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STANDARD 1: PROGRAM GOVERNANCE AND RESOURCES

Accreditation documentation must explicitly describe and include evidence that:

The program has adequate resources and works closely with the university and practice community to identify changing health needs and prepare a workforce that can respond to and meet community assets and needs.

CRITERION 1.1 (CORE ^G)	EXAMPLES OF EVIDENCE ^G
<p>The program^G faculty^G have responsibility for governance of the program and the authority to ensure program policies are implemented.</p>  <p>Essential Concept: Within established university governance processes, decisions about program policies and governance are made by the program and not overruled.</p>	<p>May include, but not limited to:</p> <ul style="list-style-type: none"> → policies and procedures related to governance of the academic program → policies and procedures related to development and implementation of the program policies and procedures → university and program organizational charts → documented terms of reference and defined membership of committees
<p>Explanatory notes The evidence would adequately illustrate the criterion by demonstration and commentary such as:</p> <ul style="list-style-type: none"> ➤ The university supports or permits the director and/or program faculty to <ul style="list-style-type: none"> a) be responsible for governance of the physiotherapy education program, and b) exercise responsibility for and authority over the program while operating within the established university governance processes. 	

PEER REVIEW TEAM DESCRIPTION/ RATIONALE	SOURCES OF EVIDENCE
<p>The MPT program is accountable to the Faculty of Medicine via the School of Rehabilitation Sciences. The program is also governed by policies within the Department of Graduate Studies. MPT program governance is the shared responsibility of the Associate Dean of the School of Rehabilitation Sciences Program Director. The Associate Dean is an OT with a PhD and has been with the School for several years. The Program Director, who has been in the position since 2008 is a PT and also holds a PhD. Responsibilities are clearly delineated with the Associate Dean focusing on external relationships for the School within the university and external stakeholders. The Director manages the internal administration of the program. Both report to the Dean of Medicine. All stakeholders acknowledged this model works well. The</p>	<p>Self Study Report:</p> <p>p. 2 SSR Introduction Org Charts Appendices 1.1 a, f, h, l</p> <p>Interviews:</p> <p>Dean Associate Dean Program Director Faculty and staff</p>

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PEER REVIEW TEAM DESCRIPTION/ RATIONALE	SOURCES OF EVIDENCE	
<p>Associate Dean is on the Finance Committee of the Faculty of Medicine and is a member of some committees to ensure the program is represented in decision making.</p> <p>Faculty members and the Director are responsible for the governance of the program. The program has a number of committees comprising faculty members, external faculty and clinical faculty who are responsible for governance of the program.</p> <p>Faculty members are well represented on a range of school, faculty, graduate studies and University committees.</p>		
Criterion Fully Met ___X___	Criterion Partially Met _____	Criterion Not Met _____

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CRITERION 1.2 (CORE)	EXAMPLES OF EVIDENCE
<p>The director of the program has a physiotherapy university degree and provides leadership for the faculty, staff, and students, and management of the program. The director has a faculty appointment and the appropriate qualifications, including related experience in higher education, research, and administration. The director has sufficient authority and recognition to manage and represent the program.</p> <p> Essential Concept: The program director has a physiotherapy degree and a faculty appointment and is recognized as a leader.</p>	<p>May include but not limited to:</p> <ul style="list-style-type: none"> → position description for program director → curriculum vitae for program director → policies and procedures for selection process of the program director

Explanatory notes

The evidence would adequately illustrate the criterion by demonstration and commentary such as:

- Documents and information which demonstrate the leadership and positive outcomes of the program director with respect to:
 - educational and program planning strategy
 - curriculum content, design and evaluation
 - facilitating change
 - working with program and university priorities
- The rights and privileges of the program director are commensurate with other faculty in the university having comparable roles and responsibilities.

PEER REVIEW TEAM DESCRIPTION/ RATIONALE	SOURCES OF EVIDENCE
<p>The Program Director is highly capable and experienced. Her leadership exceeds the standard and informs remarkable development and accomplishment in the program. Her qualifications and experience are appropriate to this position of leadership.</p> <p>Interviews with all faculty, staff, part time instructors, employers, etc., emphasized repeatedly the Program Director's abilities and their loyalty to her.</p> <p>The position description (role, responsibilities, accountability) for the Program Director position, and the governance structure demonstrate appropriate level of authority for the position.</p>	<p>Self Study Report:</p> <p>Appendix 1.2 c Organizational Chart Appendix 1.2 a position description Program Director Appendix 1.2 b CV Program Director</p> <p>Interviews:</p> <p>Faculty Staff Part time instructors Employers</p> <p>Preliminary review response Appendix 1.3e</p>

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<p>Medicine and graduate studies. Faculty members have input into budget decisions through consultation with the Program Director and also through the Academics Committee and Program Advisory Committee.</p>	<p>Appendix 1.3 b – Budget 2019, draft budget 2020 Appendix 1.3 c – Budget Priorities planning committee TOR and minutes from 2017/2018 – see highlighted sections Appendix 1.3 d – Academics Committee TOR and minutes 2017 – see highlighted sections Appendix 1.3 e – Program Advisory Committee TOR and minutes 2017 –see highlighted sections Appendix 1.3 f – letter from the Dean Appendix 1.3 g – Program Director fiduciary responsibilities</p>	
<p>The program’s operating budget is determined by central university administration. The Associate Dean is responsible for budget planning with the Program Director and Faculty of Medicine financial staff. Budget proposals are developed by the Associate Dean and Program Director to present to the Faculty of Medicine.</p>		
<p>Evidence in the Self Study Report, and confirmed in onsite interviews, demonstrated that the program’s operating budget was in deficit the past two years, and is expected to be in deficit next year. While on paper this appears to be a concern, in practice the deficit is resolved each year by funds coming directly from the Faculty of Medicine which provides “bail out” funding on an annual basis to the program (and to other programs within the School of Rehabilitation Sciences)</p>		
<p><i>The ongoing deficit and the need to be ‘bailed out’ annually appear to put in question the sustainability of the program, and to put the program’s ability to continue to deliver the extremely high quality that it is presently, in peril. Moreover, without a more stable long term financial picture, it is not possible for the program to plan in advance for capital expenditures associated with CQI or maintenance of current services.</i></p>		
<p><i>NOTE – here the team has identified the concern. While the team has acknowledged above that at this time, the resources available are adequate for the program, they have clearly identified that there is not evidence of sustainability and therefore the team considers this to be concerning enough to warrant “Criterion Partially Met” level of compliance.</i></p>		
<p>Criterion Fully Met _____</p>	<p>Criterion Partially Met ___X___</p>	<p>Criterion Not Met _____</p>

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CRITERION 1.4	EXAMPLES OF EVIDENCE
<p>The program has adequate support staff and services to meet the needs of the faculty and students and achieve the goals of the program.</p>  <p>Essential Concept: Support staff and services are sufficient to maintain program delivery.</p>	<p>May include but not limited to:</p> <ul style="list-style-type: none"> → position descriptions, curriculum vitae → program organizational charts → information about available services, e.g., library staff resources, information technology support
<p><i>Explanatory notes</i></p> <p>The evidence would adequately illustrate the criterion by demonstration of and/or commentary such as:</p> <ul style="list-style-type: none"> ➤ The number and skills of administrative, secretarial and technical personnel assigned provides sufficient support services for the program. ➤ The program and/or university assure that support services are available to facilitate faculty and students in meeting their academic obligations related to the program. 	

PEER REVIEW TEAM DESCRIPTION/ RATIONALE	SOURCES OF EVIDENCE
<p>The School of Rehabilitation Sciences has one senior administrative person who oversees all the other support staff in the School, including those within the MPT Program.</p> <p>Duties of the support staff within the Program range from reception to assistant to the Program Director. The senior administrative staff person in the School determines the allocation of support staff to different duties, and can move people from one program to another according to workload demands. Administrative and secretarial staff assignment is determined by responsibilities, faculty in all three programs within the School (PT, OT and SLP) use the same pool of support staff. For example, one administrative support person handles admissions-related activities in all three programs, one person handles room bookings, etc.</p> <p>Faculty, staff, and students reported being well supported by the administrative team. The team themselves felt workloads and expectations were appropriate.</p> <p>There is a technician who provides classroom setup and support, as well as IT support staff in the Faculty of Medicine. Library support (onsite</p>	<p>Self Study Report</p> <p>Appendix 1.4 a Org Chart Appendix 1.4 b – Position descriptions Appendix 1.4 c – survey results – administrative staff satisfaction surveys. Appendix 1.4 d – Contact information for IT support describing range of access options Appendix 1.4 e – list of online resources for students, information re. Writing Help Centre and support from GSA</p> <p>Interviews</p> <p>Faculty Administrative staff Students Writing Help Centre staff</p>

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PEER REVIEW TEAM DESCRIPTION/ RATIONALE		SOURCES OF EVIDENCE		
<p>and online) was extensive, and this was supported through interviews with students and faculty. The librarian is a member of the Curriculum Committee.</p> <p>Students have access to Writing Help Centre and online resources. They are assigned a graduate advisor faculty member and have access to support through the graduate students association.</p>				
Criterion Fully Met _____ X	Criterion Partially Met _____	Criterion Not Met _____		

CRITERION 1.5		EXAMPLES OF EVIDENCE		
<p>The program provides adequate learning resources to enable students to achieve learning objectives.</p>		<p>May include but not limited to:</p> <ul style="list-style-type: none"> → inventory of educational tools and equipment for teaching the curriculum → size of classrooms, seminar rooms, laboratory space → lists of library and computer resources → policies and procedures for students regarding access to library/computer resources 		
	<p>Essential Concept: Program learning resources are sufficient for student learning.</p>			
<p><i>Explanatory notes</i></p> <p>The evidence would adequately illustrate the criterion by demonstration and commentary such as:</p> <ul style="list-style-type: none"> ➤ The library system provides access to current information in the fields of physiotherapy, biomedical sciences, clinical sciences, health services, population health and related areas. ➤ The students are aware of learning resources, have timely access to this information and are aware of the methods available to access it. ➤ The number and size of the classrooms accommodate the number of students in courses and the scheduling requirements of the program. ➤ Learning supplies and equipment are available and in good repair and safe operating condition for laboratory experiences, teaching, research and supportive activities (for example, preparation of instructional materials). ➤ Learning supplies and equipment reflect contemporary practice in physiotherapy, are sufficient in amount, and are available when needed. 				

PEER REVIEW TEAM DESCRIPTION/ RATIONALE		SOURCES OF EVIDENCE		
<p>The Program's teaching labs and classrooms are adequate teaching spaces, with lecture theatres, three large teaching labs and numerous tutorial rooms for small group learning. Classroom teaching resources and PT equipment appears</p>		<p>Self Study Report</p> <p>Appendices 1.5 a-e – Program space, list of PT equipment and resources.</p>		

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PEER REVIEW TEAM DESCRIPTION/ RATIONALE	SOURCES OF EVIDENCE	
<p>comprehensive. There is a clinical resource centre used for OSCE exams and interprofessional activities with standardized/ simulated patients or volunteer patients.</p> <p>Wireless internet is available throughout campus and students did not report any technology concerns related to wifi access.</p> <p>The SSR and faculty interviews suggest that students are made aware of learning resources during orientation week in first year; however interviews with first year students (just three months into the program) did not support this statement. <i>The PRT found evidence of access information regarding learning and other resources available to students in the Orientation Handbook but it was clear that students had not absorbed the information in that format. The Program may wish to consider providing the same information in a different way such that students are better informed.</i></p> <p>Students have access to labs during regular class hours but report <i>no access after hours despite having made requests</i> of the Program for extended hours in order to review material while studying. This was mentioned by both years of students and was a clear area of concern, especially with exams approaching.</p> <p><i>Note: the team has clearly identified where two of their concerns lie, in italics above.</i></p>	<p>Appendix 1.5 f – maintenance records for electrophysical equipment</p> <p>Interviews</p> <p>Students Faculty Lab assistants</p> <p>Preliminary review response p. 11</p>	
Criterion Fully Met _____	Criterion Partially Met __X__	Criterion Not Met _____

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CRITERION 1.6	REQUIRED EVIDENCE FOR 1.6.2
<p>The program develops and sustains cooperative relationships with others that contribute to the professional preparation of students including, but not limited to</p> <p>1.6.1 departments or units on campus</p> <p>1.6.2 clinical placement sites</p> <p>1.6.3 community agencies</p>  <p>Essential Concept: A network of relevant relationships exists, across a span of sectors.</p>	<p>In addition to other evidence, must include:</p> <ul style="list-style-type: none"> → orientation and training materials for preceptors → the template used for establishing a placement agreement/affiliation agreement, or memorandum of understanding with each clinical site
	EXAMPLES OF EVIDENCE FOR 1.6.1, 1.6.2, 1.6.3
	<p>May include but not limited to:</p> <ul style="list-style-type: none"> → documented means to promote and assess student learning outside the university → established policies and procedures for communication between the program and clinical placement or other off-campus sites → documented outcomes of communication between the program and educational sites both on and off-campus → documented means to promote relationships that advance interprofessional education^G
<p>Explanatory notes</p> <p>The evidence would adequately illustrate the criterion by demonstration and commentary such as:</p> <ul style="list-style-type: none"> ➤ The program has multiple partnerships established for student education both on and off campus ➤ The program arranges and maintains agreements with other educational sites or facilities such as those for distance learning, satellite programs, e-learning etc. ➤ An agreement, in a format acceptable to both parties, exists between the university and each site that accepts students for clinical placements. ➤ Communication (i.e., with all sites that have such agreements) occurs on a regular basis to provide information about policies and procedures and relevant information pertaining to student education and supervision. ➤ There is an orientation process to ensure that new clinical instructors understand the educational principles of the program, the tools for evaluation and the appropriate methods to provide educational experiences. 	

PEER REVIEW TEAM DESCRIPTION/ RATIONALE	SOURCES OF EVIDENCE
<p>The program has forged many collaborative relationships with other programs on campus including OT, SLP, nursing and kinesiology, and make use of these relationships when organizing opportunities in interprofessional education for its students. This was confirmed through interviews with students and with faculty within these other programs. The faculty has excellent links with other departments on campus, including anatomy, orthopedic surgery, and neurophysiology.</p>	<p>Self Study Report</p> <p>Standard 1 p. 45-49</p> <p>Appendix 1.6 a-e – orientation materials for preceptors – online training modules, agenda/minutes of annual preceptors meetings, results of preceptor surveys.</p> <p>Appendix 1.6 f – TOR CEAC and membership list.</p> <p>Appendix 1.6 g – Affiliation agreement (template)</p> <p>Interviews</p>

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<p>Strong relationships with the clinical community were reported and confirmed through interviews with preceptors, students and graduates. There are preceptors across a broad range of both private and public settings, and many of these settings support their clinicians to act as guest lecturers, as revealed through preceptor and employer interviews. Preceptors are invited to join the Clinical Education Advisory Committee (CEAC) to contribute to the ongoing quality assurance of clinical education in the program.</p> <p>The program holds an annual preceptor meeting for those interested and able to attend. An online training module describing the role of the preceptor and the details of the conceptual framework of the curriculum (what the students learn when) is provided to all preceptors and revised annually. With the transition to the ACP additional training opportunities were offered to preceptors. The interview with preceptors confirmed that they are well informed and feel connected to the program.</p>		<p>Faculty in other programs Students Preceptors Students Graduates Employers</p> <p>Preliminary review response p. 13 Appendix 1.6</p>
Criterion Fully Met <u> X </u>	Criterion Partially Met <u> </u>	Criterion Not Met <u> </u>

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Brief Summary of Standard 1

Please provide information about the program's strengths, any concerns, any recommendations, other comments

The program demonstrates strong leadership, a supportive administrative structure, and appropriate access to physical and learning resources for students to help them meet the learning goals of the program. There are clear links both within the University and outside to clinical sites to support learning.

Concerns:

1. The program budget is in deficit each year on paper, and funds are provided by the Faculty of Medicine to cover any shortfall. The faculty of Medicine does this for each program within the School of Rehabilitation Sciences as required. This does not provide evidence that the program is sustainable, and prevents the program from planning in advance for capital expenditures associated with CQI, or suggest that maintenance of the current level of quality in the program is possible.
2. Although the material was available to students in the Orientation Handbook, first year students reported being unaware of the learning resources available to them, and how to access it. The program may wish to consider providing this information differently in order to facilitate uptake.
3. Labs are available during regular class hours. Students report that lack of access to labs after hours is challenging especially when exams are approaching. They would like more availability of lab space to study and review practical material.