Introducing the 2020 Accreditation Standards for Canadian Entry-to-Practice Physiotherapy Education Programs

March 2021

PEAC is proud to launch our revised (2020) Accreditation Standards for Canadian Entry-to-Practice Physiotherapy Education Programs. These standards will be applied to accreditation reviews scheduled after June 2022.

We invite you to read the Acknowledgements where we recognize all those who contributed to the review, revision, development, and approval of these standards. We are grateful for their professionalism, their expertise, and above all their commitment to this project despite the challenges that presented themselves during the COVID-19 pandemic.

Methodology

PEAC initiated the standards review process with the recruitment of the members of the Standards Review Committee in late 2019. A survey was circulated to all key accreditation stakeholders in early 2020 as part of an environmental scan to inform required changes to the standards. Consultations were held and input sought from the Black Physiotherapy Association and the Indigenous Health Sub-Committee of the Global Health Division of the Canadian Physiotherapy Association. A second survey was circulated to all key accreditation stakeholders in late 2020 to validate the draft 2020 Accreditation Standards content.

Upon approval of the 2020 Accreditation Standards for Canadian Entry-to-Practice Physiotherapy Education Programs by the Board of Directors of PEAC, the standards were translated, and the translation was independently verified. A list of resources and references used by the Standards Review Committee during the standards review project is appended to this report for information.

Standards and criteria

Many of the accreditation criteria within the standards remain substantively unchanged from the 2012 Accreditation Standards. The substantive changes are described below.

Standard 1

Standard 1 retains criteria 1.1-1.6. There are non-substantive changes to the criteria statements themselves. Additional clarifications have been added to the examples of evidence and the explanatory notes. Substantive changes include:

Criterion1.2:

- Required Evidence now includes confirmation of registration of the entry-to-practice program director with the regulatory body in the jurisdiction of the university.
- Examples of evidence and explanatory notes suggest that evidence demonstrating the program director's leadership competencies and a positive organizational culture within the program would assist in illustrating compliance.

Criterion 1.3:

Required Evidence explains that budgetary information to support compliance with
this criterion can be provided at the level of the entry-to-practice program, at the
level above the program, or a combination of both. The key to achieving compliance
is the provision of evidence to support that the entry-to-practice program's needs are
met and that the program is sustainable over the current and next two fiscal years.

Criterion 1.6:

• Examples of evidence and explanatory notes illustrate that this criterion's focus has shifted away from relationships with clinical placement sites (see criterion 4.2 below) toward relationships within and outside the program and the university.

Standard 2

Standard 2 retains criteria 2.1-2.6. There are non-substantive changes to the criteria statements themselves. Additional clarifications have been added to the *examples of evidence* and the *explanatory notes*. Substantive changes include more details listed within the *Required Evidence* for criteria 2.3, 2.4, and 2.6 to assist programs in providing evidence of compliance.

Standard 3

Standard 3 retains criteria 3.1-3.6. There are non-substantive changes to the criteria statements themselves. The terms "faculty" and "instructors" are defined for the purposes of the standards.

Standard 4

Standard 4 has undergone several substantive changes. These include:

Criterion 4.2:

• The focus of this criterion now is on the relationships with clinical placement sites and preceptors (moved from criterion 1.6 above) and the quality and consistency of clinical placement experiences.

Criterion 4.3:

This criterion is now considered a Core criterion. It has been revised to align with the National Physiotherapy Entry-to-Practice Curriculum Guidelines (CCPUP, 2019).
 The criterion statement itself is broad; the Required Evidence describes what is expected to demonstrate compliance. The Required Evidence will be adjusted to remain in alignment with Clinical Education Experiences when and if the Curriculum Guidelines are reviewed and revised.

Criteria 4.4, 4.5, 4.6:

These criteria have been re-organized for clarity and to eliminate overlap. The focus
of criterion 4.4 is the framework for student assessment, communication of those
expectations to students, and fairness in those policies. The focus of criterion 4.5 is
student progress, appeals, and remediation. The focus of criterion 4.6 is supports for
students who are struggling or who request academic accommodations.

Standard 5

Standard 5 (5.1-5.5) has undergone several substantive changes and now includes one additional criterion. Substantive changes include:

Criterion 5.2:

While there is no substantive change to the criterion statement itself, this criterion
now lists Required Evidence to describe what is expected to demonstrate
compliance. The expectations have broadened to ensure the program considers the
rights and safety of all those involved in the program and considers any regulatory
reporting requirements following an incident.

Criterion 5.4:

 This criterion in the previous standards (which required a program to report on maintenance of accreditation status) has been removed.

New Criteria 5.4 and 5.5:

These two new criteria represent the most substantive changes to the standards. They were developed with a view to effect change in physiotherapy education and practice with respect to social justice, human rights, equity, diversity, and inclusion.

The focus of criterion 5.4 is Canada's colonial history and how programs engage
in ongoing authentic and reciprocal relationship-building with Indigenous Peoples
and communities. Programs will be asked to demonstrate a commitment to
relational accountability; evidence of compliance can be multi-faceted (see
below).

 The focus of criterion 5.5 is the program's commitment to social justice and antioppressive practices within educational and healthcare environments. Programs will be asked to demonstrate how these principles are reflected throughout the fabric of the program; evidence of compliance can be multi-faceted (see below).

Given how far-reaching and complex these concepts and principles are, PEAC recognizes that education programs, peer reviewers, and accreditation decision-makers will need support to interpret and apply these criteria and to identify the evidence needed to illustrate compliance. We recognize that every program will be at a different stage of compliance with these criteria, depending on their own context, the support/initiatives at the university level, the communities they serve and connect with, and the general demographics where they are situated. Demonstrating compliance with these criteria will potentially require significant changes within programs and the results of these changes will not be evident immediately.

Both criteria are worded in a way that allows for programs to be taking steps towards these changes ("demonstrates a commitment to…") at the time of an accreditation review. Programs may then be asked to provide ongoing Progress Reports to demonstrate ongoing change. These criteria may be assigned a level of compliance of Partially Met while a program continues to make change. An assignment of this level of compliance allows for programs to be awarded an overall accreditation status of Accreditation – Fully Compliant. Evidence of ongoing progress towards compliance will be required in subsequent Progress Reports to maintain this status.

Because demonstrating compliance with these two criteria will involve evidence from multiple aspects of the program, evidence of compliance will need to be multi-faceted. To assist programs in identifying where evidence may already exist and to suggest to programs where they may choose to make changes towards stronger compliance, there are new *examples of evidence* and *explanatory notes* relevant to criteria 5.4 and 5.5 in many of the criteria in Standards 1 through 5.

PEAC is discussing how best to prepare guidance documents that describe in more detail the intent of these new criteria and that establish expectations to enable consistent interpretation and application by education programs, peer reviewers, and accreditation decision-makers.

Standard 6

All criteria within Standard 6 have been revised to reflect the essential competencies and the entry-to-practice milestones in the *Competency Profile for Physiotherapists in Canada (NPAG, 2017)*. Evidence of compliance will be required at the level of the criterion/essential competency (see FORM-SSR-6). It is not necessary for evidence of compliance with every key indicator to be submitted for the criterion to be assigned a

level of compliance of Fully Met. The key indicators are included as guidance to programs, peer reviewers, and accreditation decision-makers about curricular evidence that demonstrates the required level of competency at entry-to-practice.

In summary

We at PEAC extend our thanks to all who provided their input during the revision of the standards. We look forward to working with education programs, peer reviewers, and committee members as we prepare to implement these standards.

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