

FOREIGN QUALIFICATION RECOGNITION

A Review of International Physiotherapy Education Accreditation Systems

Prepared for the
College of Physical Therapists of Alberta

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1.0 ACCREDITATION OF PHYSIOTHERAPY EDUCATION PROGRAMS IN CANADA

Accreditation is both a process and a condition. The process involves an integrated system of continuous assessment, evaluation, and improvement to comply with specified standards. The condition or state of being accredited provides a credential to the public and regulators, assuring that a program has accepted and is fulfilling its commitment to educational quality.¹ Accreditation is an accepted method to evaluate structure, process, and educational outcome. It is used extensively in Canada and in many other countries to confirm that an education program meets criteria important to the success of the graduates. It considers teaching and learning and, as such, may be relied upon to identify substantial differences in education programs.

The physiotherapy education accreditation authority in Canada is Physiotherapy Education Accreditation Canada (PEAC).² PEAC was incorporated under the Canada Corporations Act in 2000 for the purpose of accrediting physiotherapy entry-level education programs in Canada. Currently there are 14 physiotherapy education programs that hold PEAC accreditation status; an additional two programs have pre-accreditation status.

The PEAC accreditation program continually evolves to reflect the Canadian physiotherapy education, practice, and regulatory environments; physiotherapy regulators are essential stakeholders in this program. Established links between PEAC and physiotherapy regulators ensure the regulatory perspective is considered in discussions and decisions taken and includes a regulatory representation on:

- PEAC Peer Review Teams that conduct the on-site education program evaluation;
- The PEAC Accreditation Committee, which makes recommendations to the Board of Directors (the decision-making body) about accreditation decisions and processes; and
- Working groups established for accreditation standard development and revision.

These established links between accreditation and regulation facilitate consistency between entry-level education standards and regulatory entry-to-practice standards.

Education program accreditation is a key feature in the Canadian credentialing system for physiotherapy entry-level practice. In addition to individual verification, graduation from an accredited program permits a Canadian physiotherapy graduate to register for the national competency examination without further assessment of education.

2.0 PROJECT PURPOSE, OUTCOMES, IMPACT, AND SCOPE

Project Purposes and Outcomes

The primary purpose of this project is to undertake a review of the accreditation systems of physiotherapy education programs external to Canada to determine if recognition of international

¹ Physiotherapy Education Accreditation Canada (2012). Accreditation Handbook 2012: Education Programs. Author: London, ON.

² The initial name of the accrediting authority for Canadian physiotherapy education programs was the Accreditation Council for Canadian Physiotherapy Academic Programs. In 2010 the name of the organization was changed to Physiotherapy Education Accreditation Canada.

physiotherapy education accreditation programs is feasible. Specifically the purposes of the project, as outlined in the proposal,³ are to

- Identify the accreditation systems for physiotherapy entry-level education programs in selected countries,
- Review each country's accreditation standards and systems, and
- Compare them with the PEAC accreditation standards and systems.

The overall project outcome is to assist in identifying internationally educated physiotherapists who may be able to access a variable pathway to licensure in Canada. The project outcomes may also form the foundation for further discussion with countries that have comparable physiotherapy accreditation standards with respect to the creation of mutual recognition agreements. The specific project outcomes will include:

1. Identification of countries internationally that have physiotherapy education accreditation programs in place;
2. Increased understanding about education programs internationally and the processes and standards in place to accredit them;
3. Evaluation of the accreditation standards, for those countries with accreditation programs, in comparison to Canadian physiotherapy education accreditation standards;
4. Recommendations about accreditation programs reviewed and how they compare to the Canadian benchmark; and
5. Creation of a list of comparable international physiotherapy education accreditation programs for consideration in future mutual recognition agreements.

Project Impact

The eventual target audience for this project is internationally educated physiotherapists who apply for credentialing and licensure in Alberta and Canada, and who would benefit from a variable pathway to licensure. The number of internationally educated physiotherapists who apply for credentialing in Canada was expected to reach 770 in 2012, representing a 21% increase in applications year over year. Of these applicants, 65%, or up to 500, are from 'top source' countries (i.e., those countries from which the greatest number of applicants are received) including (in order of highest number of applicants) India, Philippines, Australia, United Kingdom, United States of America, Brazil, Nigeria, and Iran.

International credentialing applicants consistently rank Alberta within the top three provinces of choice for residence. In 2011, 23 internationally educated physiotherapists were initially registered in Alberta. Internationally educated physiotherapists make up 15% (350) of the total number of physiotherapists registered in Alberta and are critical to ensuring an ongoing supply of physiotherapists in Alberta.

Project Scope

The scope of this project is limited to a comparison of selected international accreditation programs for physiotherapy education with the Canadian accreditation program. The project report will not include a review or comparison of physiotherapy competencies for entry-level practice in each jurisdiction. Specifically, the review of accreditation programs will consider the inclusion of competencies as a component of the accreditation standards; however it will not include a review to determine if the physiotherapy competencies in each comparator jurisdiction are similar to those in the Essential Competency Profile for Physiotherapists in Canada (2009).

³ College of Physical Therapists of Alberta. (November 2012). 2012 Innovation Fund - Foreign Qualification Recognition: A Review of International Physiotherapy Education Accreditation Systems.

3.0 PROJECT METHODS

The College of Physical Therapists of Alberta (CPTA) was the secretariat for this project, for which funding was received from the Alberta 2012 Innovation Fund. CPTA contracted with CEB Consulting to complete the data gathering, analysis, and preparation of the project report, in keeping with the established project purposes and outcomes. A Steering Group was established to oversee completion of these project activities and comprised representatives of the project partners including

- Canadian Alliance of Physiotherapy Regulators,
- College of Physical Therapists of Alberta, and
- Physiotherapy Education Accreditation Canada.

The project methods primarily involved data gathering and a qualitative analysis and were conducted over four project phases including

1. Document review,
2. Comparison of accreditation standards with the Canadian (PEAC) benchmark,
3. Preliminary report preparation, and
4. Meeting with project partners and preparation of final report.

Appendix A includes details of the project workplan and deliverables.

The Steering Committee Members determined there were four countries that should be targeted for the analysis including Australia, Ireland, United Kingdom, and United States of America. These countries have known physiotherapy education and practice that is more similar to Canada and also have education accreditation systems in place. In addition, all of these countries produce graduates that are keen to practice physiotherapy in Canada and are generally successful on the national physiotherapy examination. As a result the project could be considered as a pilot for future exploration of accreditation standards in other countries.

The project consultant gathered information about the accreditation systems of the four targeted countries and the Canadian system from the Internet and electronic communication with individuals responsible for the accreditation programs. The data were organized into three main areas including

1. An overview of the accrediting organizations reviewed,
2. A comparison of the accreditation standards of the targeted countries with the PEAC standards, and
3. An overview of the accreditation processes reviewed.

The following sections of the report include a description and a summary of the results in these three areas.

4.0 OVERVIEW OF THE ACCREDITING ORGANIZATIONS REVIEWED

The accrediting organizations reviewed included:

- Australian Physiotherapy Council (APC), Australia;
- Commission on Accreditation in Physical Therapy Education (CAPTE), United States of America;
- Health & Care Professions Council (HCPC), United Kingdom;
- Irish Society of Chartered Physiotherapists (ISCP), Ireland; and
- Physiotherapy Education Accreditation Canada (PEAC), Canada.

Generally, each accrediting organization was reviewed with respect to its

- Authority and purpose,
- Governance and decision-making,
- Links with regulation,
- Education model,
- Number of accredited programs, and
- Accreditation awards and cycle.

Generally all five accrediting organizations reviewed are similar with respect to authority and purpose, governance and decision-making, and links with regulation. The organizations all act under authority of federal law, or state/territory based law in the case of Australia, to accredit physiotherapy entry-level education programs. Similar to PEAC, the accrediting organizations function as an independent/incorporated body, although operating under somewhat different conditions. For example, CAPTE is appointed by the American Physical Therapy Association to assure the quality of physical therapy education in the United States, and the HCPC is a regulatory body responsible for education and practice regulations of 16 professional groups in the United Kingdom.

The organizations are all responsible to develop the accreditation standards, and use them for evaluation of education programs to ensure the programs meet established standards for quality and continuous improvement. Consideration is often made for the accreditation standards to reflect the education, practice, and regulatory environments of the physiotherapy profession in the respective country.

Members of a governing body (i.e., Board, Committee, or Commission) make decisions about the accreditation status of the education programs reviewed. In all accrediting organizations, the governing body takes decisions based on recommendations of a standing committee or panel of the governing body. In turn, members of the standing committee or panel base their recommendations on a report prepared by the education program to demonstrate its compliance with the accreditation standards and an external peer review of the program.

There are established links in all five countries between the accreditation status of entry-level education programs and the regulatory entry-to-practice standards. Students who graduate from accredited programs are either automatically eligible for registration to practice (i.e., in Ireland, United Kingdom) or, in countries where there is a national licensing examination, are eligible to take the examination (in Canada, United States). Table 1 includes more detailed information about the authority, governance, decision-making, and regulatory links.

Accrediting Organization	Authority / Purpose	Governance / Decision-making	Links with Regulation
APC	APC is the accreditation authority, under contract to the Australian Health Practitioner Regulation Agency. APC is responsible to accredit physiotherapy education providers and programs of study and has requirements to meet its statutory functions, including performance parameters, under a Quality Framework applicable to all	The APC Board makes recommendations about the accreditation status of programs -the Accreditation Committee (AC) is a Standing Committee of the APC Board established to assist APC to fulfill its requirements as an accrediting authority -the AC a) identifies and develops best practice policy for the design, conduct, and monitoring of accreditation services, and b) makes recommendations to the APC Board	Students who graduate from an accredited program, that is approved by the PBA, and who are deemed to be suitable candidates for registration may be registered to practice

Table 1 Accrediting Organizations: Authority, Governance, Links with Regulation			
Accrediting Organization	Authority / Purpose	Governance / Decision-making	Links with Regulation
	accreditation entities under the National Scheme in Australia	about a program's accreditation status that are then provided to the PBA. The PBA considers these recommendations and decides whether the qualifications are approved for the purpose of suitability for registration	
CAPTE	<p>CAPTE is the accrediting agency nationally recognized by the US Department of Education and the Council for Higher Education Accreditation</p> <p>-serves the public by establishing and applying standards that ensure quality and continuous improvement in the professional preparation of physical therapists and physical therapist assistants and reflect the evolving nature of education, research, practice</p>	<p>CAPTE is the decision-making body about accreditation status of programs</p> <p>-consists of at least 29 members, divided into three panels: a Physical Therapist Review Panel, a Physical Therapist Assistant Review Panel (both panels review findings and recommendations of reviews and recommend accreditation status), and a Central Panel (like a Board of Directors).</p> <p>-comprises broad representation from the educational community, the physical therapy profession, and the public</p> <p>-Staff support provided by the APTA Department of Accreditation</p>	<p>Graduation from an accredited program is a requirement to take the licensing examination</p> <p>-all 50 states require physical therapists to have a license to practice and CAPTE is the only accrediting agency recognized by the state licensing boards.</p>
HCPC	<p>HCPC sets standards for registrants' education and training, professional skills, conduct, performance, ethics and continuing professional development</p>	<p>The HCPC Education and Training Committee is responsible for approving and monitoring programmes</p>	<p>Students who successfully complete accredited programs are automatically eligible for HCPC registration</p>
ISCP	<p>ISCP is the Competent Authority acting with the approval of the Minister for Health and Children to accredit undergraduate physiotherapy programmes in the Irish universities</p>	<p>The ISCP Board is the decision making body about program accreditation</p> <p>-The Accreditation Board makes recommendations to the ISCP Board about a program's accreditation status</p>	<p>Graduates of accredited programs are eligible to become members of the ISCP and can work in the Irish public health system without individual qualification validation.</p>
PEAC	<p>PEAC is incorporated under federal law (Not-for-Profit Act) to accredit physiotherapy education programs in Canada</p> <p>-establishes, implements, and evaluates the processes of accreditation and conducts accreditation reviews</p> <p>-develops and sustains an integrated process of continuous assessment to ensure physiotherapy education programs meet or exceed national standards, while encouraging excellence and innovation.</p>	<p>Governed by a Board, which is the decision-making body</p> <p>-Accreditation Committee is a Standing Committee of the Board and makes recommendations to the Board about a program's accreditation status</p> <p>-An Executive Director is appointed by the Board to manage the day-to-day activities of PEAC</p>	<p>Graduation from an accredited or approved university program is a licensure requirement for most Canadian graduates, allowing them to take the national competency exam</p>

Data were also collected about the education models in each of the five targeted countries, as well as the number of accredited education programs and the types of accreditation awards.

Table 2 includes more detailed information about the education models, number of accredited programs, and accreditation awards.

The organizations reviewed currently have a total of 312 accredited education programs that are all university-based. There is currently a mixed model of education with programs offering a range from baccalaureate to professional doctoral entry-level professional degrees:

- In Ireland the four accredited programs are at the baccalaureate level, although one program is in the process of having a new master's entry-level program reviewed.
- The United Kingdom and Canada both have baccalaureate and master's programs (n=60 and n=14 respectively); however by 2014 all programs in Canada will be at the master's entry-level.
- Australia has a combination of baccalaureate, master's, and doctoral entry-level programs (n=22).
- The majority of programs in the United States are at the doctoral level (211 of 212).

There is a definite trend for education programs to be at a post-baccalaureate degree level as 83% of accredited programs offer professional master's or doctoral degrees. The length of the accreditation cycle varies amongst the five organizations reviewed. One organization has an open-ended approval process (HCPC) and the remaining four organizations have cycles of 4, 5, 6, or 10 years. Each of the organizations monitors the education programs on a regular, annual basis, once full accreditation or approval has been granted.

Accrediting Organization	Education Model	Number of Accredited Programs	Accreditation Cycle & Awards
APC	4 year University-based full time study at Bachelor and Honours level and 2 years Master's/Doctoral levels	22 (9 Baccalaureate; 1 Baccalaureate PT and Exercise Science; 9 Master's; 2 combined Baccalaureate & Master's; 1 Doctoral)	5 years -Full Accreditation with or without conditions -No accreditation -Accreditation Revoked
CAPTE	University-based entry-level Master's and Professional Doctoral degree	212 in the USA (only 1 at Master's level, remainder at Doctoral level)	5 years for initial accreditation and 10 years for established programs (Candidacy for accreditation) -Accreditation -Probationary accreditation
HCPC	3 and 4 year undergraduate degree level and 2 year Master's levels (Master's courses are for those who have graduated in other relevant disciplines and wish to qualify as physiotherapists)	60 (38 Baccalaureate level; 16 Master's; 6 PgDip)	Approval is open-ended with annual monitoring process -Approve or reconfirm ongoing approval -Approve or reconfirm ongoing approval, subject to conditions -No approval or withdraw approval
ISCP⁴	4 year Bachelor of Science honours degree in physiotherapy (B.Sc. Hons. Physiotherapy); a	4 (all at Baccalaureate level)	5 years -Full accreditation -Provisional accreditation

⁴ In addition to the four baccalaureate programs, University College in Dublin is offering an MSc Physiotherapy (pre-registration) program that is currently undergoing professional accreditation by the ISCP; the program has attained accreditation for Year 1 and is preparing for accreditation of Year 2 during the summer of 2013 and full accreditation in 2014.

	level 8 qualification on the Irish National Framework of Qualifications 10 point scale.		-Deferral of Decision -Non-Accreditation
PEAC⁵	4 year Baccalaureate or 2 year Master's entry level programs	14 (1 Baccalaureate, 13 Master's)	6 years -Accreditation (Fully Compliant, Partially Compliant, Probationary) -Deferral of Decision -Non-accreditation

Note about physiotherapy education accreditation in the United Kingdom

In the United Kingdom there are two accreditation systems in place, one conducted by the HCPC and one conducted by the Chartered Society of Physiotherapists (CSP). All programs are required to participate in the HCPC process to ensure the programs meet the Standards of Education and Training, which leads to eligibility of graduates to apply to the Register. The CSP process is a parallel process; one of the requirements for a program to be accredited by the CSP is that the program has secured HCPC accreditation. Currently there are 60 programs holding HCPC accreditation status, and 35 higher education institutions that offer qualifying education programs in physiotherapy that also carry CSP approval and lead to chartered status.

5.0 COMPARISON OF ACCREDITATION STANDARDS

5.1 Overview of Accreditation Standards

The accreditation standards used by each of the targeted accrediting organizations were reviewed to determine how the standards and evaluative criteria compare to those employed by PEAC. (Table 3 depicts an overview of the comparison of the accreditation standards.)

Generally, the standards are current documents having been published between 2011 and 2013, with the exception of the APC requirements that were published in 2006. All the documents include a description of standards and the associated criteria, as well as information to guide the program in preparation of its accreditation report, e.g., indicators and examples of evidence for the program to demonstrate compliance with the criteria. The standards all consistently address areas with respect to:

- Program organization, e.g., funding, leadership, learning resources;
- Faculty, e.g., qualifications, scholarly activity, career development;
- Students, e.g., methods of learning, clinical education opportunities, assessment methods; and
- Program and curriculum evaluation, e.g., gathering data for feedback, analysis of data, and resultant implementation and evaluation of program changes.

⁵ In Canada all accredited education programs will be at the master's entry-level by the Fall 2014. The number of accredited programs will also increase to 15 by Fall 2017, as a new program is going through the pre-accreditation process in 2014 with its first cohort expected to graduate in the Fall 2017.

Table 3 Overview of Accreditation Standards				
Accrediting Organization	Name of Standards Document	Standards – Broad Categories	Number of Evaluative Criteria / Category	Additional Information
APC	Accreditation Standard Requirements (2011)	<i>Requirements</i> 1. Program Attributes 2. Quality Systems 3. Academic Program 4. Resources and Infrastructure Elements	<i>Elements & Criteria</i> ⁶ 3 4 6 9 (Total criteria = 26)	-Indicators -Examples of Evidence
CAPTE	Evaluative Criteria PT Programs (2013)	<i>Section 1: Institution and Program Integrity & Capacity Institutional</i> 1. Integrity and Capacity (I) 2. Program Mission, Goals, and Expected Outcomes (P) 3. Program Faculty (F) 4. Program Resources (R) <i>Section 2: Curriculum Plan, Evaluation, Content, Outcomes</i> 1. Curriculum Plan, and Evaluation (CP) 2. Curriculum Content (CC) ⁷ 3. Outcomes (CO)	<i>Evaluative Criteria</i> 2 14 29 12 13 8 4 (Total criteria = 82)	-Evidence of Compliance (to be included in the report narrative, appendices/attachments, or on-site)
HPCPC	Standards of Education and Training (SETs) (2012)	<i>SETs</i> 1. Level of Qualification for Entry to the Register 2. Programme Admissions 3. Programme Management and Resources 4. Curriculum 5. Practice Placements 6. Assessment	1 7 16 9 13 11 (Total criteria = 57)	-Overall Guidance and Example Questions -Detailed Guidance
ISCP	Accreditation of Pre-Registration Physiotherapy Programs in Ireland (2012)	<i>Standards</i> 1. Admission onto a Physiotherapy Programme 2. Programme Management and Learning Resources 3. Policy and Procedures for Quality Assurance 4. Curriculum Design and Development 5. Programme Assessment Process 6. Physiotherapy Entry Level Competencies	<i>Criteria</i> 1 8 6 13 6 9 (Total criteria = 43)	-Indicators -Examples of Evidence

⁶ The *Element* is a specific component of an Accreditation Requirement with criteria that must be evidenced for Accreditation (see 'Glossary of Terms'); the *Indicators* identify the evidence about which the Program must evaluate and report to meet the criteria.

⁷ The group of Curriculum Content criteria includes one criterion comprising 10 areas of Professional Practice Expectations, 8 Patient/Client Management Expectations, and 5 Practice Management Expectations (and that correspond to the PEAC Physiotherapy Competencies).

PEAC	Accreditation Standards for Physiotherapy Education Programs In Canada (2012)	Standards	Criteria	-Examples of Evidence -Explanatory Notes
		1. Program Governance and Resources	6	
		2. Program Development and Evaluation	6	
		3. Faculty	6	
		4. Students	6	
		5. Accountability	4	
		6. Physiotherapy Competencies (7 Roles)	18	
			(Total criteria = 46)	

General Differences in Accreditation Standards

Generally, the accreditation standards differ in two areas: a) the description of physiotherapy competencies or expectations of graduates and b) the total number and description of the evaluative criteria.

a) Physiotherapy Competencies

Differences related to physiotherapy competencies or expectations of graduates are with respect to the level of detail describing the curriculum content and the expected outcomes for graduates. For example, the PEAC, CAPTE, and ISCP Standards incorporate criteria related to the expected outcomes for program graduates in the standards document, i.e.,

- Physiotherapy Entry-Level Competencies (PEAC Standard 6),
- Curriculum Content: Expectations for Professional Practice, Patient/Client Management, and Practice Management (CAPTE CC 5.1-5.66), and
- Physiotherapy Graduate / Entry Level Competencies (ISCP Standard 6).

In contrast, the standards for the APC and HCPC do not include this level of detail, and instead mention the relationship of the curriculum content to the respective physiotherapy professional document, i.e.,

- The APC requirements indicate that 'The curriculum is designed such that the program is aligned to the Australian Standards for Physiotherapy',⁸ and
- The HCPC standards indicate that 'The learning outcomes must ensure that those who successfully complete the programme meet the standards of proficiency for their part of the Register'.⁹

It is important to note that all accrediting organizations reviewed did include assessment of physiotherapy entry-level competencies as an integral component of curriculum content. This will be addressed further in the detailed review of PEAC Standard 6.

b) Number and Description of Criteria

The total number of evaluative criteria differs greatly amongst the accreditation organizations, ranging from a minimum of 26 (APC) to a maximum of 82 (CAPTE). However, it is difficult to directly compare the criteria as they are formatted somewhat differently and, include differing levels of detail. For example, the PEAC criteria match better with the more detailed APC and ISCP indicator level. The comparative evaluation of the APC and ISCP criteria was, therefore, also based on the indicators. One example for the APC and PEAC criteria review with respect to student evaluation is shown in Table 4.

⁸ APC. (2011). Accreditation of Entry-Level Physiotherapy Programs – A manual for universities. (Pre-publication version). Authors: Canberra, Australia. p. 30, Criterion 3.2. Curriculum.

⁹ HCPC. (2012). Standards of Education and Training (SETs). Authors: London, United Kingdom. p. 32, Standard 4.1

Table 4 Review of APC Indicators and PEAC Criteria		
<p><i>APC Criterion 2.2</i> The university must provide evidence through the collection and evaluation of longitudinal assessment data that graduates of the program demonstrate the specific attributes defined in the Australian Standards for Physiotherapy in conjunction with the graduate attributes defined by the university.</p>	<p><i>Indicators</i> -The university undertakes evaluative procedures to assess students at each stage within the program in terms of the specific attributes defined in the Australian Standards for Physiotherapy and the graduate attributes defined by the university</p>	<p><i>PEAC Criteria</i> 4.4 There is a framework for evaluation of student achievements with clearly defined evaluative criteria and outcomes.</p>
	<p>The university undertakes evaluative procedures, including standard surveys and mechanisms selected by the individual university, to assess graduates and their employers in terms of the specific attributes defined in the Australian Standards for Physiotherapy and the graduate attributes defined by the university</p>	<p>2.5 The program analyzes and synthesizes program evaluation data to identify need for change.</p>
	<p>-The university takes action in response to the findings of the evaluation of student and graduate outcomes to improve the standard of graduates</p>	<p>2.6 Changes to the program and the curriculum are made in response to analysis of evaluation data and the impact of these changes is assessed.</p>
	<p>-The university implements strategies to ensure the sample of graduates and employers and response rate are sufficient to reach valid conclusions regarding the standard of graduates</p>	<p>2.5 The program analyzes and synthesizes program evaluation data to identify need for change.</p>

In contrast, the CAPTE evaluative criteria are more specific and include more detailed requirements. Therefore, in some cases, the CAPTE *evaluative criteria* relate more directly to the PEAC *examples of evidence* provided for an education program about demonstrating compliance with the PEAC criteria, one example (depicted in Table 5) is with respect to the PEAC criterion about information available for prospective and enrolled students. The PEAC criterion is more broadly stated and the details are provided in the example of evidence; whereas the CAPTE criterion is much more specific and includes all the details.

Table 5 Matching of CAPTE Criteria with PEAC Examples of Evidence	
<p><i>CAPTE Criterion P-8</i> Prospective and enrolled students are provided with relevant information about the institution and program that may affect them, including, but not limited to, catalogs, academic calendars, grading <i>policies</i>, financial aid, the program's accreditation status, the process to register a complaint with CAPTE, outcome information, and other pertinent information. Materials related to the institution and program are accurate, comprehensive, current, and provided to students in a timely manner.</p>	
<p><i>PEAC Criterion 5.1</i> Information available to prospective students, enrolled students, and the public about the university and the program is current and complete and accurately reflects the program's vision, mission, and goals.</p>	<p><i>Examples of Evidence</i> may include, but are not limited to:</p> <ul style="list-style-type: none"> - Documentation about admission policies, tuition and fees, financial aid, graduation and licensing/registration requirements, academic policies and student services. - Student handbook, program brochures, university documents - Program calendar; web site - Student orientation programs - Records that students admitted to the program meet the published admission criteria - Grading policy - Academic regulations

5.2 Specific Review of Accreditation Standards

This section includes results of the comparative analysis of accreditation criteria. The criteria of the four targeted accrediting organizations were matched with the PEAC criteria (and indicators for APC and ISCP, as mentioned in Section 5.1 of this report) where possible. For each Standard, General Comments with respect to the matching with PEAC criteria are provided. These are followed by Specific Comments, including a Table and more detailed information where any similarities or differences were identified during the analysis.

The Tables for each Standard are formatted with checks where the selected organizations have been found to have criteria or indicators that directly or indirectly relate to the PEAC criteria. The comparator organization's matching criteria numbers are included in the boxes in brackets. To specifically identify the level of matching:

- When the criteria are directly or strongly matched (i.e., the criteria wording and concepts were the same or very similar) the box in the table is highlighted in blue.
- When the criteria are more indirectly or more weakly matched (i.e., the matching is in the guidance or explanatory notes vs. the criteria or indicators) the boxes are highlighted in yellow.
- When there is only partial or no matching with the PEAC criteria, the box has no colour.

PEAC Standard 1

General Comments about Standard 1

There is a 100% match for the APC and CAPTE criteria with PEAC criteria; in most cases the APC and CAPTE criteria include more detailed information, similar to what is found in the PEAC Explanatory Notes. For the HCPC and ISCP criteria there is no match with PEAC Core Criterion 1.1; while there is matching for Core Criteria 1.2 and 1.3, the matching is weak for the HCPC.

Specific Comments about Standard 1

Table 6 PEAC STANDARD 1 - PROGRAM GOVERNANCE & RESOURCES				
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.				
	APC	CAPTE	HCPC	ISCP
1.1 The program faculty have responsibility for governance of the program and the authority to ensure program policies are implemented. [CORE]	✓ (4.7) ¹⁰	✓ (F19)		
1.2 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. [CORE]	✓ (4.1,4.6,4.7)	✓ (F5,F6)	✓ (3.2,3.4)	✓ (4.2.1)
1.3 The program has adequate financial resources to achieve its stated goals and assure its continuing operation. [CORE]	✓ (4.6)	✓ (R4, F9)	✓ (3.1)	✓ (4.2.6)

¹⁰ The bracketed numbers are a specific reference to the organization's related accreditation criterion/indicator.

Table 6 PEAC STANDARD 1 - PROGRAM GOVERNANCE & RESOURCES

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.

	APC	CAPTE	HCPC	ISCP
1.4 The program has adequate support staff and services to meet the needs of the faculty and students and achieve the goals of the program.	✓ (4.4)	✓ (R3,R9,R12)	✓ (3.8)	✓ (4.2.3)
1.5 The program provides adequate learning resources to enable students to achieve learning objectives.	✓ (4.5)	✓ (R5,R6,R10)	✓ (3.8,3.9,3.10)	✓ (4.2.3,4.2.7)
1.6 The program develops and sustains cooperative relationships with others that contribute to the professional preparation of students including, but not limited to 1.6.1 departments or units on campus, 1.6.2 clinical placement sites, and 1.6.3 community agencies.	✓ (3.6)	✓ (F10,F14)	✓ (5.1)	✓ (4.2.4)

Core Criteria

- There are three PEAC core criteria in Standard 1 including Criteria 1.1, 1.2, and 1.3. For Criterion 1.1, there is strong matching for the APC and CAPTE criteria only. Additionally, the APC criterion specifies that the 'structure of the university is appropriate for the delivery of an entry-level program in physiotherapy' and one of the indicators requires that 'the university is supportive of physiotherapy both as an academic and professional discipline'. The CAPTE criterion also includes specific information about the areas to which the policies or regulations should apply, e.g., admissions and student progression through the program.
- While all organizations have criteria matching with PEAC Criterion 1.2, the HCPC criteria are not as strongly matched as they refer only very broadly to effective program management and a named person who must have appropriate qualifications. The APC, CAPTE, and ISCP criteria refer more specifically to the effective and academic leadership for the program. The ISCP criteria actually use some of the exact wording as the PEAC criterion, i.e., 'appropriate qualifications in physiotherapy, including relevant experience in higher education, research and administration and who has sufficient authority and recognition to manage and represent the programme'. In contrast to the PEAC criteria, APC and CAPTE explicitly require the program leader to have a doctoral degree, while the ISCP refers to a senior academic position, which is more similar to PEAC.
- Similar to PEAC Criterion 1.2, all comparator organizations include criteria with respect to the program's financial resources and having a financial/business plan to ensure sustainability of the education program. The APC and CAPTE criteria also refer to the responsibility of the program director to administer the finances.

Criterion 1.4

The HCPC has no direct reference about support staff and services; however, 'academic and support staff' are identified as resources to which students should have access in the Guidance provided for SET 3.8.

Criterion 1.5

There is strong matching of the comparator organizations' criteria with PEAC Criterion 1.5. However, there is a wide range in the level of detail provided about the requirements to comply with this criterion. For example, the APC, CAPTE, and ISCP criteria all specify details about the learning resources that must be present including library resources, classroom and laboratory space, and materials; all of this information is included in the PEAC Explanatory Notes.

Criterion 1.6

The focus of this criterion for APC and HCPC is solely on formal agreements/arrangements for clinical placements, while the CAPTE criteria also focus on other departments involved with teaching students, which is more similar to the PEAC criterion. The ISCP criteria or indicators have no direct mention of the program’s cooperative relationships with others that contribute to student learning; however, ‘Documentation of agreements between clinical placement sites and the HEIs’ is listed as an example of evidence for ISCP Criterion 4.2.4.

PEAC Standard 2

General Comments about Standard 2

Overall the matching is strongest for the CAPTE and ISCP criteria (5/6 criteria). Only one organization (CAPTE) has a match for criterion 2.1. There is 100% matching for the remaining four criteria; however, the matching overall is weaker for HCPC. In addition, Criteria 2.6 is a PEAC Core Criterion for which two organizations have only a partial match (CAPTE, HCPC).

Specific Comments about Standard 2

Table 7 PEAC STANDARD 2 - PROGRAM DEVELOPMENT AND EVALUATION				
The program maintains an effective process of continuous self-assessment, planning, and improvement.				
	APC	CAPTE	HCPC	ISCP
2.1 The program’s vision, mission, and goals are consistent with those of the university and the profession.		✓ (P1,P2,P3)		
2.2 The curriculum includes: 2.2.1 An integrated curriculum plan that reflects the theoretical foundation, educational principles and values for the program. 2.2.2 A statement of overall expected attributes of the graduates.	✓ (2.1,3.1,3.2, 3.3, 3.4,3.5)	✓ (CP1,CP2)	✓ (4.1,4.2,4.3, 4.4,4.5)	✓ (4.3.5,4.4.3, 4.4.4,4.4.5, 4.4.6,4.4.7)
2.3 There is a documented plan for program evaluation and re-evaluation that is based on clearly defined and measurable goals and includes evaluation of impact when changes are made.	✓ (2.1)	✓ (P5,CP3, CP4)	✓ (3.3,6.6)	✓ (4.3.1,4.3.4, 4.4.4)
2.4 The program collects data for a systematic and comprehensive evaluation and re-evaluation of program effectiveness on a regular basis. 2.4.1 Data collected must include feedback from all key stakeholder groups including students, recent graduates, and employers.	✓ (2.1,3.1,3.3, 4.3,)	✓ (P4,CP3)	✓ (3.3,5.4)	✓ (4.2.4,4.3.2)
2.5 The program analyzes and synthesizes program evaluation data to identify need for change.	✓ (2.1,2.2,2.3)	✓ (P4)	✓ (3.3,5.4)	✓ (4.3.1,4.3.3)
2.6 Changes to the program and the curriculum are made in response to analysis of evaluation data and the impact of these changes is assessed. [CORE]	✓ (2.1,2.2)	✓ (P4)	✓ (5.4)	✓ (4.3.3)

Criterion 2.3

While the APC does not have a specific criterion directly outlining the requirement for a documented evaluation plan, the whole of Requirement 2-Quality Systems focuses on and, therefore, implies that evaluation systems and processes are in place to monitor and evaluate the quality and standards related to the physiotherapy education program. The HCPC also has

criteria requiring the program to have 'regular monitoring and evaluation systems in place'; however, there is no mention of a 'documented plan' for the evaluation.

Criteria 2.4 and 2.5

It is interesting to note that the wording of ISCP Criterion 4.3.2 exactly matches that for PEAC Criterion 2.4.1. While the matching to PEAC Criteria 2.4 and 2.5 is strong in all comparator organizations, it is noted that the related HCPC criteria are very broad and the details about gathering evaluation data and analysis of data are included in the examples of evidence provided. With respect to data collection, the HCPC examples refer to analysis of the data so the collection of data is, therefore, implied.

Core Criterion 2.6

All comparator organizations have criteria with respect to implementing changes in response to analysis of evaluation data, although, similar to Criteria 2.4 and 2.5, the reference for the HCPC is in its examples of evidence. The matching is stronger for the APC and ISCP criteria as both explicitly state a requirement to evaluate the impact of changes made in response to the evaluation and analysis of data.

PEAC Standard 3

General Comments about Standard 3

There is 100% matching of the CAPTE criteria, and a strong level of matching of the APC criteria (5/6 criteria); there is 100% matching for all organizations with criterion 3.2. Matching of the HCPC and ISCP criteria is weak for this Standard with only 2/6 criteria being strongly matched.

Specific Comments about Standard 3

Table 8 PEAC STANDARD 3 - FACULTY				
The program has sufficient qualified faculty (academic and clinical) for effective program design and instruction, and provides appropriate, ongoing faculty development and evaluation.				
	APC	CAPTE	HCPC	ISCP
3.1 The number and qualifications of faculty are sufficient to meet the program's mission and goals through educational administration, curriculum development, instructional design and delivery, research, and evaluation of outcomes.	✓ (4.4,2.2)	✓ (F1-4, F2,F18)	✓ (3.5,3.6)	✓ (4.2.2)
3.2 The university and program encourage and support appropriate professional and career development of faculty relevant to their roles in the program, including support for new/junior faculty.	✓ (4.2,4.7)	✓ (F3)	✓ (3.7)	✓ (4.2.2,4.2.6)
3.3 Faculty members are evaluated in accordance with University policies and with reference to clearly outlined criteria using multiple sources of information.	✓ (4.2)	✓ (F7,F8)	✓ (SET3)	✓ (4.2.2)
3.4 The rights and privileges of faculty are commensurate with other faculty in the university having comparable roles and responsibilities.		✓ (I2,F4,F26)		
3.5 The program faculty have responsibility and authority for curriculum development, implementation, and evaluation.	✓ (3.2)	✓ (F20)	✓ (4.4)	✓ (SET 4.4)

Table 8 PEAC STANDARD 3 - FACULTY

The program has sufficient qualified faculty (academic and clinical) for effective program design and instruction, and provides appropriate, ongoing faculty development and evaluation.

	APC	CAPTE	HCPC	ISCP
3.6 The university and program support research and other scholarly activity conducted by faculty.	✓ (2.4,4.2)	✓ (R7,R8,R11)	✓ (3.7)	✓ (4.2.2)

Criterion 3.1

The HCPC match to the PEAC criterion is weak as there is no reference to any specifics about the qualifications of the faculty; the HCPC states it does 'not set specific requirements for the expertise and knowledge that is needed' for faculty to deliver certain parts of the program, as the required qualifications will change good practice develops. As for some of the other criteria, it is interesting to note that the ISCP wording is exactly the same as that for PEAC.

Criterion 3.3

There are no explicit HCPC criteria about faculty evaluation; however, the Guidance for SET 3 does ask a question focusing on 'staff appraisals', so it could be assumed that this requirement is considered for the accreditation process. Similarly there are no specific ISCP criteria for faculty evaluation; however, an example of evidence for Criterion 4.2.2 with respect to Academic staffing includes an 'ongoing program of professional development in teaching and learning strategies and performance management'.

Criterion 3.4

The CAPTE criteria include additional specific requirements for rights and privileges of faculty, as well as clinical education faculty, and associated faculty.

Criterion 3.5

Similar to other HCPC criteria matching, there is no explicit criterion about faculty involvement in curriculum development and evaluation. The matching is not strong; however, the Guidance for SET 4.4 does indicate how the curriculum is kept relevant through the ongoing research experience or professional activity of the academic staff.

Criterion 3.6

The ISCP has an indicator in one criterion that requires faculty to be 'active in research as defined by the research indicators employed by their higher education institution'. This was not identified as being strongly matched to the PEAC criterion as it was not explicit about the university and program support for the faculty scholarly activity.

PEAC Standard 4**General Comments about Standard 4**

None of the comparator organizations have a requirement about student participation in program planning, development, and evaluation (Criterion 4.1). For the remaining five criteria there was 100% matching with PEAC criteria, except for 4.5, where only one organization had a strong level of matching.

Specific Comments about Standard 4

Table 9 PEAC STANDARD 4 - STUDENTS

	APC	CAPTE	HCPC	ISCP
4.1 The program ensures student participation in program planning, development, and evaluation.				
4.2 Methods of teaching and learning align with program and curricular goals.	✓ (3.1)	✓ (CP2.8)	✓ (4.8,4.9)	✓ (4.4.6,4.4.7)
4.3 The program has a required mix of clinical education experience that is designed to encompass essential areas of practice and settings across the lifespan, and that enables students to achieve the required competencies. 4.3.1 Each student shall attain the required mix as defined by the program. 4.3.2 Each student shall attain a minimum of 1025 hours of clinical education experience; the majority of these hours shall be under the supervision of a licensed/registered physiotherapist.	✓ (3.2,3.3,3.5,3.6,4.3)	✓ (CP2.10,CC4)	✓ (5.2,5.4,5.6,5.7,5.8,5.9,5.10,5.11,5.12,5.13)	✓ (4.2.4,4.4.6.3,4.4.6.4)
4.4 There is a framework for evaluation of student achievements with clearly defined evaluative criteria and outcomes. 4.4.1 A variety of appropriate methods and tools are used to measure student performance 4.4.2 The program provides appropriate and timely feedback to students about their strengths and opportunities for improvement and remediation	✓ (2.2,3.3)	✓ (P11,F21,CP2.9)	✓ (3.1.5,6.1,6.2,6.3,6.4,6.5,6.7)	✓ (4.5.1,4.5.2,4.5.3,4.5.5,4.5.6)
4.5 The program provides mechanisms for students to address their individual or programmatic academic and clinical placement concerns.	✓ (4.5)		✓ (3.13,6.10)	✓ (4.2.8)
4.6 The program ensures students have timely and confidential access to academic support and academic or psychosocial counselling services.	✓ (4.2,4.5)	✓ (R2)	✓ (3.11,3.12)	✓ (4.2.8,4.5.3)

Criterion 4.3

There is strong matching for all comparator organizations for PEAC Criteria 4.3 and 4.3.1. There is some variation with matching to Criterion 4.3.2, which is likely due to each country's regulatory environment. For example, only ISCP has a requirement for a minimum number of clinical placement hours (1,000). There are also variations with respect to the qualification of clinical education supervisors, e.g., the APC requires 'access to adequately and experienced clinical educators', while the HCPC requires that 'practice placement educators must be appropriately registered'. All comparators' criteria included details about education/support for clinical educators and details about the clinical experiences that are included in the PEAC Explanatory Notes.

Criterion 4.4

Generally there is strong matching for this criterion, especially with 4.4.1. The requirement to have a 'framework' for student evaluation is not explicit in the comparators' criteria, except for the HCPC, which refers to the 'assessment strategy and design'. The remaining comparators relate to 'policies, procedures and practices' (CAPTE), or a process (ISCP). However, for APC, HCPC, and ISCP the criteria are based on the student meeting the standards for entry-level

practice/proficiency in the jurisdiction of the education program. APC is the only one of the comparators to have a requirement for providing timely feedback for students.

Criterion 4.5

While there is some matching of the APC and ISCP requirements to this PEAC criterion, the association is not strong as the reference is generally to student appeals or student safety and concerns. There is no specific mention of addressing academic or clinical placement concerns.

PEAC Standard 5

General Comments about Standard 5

CAPTE has 100% matching with the PEAC criteria for this Standard, and is the only organization to have a match with Criterion 5.4 with respect to monitoring compliance with accreditation standards. Of the remaining three criteria, there is a strong matching with 5.1 and 5.3 and only partial matching with 5.2.

Specific Comments about Standard 5

Table 10 PEAC STANDARD 5 - ACCOUNTABILITY				
The program accurately represents itself publicly, and provides sufficient information to ensure accountability and consumer choice.				
	APC	CAPTE	HCPC	ISCP
5.1 Information available to prospective students, enrolled students, and the public about the university and the program is current and complete and accurately reflects the program's vision, mission, and goals.	✓ (4.9)	✓ (P9)	✓ (2.1)	✓ (4.3.4, 4.4.4, 4.4.5)
5.2 The program provides an environment that is safe and protects the rights of all individuals including students, faculty, staff, and others participating in activities associated with the program.	✓ (3.6)	✓ (P6,P7,P10, P12)	✓ (3.14,5.3)	✓ (4.2.5)
5.3 The program has an admissions process that is fair, transparent, and timely.	✓ (4.8)	✓ (P9,R1)	✓ (2.1-2.7)	✓ (4.1)
5.4 The program i) monitors its compliance with accreditation standards and the rules of PEAC on a continual basis ii) takes required steps to ensure compliance and iii) publishes its accreditation status.		✓ (P13)		

Criterion 5.2

All comparator organizations have criteria with respect to safety of students; however, only the CAPTE criteria refer specifically to the rights, responsibilities, safety, privacy, and dignity of faculty, students, patients/clients, other individuals, and clinical placement sites. The APC and HCPC criteria relate to student safety during clinical and practical teaching, and the ISCP criterion is with respect to a staff:student ratio that must be maintained to ensure safe teaching of clinical skills.

Criterion 5.3

All organizations have a strong level of matching with this criterion. CAPTE includes an additional related requirement about the outcome of the admission process, i.e., 'The enrolled

student body is consistent with the mission and goals of the program, the profession's need for qualified, competent practitioners, and the societal need for diversity among physical therapists'. The HCPC includes specific information about requirements to be included in the admissions process, e.g., literacy, criminal record checks, and compliance with health requirements.

PEAC Standard 6

General Comments about Standard 6

It is important to note that the content of PEAC Standard 6 provides a focus for the education program's curriculum content. The criteria in this standard are adapted from the Essential Competency Profile for Physiotherapists in Canada, 2009 (ECP) and relate to key competencies in the ECP; however, they are not meant to be identical to the content of the ECP. The criteria in Standard 6 mirror the physiotherapist roles and competencies described in the ECP, but have been modified slightly to suit the academic environment. For example, the role of "Expert" in the ECP is described in Standard 6 as "*Expertise in Physiotherapy: The program prepares students to be competent entry-level practitioners with expertise in physiotherapy*".

As explained in Section 5.1 of this paper (page 9), the APC and HCPC criteria do not include details about physiotherapy competencies in the accreditation documents. However, these organizations do state that the education program curriculum must be designed so there is alignment with their respective physiotherapy competency documents, i.e., the APC Australian Standards for Physiotherapy and the HCPC Standards of Proficiency for the physiotherapy part of the Register. The small checks in Table 11 indicate where there is matching of the APC Standards for Physiotherapy and the HCPC Standards of Proficiency with the PEAC criteria.

Specific Comments about Standard 6

Table 11 PEAC STANDARD 6 – PHYSIOTHERAPY COMPETENCIES

Accreditation documentation must explicitly describe and include evidence about how the education program facilitates student achievement of the competencies required for entry-level physiotherapy practice.

	APC	CAPTE	HCPC	ISCP
ROLE 6.1 EXPERTISE IN PHYSIOTHERAPY				
The program prepares students to be competent entry-level practitioners with expertise in physiotherapy, and with an ability to integrate all of the Physiotherapist competencies to provide leadership in the promotion, improvement, and maintenance of the mobility, health, and well-being of clients.				
6.1.1 Consult with the client to obtain information about his/her health, associated history, previous health interventions, and associated outcomes; and Collect assessment data relevant to the client's needs and physiotherapy practice.	✓	✓ (CC 5.28-30)	✓	✓ (4.64)
6.1.2 Analyze assessment findings, and establish a physiotherapy diagnosis and prognosis.	✓	✓ (CC 5.27, 5.31-5.33, 5.53)	✓	✓ (4.64)
6.1.3 Develop and recommend a physiotherapy intervention strategy, and implement the intervention.	✓	✓ (CC 5.34-5.37, 5.39,5.41)	✓	✓ (4.64,4.65)
6.1.4 Evaluate the effectiveness of interventions, and complete physiotherapy services.	✓	✓ (CC 5.38,5.45-5.49)	✓	✓ (4.65,4.68)

Table 11 PEAC STANDARD 6 – PHYSIOTHERAPY COMPETENCIES

Accreditation documentation must explicitly describe and include evidence about how the education program facilitates student achievement of the competencies required for entry-level physiotherapy practice.

	APC	CAPTE	HPCP	ISCP
ROLE 6.2 COMMUNICATION				
The program prepares students to use effective communication to develop professional relationships with clients, families, team members, care providers, and other stakeholders.				
6.2.1 Develop and maintain professional relationships through effective communication.	✓	✓ (CC 5.17)	✓	✓ (4.62)
6.2.2 Gather and share information related to client care.	✓	✓ (CC 5.34)	✓	✓ (4.64,4.61)
6.2.3 Employ effective and appropriate communication strategies.	✓	✓ (CC 5.26,5.42)	✓	✓ (4.62,4.66)
ROLE 6.3 COLLABORATION				
The Program prepares students for collaborative practice to support quality client-centered care.				
6.3.1 Establish and maintain interprofessional relationships, which foster effective collaborative practice.	✓	✓ (CC 5.9, 5.55, 5.56,5.62)	✓	✓ (4.6.1)
6.3.2 Prevent, manage, and resolve conflict related to client-centered care.			✓	
ROLE 6.4 MANAGEMENT				
The program prepares students to manage time, resources, and priorities in physiotherapy practice.				
6.4.1 Manage individual practice effectively.	✓	✓ (CC 5.58-5.61)	✓	✓ (4.63,4.67)
6.4.2 Manage and supervise personnel involved in the delivery of physiotherapy services.	✓	✓ (CC 5.40,5.57)	✓	✓ (4.63)
6.4.3 Participate in activities that contribute to a safe working environment and effective physiotherapy practice.	✓	✓ (CC 5.43,5.44)	✓	✓ (4.64)
ROLE 6.5 ADVOCATE				
The program prepares students to responsibly use their knowledge and expertise to promote the health and well-being of clients.				
6.5.1 Work collaboratively to identify, respond to, and promote the health needs and concerns of clients.	✓	✓ (CC 5.50-5.52, 5.63,5.64)		✓ (4.67)
ROLE 6.6 SCHOLARLY PRACTITIONER				
The program prepares students to be life long learners in order to improve client outcomes through seeking, creating, applying, disseminating, and translating knowledge to physiotherapy practice.				
6.6.1 Use a reflective approach to practice.	✓	✓ (CC 5.4,5.12, 5.14,5.1,5.20)	✓	✓ (4.68)
6.6.2 Engage in scholarly inquiry.	✓	✓ (CC 5.21-5.25)	✓	✓ (4.68)
ROLE 6.7 PROFESSIONALISM				
The program prepares students to demonstrate ethical practice, support of the profession, and high personal standards of behaviour.				
6.7.1 Conduct self within legal/ethical requirements.	✓	✓ (CC 5.1-5.3, 5.11)	✓	✓ (4.61,4.69)
6.7.2 Respect the individuality and autonomy of the client.	✓	✓ (CC 5.6, 5.8, 5.10,5.18)	✓	✓ (4.64)

Table 11 PEAC STANDARD 6 – PHYSIOTHERAPY COMPETENCIES

Accreditation documentation must explicitly describe and include evidence about how the education program facilitates student achievement of the competencies required for entry-level physiotherapy practice.				
	APC	CAPTE	HPCPC	ISCP
6.7.3 Contribute to the development of the physiotherapy profession.		✓ (CC 5.5,5.13, 5.15/16,5.65/6)		✓ (4.69)

Generally the CAPTE and ISCP criteria are strongly matched with the PEAC physiotherapy competencies in Standard 6, as are the APC Standards for Physiotherapy and the HCPC Proficiencies. There are three gaps in the comparator organizations with respect to matching the PEAC competencies including:

- 6.3.2 Prevent, manage, and resolve conflict related to client-centered care (not required by APC, CAPTE, ISC);
- 6.5.1 Work collaboratively to identify, respond to, and promote the health needs and concerns of clients (not required by HCPC); and
- 6.7.3 Contribute to the development of the physiotherapy profession (not required by APC, HCPC).

6.0 OVERVIEW OF ACCREDITATION PROCESSES

Commonly, the accreditation process has five key steps^{11,12,13} including

1. Program application to accrediting organization,
2. Program self-study,
3. External review / site visit,
4. Decision-making about accreditation status, and
5. Ongoing monitoring and periodic review.

The PEAC accreditation process incorporates these steps and publishes a manual and Self-Study Inventory to assist education programs in their preparations for an accreditation review.

The accreditation processes of the targeted comparator organizations were reviewed to determine if there are any similarities and/or differences in how the accrediting organizations and education programs use and apply the accreditation standards. All comparator organizations have in place a process that includes the five key steps for accreditation. Table 12 includes information about where there are similarities and differences in the accreditation processes of the organizations reviewed.

Table 12 Similarities and Differences in Accreditation Processes

Similarities	Differences
1. Application	
<ul style="list-style-type: none"> • A requirement or recommendation for new and developing programs to participate in an initial process or application before the program begins, e.g., Pre-accreditation process (PEAC), Initial Assessment (APC), Candidacy program 	<ul style="list-style-type: none"> • Timeline for program's notification of intent ranges from 6 to 12/18/24 months

¹¹ Association of Specialized and Professional Accreditors. (2013). *The Journey to Accreditation*. Authors: Chicago, IL.

¹² Eaton, J.S. (2012). *An Overview of US Accreditation*. Council for Higher Education Accreditation: Washington, DC.

¹³ Physiotherapy Education Accreditation Canada. (2012). *Accreditation Handbook 2012: Education Programs*. Authors: London, ON.

Table 12 Similarities and Differences in Accreditation Processes	
Similarities	Differences
<p>(CAPTE)</p> <ul style="list-style-type: none"> • Program's responsibility to submit documentation to indicate intent and initiate the process 	
2. Program self-study	
<ul style="list-style-type: none"> • Guidelines provided for program to prepare and submit report • Content of report is similar, i.e., description / evidence of how program meets criteria, outcomes, and inclusion of appendices as recommended 	<ul style="list-style-type: none"> • Range from 60 days/2 months to 4 months for timing of program's submission • Two organizations require programs to submit their documents electronically using the organization's web site (CAPTE, PEAC) • CAPTE announces upcoming accreditation reviews to the community of interest at least ninety days prior to each meeting and post on-site visit dates. Comments may be submitted to CAPTE expressing concerns about physical therapy education programs under review; the issues raised are subject to exploration and, if necessary, further investigation through regular review processes
3. External review / site visit	
<ul style="list-style-type: none"> • Visits conducted by a team of reviewers; all are trained prior to completing review and their performance is evaluated • Review teams include an external member • Visits take place over a 2-3 day period and an agenda is developed in consultation with the program • Purpose of visit is to verify information provided by program, tour facilities, and conduct interviews with students, faculty, clinicians and others involved in the program • All teams may hold a closing visit / exit interview at the end of the visit 	<ul style="list-style-type: none"> • Review teams range in size from 2 (HCPC) to 6 (APC) members • APC includes site visits of 2-3 days depending on the number of sites and the complexity of matters to be addressed • HCPC and CAPTE may conduct joint visits with other accrediting bodies, e.g., professional association • Information provided in a closing meeting/exit interview varies from the reviewers providing information about findings and recommendations (APC, CAPTE, HCPC) to an overview of next steps in the process (PEAC) • APC includes opportunities for informal interaction with academic staff such as lunch and/or dinner.
4. Decision-making about accreditation status¹⁴	
<ul style="list-style-type: none"> • Review teams prepare a site visit report that is edited and forwarded to the program to provide any corrections about errors of fact or interpretations; the program's comments are included in the decision-making process • Decisions are made by the organization's governing body (e.g., Board, Council, Commission, Committee) and are based on recommendations made by another related body such as a Board, Panel, or Committee • There are stated parameters about a program's compliance with the accreditation criteria and/or the accreditation decisions, e.g., issue, weakness, deficiency, comment 	<ul style="list-style-type: none"> • HCPC reviewer report is action-based and does not provide a summary about discussions held during the visit • Varying levels of information are contained in reviewers' report, e.g., evidence of the program's compliance with accreditation standards, and related issues, weaknesses, deficiencies, or comments (PEAC); commendations, affirmations, comments and recommendations (APC); proposed conditions and / or recommendations for the program (HCPC) • CAPTE considers visit reports as confidential; the HCPC publishes visit reports on its (government) web sites

¹⁴ Information about the various types of decisions taken by accrediting bodies is included in Table 2 on page 6 of this report.

Table 12 Similarities and Differences in Accreditation Processes	
Similarities	Differences
<p>(PEAC); commendations, affirmations and recommendations (APC); non-compliance, conditional compliance, consultative comments, commendations (CAPTE); conditions, recommendations (HCPC) [no details provided by ISCP]</p> <ul style="list-style-type: none"> • Information about decisions is forwarded to program and educational institution and published by the accrediting organization • All organizations have a process in place for the education program to appeal an adverse decision about its accreditation status, e.g., error, oversight or omission in its decision-making or accreditation process or if matters have arisen since the decision was made, or if a conflict of interest occurred. 	<ul style="list-style-type: none"> • PEAC and CAPTE appoint a Primary Reviewer (CAPTE also appoints Secondary Reviewer) to conduct an independent review of all materials with respect to a program's accreditation review, lead discussion and make recommendations
5. Ongoing monitoring and periodic review	
<ul style="list-style-type: none"> • Responsibility of the program to maintain compliance with all accreditation standards • Accrediting organizations require programs to submit annual reports • Interim site visits may be conducted if areas of non-compliance are identified • Programs are obligated to report substantive changes to the accrediting organization 	<ul style="list-style-type: none"> • ISCP reviews reports annually only or pre-registration programs until their documentation is completed

7.0 ANALYSIS

The analysis involved consideration of three primary areas with respect to the selected accrediting organizations including the:

1. Context within which the accrediting organizations operate, i.e., authority, governance, decision-making, regulatory links, education models, number of accredited programs, and accreditation awards;
2. Standards and evaluative criteria; and
3. Key processes used by the accrediting organizations, i.e., program application, program self-study, external review / site visit, decision-making about accreditation status, and ongoing monitoring and periodic review.

The remainder of this section includes an overview of the results of the analysis in these three areas.

7.1 Context of the Accrediting Organizations

- All five accrediting organizations reviewed are similar with respect to authority and purpose, governance, and links with regulation. PEAC, CAPTE, HCPC, and ISCP are similar with respect to decision-making; APC recommendations require approval by the Physiotherapy Board of Australia. Examples of commonality include:

- developing the accreditation standards and using them for evaluation of education programs to ensure they meet established standards for quality and continuous improvement;
- decision-making by members of a governing body (i.e., Board, Committee, or Commission) about the accreditation status or recommended accreditation status of the education programs reviewed; and
- having established links between the accreditation status of entry-level education programs and the regulatory entry-to-practice standards, which means that students who graduate from accredited programs are either automatically eligible for registration to practice (i.e., in Ireland, United Kingdom) or, in countries where there is a national licensing examination, are eligible to take the examination (in Canada, United States), or in Australia are considered for registration based on graduation from an approved program and determination of suitability for registration.
- All accredited programs are university-based; there is currently a mixed model of education with programs offering a range from baccalaureate to professional doctoral entry-level professional degrees.
- The length of the accreditation cycle varies amongst the five organizations reviewed. One organization has an open-ended approval process (HCPC) and the remaining four organizations have cycles of 4, 5, 6, or 10 years. Each of the organizations monitors the education programs on a regular, annual basis, once full accreditation or approval has been granted.

It is important to note a major difference in the accrediting organizations, in that the HCPC is a regulatory body, while the remaining three comparator organizations and PEAC are independently incorporated with some indirect relationship to the respective physiotherapy professional association.

7.2 Standards and Evaluative Criteria

Generally, there was strong matching to the PEAC Criteria by CAPTE and ISCP (91% and 74% respectively). The matching of APC and HCPC was weaker (46% and 26% respectively), specifically with reference to Standard 6, as the APC Standards for Physiotherapy and the HCPC Standards of Proficiency are not directly included in the accreditation standards of those two programs (see Table 13). When all the matching is considered, including references to examples of evidence and guidance (i.e., when there is no explicitly matched criteria) and the APC Standards and HCPC Proficiencies, the level of matching increases to a range from 85% to 93% (see Table 14). Further details about the matching are included in Tables 13-15:

- Table 13 depicts the overall matching when only the strongly matched criteria are considered;
- Table 14 depicts the matching when both explicit and indirect reference to the PEAC criteria are present; and
- Table 15 depicts gaps in the accreditation standards of the comparator organizations, i.e., those standards for which there is no direct match with the PEAC criteria.

PEAC Standard (Total Criteria)	APC % (n)	CAPTE % (n)	HCPC % (n)	ISCP % (n)
1. Program Governance and Resources (6)	100 (6)	100 (6)	17 (1)	67 (4)
2. Program Development and Evaluation (6)	67 (4)	83 (5)	33 (2)	83 (5)
3. Faculty (6)	83 (5)	100 (6)	33 (2)	33 (2)
4. Students (6)	67 (4)	67 (4)	83 (5)	67 (4)
5. Accountability (4)	50 (2)	100 (4)	50 (2)	50 (2)
6. Physiotherapy Competencies (18)	-	94 (17)	-	94 (17)
Overall Matching (46)	46 (21)	91 (42)	26 (12)	74 (34)

PEAC Standard (Total Criteria)	APC % (n)	CAPTE % (n)	HCPC % (n)	ISCP % (n)
1. Program Governance and Resources (6)	100 (6)	100 (6)	83 (5)	83 (5)
2. Program Development and Evaluation (6)	83 (5)	83 (6)	83 (5)	83 (5)
3. Faculty (6)	83 (5)	100 (6)	83 (5)	83 (5)
4. Students (6)	83 (5)	67 (4)	83 (5)	83 (5)
5. Accountability (4)	50 (3)	100 (4)	75 (3)	75 (3)
6. Physiotherapy Competencies (18)	89 (16)	94 (17)	89 (16)	94 (17)
Overall Matching (46)	87 (40)	93 (43)	85 (39)	87 (40)

Accreditation Criteria	Programs with No Matching Criteria
1.1 The program faculty have responsibility for governance of the program and the authority to ensure program policies are implemented.	HCPC, ISCP
2.1 The program's vision, mission, and goals are consistent with those of the university and the profession.	APC, HCPC, ISCP
3.4 The rights and privileges of faculty are commensurate with other faculty in the university having comparable roles and responsibilities.	APC, HCPC, ISCP
4.1 The program ensures student participation in program planning, development, and evaluation.	APC, CAPTE, HCPC, ISCP
4.5 The program provides mechanisms for students to address their individual or programmatic academic and clinical placement concerns.	CAPTE
5.4 The program i) monitors its compliance with accreditation standards and the rules of PEAC on a continual basis, ii) takes required steps to ensure compliance, and iii) publishes its accreditation status.	APC, HCPC, ISCP
6.3.2 Prevent, manage, and resolve conflict related to client-centered care.	APC, CAPTE, ISCP
6.5.1 Work collaboratively to identify, respond to, and promote the health needs and concerns of clients.	HCPC
6.7.3 Contribute to the development of the physiotherapy profession.	APC, HCPC

Core Criteria

The PEAC standards include four core criteria that are judged to be essential in ensuring the quality of education programs (criteria 1.1, 1.2, 1.3, 2.6). These criteria are also critical in the PEAC's decision-making about an education program's accreditation status, i.e., 'A program must demonstrate full compliance with the established core criteria to be granted accreditation,

fully or partially compliant'.¹⁵ Table 16 depicts the level of comparator organization matching with the PEAC core criteria. In summary:

- APC has the strongest level of matching with all the PEAC core criteria, while the HCPC has the weakest level of matching.
- Neither HCPC nor ISCP include any criteria with respect to the education program faculty having responsibility and authority for governance of the education program and implementation of policies (PEAC Criterion 1.1).
- CAPTE and ISCP each have a strong match with three of the four PEAC core criteria.

PEAC Core Criteria	APC	CAPTE	HCPC	ISCP
1.1 The program faculty have responsibility for governance of the program and the authority to ensure program policies are implemented. [CORE]	✓ (4.7)16	✓ (F19)		
1.2 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. [CORE]	✓ (4.1,4.6,4.7)	✓ (F5,F6)	✓ (3.2,3.4)	✓ (4.2.1)
1.3 The program has adequate financial resources to achieve its stated goals and assure its continuing operation. [CORE]	✓ (4.6)	✓ (R4, F9)	✓ (3.1)	✓ (4.2.6)
2.6 Changes to the program and the curriculum are made in response to analysis of evaluation data and the impact of these changes is assessed. [CORE]	✓ (2.1,2.2)	✓ (P4)	✓ (5.4)	✓ (4.3.3)

Criteria Not Included in the PEAC Standards

There are also some criteria included in the standards of the comparator organizations that are not included in the PEAC standards. Some are primarily related to country and regulatory specific aspects such as, name of the education program, recognition by a governmental department of education, the duration of the program, and the entry-level degree. This information is specified in the PEAC eligibility requirements for participating in its pre-accreditation process (e.g., entry-level degree), or is not applicable, i.e., government recognition. Table 17 depicts the additional criteria the comparator organizations include in their standards that are not included in the PEAC standards.

Criteria	Comments
APC	
2.3 The university must provide evidence of comparative analysis of the program including systematic benchmarking and an evaluative commentary. Indicator 1: The university uses the outcomes of the Australian Graduate Survey and other mechanisms to rank the university's physiotherapy program with like physiotherapy programs. Indicator 2: The university undertakes benchmarked comparisons of the recognised subscales within the Australian Graduate Survey with the national means for like physiotherapy programs where such comparisons provide information that can be used within a quality process	These are specific details that could be matched with PEAC Criterion 2.5, although ranking is not a PEAC requirement, and there is no Canadian national graduate survey
3.5 The physiotherapy program must include a sustainable clinical education program	Not specifically included in

¹⁵ Physiotherapy Education Accreditation Canada (2012). Accreditation Handbook 2012: Education Programs. Author: London, ON. p.23.

¹⁶ The bracketed numbers are a specific reference to the organization's related accreditation criterion/indicator.

Table 17 Comparator Organizations' Criteria Not Included in PEAC Standards	
covering the required range and depth of clinical placements for all students in all key areas of physiotherapy, across all ages and from acute to community contexts. Indicator 1: Students are given sufficient grounding in professional ethics prior to undertaking supervised clinical practice; Indicator 5: Periods of supervised clinical practice are scheduled following relevant theoretical and practical education.	PEAC Criterion 4.3; details could be considered for inclusion in a program's policies and procedures (Examples of Evidence)
3.6 The university must provide evidence that the clinical education program includes clinical education placements that provide opportunities to develop competence in the key areas of physiotherapy, exposure to a range of settings (acute, rehabilitation and community) and to clients of all ages. Indicator 3: Students have online access to the university resources, professional and research databases whilst on clinical education placements; Indicator 4: There are specific procedures established for communication between the clinical educators and the students for both issues of client care and for teaching and learning whilst on clinical education placements.	
CAPTE	
<i>Core Faculty With Special Responsibilities</i> ACCE/DCE - F11 - 17: describes the qualifications, roles, and responsibilities of the ACCE with respect to the clinical education program <i>Clinical Education Faculty – F23-26:</i> describes the qualifications, roles, and responsibilities of the Clinical Education Faculty with respect to the clinical education of students	PEAC does not have specific criteria re: the ACCE or Clinical Education Faculty as they are considered members of academic faculty; these ACCE/DCE criteria could be matched with PEAC criterion 3.1
<i>Physiotherapy Competencies</i> CC-5.7 Incorporate pro bono services into practice. CC-5.54 Provide culturally competent care to patients/clients referred by other practitioners to ensure that care is continuous and reliable.	Could be matched with Role 6: Advocate, Criterion 6.5.1
HCCP	
5.5 The placement providers must have equality and diversity policies in relation to students, together with an indication of how these will be implemented and monitored.	No matching PEAC criterion

7.3 Key Accreditation Processes

The PEAC accreditation process incorporates the five key steps that have been identified as good practice for accrediting organizations including

1. Program application to accrediting organization,
2. Program self-study,
3. External review / site visit,
4. Decision-making about accreditation status, and
5. Ongoing monitoring and periodic review.

Although the level of detail was not available for some of the organizations (i.e., ISCP and APC), the review of the comparator accrediting organizations indicates they are similar in that they all incorporate these key steps in their accreditation processes.

8.0 PROJECT OUTCOMES, AREAS for FURTHER CONSIDERATION, and RECOMMENDATIONS

This report summarizes the results of a review of selected accreditation organizations for physiotherapy entry-level education programs external to Canada. The overall purpose of the review was to determine if recognition of international physiotherapy education accreditation programs is feasible. There were five related specific project purposes (described in Section 2

of this report); the results are depicted in Table 18.

Three steps were undertaken for the review including:

- Gathering information about the accreditation systems for physiotherapy entry-level education programs in Australia, Ireland, the United Kingdom, and the United States of America;
- Reviewing various aspects of each country’s accreditation standards and systems, e.g., evaluative criteria and decision-making processes; and
- Analyzing the accreditation standards and systems in comparison to the PEAC accreditation standards and systems.

It is important to note for this review that 1) accreditation standards and systems are the focus of the review, not physiotherapy competencies as they relate to graduate’s readiness for practice in each of the jurisdictions; 2) the HCPC in the United Kingdom is different from CAPTE, ISCP and PEAC in that it is a regulatory body; and 3) the APC is an independent company engaged by the Australian Health Practitioner Regulation Agency, on behalf of the Physiotherapy Board of Australia, to provide accreditation functions as described under Part 8 of the National Law. APC may be considered similar to the HCPC for the purpose of this review.

The draft Preliminary Report, was reviewed by members of the Steering Group, Physiotherapy Education Accreditation Canada, and the Canadian Alliance of Physiotherapy Regulators. The consultant incorporated the feedback from these groups in this final version of the Report.

8.1 Project Outcomes

Specific Project Purposes and Outcomes

Specific Project Purpose	Project Outcomes
1. Identification of countries internationally that have physiotherapy education accreditation programs in place.	International physiotherapy education accreditation programs selected as comparators with the Canadian accreditation organization (PEAC) included those established in Australia, Ireland, United Kingdom, and the United States of America (See Sections 3 & 4).
2. Increased understanding about education programs internationally and the processes and standards in place to accredit them.	Each accreditation program was reviewed with respect to six key areas including authority and purpose, governance and decision-making, links with regulation, education model, number of accredited programs, and accreditation awards and cycle. Results of the review are included in Section 4, and summary Tables 1 & 2.
3. Evaluation of the accreditation standards, for those countries with accreditation programs, in comparison to Canadian physiotherapy education accreditation standards.	<p>a) An overview was completed of the accreditation standards for each of the comparator programs and the PEAC, considering the document format and content such as broad standards categories, number and focus of evaluative criteria. Results of the general overview are included in Section 5.1 and summarized in Table 3.</p> <p>b) A detailed review of the standards was completed including the level of matching of the standards and evaluative criteria, and general and specific comments with respect to the similarities and differences with the PEAC standards and criteria. Results of the detailed review are depicted in Section 5.2 and Tables 6-11.</p> <p>c) The processes employed by the accreditation programs were reviewed with respect to the five key accreditation activities including program application to accrediting organization, program self-study, external review / site visit, decision-making about accreditation status, and ongoing monitoring and periodic review. All comparator</p>

Table 18 Specific Project Purposes and Project Outcomes	
	organizations and PEAC have in place a process that includes these five key steps and review results are depicted in Section 6, Table 12.
4. Recommendations about accreditation programs reviewed and how they compare to the Canadian benchmark.	Based on analysis of the accreditation program reviews: a) the overall levels of matching and gaps are identified of the comparator programs' standards and evaluation criteria with those of PEAC (See Section 7.2, Tables 13-16); and b) two recommendations are made with respect to the overall purpose of the project and two areas for further consideration are identified (See Section 8.2).
5. Creation of a list of comparable international physiotherapy education accreditation programs for consideration in future mutual recognition agreements.	The project partners will consider the project results overall and will subsequently make a final decision about the feasibility of establishing mutual recognition agreements with international physiotherapy education accreditation organizations (Project Next Steps).

**Overall Project Purpose and Outcome:
Feasibility for Recognition of International Physiotherapy Education Accreditation Programs**

Based on analysis of the reviews, **there is evidence to support the feasibility of exploring recognition of international physiotherapy education accreditation programs** including:

- The context of the accrediting organizations in the countries reviewed is similar with respect to authority and purpose, governance and decision-making, links with regulation, and monitoring of accredited education programs.
- Physiotherapy education in all jurisdictions reviewed is university based.
- When all the matching is considered, including references to examples of evidence and guidance (i.e., when there are no explicitly matched criteria), and the APC Standards for Physiotherapy and the HCPC Proficiencies, the level of matching in these four countries ranges from 83% to 92%.
- All comparator accrediting organizations have in place a process similar to the PEAC process that includes the five key steps for conducting accreditation of education programs.

8.2 Areas for Further Consideration/Discussion

1. Substantial Equivalency of International Physiotherapy Accreditation Programs with the PEAC Accreditation Program

When applied to educational programs, substantial equivalency means that two programs, while not identically meeting a single set of criteria, are both acceptable as preparing their respective graduates to enter formative development toward registration.¹⁷

With respect to physiotherapy regulation, The Canadian Alliance of Physiotherapy Regulators (The Alliance) 1) conducts credentialing to establish if the education and qualifications of internationally educated applicants are not substantially different from those of Canadian educated physiotherapists; and 2) administers the Physiotherapy

¹⁷ International Engineering Alliance. Available: <http://www.washingtonaccord.org>

Competency Examination (PCE) to determine a candidate's readiness for safe, effective, and independent physiotherapy practice.¹⁸

Currently,

- graduates of Canadian physiotherapy education programs that hold PEAC accreditation status are eligible to take the PCE without further assessment; and
- internationally educated candidates must successfully complete the Educational Credentials and Qualifications Assessment.

Therefore, if an international physiotherapy accreditation program is deemed as substantially equivalent to the PEAC accreditation program, would graduates of that international program be considered eligible to take the PCE, similar to the process for Canadian graduates?

2. Development of a Framework to Determine Substantial Equivalency of International Physiotherapy Accreditation Programs with the PEAC Accreditation Program

If equivalency of accreditation programs is to be utilized by The Alliance, it would be imperative to develop a framework, in collaboration with PEAC, to facilitate review of international physiotherapy accreditation programs and to guide decision-making about the substantial equivalency of these programs to the PEAC accreditation program. The framework should include identification of two main components that must be evident in the international accreditation program:

- Fundamental criteria with respect to the general areas of context, standards, and accreditation processes; and
- An established level or proportion of matching with the PEAC standards, with specific reference to the PEAC core criteria, physiotherapy competencies (Standard 6), and selected criteria that are key to Alliance credentials assessment (e.g., Standard 4.3 regarding supervised clinical practice hours).

In cases where the physiotherapy entry-level competencies are not specified in the accreditation standards, but are required to be addressed in the education program curriculum (e.g., in Australia and the United Kingdom), an additional assessment component would need to be added to the framework.

With respect to taking decisions about substantial equivalency, the framework could include a decision-making guide similar to the PEAC guide for taking decisions about an education program's accreditation status.¹⁹ For example, for the purposes of discussion, the following could be considered:

- *Substantially Equivalent or Not Substantially Different* could mean that the accreditation program has
 - a) evaluative criteria with a 100% match to the PEAC criteria in each of the six standards; or

¹⁸ The Canadian Alliance of Physiotherapy Regulators. Available: <http://www.alliancept.org>

¹⁹ Physiotherapy Education Accreditation Canada. (2012). Accreditation Handbook 2012: Education Programs. Author: London, ON. p.21.

- b) 100% match with the PEAC core criteria, and 80-100% match of the evaluative criteria in a minimum of four standards, and 50-79% match of the evaluative criteria in a maximum of two standards.
- *Substantially Equivalent with Further Consideration/Evaluation* could mean that the accreditation program
 - a) does not have 100% match with the PEAC core criteria, or
 - b) has less than 50% match with the evaluative criteria in one standard, or
 - c) has less than 80% of the evaluative criteria in three or more standards.

These guidelines are a general proposal only and would need to be established in much more detail by the parties involved, i.e., PEAC and The Alliance.

8.3 Recommendations

Based on the reviews of selected international physiotherapy education accreditation programs and the comparison of these programs with the PEAC accreditation standards and processes, and assuming the Board of Directors of The Alliance and PEAC agree to the general utility and benefit of proceeding, it is recommended that

1. A framework be developed to a) facilitate the review of international physiotherapy education accreditation programs more broadly and b) guide decision-making about substantial equivalency with the PEAC accreditation program, and
2. Recognition or substantial equivalency of international physiotherapy accreditation programs to the PEAC accreditation program be considered.

9.0 REFERENCES

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APPENDIX A PROJECT WORKPLAN AND DELIVERABLES

Project Workplan and Deliverables

Project Phase	Consultant Days	Deliverable
1. Document Review <ul style="list-style-type: none"> • Review and organize documentation available on-line • Request and gather additional information required • Complete preliminary document review 	1.5 1.5 3.0	Confirmation of list of countries with accreditation systems and documentation available
2. Comparison with Canadian Benchmark <ul style="list-style-type: none"> • Prepare matrix to record and compare data • Complete matrix 	2.0 5.0	Summary and Analysis of qualitative information gathered
3. Preparation of Report <ul style="list-style-type: none"> • Prepare Draft Report for consideration by partners 	3.0	Draft report including summary, analysis and recommendations
4. Meeting to Discuss Results of Review <ul style="list-style-type: none"> • Prepare and distribute documents for review (report, slides, focused questions) • Attend partner meeting (Toronto) • Revise Draft Report as required 	1.0 1.0 2.0	Final report based on feedback
TOTAL	20 days	