

Name: American Physical Therapy Association	Meeting Date: 02/07/2018	Response Submit Date: 11/07/2017	Status: Final Review	Type: Renewal Petition
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U.S. Department of Education

Staff Report

to the

Senior Department Official

on

Recognition Compliance Issues

Recommendation Page

1. **Agency:** American Physical Therapy Association
2. **Action Item:** Renewal Petition
3. **Current Scope of Recognition:** The accreditation and preaccreditation ("Candidate for Accreditation") in the United States of physical therapist education programs leading to the first professional degree at the master's or doctoral level and physical therapist assistant education programs at the associate degree level and for its accreditation of such programs offered via distance education.
4. **Requested Scope of Recognition:** Same as above.
5. **Date of Advisory Committee Meeting:** February 07, 2018
6. **Staff Recommendation:** Continue the agency's current recognition and require the agency to come into compliance within 12 months, and submit a compliance report 30 days after the 12 month period that demonstrates the agency's compliance with the issues identified below.
7. **Issues or Problems:** It does not appear that the agency meets the following sections of the Secretary's Criteria for Recognition. These issues are summarized below and discussed in detail under the Summary of Findings section. -- The agency must provide documentation to demonstrate it has taken an adverse action and enforced the timeframes required by this section. [§602.20(a)] -- The agency must provide documentation to demonstrate that it clearly communicates to a program when it grants an extension for good cause. [§602.20(b)]

Executive Summary

Part I: General Information About The Agency

The American Physical Therapy Association (APTA) is a professional association of more than 80,000 physical therapists, physical therapy assistants, and students of physical therapy. The Commission on Accreditation in Physical Therapy Education (CAPTE) of the APTA is a programmatic accreditor. CAPTE membership is voluntary and its principal purpose is to accredit higher education programs. CAPTE accredits and preaccredits physical therapist (PT) education programs leading to the first professional degree at the master's or doctoral level and physical therapist assistant (PTA) education programs at the associate degree level.

CAPTE accreditation of PT and PTA programs is required for access to the Scholarships for Disadvantaged Students (SDS) Program which was established via the Disadvantaged Minority Health Improvement Act of 1990, Section 737 of the Public Health Service Act. As a programmatic, non-Title IV eligible accreditor, CAPTE is not required to meet the separate and independent requirements in the Secretary's Criteria for Recognition.

CAPTE currently accredits 202 PT programs, 274 PTA programs, and 74 preaccredited ("developing") programs throughout the United States, the District of Columbia, and its territories. In addition to the U.S. programs, the agency also recognizes PT programs in Canada and the United Kingdom, although these programs are outside the scope of the agency's recognition by the Secretary.

Recognition History

The Commission on Accreditation in Physical Therapy Education (CAPTE) of the American Physical Therapy Association (APTA) was

first recognized by the Secretary in 1977. In 1985, the Secretary granted an expansion of scope to the agency to include the preaccreditation of programs for the physical therapist and physical therapist assistant. The agency has been periodically reviewed and continued recognition has been granted after each review. The agency has evaluated programs offering courses using distance education methodology since 1994 and 1997 for the PT and PTA programs, respectively, and has been included within its scope since July 2002.

CAPTE was last reviewed for continued recognition at the fall 2012 meeting of the National Advisory Committee on Institutional Quality and Integrity (NACIQI). Both Department staff and the NACIQI recommended to the senior Department official to continue the agency's recognition and require it to come into compliance within 12 months, and submit a compliance report that demonstrates the agency's compliance with the issues cited in the staff report. The senior Department official, Acting Assistant Secretary David Bergeron, concurred with the recommendations. The compliance report was reviewed and accepted by both Department staff and NACIQI at the spring 2014 meeting.

Since the agency's last review, the Department has received no complaints and no 3rd party comments.

In conjunction with agency's petition, Department staff reviewed the agency's supporting documentation and observed a CAPTE meeting in April 2017.

Part II: Summary Of Findings

602.16(a)(1)(i) Student Achievement

(a) The agency must demonstrate that it has standards for accreditation, and preaccreditation, if offered, that are sufficiently rigorous to ensure that the agency is a reliable authority regarding the quality of the education or training provided by the institutions or programs it accredits. The agency meets this requirement if -

(1) The agency's accreditation standards effectively address the quality of the institution or program in the following areas:

(i) Success with respect to student achievement in relation to the institution's mission, which may include different standards for different institutions or programs, as established by the institution, including, as appropriate, consideration of course completion, State licensing examination, and job placement rates.

The agency's standards for student achievement are found within the PT and PTA standards and required elements. The agency applies the requirements to each program on an annual basis, and requires the program to address how effectively it meets its objectives and goals in its self-study.

Within the evaluation process, each program must develop goals and associated outcomes related to the program's mission, and develop comprehensive, formal and on-going processes to assess achievement of the goals. In addition, each program must assess the performance of the graduates in their clinical practice, and have mechanisms to obtain feedback from graduates about how well prepared they were for practice and from employers about how well the graduates function in their clinical positions to inform curricula and student service improvement.

With regards to outcomes data, the agency reviews graduation rates, licensure pass rates, and employment rates within the accreditation process. The annual report requires self-reporting of attrition rates and credentialing examination pass rates. On a two-year average, the agency has set a graduation rate of 60% for PTA programs and 80% for PT programs, licensure pass rate of 85%, and employment rate of 90%. Although the agency provided its outcomes benchmarks, the agency did not describe how it determined that the use of those rates are sufficiently rigorous to ensure that the agency is a reliable authority regarding the education provided by the programs it accredits.

In addition, the agency states that CAPTE reserves the right to request that a program provide verification by an external source of a program's student achievement data that CAPTE relies on, in part, in making an accreditation decision. Since this new requirement was effective January 2017, the agency had not had an opportunity to implement it prior to submitting its petition. Department staff requests that the agency submit documentation of implementation in response to the draft staff analysis, if available.

The agency provided extremely limited documentation to demonstrate the consistent application of its student achievement standards. Specifically, the agency provided documentation of the applicable self-study sections and site visit report for one PT program. Although the documentation demonstrates the review of the program's student achievement assessment processes, procedures, and outcomes, the submission of the review of only one program does not demonstrate that the agency conducts such reviews consistently. In addition, the agency did not provide any documentation regarding the review of such information by CAPTE. Therefore, the agency must provide additional documentation to demonstrate systematic implementation of its student achievement standards.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided information and documentation on the qualifications, selection, and training of its appeals panel members. Per the agency's rules, appeal panel members are selected from the roster of site visitors and prior CAPTE members. The agency's rules define the qualifications for the appeal panel members, thus ensuring that it includes an educator, practitioner, and public member, as required by regulation. The agency provided documentation (attached) of its current appeal panel pool, as well as the members of the last two appeals held by the agency. The agency also provided information and documentation of its comprehensive training for appeal panel members.

602.16(a)(1)(iii) Faculty**(a)(1)(iii) Faculty.**

The agency has clear and specific expectations regarding faculty contained in Section 4 of its standards and required elements for both the PT and PTA programs regardless of delivery mode (traditional or distance). The standards are sufficiently detailed and clear to assess faculty in verifiable ways. Specifically, the agency requires that all faculty members possess education, licensure, and clinical expertise backgrounds appropriate for their role in the program and to meet the mission of the institution. The agency provides the specific qualification expectations for each role (core faculty member, clinical faculty member, program administrator and academic coordinator of clinical education). In addition, the agency considers the faculty both individually and collectively to determine that they are capable of providing a quality PT or PTA program.

The agency provided extremely limited documentation to demonstrate the consistent application of its faculty standards. Specifically, the agency only provided documentation of the applicable self-study sections and team report for one PT program. Although the documentation demonstrates the program addressed the self-study in the areas related to faculty and it was reviewed by the site team, the lack of a comprehensive review by the agency (to include CAPTE decision letter) in this area, as well as the documentation submission for only one program, does not demonstrate that the agency conducts reviews consistently and enforces its standards. Therefore, the agency must provide additional documentation to demonstrate systematic implementation of its faculty standards.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided its policies regarding the composition of the appeals panel (in Section 602.15(a)(2)). Per the agency's rules, appeal panel members are selected from the roster of site visitors and prior CAPTE members. The agency's rules define the qualifications for the appeal panel members, thus ensuring that it includes an educator, practitioner, and public member, as required by regulation. The agency also provided documentation (attached) to demonstrate implementation of the policy.

602.16(a)(1)(iv) Facilities/Equipment/Supplies**(a)(1)(iv) Facilities, equipment, and supplies.**

The agency has clear and specific expectations regarding facilities, equipment, and supplies contained in Section 8 of its standards and required elements for both the PT and PTA programs. The agency's standards are sufficiently specific to ensure that students have a safe and adequate space, and equipment and supplies to complete the program. The agency separately evaluates a program's library resources, laboratory equipment and supplies, and technology resources and infrastructure in this area. The standards are applicable to facilities, equipment, and supplies for all programs at all levels regardless of delivery mode (traditional or distance).

The agency provided extremely limited documentation to demonstrate the consistent application of its facilities, equipment, and supplies standards. Specifically, the agency only provided documentation of the applicable self-study section and team report for one PTA program, and it does not appear from the documentation that the program offers any distance education. Although the documentation demonstrates the program addressed the self-study in the area related to facilities, equipment, and supplies and it was reviewed by the site team, the lack of a comprehensive review by the agency (to include CAPTE decision letter) in this area, as well as the documentation submission for only one program, does not demonstrate that the agency conducts reviews consistently and enforces its standards. Therefore, the agency must provide additional documentation to demonstrate systematic implementation of its facilities, equipment, and supplies standards.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided its policies regarding the composition of the appeals panel (in Section

602.15(a)(2)), which states that, when convened, the appeals panel includes one representative of the public. The agency also included documentation (attached) on how it ensures that any public members on an appeals panel meet the required definition to demonstrate compliance with this section.

602.16(a)(1)(ix) Student Complaints

(a)(1)(ix) Record of student complaints received by, or available to, the agency.

The agency has clear and specific expectations regarding student complaints contained in Sections 3 & 5 of its standards and required elements for both the PT and PTA programs. The agency's standards are sufficiently specific and require programs to have a complaint policy and make it readily available. Programs are required to maintain a written record of all complaints and their disposition.

The agency provided extremely limited documentation to demonstrate the consistent application of its student complaints standards. Specifically, the agency only provided documentation of the applicable self-study sections and team report for one PTA program. Although the documentation demonstrates the program addressed the self-study in the areas related to student complaints and it was reviewed by the site team, the lack of a comprehensive review by the agency (to include CAPTE decision letter) in this area, as well as the documentation submission for only one program, does not demonstrate that the agency conducts reviews consistently and enforces its standards. Therefore, the agency must provide additional documentation to demonstrate systematic implementation of its student complaints standards.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided documentation of implementation of its conflict of interest policy for all entities listed in this section. For the appeals panel, the agency provided documentation of a recusal of a potential member due to a conflict of interest, and a program noting conflicts of interest with potential members. For administrative staff, the agency provided documentation of recusal of staff during the discussion of a program due to a conflict of interest. The agency noted that it does not employ consultants nor any other agency representatives.

602.16(a)(1)(vi) Student Support Services

(a)(1)(vi) Student support services.

The agency has clear and specific expectations regarding student support services contained in Sections 2, 5, 6, & 8 of its standards and required elements for both the PT and PTA programs regardless of delivery mode (traditional or distance). The agency requires that programs inform students of and provide access to the student support services that are provided to other students in the institution, and separately evaluates a program's support of students in the areas of library resources, academic services, counseling services, health services, disability services, and financial aid services.

The agency provided extremely limited documentation to demonstrate the consistent application of its student support services standards. Specifically, the agency only provided documentation of the applicable self-study sections and team report for one PT program, and that program does not appear to offer distance education. Although the documentation demonstrates the program addressed the self-study in the areas related to student support services and it was reviewed by the site team, the lack of a comprehensive review by the agency (to include CAPTE decision letter) in this area, as well as the documentation submission for only one program, does not demonstrate that the agency conducts reviews consistently and enforces its standards. Therefore, the agency must provide additional documentation to demonstrate systematic implementation of its student support services standards.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided additional documentation to demonstrate systematic implementation of its student achievement standards. The agency also provided additional information concerning how it determines that its standards and review of student achievement are sufficiently rigorous to ensure that the agency is a reliable authority regarding the education provided by the programs it accredits. Specifically, the agency described how it developed the current bright lines for student achievement rates, and the various processes both within an accreditation review and in between reviews to ensure compliance. In addition, the agency provided documentation of implementation of the new policy that allows CAPTE to request that a program provide verification by an external source of the program's student achievement data.

602.16(a)(1)(vii) Recruiting & Other Practices

(a)(1)(vii) Recruiting and admissions practices, academic calendars, catalogs, publications, grading, and advertising.

The agency has clear and specific expectations regarding recruiting and admissions contained in Sections 5 & 8 of its standards and required elements for both the PT and PTA programs, as well as within the agency's integrity rules. The agency evaluates its programs for the accuracy and comprehensiveness of the information provided to prospective students and the public. Programs are required to provide information about academic calendars, grading policies, financial aid, the program's accreditation status, the process to register a complaint with CAPTE, and outcome information, to prospective and enrolled students

The agency provided extremely limited documentation to demonstrate the consistent application of its recruiting and admissions standards. Specifically, the agency only provided documentation of the applicable self-study section and team report for one PTA program, as well as the related exhibits from the program. Although the documentation demonstrates the program addressed the self-study in the areas related to recruiting and admissions and it was reviewed by the site team, the lack of a comprehensive review by the agency (to include CAPTE decision letter) in this area, as well as the documentation submission for only one program, does not demonstrate that the agency conducts reviews consistently and enforces its standards. Therefore, the agency must provide additional documentation to demonstrate systematic implementation of its recruiting and admissions standards.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided additional documentation to demonstrate systematic implementation of its curricula standards, as well as documentation of the review of programs offered via distance education. The documentation included review of such information by the CAPTE board.

602.16(a)(2) Preaccreditation Standards

(a)(2) The agency's preaccreditation standards, if offered, are appropriately related to the agency's accreditation standards and do not permit the institution or program to hold preaccreditation status for more than five years.

The agency has attested that there has been no changes to the policies or practices since it's last review before the NACIQI.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided additional documentation to demonstrate systematic implementation of its faculty standards, as well as documentation regarding the review of such information by the CAPTE board.

602.16(b)(c) Distance/Correspondence Education

(b) If the agency only accredits programs and does not serve as an institutional accrediting agency for any of those programs, its accreditation standards must address the areas in paragraph (a)(1) of this section in terms of the type and level of the program rather than in terms of the institution.

(c) If the agency has or seeks to include within its scope of recognition the evaluation of the quality of institutions or programs offering distance education or correspondence education, the agency's standards must effectively address the quality of an institution's distance education or correspondence education in the areas identified in paragraph (a) (1) of this section. The agency is not required to have separate standards, procedures, or policies for the evaluation of distance education or correspondence education;

The agency has attested that there has been no changes to the policies or practices since it's last review before the NACIQI.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided additional documentation (in Section 602.16(a)(1)(ii) and (iii)) to demonstrate systematic implementation of its facilities, equipment, and supplies standards, as well as documentation regarding the review of such information by the CAPTE board.

602.17(a) Mission & Objectives

(a) Evaluates whether an institution or program--

- (1) Maintains clearly specified educational objectives that are consistent with its mission and appropriate in light of the degrees or certificates awarded;**
- (2) Is successful in achieving its stated objectives; and**
- (3) Maintains degree and certificate requirements that at least conform to commonly accepted standards;**

The agency's programs must have a mission that is clearly stated and that defines its purpose, as outlined in Sections 1 & 2 of the agency's standards and required elements. The agency's standards are clear in requiring that a program must have a clearly stated mission and objectives that are consistent with the mission of the institution, as well as specified terminal competencies. The standards also require programs to review of the objectives, and the degree to which the objectives are achieved, within the program effectiveness assessment. The agency evaluates the appropriateness of the mission and program effectiveness assessment during the self-study review and on-site visit and provided documentation of such evaluation. The agency has qualitative and quantitative program effectiveness and student outcomes measures by which it assesses a program's success in achieving its mission and objectives.

In addition, the agency requires the use of program requirements that are developed by CAPTE and which meet APTA licensure requirements, and therefore meet commonly accepted practice in the higher education community.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided additional documentation (in Section 602.16(a)(1)(iii) and this section) to demonstrate systematic implementation of its student complaints standards, as well as documentation regarding the review of such information by the CAPTE board.

602.17(b) Self-Study

(b) Requires the institution or program to prepare, following guidance provided by the agency, an in-depth self-study that includes the assessment of educational quality and the institution's or program's continuing efforts to improve educational quality;

The agency has attested that there has been no changes to the policies or practices since it's last review before the NACIQI.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided additional documentation to demonstrate systematic implementation of its administrative and fiscal capacity standards, as well as documentation regarding the review of such information by the CAPTE board.

602.17(c) On-Site Review

(c) Conducts at least one on-site review of the institution or program during which it obtains sufficient information to determine if the institution or program complies with the agency's standards;

The agency has attested that there has been no changes to the policies or practices since it's last review before the NACIQI.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided additional documentation (in Sections 602.16(a)(1)(iii) and (vii)) to demonstrate systematic implementation of its student support services standards, as well as documentation regarding the review of such information by the CAPTE board.

602.17(d) Response to Site Review

(d) Allows the institution or program the opportunity to respond in writing to the report of the on-site review;

The agency has attested that there has been no changes to the policies or practices since it's last review before the NACIQI.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided additional documentation (in Section 602.16(a)(1)(iii) and this section) to demonstrate systematic implementation of its recruiting and admissions standards, as well as documentation regarding the review of such information by the CAPTE board.

602.23(b) Opportunity for 3rd-party Comments

(b) In providing public notice that an institution or program subject to its jurisdiction is being considered for accreditation or preaccreditation, the agency must provide an opportunity for third-party comment concerning the institution's or program's qualifications for accreditation or preaccreditation. At the agency's discretion, third-party comment may be received either in writing or at a public hearing, or both.

The agency has attested that there has been no changes to the policies or practices since it's last review before the NACIQI.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided comprehensive and additional documentation of all monitoring mechanisms used to the review the continued compliance of programs. Specifically, the agency provided additional information and documentation to demonstrate consistent review and action taken as a result of the review of the annual report. The agency provided completed copies of its annual report to demonstrate that it collects key data and indicators, including fiscal information and measures of student achievement, to enable the agency to analyze and identify problems with a program's continued compliance with agency standards.

The agency also provided additional information and documentation on the use of semi-annual reports of licensure pass rates, and focused and/or unannounced site visits. The agency provided documentation that the Federation of State Boards of Physical Therapy provides CAPTE with licensure pass rates twice a year to monitor licensure pass rates. As the data can be old when reviewed, the agency will request additional and current information and documentation on licensure pass rates prior to taking further action, should the provided data fail to meet agency benchmarks. The agency also provided documentation of its use of a focused visit to collect additional information to assist CAPTE to make an appropriate decision about the status of the program, as part of its monitoring mechanism.

602.25(a-e) Basic Due Process Requirements

The agency must demonstrate that the procedures it uses throughout the accrediting process satisfy due process. The agency meets this requirement if the agency does the following:

- (a) Provides adequate written specification of its requirements, including clear standards, for an institution or program to be accredited or preaccredited.**
- (b) Uses procedures that afford an institution or program a reasonable period of time to comply with the agency's requests for information and documents.**
- (c) Provides written specification of any deficiencies identified at the institution or program examined.**
- (d) Provides sufficient opportunity for a written response by an institution or program regarding any deficiencies identified by the agency, to be considered by the agency within a timeframe determined by the agency, and before any adverse action is taken.**
- (e) Notifies the institution or program in writing of any adverse accrediting action or an action to place the institution or program on probation or show cause. The notice describes the basis.**

The agency has attested that there has been no changes to the policies or practices since it's last review before the NACIQI.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided information and documentation of the revision to its policies to meet the requirements of this section. The agency stated that since the policy revision, it has not had the opportunity to implement it. However, the agency did not provide information or documentation about the implementation of its previous policy in this area, nor did it indicate that it has never taken an adverse action against a program. The agency provided two comprehensive examples in Section 602.20(b), but neither of those included an adverse action nor enforcement of timeframes required by this section to demonstrate compliance.

602.25(f) Specific Appeals Requirements

(f) Provides an opportunity, upon written request of an institution or program, for the institution or program to appeal any adverse action prior to the action becoming final.

(1) The appeal must take place at a hearing before an appeals panel that--

(i) May not include current members of the agency's decision-making body that took the initial adverse action;

(ii) Is subject to a conflict of interest policy;

(iii) Does not serve only an advisory or procedural role, and has and uses the authority to make the following decisions: to affirm, amend, or reverse adverse actions of the original decision-making body; and

(iv) Affirms, amends, reverses, or remands the adverse action. A decision to affirm, amend, or reverse the adverse action is implemented by the appeals panel or by the original decision-making body, at the agency's option. In a decision to remand the adverse action to the original decision-making body for further consideration, the appeals panel must identify specific issues that the original decision-making body must address. In a decision that is implemented by or remanded to the original decision-making body, that body must act in a manner consistent with the appeals panel's decisions or instructions.

(2) The agency must recognize the right of the institution or program to employ counsel to represent the institution or program during its appeal, including to make any presentation that the agency permits the institution or program to make on its own during the appeal.

The agency has attested that there has been no changes to the policies or practices since it's last review before the NACIQI.

Analyst Remarks to Response:

In response to the draft staff analysis, the agency provided two examples of its use of good cause extensions. However, it is not clear in those two examples that CAPTE specifically reviewed each program for a good cause extension under its rules nor that each program was informed that it was granted a good cause extension.

For example 1, the program was first found out of compliance in November 2013 (page 53). In the November 2015 commission decision letter (page 916), the agency notified the program that it had continued deficiencies and must resolve the deficiencies by March 2016, but there was no indication of the grant of a good cause extension. In the May 2016 commission decision letter (page 934), the agency notified the program that it has resolved its deficiencies based on a compliance report. Example 2 provided the same documentation as example 1 - notification of out of compliance in November 2012 (page 2); notification of continued deficiencies in November 2104, with no indication of a good cause extension (page 198); and resolution of all deficiencies in November 2016 (page 225). The agency must clearly communicate to a program whether it has been granted an extension for good cause or not, if it does not take immediate adverse action as required by this criterion.

Part III: Third Party Comments

The Department did not receive any written third-party comments regarding this agency.

