

Recent ABPTRFE Accreditation Actions

September 15-16, 2024

Candidacy Granted	Effective Date
Atlantic Health System Sports Residency	September 30, 2024 to January 31, 2027
Atrium Health Oncology Residency	September 30, 2024 to January 31, 2027
Campbell Clinic Orthopaedic Residency	September 30, 2024 to January 31, 2027
Campbell Clinic Sports Residency	September 30, 2024 to January 31, 2027
Colorado University Sports Medicine and Performance Center Orthopaedic Residency	September 30, 2024 to January 31, 2027
Erlanger Health and University of Tennessee at Chattanooga Acute Care Residency	September 30, 2024 to January 31, 2027
Hayashida Physical Therapy Orthopaedic Residency	September 30, 2024 to January 31, 2027
Houston Methodist Upper Extremity Athlete Fellowship	September 30, 2024 to January 31, 2027
Lattimore Physical Therapy Orthopedic Residency	September 30, 2024 to January 31, 2027
Memorial Hermann Spine Fellowship	September 30, 2024 to January 31, 2027
Orthopedic Residency at Orthopedic One	September 30, 2024 to January 31, 2027
Piedmont Athens Regional Hospital Sports Residency	September 30, 2024 to January 31, 2027
Sanford Health Neurologic Residency	September 30, 2024 to January 31, 2027
The Summit Orthopaedic Residency	September 30, 2024 to January 31, 2027
University of Miami Upper Extremity Athlete Fellowship	September 30, 2024 to January 31, 2027
University of Rochester Medical Center Pediatric Residency	September 30, 2024 to January 31, 2027
University of Southern California Performing Arts Fellowship	September 30, 2024 to January 31, 2027
West Virginia University Division of Physical Therapy and WVU Medicine Hospital Cardiovascular and Pulmonary Residency	September 30, 2024 to January 31, 2027
Candidacy Denied (Actions are Subject to Appeal and Are Not Yet Final)	Effective Date
See Attached ABPTRFE Decision Letters	
Texas Physical Therapy Specialists Orthopedic Residency	September 30, 2024
Texas Physical Therapy Specialists Sports Residency	September 30, 2024
Initial Accreditation Granted	Effective Date
Adams Sports Medicine and Physical Therapy Sports Residency	September 30, 2024 to September 30, 2029

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AdventHealth Sports Medicine and Rehabilitation Sports Residency	September 30, 2024 to September 30, 2029
Atrium Health Sports Residency	September 30, 2024 to September 30, 2029
Belmont University-Tennessee Orthopedic Alliance Orthopedic Residency	September 30, 2024 to September 30, 2029
Creighton University Sports Residency	September 30, 2024 to September 30, 2029
Georgia State University Pediatric Residency	September 30, 2024 to September 30, 2029
Mayo Clinic School of Health Sciences Acute Care Residency	September 30, 2024 to September 30, 2029
Mercer University Wound Management Residency	September 30, 2024 to September 30, 2029
Midwest Orthopedics at Rush Sports Residency	September 30, 2024 to September 30, 2029
National Sports Medicine Institute Sports Residency	September 30, 2024 to September 30, 2029
Ochsner Health System Women's Health Residency	September 30, 2024 to September 30, 2029
Orlin and Cohen Medical Specialists Group and Northwell Health Orthopedic Residency	September 30, 2024 to September 30, 2029
Rehab 2 Perform Orthopedic Residency	September 30, 2024 to September 30, 2029
The Ohio State University Wexner Medical Center and Bellarmine University Neurologic	September 30, 2024 to September 30, 2029
Movement Disorders Fellowship	
The Paso del Norte Orthopaedic Residency	September 30, 2024 to September 30, 2029
Trinity Health TrinityElite Sports Residency	September 30, 2024 to September 30, 2029
University Hospitals Sports Residency	September 30, 2024 to September 30, 2029
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University of New Mexico Women's Health Residency	September 30, 2024 to September 30, 2029
Washington University School of Medicine in St. Louis Orthopaedic Residency	September 30, 2024 to September 30, 2029
Washington University School of Medicine in St. Louis Orthopaedic Residency Initial Accreditation Denied (Actions are Subject to Appeal and Are Not Yet Final)	·
Washington University School of Medicine in St. Louis Orthopaedic Residency	September 30, 2024 to September 30, 2029
Washington University School of Medicine in St. Louis Orthopaedic Residency Initial Accreditation Denied (Actions are Subject to Appeal and Are Not Yet Final) See Attached ABPTRFE Decision Letters None	September 30, 2024 to September 30, 2029 Effective Date
Washington University School of Medicine in St. Louis Orthopaedic Residency Initial Accreditation Denied (Actions are Subject to Appeal and Are Not Yet Final) See Attached ABPTRFE Decision Letters	September 30, 2024 to September 30, 2029 Effective Date Effective Date
Washington University School of Medicine in St. Louis Orthopaedic Residency Initial Accreditation Denied (Actions are Subject to Appeal and Are Not Yet Final) See Attached ABPTRFE Decision Letters None	September 30, 2024 to September 30, 2029 Effective Date Effective Date January 31, 2025 to January 31, 2035
Washington University School of Medicine in St. Louis Orthopaedic Residency Initial Accreditation Denied (Actions are Subject to Appeal and Are Not Yet Final) See Attached ABPTRFE Decision Letters None Renewal of Accreditation Granted	September 30, 2024 to September 30, 2029 Effective Date Effective Date
Washington University School of Medicine in St. Louis Orthopaedic Residency Initial Accreditation Denied (Actions are Subject to Appeal and Are Not Yet Final) See Attached ABPTRFE Decision Letters None Renewal of Accreditation Granted Brooks Rehabilitation Neurologic Residency	September 30, 2024 to September 30, 2029 Effective Date Effective Date January 31, 2025 to January 31, 2035
Washington University School of Medicine in St. Louis Orthopaedic Residency Initial Accreditation Denied (Actions are Subject to Appeal and Are Not Yet Final) See Attached ABPTRFE Decision Letters None Renewal of Accreditation Granted Brooks Rehabilitation Neurologic Residency Casa Colina Orthopedic Residency	September 30, 2024 to September 30, 2029 Effective Date Effective Date January 31, 2025 to January 31, 2035 January 31, 2025 to January 31, 2035
Washington University School of Medicine in St. Louis Orthopaedic Residency Initial Accreditation Denied (Actions are Subject to Appeal and Are Not Yet Final) See Attached ABPTRFE Decision Letters None Renewal of Accreditation Granted Brooks Rehabilitation Neurologic Residency Casa Colina Orthopedic Residency Emory University Acute Care Residency	September 30, 2024 to September 30, 2029 Effective Date Effective Date January 31, 2025 to January 31, 2035 January 31, 2025 to January 31, 2035 September 30, 2024 to September 30, 2034
Washington University School of Medicine in St. Louis Orthopaedic Residency Initial Accreditation Denied (Actions are Subject to Appeal and Are Not Yet Final) See Attached ABPTRFE Decision Letters None Renewal of Accreditation Granted Brooks Rehabilitation Neurologic Residency Casa Colina Orthopedic Residency Emory University Acute Care Residency Duke University Health System Cardiovascular and Pulmonary Residency Duke University Health System Sports Division I Fellowship	September 30, 2024 to September 30, 2029 Effective Date Effective Date January 31, 2025 to January 31, 2035 January 31, 2025 to January 31, 2035 September 30, 2024 to September 30, 2034 January 31, 2025 to January 31, 2035
Washington University School of Medicine in St. Louis Orthopaedic Residency Initial Accreditation Denied (Actions are Subject to Appeal and Are Not Yet Final) See Attached ABPTRFE Decision Letters None Renewal of Accreditation Granted Brooks Rehabilitation Neurologic Residency Casa Colina Orthopedic Residency Emory University Acute Care Residency Duke University Health System Cardiovascular and Pulmonary Residency	September 30, 2024 to September 30, 2029 Effective Date January 31, 2025 to January 31, 2035 January 31, 2025 to January 31, 2035 September 30, 2024 to September 30, 2034 January 31, 2025 to January 31, 2035 September 30, 2024 to September 30, 2034
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Washington University School of Medicine in St. Louis Orthopaedic Residency Initial Accreditation Denied (Actions are Subject to Appeal and Are Not Yet Final) See Attached ABPTRFE Decision Letters None Renewal of Accreditation Granted Brooks Rehabilitation Neurologic Residency Casa Colina Orthopedic Residency Emory University Acute Care Residency Duke University Health System Cardiovascular and Pulmonary Residency Duke University Health System Sports Division I Fellowship Good Shepherd Rehabilitation Network and Drexel University Pediatric Residency Holy Cross Health Orthopaedic Residency LSUHSC Orthopaedic Residency Nova Southeastern University Faculty Residency	Effective Date Effective Date January 31, 2025 to January 31, 2035 January 31, 2025 to January 31, 2035 September 30, 2024 to September 30, 2034 January 31, 2025 to January 31, 2035 September 30, 2024 to September 30, 2034
Washington University School of Medicine in St. Louis Orthopaedic Residency Initial Accreditation Denied (Actions are Subject to Appeal and Are Not Yet Final) See Attached ABPTRFE Decision Letters None Renewal of Accreditation Granted Brooks Rehabilitation Neurologic Residency Casa Colina Orthopedic Residency Emory University Acute Care Residency Duke University Health System Cardiovascular and Pulmonary Residency Duke University Health System Sports Division I Fellowship Good Shepherd Rehabilitation Network and Drexel University Pediatric Residency Holy Cross Health Orthopaedic Residency LSUHSC Orthopaedic Residency Nova Southeastern University Faculty Residency Ohio University and OhioHealth Women's Health Residency	Effective Date Effective Date Effective Date January 31, 2025 to January 31, 2035 January 31, 2025 to January 31, 2035 September 30, 2024 to September 30, 2034 January 31, 2025 to January 31, 2035 September 30, 2024 to September 30, 2034 September 30, 2024 to September 30, 2034

Last Updated: September 16, 2024

Tampa General Hospital Neurologic Residency	September 30, 2024 to September 30, 2034
The Ohio State University Wexner Medical Center Neurologic Residency	September 30, 2024 to September 30, 2034
The University of Alabama at Birmingham Neurologic Residency	September 30, 2024 to September 30, 2034
Therapy Partners Group Women's Health Residency	September 30, 2024 to September 30, 2034
UCSF Acute Care Residency	September 30, 2024 to September 30, 2034
University Hospitals Orthopedic Residency	September 30, 2024 to September 30, 2034
University of Delaware Orthopaedic Manual Physical Therapy Fellowship	September 30, 2024 to September 30, 2034
University of Miami and Jackson Rehabilitation Hospital Neurologic Residency	September 30, 2024 to September 30, 2034
University of Mississippi Medical Center Pediatric Residency	September 30, 2024 to September 30, 2034
University of North Carolina Neurologic Residency	September 30, 2024 to September 30, 2034
University of Toledo Medical Center Neurologic Residency	September 30, 2024 to September 30, 2034
Virginia Orthopedic Manual Physical Therapy Institute Orthopedic Residency	September 30, 2024 to September 30, 2034
Wake Forest University Health System Sports Division 1 Fellowship	September 30, 2024 to September 30, 2034
Renewal of Accreditation Denied (Actions are Subject to Appeal and Are Not Yet	Effective Date
Final)	
See Attached ABPTRFE Decision Letters	
None	
Show Cause Directive	
Ola Grimsby Institute Orthopaedic Residency	September 30, 2024 to September 30, 2025
Show Cause Vacated	
Hands On Diagnostics Clinical Electrophysiology Residency	September 30, 2024
Voluntary Withdrawal of Accreditation (by Program)	Effective Date
Mercy Health - Cincinnati Orthopaedic Residency	October 8, 2024
PT Solutions Neurologic Residency	June 13, 2024
The Market State Control of the Cont	September 30, 2024
The McKenzie Institute USA Orthopaedic Manual Physical Therapy Fellowship	•
University of St. Augustine for Health Sciences Orthopaedic Manual Physical Therapy Fellowship	September 30, 2024
	•
University of St. Augustine for Health Sciences Orthopaedic Manual Physical Therapy Fellowship Administrative Withdrawal of Accreditation (Non-Compliance) None	September 30, 2024 Effective Date
University of St. Augustine for Health Sciences Orthopaedic Manual Physical Therapy Fellowship Administrative Withdrawal of Accreditation (Non-Compliance)	September 30, 2024



September 15, 2024

Ben Morgan, PT, DPT, ATC
Program Director
Texas Physical Therapy Specialists Orthopedic Residency
10526 W. Parmer Lane
Suite 403
Austin, TX 78717
UNITED STATES

Dear Dr. Morgan:

The American Board of Physical Therapy Residency and Fellowship Education (ABPTRFE or Board) met on September 15, 2024 and considered granting candidacy to Texas Physical Therapy Specialists Orthopedic Residency.

Upon review of the Self-Evaluation Report, Exhibits, and Accreditation Report Rubric, the Board took action to deny candidacy to Texas Physical Therapy Specialists Orthopedic Residency. The reasons for the Board's decision to deny candidacy are outlined below.

1) **Program Profile A.** Briefly describe the program's history and why it was developed.

It is not clear regarding the relationship with Confluent Health as a potential sponsoring organization and hiring entity. As the resident contract and program policies reflect Confluent Health, and not the identified program sponsoring organization (Texas Physical Therapy Specialists), it is unknown which entity serves as the program's sponsoring organization and is responsible for the program.

2) **Standard 1: Mission, Goals, and Outcomes 1.1:** The <u>mission statement</u> communicates the program's purpose and commitment to providing quality advanced education to physical therapists in a defined area of practice that results in enhanced patient care.

The program's mission statement is lacking reflection of orthopaedic physical therapist practice.

3) **Standard 1: Mission, Goals, and Outcomes 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.

The program's goals do not all reflect the orthopaedic area of specialty practice. In addition, the program lacks goals that are broadly stated, lead to assessable outcomes, and do not describe the general aims and purpose of the program's administration and curriculum.

4) **Standard 1: Mission, Goals, and Outcomes 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.

The program does not have outcomes that reflect the knowledge, skills, and affective behaviors achieved. In addition, the program outcomes are not measurable and

observable. The program outcomes do not focus on a single outcome. Last, the program outcomes contain redundancy (outcomes 4 & 8).

5) **Standard 1: Mission, Goals, and Outcomes 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.

The program does not have key indicators that measure the achievement of the program's mission, goals and outcomes which are clear, well defined, measurable, and consistently correspond to the program's mission, goals, and outcomes.

6) Standard 2: Curriculum Design and Instruction 2.1.4: 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 evidence-based practice principles, 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 live patient practical examinations are required throughout the program.

The program does not have assessments that evaluate resident performance based on established measures. In addition, the program has not demonstrated it administers at least 1 written examination and 2 live patient examinations throughout the duration of the program.

7) Standard 2: Curriculum Design and Instruction 2.3: Program Delivery: The program is conducted in settings or affiliated clinical sites where management and professional staff are committed to seeking excellence in education and patient care by demonstrating substantial compliance with professionally developed and nationally applied practice and operational standards while maintaining sufficient resources to achieve the mission, goals, and outcomes.

The program's description of its curriculum is directed towards a sports residency program, not orthopaedics. In addition, the program has not demonstrated it ensures all settings and affiliated practice sites demonstrate substantial compliance with professional developed and nationally applied practice and operational standards.

8) Standard 4: Program Commitment and Resources 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.

The program has not demonstrated a process to ensure educational resources remain current and relates to orthopaedics.

9) Standard 5: Assessment, Achievement, Satisfaction, and Effectiveness 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

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program's website. Information shall be no more than one "click" away from the program's home webpage. At a minimum, programs publish their <u>program completion rate</u>.

The program needs to develop a webpage that is separate from the program's sponsoring organization.

Denial of candidacy status is an appealable decision. A developing program may appeal this adverse decision following procedures detailed in 6.4 of the ABPTRFE Processes and Procedures.

Per ABPTRFE Processes and Procedures 2.5.2, if a developing program denied candidacy decides to continue pursuing ABPTRFE-accredited status, the program is required to revise the Self-Evaluation Report and Exhibits incorporating feedback from the ABPTRFE Accreditation Report Rubric and reapply for initial accreditation following ABPTRFE's published procedures.

ABPTRFE's approach to accreditation emphasizes practices of continuous improvement and quality enhancement driven by the program's mission. The accreditation process does not assume a single model for improvement but reflects an understanding that continuous improvement is a process that can follow various paths to demonstrate excellence in residency and fellowship education. Should you have any questions, please feel free to contact ABPTRFE staff.

Sincerely,

Alice Holder, PT, DPT, MHS

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Board-Certified Clinical Specialist in Geriatric and Neurologic Physical Therapy Chair, American Board of Physical Therapy Residency & Fellowship Education



September 15, 2024

Ben Morgan, PT, DPT, ATC Program Director Texas Physical Therapy Specialists Sports Residency 10526 W. Parmer Lane Suite 403 Austin, TX 78717 UNITED STATES

Dear Dr. Morgan:

The American Board of Physical Therapy Residency and Fellowship Education (ABPTRFE or Board) met on September 15, 2024 and considered granting candidacy to Texas Physical Therapy Specialists Sports Residency.

Upon review of the Self-Evaluation Report, Exhibits, and Accreditation Report Rubric, the Board took action to deny candidacy to Texas Physical Therapy Specialists Sports Residency. The reasons for the Board's decision to deny candidacy are outlined below.

1) **Program Profile A.** Briefly describe the program's history and why it was developed.

The program described the history of an orthopaedic residency, not a sports residency. In addition, it is not clear regarding the relationship with Confluent Health as a potential sponsoring organization and hiring entity.

2) Standard 1: Mission, Goals, and Outcomes 1.1: The mission statement communicates the program's purpose and commitment to providing quality advanced education to physical therapists in a defined area of practice that results in enhanced patient care.

The program's mission statement does not address the correct area of specialty practice (sports).

3) Standard 1: Mission, Goals, and Outcomes 1.3: The program identifies goals 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.

The program's goals do not all reflect the sports area of specialty practice.

4) Standard 1: Mission, Goals, and Outcomes 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.

The program does not have outcomes that reflect the sports area of specialty practice, are clear and specific, and focus on learning outcomes rather than curriculum input.

5) **Standard 1: Mission, Goals, and Outcomes 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.

The program does not have key indicators that measure the achievement of the program's goals and outcomes which are specific, and limited to, sports physical therapy.

6) Standard 2: Curriculum Design and Instruction 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 clinical 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.

The program did not describe a comprehensive curriculum that reflects the Sports Description of Residency Practice.

7) Standard 2: Curriculum Design and Instruction 2.1.4: 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 evidence-based practice principles, 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 live patient practical examinations are required throughout the program.

The program does not have assessments that evaluate resident performance based on established measures. In addition, the program has not integrated a variety of assessments that evaluate resident initial and advancing progression as defined by Sports DRP. Last, the program has not demonstrated it administers at least 1 written examination and 2 live patient examinations throughout the duration of the program.

8) Standard 2: Curriculum Design and Instruction 2.1.5: Residency Programs – Domains of Competence: The program integrates the following competencies when evaluating achievement of the participant's goals and outcomes. The program monitors and measures the achievement of the participant's seven domains of competence.

The program has not demonstrated that it integrates and evaluates resident achievement of domains of competence within a sports residency curriculum.

9) Standard 2: Curriculum Design and Instruction 2.3: Program Delivery: The program is conducted in settings or affiliated clinical sites where management and professional staff are committed to seeking excellence in education and patient care by demonstrating substantial compliance with professionally developed and nationally applied practice and operational standards while maintaining sufficient resources to achieve the mission, goals, and outcomes.

The program has not demonstrated it ensures all settings and affiliated practice sites demonstrate substantial compliance with professional developed and nationally applied practice and operational standards. In addition, the program has not demonstrated that is assures sufficient resources to achieve the mission, goals, and outcomes.

10) Standard 2: Curriculum Design and Instruction 2.4: Mentoring Focus: The program emphasizes the professional benefit of advanced clinical education through mentoring. The curriculum offers the participant individualized guidance on emerging and current best practices, patient care, and evidence-based practice 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.

The program has not described its mentoring process for advancing a resident's knowledge and skills within the sports specialty area of practice.

11) **Standard 3: Program Delivery, Director, and Faculty 3.3.8: Participant Tracking:** The program maintains a record of current and past program participants.

The program has not described a process for tracking residents over time.

12) **Standard 3: Program Delivery, Director, and Faculty 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 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.

The program did not include all 16 faculty members on Exhibit 9: Faculty Qualifications Chart.

13) Standard 3: Program Delivery, Director, and Faculty 3.6.2: Qualifications: Collectively, program faculty have the qualifications necessary to oversee and initiate the learning experiences of the residency/fellowship program.

The program did not demonstrate how all residents will receive mentoring from faculty who possess ABPTS board-certification within sports physical therapy.

14) **Standard 4: Program Commitment and Resources 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.

The program has not demonstrated a process to ensure educational resources remain current and relates to sports.

15) **Standard 5: Assessment, Achievement, Satisfaction, and Effectiveness 5.1: Program Assessment:** The program implements a plan and collects data from <u>key indicators</u> used to annually evaluate the achievement of its mission, goals, and outcomes.

The program has not demonstrated the annual data collected demonstrates achievement of the program's mission, goals, and outcomes within the sports area of practice.

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16) Standard 5: Assessment, Achievement, Satisfaction, and Effectiveness 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.

The program did not identify benchmarks used to determine the level to which residents achieve program outcomes specific to sports area of practice.

17) Standard 5: Assessment, Achievement, Satisfaction, and Effectiveness 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.

The program did not demonstrate evidence of collecting data that supports continued achievement of the program's mission, goals, and outcomes specific to sports physical therapy.

Denial of candidacy status is an appealable decision. A developing program may appeal this adverse decision following procedures detailed in 6.4 of the ABPTRFE Processes and Procedures.

Per ABPTRFE Processes and Procedures 2.5.2, if a developing program denied candidacy decides to continue pursuing ABPTRFE-accredited status, the program is required to revise the Self-Evaluation Report and Exhibits incorporating feedback from the ABPTRFE Accreditation Report Rubric and reapply for initial accreditation following ABPTRFE's published procedures.

ABPTRFE's approach to accreditation emphasizes practices of continuous improvement and quality enhancement driven by the program's mission. The accreditation process does not assume a single model for improvement but reflects an understanding that continuous improvement is a process that can follow various paths to demonstrate excellence in residency and fellowship education. Should you have any questions, please feel free to contact ABPTRFE staff.

Sincerely,

Alice Holder, PT, DPT, MHS

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Board-Certified Clinical Specialist in Geriatric and Neurologic Physical Therapy Chair, American Board of Physical Therapy Residency & Fellowship Education