Expectations		Improvement*		
	Program collects data at <b>predetermined</b> <b>intervals</b> about the post- completion performance of residency/ fellowship graduates.		Program <b>collects</b> data regularly about the post- completion performance of residency/ fellowship graduates.		Program inconsistently collects data about the post- completion performance of residency/ fellowship graduates.		Program <b>does</b> <b>not</b> collect data about the post- completion performance of residency/ fellowship graduates.
	Program uses data to evaluate the program <b>effectiveness</b> and <b>implements</b> continuous improvement efforts as a direct result.		Program uses data to <b>evaluate</b> the program and <b>inform</b> continuous improvement efforts.		Program inconsistently uses data to evaluate the program and inform continuous improvement efforts.		Program <b>does</b> <b>not</b> use data to evaluate the program or inform continuous improvement efforts.
SEI	R Review Findings:		[Insert for Finding	gs fr	om SER review]		
Sit	e Visit Finding:		[Insert for Finding	gs fr	om Site Visit]		
Re	quired Actions*:				f Needs Improveme		
	Comments:		[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]				
	ogram Response:						
AB	PTRFE Decision:						



5.6 **Program Effectiveness:** The program annually uses comprehensive outcomes data to inform curriculum revisions. The data guides the program's continuous improvement efforts indicative of an ABPTRFE-accredited residency/fellowship program and provides evidence supporting the continued achievement of the mission, goals, and outcomes.

Exceeds	Me	ets Expectations	Needs		Inadequate*	
Expectations				Improvement*		
Program implements a plan that uses comprehensive outcomes data to continuously inform curriculum revisions throughout the year.		Program <b>uses</b> comprehensive outcomes data to <b>annually</b> inform curriculum revisions.		Program inconsistently uses comprehensive outcomes data to annually inform curriculum revisions.		Program <b>does</b> <b>not</b> use comprehensive outcomes data to inform curriculum revisions.
Program implements a <b>systematic</b> process for using the data collected to guide continuous improvement efforts that exemplifies an ABPTRFE- accredited residency/ fellowship program.		Program <b>uses</b> the data collected to guide continuous improvement efforts indicative of an ABPTRFE- accredited residency/ fellowship program.		Program <b>inconsistently</b> uses data collected to guide continuous improvement efforts indicative of an ABPTRFE- accredited residency/ fellowship program.		Program <b>does</b> <b>not</b> use data collected to guide continuous improvement efforts indicative of an ABPTRFE- accredited residency/ fellowship program.
Program regularly maintains evidence supporting the continued achievement of		Program <b>provides</b> evidence supporting the continued achievement of the mission,		Program provided <b>inconsistent</b> evidence supporting the continued achievement of		Program <b>does</b> <b>not</b> provide evidence supporting the continued achievement of the mission,



	the mission, goals, and outcomes.	goals, and outcomes.	the mission, goals, and outcomes.	goals, and outcomes.
	For programs seeking renewal of accreditation only if exceeding expectations: Evidence maintained is used annually by the program to compare past achievements against current performance data.			
SE	R Review Findings:	[Insert for Findings	from SER review]	
Sit	e Visit Finding:	[Insert for Findings	from Site Visit]	
Re	quired Actions*:	· · · · · · · · · · · · · · · · · · ·	of Needs Improvement	
Со	mments:		egardless of Finding or with this Standard, incl	<b>.</b>
	ogram Response:			
AB	PTRFE Decision:			

5.7 **Outcomes Publication:** The program annually publishes outcomes data that communicates program performance indicative of participant achievement. Outcomes data must be published on the program's website. Information shall be no more than one "click" away from the program's home webpage. At a minimum, programs publish their program completion rate.

Exceeds Expectations	Mo	eets Expectations	Needs Improvement*		Inadequate*	
		Program <b>has</b> a webpage separate from the sponsoring organization.			Program <b>does</b> <b>not</b> have a webpage separate from the sponsoring organization.	



	Program annually publishes on its website outcomes data that communicate <b>comprehensive</b> and <b>specific</b> program performance indicative of participant achievement.		Program annually <b>publishes</b> on its website outcomes data that communicate program performance indicative of participant achievement.		Program annually <b>partially</b> publishes on its website outcomes data that communicate program performance indicative of participant achievement.		Program <b>does</b> <b>not</b> annually publish on its website outcomes data that communicate program performance indicative of participant achievement.
			Program <b>publishes</b> the current ABPTRFE- accredited program logo.				Program <b>does</b> <b>not</b> publish the current ABPTRFE- accredited program logo.
			Program <b>publishes</b> its completion rate.				Program <b>does</b> <b>not</b> publish its completion rate.
			The program's completion rate and outcomes data are <b>no</b> <b>more than</b> one "click" away from the program's home webpage.				The program's completion rate and outcomes data are <b>more</b>
SER Review Findings:			[Insert for Findings from SER review]				
Site Visit Finding:		[Insert for Findings from Site Visit]					
Required Actions*:			[Insert for Findings of Needs Improvement or Inadequate]				
Comments:		[Insert Comments Regardless of Finding on the Program's Overall Compliance with this Standard, including consultative comments.]					
Program Response:							
AB	PTRFE Decision:						



Adopted: 09/16/2024 Last Updated: 05/31/2025 Contact: resfel@apta.org