

PREAMBLE

Upon recommendation of the Program Accreditation Committee (PAC) to the Canadian Athletic Therapists Association (the Association) Executive Director and ratification of the recommendation, the Association grants accreditation to educational programs in athletic therapy.

PURPOSE OF MANUAL

This *Canadian Athletic Therapists Association Program Accreditation Manual* provides standards, policies, procedures, samples, and guidelines used by the PAC to evaluate accreditation applications and to inform accreditation application packages. These standards constitute the minimum requirements a program must achieve and maintain for accreditation.

MANUAL STRUCTURE

The *Canadian Athletic Therapists Association Program Accreditation Manual* is divided into five sections:

1. Introduction
2. Policies and Procedures of the Program Accreditation Committee
3. Accreditation Policies and Procedures
4. Accreditation Standards
5. Appendices
 - Appendix A – Accreditation Application Package
 - Appendix B – Sample Site Visit Agenda
 - Appendix C – Sample Site Visit Questions
 - Appendix D – Site Visit Report
 - Appendix E – Guidelines and Recommendations for Writing Site Visit Report
 - Appendix F – Accreditation Appeals Process
 - Appendix G – PAC Annual Report
 - Appendix H – Programmatic Evaluation Plan Template
 - Appendix I – Course Equivalency Checklist

1. INTRODUCTION

The Association promotes appropriate standards of quality for educational programs in athletic therapy and provides accreditation for educational programs that meet or exceed the standards outlined in this manual.

Members of the PAC are Association members who help to advance the profession through their affirmation to the goals and standards established by the Association.

The relationship between PAC and the programs is meant to help facilitate program development, growth and innovation through program self-analysis, and PAC evaluation and feedback of program annual reports and accreditation packages. Site visitation teams assist in the evaluation of a program's compliance with the minimum standards for accreditation.

2. POLICIES AND PROCEDURES OF THE PROGRAM ACCREDITATION COMMITTEE

The Program Accreditation Committee (PAC) is a standing committee of the Association, reporting directly to the CATA Executive Director. All committee members are required to disclose all potential conflicts of interest (COI) prior to accepting a position on the committee. When a COI is declared, the committee member will be removed from all discussions pertaining to the specific subject matter where a perceived COI may arise.

2.1 OBJECTIVES

PAC objectives are to administer:

- support to CATA program accreditation applicants with program development,
- support to accredited institutions with program development,
- post-secondary curriculum evaluation guidelines for athletic therapy programs,
- policies and procedures for receipt, evaluation, and recommendation of applications by post-secondary institutions seeking accreditation, and
- maintenance of accreditation policies and procedures.

2.2 COMMITTEE STRUCTURE

The PAC is comprised of nine members who are Certified Athletic Therapists of the Association. All members must have a postgraduate degree and curriculum development and delivery experience at the post-secondary level. In addition, at least one member of the PAC must be proficient in French. Committee members are appointed for a maximum of a 3-year term.

The Chairperson of PAC is nominated by the committee and ratified by the Association's Executive Director. The other members are nominated by the PAC Chair to the BOD.

2.3 MEETINGS

The Committee usually meets four times a year, including at the annual conference of the Association. Between these meetings, ongoing committee business is conducted as necessary by e-mail and videoconferencing.

3. ACCREDITATION POLICIES AND PROCEDURES

3.1 GOALS AND OBJECTIVES

1. To ensure that each accredited institution providing Athletic Therapy education has the resources to produce an entry-level professional who can meet accepted standards (i.e. CATA certification) of athletic/active patient care.
2. To provide guidance for those establishing new educational programs in athletic therapy.
3. To provide guidelines for the faculty and administration of existing athletic therapy accredited programs to self-assess, plan, and continually review their own facilities, personnel, and curriculum to meet changing needs.
4. To ensure that accredited programs have a competency development model that is complemented by a programmatic evaluation master plan.
5. To ensure that clinical and practical standards are carried out under the supervision of accredited institution personnel and/or the institution's clinical educators
6. To ensure that the public interest is served.
7. To provide a clearly outlined process of accreditation that is fair and that ensures due process.

3.2 ELIGIBILITY

Educational programs are eligible for accreditation if the post-secondary institution is a member of the Association of Colleges and Institutes Canada (CICan) or Universities Canada accredited and meets the standards for education in athletic therapy as stated in the CATA Standards for Accreditation.

3.3 ACCREDITATION APPLICATION

3.3.1 Application package requirements are posted on the CATA website. Applications for accreditation for programs with expiring accreditation are due on **September 1st**, one year prior to expiry. Applications for the accreditation of new programs are due **September 1st**, in the year prior to anticipated implementation.

3.3.2. The application submission (for new programs and those with expiring accreditation) includes:

- a) a cover letter from the President, Vice President academic, and/or Provost of the post-secondary institution.

- b) a completed application package (Appendix A), and
- c) the application fees.

3.3.3 Accreditation Year

Accreditation year begins on **September 1st** and continues until **August 31st** of the expiration year (depending on length of accreditation).

3.3.4 Accreditation Fees

Accreditation fees are non-refundable and used to help defray costs of the Program Accreditation Committee operations.

Fee	Amount	Explanation
Initial Application Fee (non-refundable)	\$3000 (Set 2018)	<ul style="list-style-type: none"> a one-time fee that is submitted with the institution's initial application for accreditation this fee applies to first time applicants and applicants who have had a previous accreditation withdrawn
Application Fee for Institutions with Expiring Accreditation (non-refundable)	\$2500 (Set 2025)	<ul style="list-style-type: none"> this fee applies to institutions with expiring accreditation who are reapplying for accreditation
Annual Program Fee	\$2500 (Set 2025)	<ul style="list-style-type: none"> due each year payment is due 30 days after the invoice is received
Site Visit Team Expenses	expenses vary	<ul style="list-style-type: none"> expenses of the PAC site visitation team are the responsibility of the institution/program seeking accreditation or re-accreditation (refer to section 3.3.8)

3.3.5 Initial Review of Application Package

- a) The PAC Chair circulates the application package to all PAC members for review.
- b) A primary and secondary reviewer from the PAC are assigned to review the application package.
- c) A virtual meeting is scheduled for all PAC members to discuss information brought forward by primary and secondary reviewers and to discuss the merits of the application package.
- d) The PAC Chair, or primary reviewer, will provide an initial response to the applying institution by November 1st of the application year.
- e) The findings of the initial review process will dictate the timing of a site visit. All

accreditation applications (new programs and institutions with expiring accreditation) will include a site visit.

- f) With regard to new programs, a finding after the initial review process could be a provisional accreditation if the committee determined a new program has met most of the basic criteria, but a site visit may be premature. In cases like these, it may be in the best interest of new programs to make structural program changes related to deficient standards prior to the site visit, which may take time. Moreover, provisional accreditation may be more appropriate to avoid multiple site visits in a short period of time.

3.3.6 Site Visit

1. The purpose of the site visit is to validate the application package and evaluate the program's compliance with the accreditation standards.
 - a) The primary reviewer, who chairs the site visit team, will contact the Program Director of the institution to select tentative dates for a site visit.
 - b) The site visit will occur over two consecutive days during the months of January - April.
 - c) The site visit team will consist of the site visit chair and two additional site visit team members (one PAC member and one non-PAC member). Where possible, this non-PAC reviewer will be local to the region with no affiliation to the institution. The non-PAC reviewer must be a Certified Athletic Therapist of the Association. Non-PAC reviewers will be recruited based on the following qualifications: post-graduate degree, post-secondary teaching experience, prior accreditation experience, clinical teaching experience, national or provincial association committee experience, curriculum development and evaluation experience. Prior to the site visit, non-PAC reviewers are required to complete the confidentiality and conflict of interest form that is required from all Association volunteers.
 - d) Prior to the site visit, the Program Director of the sponsoring institution is notified of the names and institutional affiliations of the individuals assigned to the team. If any member of the site visitation team is unacceptable, a request to change the team composition may be forwarded to the site visit chair for consideration. However, final decisions regarding the suitability of any site visit team member will be at the discretion of the site visit chair, in conjunction with the PAC Chair.
 - e) The site visit chair will provide a copy of the applicant's application package and the results from PAC's initial review to the external member of the site visit team.
 - f) In consultation with the institution, the site visit chair will set the site visit final agenda in collaboration with the Program Director, a minimum of 6 weeks in advance of the site visit. The site visit team reserves the right to adjust the agenda on site. See Appendix B for sample agenda.
 - g) The site visit chair organizes a preliminary conference call to discuss the visit.

- The site visit team should also be prepared to meet on the eve of the site visit.
- h) Site visit occurs

3.3.7 Site Visit Logistics

1. The following individuals from the sponsoring institution will be included as a part of the site visit: Vice-President Academic or designate, Dean/Chairperson, athletic therapy Program Director, core athletic therapy faculty, non-athletic therapy faculty, current athletic therapy students, clinical educators or equivalent, and other administrative personnel as required. Additional administrative personnel may include but is not limited to the registrar, director of student services, librarian, and school administrative support staff.
2. The individuals outlined in 3.3.7.1. will be available to the site visit team for the following:
 - a. A scheduled meeting as per the set agenda,
 - b. If necessary, an additional meeting to address questions that arose during the site visit.
3. Appendix C has a listing of the potential site visit questions.
4. The on-site evaluation includes a review of both the didactic and practicum aspects of the program including visits to both on-campus and off-campus practicum sites to evaluate the integration of the various aspects of the program. All clinical sites should be within one hour from the meeting site that allows visitation within the allotted period of time the site visit team is on campus. The number of off-campus practicum sites to be visited is determined by PAC.
5. The institution must provide a conference room or office for the site visit team to use throughout the visit.
6. The institution must provide internet access for the site visit team.

3.3.8 Site Visit Costs

1. Sponsoring Institution Costs - the sponsoring institution is responsible for payment of site visitor expenses as per the Association's expense policy. PAC will assign three (3) site team members to each site visit team. The costs associated with each site visit varies by location. Site visit expenses for each member of the site visit team include airfare, airport parking fees, baggage fees, meals in transit (as per current CATA policy), transportation/mileage to and from home, the airport, the institution, and off-campus practicum sites (if applicable). The external reviewer will be provided an honorarium of \$500.

On site expenses for sponsoring institutions include hotel costs for each member of the site visit team, workrooms at the hotel and on campus with internet access for the site visitation team, transportation from the destination airport to the hotel and back, transportation from the hotel to and from the campus, and meals and refreshments for the site visit team during the duration of the site visit.

The arrangements for travel, accommodation and meals will be made between the institution's Program Director and the Site Visit Chair or designate. The Association submits a final invoice to the institution after the site visit for all site visitation team expenses. Expenses that appear excessive are investigated by the PAC Chair prior to invoicing the program. If a sponsoring institution deems expenses as being excessive, a formal request can be sent to the PAC Chair and CATA Executive Director. An investigation will be completed, and a response will be sent to the sponsoring institution.

2. Association Costs – if applicable, site visit team members are eligible for work release at a rate of \$100/hour to a maximum of 5 hours per site visit. A separate expense claim detailing the actual work coverage costs will be submitted by the replacement individual to the Association, for payment by the Association.

3.3.9 Site Visit Report

The site visit report (see Appendix D) is comprised of the following sections:

- Accreditation Standards checklist
- Individuals interviewed during visitation
- Summary of program strengths
- Summary of program deficiencies
- Recommendations relevant to the program

Responsibilities and Timing for Report

1. The site visit chair is responsible for final preparation, writing and submission of the site visit report (See Appendix E - Guidelines and Recommendations for Writing Report), with assistance and input from the other site visitation team members.
2. All sections of the report are to be completed and submitted to the PAC Chair for circulation to PAC members within 15 days following the on-site visit.
3. A PAC-member approved "draft" report must be circulated to the sponsoring institution athletic therapy Program Director and Director/Dean of the department/faculty by the site visit Chair within 30 days following the on-site visit.
4. The sponsoring institution will have a maximum of 2 weeks to review and authenticate the content of the site visit report for factual errors.
5. Upon authentication by the sponsoring institution, the site visit Chair will finalize the site visit report and submit it to all members of PAC.
6. The final site visit report will be included in the institution's full application for deliberation of final accreditation recommendation by the PAC.

3.3.10 Final Accreditation Review and Recommendation

1. Following the PAC adjudication, the PAC Chair forwards the committee's recommendation for accreditation, including any provisos to CATA's Executive Director

with accompanying rationale explaining each proviso.

2. Provisos are actionable items for the institution with identified deadlines, and respective consequences.
3. The Executive Director's ratification is sent to the PAC Chair.
4. The PAC Chair sends an executive report which summarizes key findings from the written application and site visit review, and communicates the decision regarding the institution's accreditation status, duration, including any provisos to accreditation to the Program Director, Chair and Dean or designate by July 31 of the year the accreditation term ends.
5. The PAC Chair communicates accreditation decisions to the CATA Administrator(s), who issue a Certificate of Accreditation to be sent to the sponsoring institution.

3.3.11 Accreditation Outcomes

Review of an application for accreditation or re-accreditation results in one of the following decisions:

1. No accreditation
2. Provisional accreditation for new programs
3. Two (2) to five (5) year accreditation with proviso(s)
4. Five (5) year accreditation
5. Suspension of accreditation
6. Withdrawal of accreditation

No Accreditation

This designation is assigned when the application package and/or site visitation results are such that the program does not achieve the standards for program accreditation.

Provisional Accreditation for New Programs

This designation is assigned for a new program when the application package and/or site visitation results are such that the program has yet to achieve the standards for program accreditation. This accreditation designation will only be possible if most of the key standards for accreditation have been met but need additional refinement. Provisos will be based on program deficits (i.e.: NYC or Partially Compliant standards). Provisos will be given a finite timeframe to make program changes and if the program desires to have graduates of the program eligible for the CATA exam while on provisional status, a plan must be established to ensure all graduates are meeting the standards and competencies expected of Athletic Therapy graduates in Canada.

Two to Five-Year Accreditation with Proviso(s)

This designation is assigned when the application package and site visitation results are such that the program meets standards for program accreditation following the completion of the proviso(s). Provisos are actionable items for the institution with identified deadlines, and respective consequences. Provisos are associated with standards for which the institution have been evaluated as Not Yet Compliant (NYC) or Partially Compliant (PC)

Five-Year Accreditation

This designation is assigned when the application package and site visitation results are such that the program have been evaluated as compliant with most of the standards for program accreditation.

Suspension of Accreditation

This designation is assigned when an institution: does not submit their annual report by May 15th; fails to achieve provisos as a part of their accreditation; or does not remain compliant with the standards for program accreditation.

Note: Students attending a program under suspension are not eligible to apply to become a member of the Association. Students who have commenced their academic program in an accredited institution for which the suspension designation is then later assigned, may remain members of the association until graduation from the said program. No leave of absence can incur during their studies to satisfy this leniency. No new students will be granted membership until the suspension of accreditation has been rectified.

Withdrawal of Accreditation

This designation may be:

- requested by an institution.
- assigned to an institution that remains suspended for **3 consecutive months**.

Unless at a sponsoring institution's request to withdraw their accreditation, when accreditation is withdrawn, the institution's athletic therapy Program Director, Dean/Chair or designate are provided with the following information:

- a clear statement of each deficiency in the program's relative compliance with the standards of program accreditation; and
- notification that application for accreditation would be as a new applicant.

Note: Students attending a program under withdrawal are not eligible to apply to become a member of the Association. Students who have commenced their academic program in an accredited institution for which the suspension designation is then later assigned, may remain members of the association until graduation from the said program. No leave of absence can incur during their studies to satisfy this leniency.

3.3.12. Accreditation Appeals

The institution may request an appeal of the Association's accreditation, suspension, or withdrawal to the Executive Director of the Association (Appendix F - accreditation appeals process).

3.4 MAINTENANCE OF ACCREDITATION

To maintain accreditation an accredited program must:

1. Submit a PAC annual report (Appendix G) by May 15th for each year, exclusive of accreditation application year.
2. Pay the \$2500 annual program accreditation fees.
3. Maintain compliance with the standards of their accreditation.

4. ACCREDITATION STANDARDS

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4.2 STANDARDS FOR ACCREDITATION

A. POST-SECONDARY INSTITUTION STANDARDS

1. The post-secondary institution and affiliates, if any, must be accredited by Universities Canada or the Colleges and Institutes Canada (CICan).
2. For programs in which academic and clinical instruction and supervised practice are provided by two or more institutions, responsibilities for program administration, instruction, supervision, and other functions of the sponsoring institutions and of each affiliate must be clearly documented in a formal affiliation agreement or memorandum of understanding among the parties.
3. Accredited educational programs must be established in a degree-granting post-secondary academic institution which meet standards for education in athletic therapy.
4. Post-secondary institutions assume primary responsibility for student admission, curriculum planning as per Association curriculum standards, selection of course content, co-ordination of classroom teaching and supervised practicum experiences, appointment of faculty, and granting the credential documenting satisfactory completion of the educational program.
5. The institution must ensure full liability protection for students during field and clinical practicums.
6. The institution must be authorized under applicable provincial law and statute to provide a program of post-secondary education.

B. RESOURCES

1. Personnel Resources

a) Program Leadership/Athletic Therapy Education Program Direction

Qualifications: The Director of the program must be a full-time member of the academic staff. The Director of the program must be a Certified Athletic Therapist of the Association for a minimum of 10 years. The Director of the program should have a strong academic orientation and should have demonstrated an interest and have experience in the professional preparation of students.

Academic qualifications for the Program Director are PhD preferred, thesis-based Master's required.

Responsibilities: For each institution, the title of the individual(s) responsible for program direction, leadership, day-to-day operation, coordination, and supervision of

the athletic therapy education program may vary. Notwithstanding their title, this individual is responsible for overseeing the curriculum of the program, inclusive of programmatic and course changes, evaluation plan for core athletic therapy competencies and for working with core athletic therapy faculty in effective planning and implementation of student academic and practicum experience in the athletic therapy program. The Program Director will also serve as the institutional representative with the Committee of Accredited Institutions of the Association.

b) Core Athletic Therapy Teaching Faculty

Qualifications: The full-time core athletic therapy teaching faculty must be a Certified Athletic Therapist of the Association for a minimum 3 years and be full-time members of the academic staff. Academic qualifications for the core athletic therapy teaching faculty are PhD preferred, thesis-based Master's required.

Number: There must be a minimum of two full-time core athletic therapy teaching faculty at all times during the academic year including leaves and vacations. The number of core athletic therapy teaching faculty must also be sufficient to maintain student-to-faculty ratios that allow for effective instruction and evaluation. The qualitative metrics for evaluating the appropriate full-time complement for an institution will include: 1) the ability to deliver a competency-based education curriculum, and 2) effectively evaluating students. PAC will rely on faculty interviews, student interviews, and practicum agency interviews to gather data to evaluate curriculum delivery and student evaluation. The recommended full-time faculty complement is one that maintains a ratio of one (1) core athletic therapy faculty member per eight (8) athletic therapy students, based on the program's first year intake.

Responsibilities: Faculty members responsible for teaching required athletic therapy core subject matter, must be a Certified Athletic Therapist of the Association.

Athletic therapy education is interdisciplinary in nature. Therefore, teaching faculty for non-core courses may be comprised of individuals from various academic units and disciplines including medicine, biology, chemistry, physics, psychology, education, nutrition, health, and kinesiology/physical education.

All faculty members teaching courses within the accredited athletic therapy program (courses identified in the competency framework document) must be familiar with the athletic therapy competencies.

c) Instructional Support Staff

Teaching / Instructional Assistants/Laboratory Demonstrators

Qualifications: Any individual assisting with the instruction of core athletic therapy courses must be a current Certified Athletic Therapist of the Association.

Responsibilities: As per institutional position responsibilities.

Practicum Coordinator

Qualifications: The practicum coordinator must be a Certified Athletic Therapist of the Association. This individual may also be a part of the teaching faculty.

Responsibilities: A practicum coordinator provides administration of the field and clinical practicum experiences. This includes but is not limited to engagement with program curriculum, orientation of the clinical educators and site suitability.

Practicum Instructor

Qualifications: The Practicum Instructor must be a current certified athletic therapist of the Association. This person is typically a faculty member (e.g., contract or full-time). There are many titles for this position at various institutions including, but not limited to: faculty member, instructor, professor, clinical mentor, and clinical supervisor.

Responsibilities: The Practicum Instructor is the primary person responsible for the final grade allocation from the accredited program but must work closely with the clinical educator to determine the grade. This person is responsible to liaise with both the clinical educator and the student placed at the clinical educator's field or clinic environment. This person helps build the clinical educator's capacity for student evaluation and feedback with the ultimate goal of students becoming competent professionals in athletic therapy. Moreover, formative and summative feedback and capacity building for the clinical educators is the responsibility of the Institution-Faculty Liaison.

d) Administrative Support Staff

Sufficient clerical and other support staff should be readily available to the athletic therapy program.

e) Clinical Educators

Qualifications: A clinical educator should be a current certified athletic therapist of the Association. Allied healthcare professionals may act as clinical educators provided that it is not the student's only experience throughout their program. This individual is not required to be an institutional employee.

Responsibilities: A clinical educator provides supervision and education of students in the practicum aspects of the athletic therapy education program. This includes but is not limited to engagement with program curriculum, orientation, training, and student evaluations. They work with the Practicum Instructor to complete student evaluation and provide feedback that optimizes student progress and competency development.

2. Professional Development

Where collective agreements are silent on professional development, all full-time athletic therapy faculty teaching athletic therapy core curriculum should be afforded professional development opportunities by the sponsoring institution.

3. Financial Resources

The financial resources for the athletic therapy educational program must be ensured to fulfil obligations for ongoing program development and delivery.

4. Physical Resources

a) Facilities

The classrooms, laboratories, clinical and other facilities, faculty, and administrative offices must ensure adequate experiential learning opportunities for all students enrolled within the athletic therapy program to support the knowledge, skills and aptitudes needed for a competent entry-level athletic therapist.

b) Equipment and Supplies

There must be appropriate and sufficient equipment, supplies, and storage space to ensure adequate experiential learning opportunities to support the knowledge, skills, and aptitudes needed for a competent entry-level athletic therapist.

There must be appropriate instructional and audio-visual aids included, but not limited to, clinical specimens, anatomical models, modalities, tables, tape, emergency care and rehabilitation tools to support the applied learning experiences delineated by the educational components of the curriculum.

Therapeutic Modalities and Rehabilitation: There must be a wide range of contemporary therapeutic modalities and rehabilitation tools available for instructional and practice purposes.

First Aid and Emergency Care Equipment: There must be a range of contemporary equipment and supplies in emergency care for instructional and practice purposes.

c) Learning Resources

Students in the athletic therapy program must have ready access, in time and location, to an adequate supply of current books, journals, periodicals, and other reference materials related to the curriculum.

C. STUDENTS

1. Admission Policies and Procedures:

The specific academic and technical standards for admission of students must be made in accordance with clearly defined and published policies of the institution.

The policies and standards regarding advanced placement, transfer of credit (*see Appendix I for sample*) and credit for experiential learning must be available to students.

2. Evaluation of Students:

a) Programmatic Evaluation Plan

Programs should have an overall evaluation master plan for the program that aligns with the competency development model. Student evaluation should be frequent, regular, formative, and summative to facilitate competency development. Programs should have a student remediation policy and procedures. Evaluation of students should assess the acquisition of knowledge, problem identification and problem-solving skills, and psychomotor, behavioral, clinical, and on-field competencies. To help describe the programmatic evaluation plan, a template has been provided in Appendix H.

b) Student Course Evaluation Methods

The criteria for successful completion of each course of the curriculum shall be given in advance to each student. Evaluation methods shall include content related to the objectives and competencies described in the curriculum for both didactic and supervised clinical education. Mechanisms should be in place for students to document appropriate learning experiences and curriculum sequencing to develop the competencies necessary for graduation, including appropriate instructional materials, classroom presentations, discussions, demonstrations, supervised clinical and on-field practica, and other practical evaluations.

c) Frequency and Level of Competency Evaluation

The program must identify the frequency to which competencies are evaluated at levels of introduction, applied, and entry level competence.

d) Graduation Requirements

The program specific graduation requirements must be made available to each student

D. OPERATIONAL POLICIES

1. Fair Practices:

- (a) The program marketing and advertising must accurately reflect the program offered.
- (b) Student admission, faculty and staff recruitment, and faculty and staff employment practices shall be non-discriminatory.
- (c) The institution must accurately publish academic credit and full program costs to the student (including additional specific program fees).
- (d) The institution shall have a defined and published policy and procedure for processing student and faculty grievances.
- (e) The policies and procedures for students' withdrawal, and for refunds of tuition and fees, shall be published.
- (f) The programs must submit a student code of conduct which clearly outlines the program expectations. This code of conduct must ensure that students are not substituted for regular staff in an experiential learning environment or practicum.

2. Student Records:

- (a) Satisfactory records shall be maintained for student admission, attendance, and evaluation. Grades and credit for courses shall be recorded on the student transcript and permanently maintained by the post-secondary institution in a safe and accessible location. In partnership with the Office of the Registrar, a process must be known for accessing and/or verifying student records when required.

E. PROGRAM EFFECTIVENESS

The program must:

1. Systematically obtain and provide substantial and accurate information on its educational effectiveness especially as measured by student achievements, including metrics such as CATA certification rates, graduation rates, employability, attrition, and student satisfaction.
2. Maintain a clearly articulated curriculum map.
3. Ensure that there is a process in place for adequately documenting degree progression and completion. Also, verify that degrees are conferred on the basis of educational achievement assessed and documented through appropriate measures.
4. Each Institution must have a policy regarding minimum passing grades for all AT core courses.

F. CURRICULUM REQUIREMENTS

Competency Framework: programs will design curriculum to include the competency framework and competencies. Two guiding definitions of competency-based education and standards should help provide an overarching guide to program design and development:

Competency-based education is a strategy that progressively exposes students to a continuum of learning that fosters the development of general and specific knowledge, skills, and dispositions. CBE requires a combination of instruction, experiential learning, and assessment.

National Standards of Practice (also known as Entrustable Professional Activities) are performance benchmarks that Certified Athletic Therapists are expected to achieve in accordance with the Competencies as defined by the Canadian Athletic Therapists Association.

Description of the Program:

- 1) Faculty and students shall be provided with a clear written description of the program and its content including learning goals, course objectives, supervised practicum assignments and competencies required for graduation.
- 2) The program articulates a student competency framework that coincides with the overall program delivery and curriculum and CATA competencies.
- 3) Learning and scholarship must be demonstrated in the following subject matter areas:
 - i. concussion assessment and management*
 - ii. prevention of athletic injuries/illness*
 - iii. assessment of athletic injuries/illness*
 - iv. emergency care*
 - v. therapeutic modalities*
 - vi. rehabilitation principles*

- vii. taping and bracing*
- viii. ethics, professionalism, and cultural competence*
- ix. patient education and advocacy*
- x. therapeutic exercise*
- xi. strength and conditioning
- xii. business of athletic therapy
- xiii. human anatomy
- xiv. human physiology
- xv. exercise physiology
- xvi. biomechanics
- xvii. food and nutrition
- xviii. sport and exercise psychology
- xix. pharmacology
- xx. pathology
- xxi. research methods and statistics
- xxii. health
- xxiii. adapted physical activity
- xxiv. motor control and learning
- xxv. Indigenization and decolonization
- xxvi. equity, diversity, and inclusion
- xxvii. leadership and communication

* = Core Athletic Therapy Course, must be delivered by core athletic therapy teaching faculty

- 4) Practicum experiences are necessary to compliment didactic courses. Clinical and field practica should be integrated and sequenced simultaneously with other theoretical and experiential learning in the curriculum. The curriculum shall include provision for clinical and field practica under a clinical educator in an acceptable clinical and field setting. All programs shall have a field practicum in every semester of the final two years of the program.
 - i. The athletic therapy curriculum is to include provision of practicum courses that provide students with opportunity for field and clinical experience under the supervision of a qualified clinical educator.
 - ii. Practicum experiences should be initiated early in the student's program and should be designed to provide the student with sufficient opportunity to develop specific competencies pertaining to the practice of athletic therapy. These experiences should assist the student to develop their knowledge, skills, and dispositions that progresses from introduction, to application, to entry-level competence.
 - iii. Practicum experiences must provide each student with exposure to a variety of sports, genders, clinical educators, clinical and field environments.
 - iv. Supervised clinical practicums must ensure that the clinical educator is readily

- accessible to students for instruction and guidance. In a clinical setting, there must be a ratio which does not exceed four students to one on site clinical educator during the student's practicum at a single time.
- v. Supervised field practicums must ensure that the clinical educator is readily accessible to students for instruction and guidance. In a field setting, there must be a ratio which does not exceed eight students to one clinical educator during the student's practicum at a single time.
 - vi. Supervision in both field and clinic practicum should be based on curriculum design, the programmatic evaluation plan and levels of entrustment that are ladderred into the curriculum over time. For example, earlier in the curriculum when students have some theoretical knowledge and testing, they would require more supervision until enough experience is gained to entrust students with varying and safe levels of guided autonomy. Once more knowledge and experiences are gained by the students and those competencies are well-documented, students should be given more guided, autonomous professional activities.
 - vii. Interprofessional educational opportunities should be part of practica.
 - viii. All practicum courses should be designed in such a manner that there are practical experiences (also known as practical hours) in both a clinic and field setting. Those courses must also have a formal classroom component whereby experiences gained in the practicum setting can be debriefed by the instructor, and also where practical skills can be honed for practical application in authentic environments. Due to the practical nature of these activities (I.e., psychomotor skills development), class sizes should be set up with similar supervisory ratios as the practicum setting.
 - ix. All practicum courses should provide a minimum of 8 and a maximum of 24 practical hours a week not including travel.

**Canadian Athletic Therapists Association
Program Accreditation Application
Checklist/Table of Contents**

Appendix A – Accreditation Application Package:

A – Post Secondary Institutional Mission and Objectives

B – Resources

C – Students

D – Curriculum Description

E – Field and Clinical Practicum Sites

F – Syllabi for Courses

G – Course Resources

H – University Calendar

I – PAC Annual Reports

J - Appendices

Appendix A – Accreditation Application Package

CANADIAN ATHLETIC THERAPISTS ASSOCIATION PROGRAM ACCREDITATION COMMITTEE

APPLICATION FOR INITIAL ACCREDITATION AND INSTITUTIONS WITH EXPIRING ACCREDITATION

Signed by the President of the sponsoring institution, or the delegated representative, this application is a request that the Canadian Athletic Therapists Association's (CATA) Program Accreditation Committee begin the process of accreditation review of the applicant program.

The accreditation process is initiated only at the request of the institution sponsoring the Athletic Therapy program. This process provides external peer review of the Accreditation Standards. Applications are due September 1st of the year prior to program implementation. A non-refundable fee of \$3000 is due with all initial applications. After initial accreditation, a non-refundable fee of \$1500 is due with all subsequent applications for accreditation.

PLEASE TYPE OR PRINT INFORMATION CAREFULLY

Name of Sponsoring Institution

SPONSORING INSTITUTION'S OFFICIALS

President	Degree/Credentials	Date
-----------	--------------------	------

Signature	Date
-----------	------

Mailing Address

City, Province, Postal Code	Area Code and Telephone No.
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VP Academic	Degree/Credentials	Date
-------------	--------------------	------

Signature	Date
-----------	------

Mailing Address

City, Province, Postal Code Area Code and Telephone No.

Dean (or Comparable Administrator) Degree/Credentials

Date

Signature

Date

Mailing Address

City, Province, Postal Code Area Code and Telephone No.

PROGRAM INFORMATION

Degree Name

Major, where applicable

Mailing Address (if different from sponsoring institution's address)

City, Province, Postal Code

Area Code and Telephone No.

PROGRAM OFFICIALS

Program Director		Degree/Credentials	
Area Code & Telephone Number			
Length of Program/Degree		Degree Granted (Specify – BA, BSc, BKin, etc.)	
Average annual tuition for full-time students:		Domestic	International
Number of students:	Within province	Out of province	International
Maximum first year enrollment capacity			
Expiration of Current Accreditation (Month/Year)			

Submit this completed application electronically to:

Chair, CATA Program Accreditation Committee c/o CATA
#300, 400 5th Avenue S.W.
Calgary, AB, T2P 0L6

pac_chair@athletictherapy.org

A. POST-SECONDARY INSTITUTIONAL MISSION AND OBJECTIVES

Institution's Mission

Program Objectives

Degree Requirements

(Provide detailed description of the specific requirements for your degree(s) as outlined in the institution's academic calendar.)

Cooperation with Other Academic or Professional Units

Description of Cooperation with Other Academic or Professional Units

B. RESOURCES

Program Director

Qualifications:

Responsibilities:

Faculty

Faculty Name & Rank	Credentials	Type of Apptmt	Yrs. of Service	Areas of Involvement (Teaching, Clinical, etc.)	Courses/Workload (Most recent year)
<i>AT Faculty Members</i>					
<i>AT Contract Lecturers/Instructors</i>					
<i>Other Faculty Affiliated w/Unit</i>					
<i>Staff</i>					

Practicum Coordinator

This is administrative and leadership role. It can be completed by a faculty member who has been granted release time for the associated duties, but it should be distinctively different than an instructor role (see below).

Qualifications:

Responsibilities:

Practicum Instructor

This is a faculty member (part time or full time) that is responsible for the final grading of the student. This faculty member will be responsible to gather grades from multiple sources including classroom evaluation (practical in nature), clinical educators and other medical or paramedical professionals who can help to evaluate student competence.

Qualifications:

Responsibilities:

Clinical Educators

This is typically a certified athletic therapist who practices inside or outside the home institution and has agreed to supervise, guide and mentor students. Clinical Educators must be orientated to the program curriculum, the programmatic evaluation plan and be willing to evaluate students based on knowledge of the curriculum. Finally, Clinical Educators will work with the program and students to ensure the appropriate level of supervision is provided based on the level of entrustment that is planned by the program and confirmed by student competence level.

Name	Credentials	Type of Practicum (Field/Clinical/Both)	Number of Students Supervised Per Year

Laboratory, Teaching Facilities, and Equipment Description

Laboratory, Teaching Facilities Description

Describe teaching facilities and laboratory facilities. Adequate classrooms, laboratories, clinical and other facilities, and administrative offices are to be provided for students, program staff and faculty.

Equipment Description

Therapeutic Modalities and Rehabilitation: List all therapeutic modalities and rehabilitative equipment available to students. There must be a wide range of contemporary therapeutic modalities and rehabilitation tools available for instructional and practice purposes.

First Aid and Emergency Care Equipment: List all first aid and emergency care equipment available to students. There must be a range of contemporary equipment and supplies in emergency care for instructional and practice purposes.

C. STUDENTS

Admission Policies and Procedures

Explain admission policies and procedures for all incoming students. Include specific policies and standards for advanced placement, transfer of credit and credit for experiential learning available to students.

Programmatic Evaluation Plan

Frequency and Level of Competency Evaluation

D. CURRICULUM DESCRIPTION

The format for this matrix will be to describe the requirements for your program and demonstrate how each standard/competency is met.

Complete Competency Framework Document

Include curriculum sequencing map outlining the courses (required, electives, practica, etc.) for each year/semester

E. FIELD AND CLINICAL PRACTICUM SITES

Placement Site	Type of Practicum (Field/Clinic/Both)	Clinical Educator (CE)	Credentials	Number of Students Supervised Per Year	Frequency of CE Program Orientation

F. SYLLABI FOR ALL COURSES

G. COURSE RESOURCES

Course #	Course Name	Semester Offered (F, W, S/S)	Textbook/Journal Title	Author	Year

H. A WEBLINK OF UNIVERSITY CALENDAR (or hardcopy)

I. INCLUDE ALL PAC ANNUAL REPORTS SINCE LAST ACCREDITATION

J. APPENDICES

Appendix B – Sample Site Visit Agenda

DAY ONE

Time	Agenda Item	Purpose/Comments
8:30am	Preliminary Conference	a meeting with institution officers, Program Director, and others as appropriate: <ul style="list-style-type: none"> to allow evaluators to summarize the purpose of the site visit, the accreditation process, and the roles and functions of the site visitors and Program Accreditation Committee; and to review the schedule for the first day as planned by the program and make adjustments as necessary
9:00am	Meeting with Program Director	to provide the site visit team with an opportunity to obtain a more complete understanding of the curriculum and the program objectives, philosophies, course objectives, operational procedures, student selection criteria (if used), student evaluation protocols, enrollment, student attrition rates, processes for monitoring progress in development of student knowledge and skills, programmatic evaluation plan, success of program graduates, etc.
11:00am	Visits to Support Services	to review library facilities, audio-visual resources, health services, etc.
12:00pm	Working Lunch	site visit team only
1:00pm	Interviews	<p>Core AT Faculty - to discuss course selection and content, instructional methods and objectives, evaluation mechanism, etc. – 1 hour</p> <p>Non-AT Faculty – to discuss knowledge of athletic therapy competencies, instructional methods and objectives, evaluation mechanism, etc. – 1 hour</p> <p>Students - to obtain reactions to all phases of the program through a group meeting or private interviews, without faculty or others being present – 1 to 2 hours</p> <p>Program Director- to obtain additional information, to clarify points of information acquired during the day, and to review the schedule for the second day of the visit – ½ hour</p> <p>Note: sequence and times may vary as desired</p>
4:30pm	Tour of Facilities	a brief tour to familiarize site visitors with the classroom, laboratory, and other facilities used by students during didactic and/or supervised practice components of the program
Evening		program is requested not to schedule activities for the evening since site visitors use dinner and evening hours to discuss

Time	Agenda Item	Purpose/Comments
		information acquired throughout the day, to identify areas requiring further inquiry the following day, and to commence drafting the site visit team report

DAY TWO

Meeting times are based on need and meetings normally conclude by mid-day.

Agenda Item	Purpose/Comments
Visits to Affiliate Practicum Sites (one clinical and one field; at least one of the sites must be off campus)	interviews will be completed with clinical educators at affiliate practicum sites. Questions will include type of supervision, knowledge of institution's competency framework and programmatic evaluation plan, and overall quality of the teaching environment. time required for site visits to clinical settings varies due to factors such as distance
Interviews	<i>Students at Affiliate Sites</i> - to obtain students' reactions to the practicum and the connection to the institution and its competency framework. <i>Employed Program Graduates</i> (if possible and reasonable) - to provide site visitors with an opportunity to evaluate graduates' satisfaction with the educational process and the degree to which the program prepares graduates to perform entry-level functions. If face-to-face interviews are impractical due to practice demands and/or geographic distribution of employment sites, the program may arrange for telephone interviews.
Preparation of Site Visit Team Report	program provides private meeting space for ½ to 1 hour to enable site visit team members to reach consensus on findings, complete their written report and prepare for the exit conference
Concluding Meeting with Program Director	a brief meeting of 15 minutes or less to share the findings and conclusions in the draft site visit team report with the Program Director prior to the exit conference
Exit Conference	a concluding meeting with the Program Director and other institutional officers of 30 minutes or less to share the site visit team's initial findings

Appendix C – Sample Site Visit Questions

Questions to Ask of the President or Senior Administration Representative

1. If there were budget cuts, how do you envision that this program would be affected?
2. Will this department be allotted adequate funding for the next few years?
3. How much is research a part of faculty members' mandate?
4. Can you indicate the degree of the Senior Administration's on-going support for this program?
5. Please identify any other strengths and weaknesses of the overall program.

Questions to Ask of Athletic Therapy Program Director

1. What are your day-to-day responsibilities with the AT curriculum?
2. Are you responsible for any other programs? Which ones? What percentage do you devote to this program?
3. Are you a member of the teaching faculty?
4. What are your academic qualifications? How do your qualifications affect your role as program coordinator/program director?
5. How many teaching faculty are tenured?
6. How many teaching faculty are contracted?
7. How many clinical faculty are tenured?
8. How many clinical faculty are contracted?
9. If there were budget cuts, how do you envision that your program would be affected?
10. What is the faculty/student ratio?
11. Discuss the standards and process of admission to the university. What is the minimal entrance grade point?
12. What support staff (i.e., clerical) are provided to faculty?
13. What resources and opportunities are allotted to faculty for professional development?
14. Will your department be allotted adequate funding for the next few years?
15. Are there sufficient physical resources?
16. Any plans for facility changes in the near future?
17. Any planned changes in the number of entering students?
18. What criteria do you look for in the students who apply?
19. What would the typical first year class "look like" on day one?
20. What program review processes are conducted of the athletic therapy program?
21. How is the program effectiveness verified?
22. Please identify any other strengths and weaknesses of the overall program.
23. What is the percentage of graduating students getting jobs related to the field?
24. What is the percentage of graduating students getting CATA certified out of your program?
25. Is research a part of faculty members' mandate?

Questions to Ask of Faculty / Staff

1. Does the program enable students to attain the competencies specified for the CATA certification exam?
2. Please discuss the role of students in the learning process in the present school setting. Are you learning to be “mature problem-solving professionals?”
3. Please discuss the Relationships, Rapport and Response students have with the present faculty. Is there a fostering of student-faculty interaction, student-student interaction, student-administration interaction?
4. This question relates to the perceived quality of instruction/learning facilitation. Compared to other learning experiences, how is information delivered in the program? Discuss systems presently utilized to deliver programming. Could this be improved and if so, how?
5. What type of classroom teaching environment is promoted overall (i.e., lecture style vs. studio/lab?)
6. How does the program support students’ educational interests and protects your rights?
7. Does the program provide an integrated learning experience for students?
8. Discuss the major strengths and weaknesses of faculty as a complement (not individually.)
9. Compared to other institutions how is learning assessed? Could this be improved and if so, how?
10. Does the program’s evaluation process result in continuous quality improvement of the student?
11. Are facilities adequate for present curriculum/programming requirements?
12. Are the program’s resources adequate to support student learning in order to prepare for CATA certification?
13. Please identify any other strengths and weaknesses of the overall program.
14. Would you establish the present framework that enables this program to be on the “cutting edge”?
15. What are your perceptions of the direction that the program has taken in the past and where will CATA accreditation take this program in the future?
16. Outside of the curriculum/program what are the unique characteristics of this university?

Questions to Ask of Students

1. Does the program enable students to attain the competencies specified for the CATA certification exam?
2. Please discuss the role of students in the learning process in the present school setting. Are you learning to be “mature problem-solving professionals?”
3. Please discuss the Relationships, Rapport and Response students have with the present faculty. Is there a fostering of student-faculty interaction, student-student interaction, student-administration interaction?
4. How does the program support students’ educational interests and protects your rights?
5. This question relates to the perceived quality of instruction/learning facilitation. Compared to other learning experiences, how is information delivered in the program? Discuss systems presently utilized to deliver programming. Could this be improved and if so, how?
6. What type of classroom teaching environment is promoted overall (i.e., lecture style vs. studio/lab?)

7. Does the program provide an integrated learning experience for students?
8. Discuss the major strengths and weaknesses of faculty as a complement (not individually.)
9. Compared to other institutions how is learning assessed? Could this be improved and if so, how?
10. Does the program's evaluation process result in continuous quality improvement of the student?
11. Are facilities adequate for present curriculum/programming requirements?
12. Are the program's resources adequate to support student learning in order to prepare for CATA certification?
13. Please identify any other strengths and weaknesses of the overall program.
14. Would you establish the present framework that enables this program to be on the "cutting edge"?
15. What are your perceptions of the direction that the program has taken in the past and where will CATA accreditation take this program in the future?
16. Outside of the curriculum/program what are the unique characteristics of this university?

Appendix D – Site Visit Report

INTRODUCTION:

Each **Standard** must be assigned a compliancy benchmark.

- (C) **Compliant** Full Meets the Standard
 (PC) **Partial-Compliance** Partially Meets the Standard
 (NYC) **Not Yet Compliant** Does Not Yet Meet Any Components of the Standard

Please identify your program's current benchmark for each standard, adding any additional commentary regarding standards undergoing change or explanation for any standards identified as PC or NYC.

STANDARDS FOR ACCREDITATION

A. POST-SECONDARY INSTITUTION STANDARDS

1. Educational programs are eligible for accreditation if the post-secondary institution is Association of Colleges and Institutes Canada (CICan) or Universities Canada accredited and meets the standards for education in athletic therapy as stated in the CATA Standards for Accreditation.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.A.1		
C	PC	NYC

2. For programs in which academic and clinical instruction and supervised practice are provided by two or more institutions, responsibilities for program administration, instruction, supervision, and other functions of the sponsoring institutions and of each affiliate must be clearly documented in a formal affiliation agreement or memorandum of understanding among the parties.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.A.2		
C	PC	NYC

3. Accredited educational programs must be established in a degree-granting post-secondary academic institution which meet standards for education in athletic therapy.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.A.3		
C	PC	NYC

4. Post-secondary institutions assume primary responsibility for student admission, curriculum planning as per Association curriculum standards, selection of course content, co-ordination of classroom teaching and supervised practicum experiences, appointment of faculty, and granting the credential documenting satisfactory completion of the educational program.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.A.4		
C	PC	NYC

5. The institution must ensure full liability protection for students during field and clinical practicums.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.A.5		
C	PC	NYC

6. The institution must be authorized under applicable provincial law and statute to provide a program of post-secondary education.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.A.6		
C	PC	NYC

B. RESOURCES

1. Personnel Resources

a) Program Leadership/Athletic Therapy Education Program Direction

Qualifications: The Director of the program is to be a full-time paid employee of the institution. The Director of the program must also be a current certified athletic therapist of the Association for a minimum of 10 years. The Director of the program should have a strong academic orientation and should have demonstrated an interest and have experience in the professional preparation of students.

Academic qualifications for the Program Director are PhD preferred, thesis-based Master's required

Responsibilities: For each institution, the title of the individual(s) responsible for program direction, leadership, day-to-day operation, coordination, and supervision of the athletic therapy education program may vary. Notwithstanding their title, this individual is responsible for overseeing the curriculum of the program, inclusive of programmatic and course changes, evaluation plan for core athletic therapy competencies and for working

with core athletic therapy faculty in effective planning and implementation of student academic and practicum experience in the athletic therapy program. The Program Director will also serve as the institutional representative with the Committee of Accredited Institutions of the Association.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.1.a		
C	PC	NYC

b) Core Athletic Therapy Teaching Faculty

Qualifications: The full-time core athletic therapy teaching faculty must be a current certified athletic therapist of the Association for a minimum 3 years. Academic qualifications for the core athletic therapy teaching faculty are PhD preferred, thesis-based Master's required.

Number: There must be a minimum of two full-time core athletic therapy teaching faculty. The number of core athletic therapy teaching faculty must also be sufficient to maintain student-to-faculty ratios that allow for effective instruction and evaluation. The qualitative metrics for evaluating the appropriate full-time complement for an institution will include: 1) the ability to deliver a competency-based education curriculum, and 2) effectively evaluating students. PAC will rely on faculty interviews, student interviews, and practicum agency interviews to gather data to evaluate curriculum delivery and student evaluation. The recommended full-time faculty complement is one that maintains a ratio of one (1) core athletic therapy faculty member per eight (8) athletic therapy students, based on the program's first year intake.

Responsibilities: Faculty members responsible for teaching required athletic therapy core subject matter, must be a certified athletic therapist of the Association.

Athletic therapy education is interdisciplinary in nature. Therefore, teaching faculty for the discipline-based courses may be comprised of individuals from various academic units and disciplines including medicine, biology, chemistry, physics, psychology, education, nutrition, health, and kinesiology/physical education.

All faculty members teaching within the accredited athletic therapy program must be familiar with the athletic therapy competencies.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.1.b		
C	PC	NYC

c) Instructional Support Staff

c1) Teaching / Instructional Assistants/Laboratory Demonstrators

Qualifications: Any individual assisting with the instruction of core athletic therapy courses must be a current certified athletic therapist of the Association.

Responsibilities: As per institutional position responsibilities.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.1.c1		
C	PC	NYC

c2) Practicum Coordinator

Qualifications: The practicum coordinator must be a current certified athletic therapist of the Association. This individual may also be a part of the teaching faculty.

Responsibilities: A practicum coordinator provides administration of the field and clinical practicum experiences. This includes but is not limited to engagement with program curriculum, orientation of the clinical educators and site suitability.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.1.c2		
C	PC	NYC

c3) Practicum Instructor

Qualifications: The Practicum Instructor must be a current certified athletic therapist of the Association. This person is typically a faculty member (e.g., contract or full-time). There are many titles for this position at various institutions including, but not limited to: faculty member, instructor, professor, clinical mentor, and clinical supervisor.

Responsibilities: The Practicum Instructor is the primary person responsible for the final grade allocation from the accredited program but must work closely with the clinical educator to determine the grade. This person is responsible to liaise with both the clinical educator and the student placed at the clinical educator's field or clinic environment. This person helps build the clinical educator's capacity for student evaluation and feedback with the ultimate goal of student's becoming competent professionals in athletic therapy. Moreover, formative and summative feedback and capacity building for the clinical educators is the responsibility of the Institution-Faculty Liaison

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.1.c3		
C	PC	NYC

d) Administrative Support Staff

Sufficient clerical and other support staff should be readily available to the athletic therapy program.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.1.d		
C	PC	NYC

e) Clinical Educators

Qualifications: A clinical educator should be a current certified athletic therapist of the Association. Allied healthcare professionals may act as clinical educators provided that it is not the student's only experience throughout their program. This individual is not required to be an institutional employee.

Responsibilities: A clinical educator provides supervision and education of students in the practicum aspects of the athletic therapy education program. This includes but is not limited to engagement with program curriculum, orientation, training, and student evaluations. They work with the Institution-Faculty Practicum Liaison to complete student evaluation and provide feedback that optimizes student progress and competency development.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.1.e		
C	PC	NYC

2. Professional Development

Where collective agreements are silent on professional development, all full-time athletic therapy faculty teaching athletic therapy core curriculum should be afforded professional development opportunities by the sponsoring institution.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.2		
C	PC	NYC

3. Financial Resources

The financial resources for the athletic therapy educational program must be ensured to fulfil obligations for program ongoing development and delivery.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.3		
C	PC	NYC

4. Physical Resources

a) Facilities

The classrooms, laboratories, clinical and other facilities, faculty and administrative offices must ensure adequate experiential learning opportunities for all students enrolled within the athletic therapy program to support the knowledge, skills and aptitudes needed for a competent entry-level athletic therapist.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.4.a		
C	PC	NYC

b) Equipment and Supplies

There must be appropriate and sufficient equipment, supplies, and storage space to ensure adequate experiential learning opportunities to support the knowledge, skills, and aptitudes needed for a competent entry-level athletic therapist.

There must be appropriate instructional and audio-visual aids included, but not limited to, clinical specimens, anatomical models, modalities, tables, tape, emergency care and rehabilitation tools to support the applied learning experiences delineated by the educational components of the curriculum.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.4.b		
C	PC	NYC

b1) Therapeutic Modalities and Rehabilitation

There must be a wide range of contemporary therapeutic modalities and rehabilitation tools available for instructional and practice purposes.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.4.b1		
C	PC	NYC

b2) First Aid and Emergency Care Equipment

There must be a range of contemporary equipment and supplies in emergency care for instructional and practice purposes.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.4.b2		
C	PC	NYC

c) Learning Resources

Students in the athletic therapy program must have ready access, in time and location, to an adequate supply of current books, journals, periodicals, and other reference materials related to the curriculum.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.4.c		
C	PC	NYC

C. STUDENTS

1. Admission Policies and Procedures:

The specific academic and technical standards for admission of students must be made in accordance with clearly defined and published policies of the institution.

The policies and standards regarding advanced placement, transfer of credit and credit for experiential learning must be available to students.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.C.1		
C	PC	NYC

2. Evaluation of Students:

a) Programmatic Evaluation Plan

Programs should have an overall evaluation plan for the program that aligns with the competency development model. Student evaluation should be frequent, regular, formative and summative to facilitate competency development. Programs should have a student remediation policy and procedures. Evaluation of students should assess the acquisition of knowledge, problem identification and problem-solving skills, and psychomotor, behavioral, clinical and on-field competencies. To help describe the programmatic evaluation plan, a template has been provided in Appendix H.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.C.2.a		
C	PC	NYC

b) Student Course Evaluation Methods

The criteria for successful completion of each course of the curriculum shall be given in advance to each student. Evaluation methods shall include content related to the objectives

and competencies described in the curriculum for both didactic and supervised clinical education. Students must document appropriate learning experiences and curriculum sequencing to develop the competencies necessary for graduation, including appropriate instructional materials, classroom presentations, discussions, demonstrations, supervised clinical and on-field practica, and other practical evaluations.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.C.2.b		
C	PC	NYC

c) Frequency and Level of Competency Evaluation

The program must identify the frequency to which competencies are evaluated at levels of introduction, applied, and entry level competence.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.C.2.c		
C	PC	NYC

d) Graduation Requirements

The program specific graduation requirements must be made available to each student

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.C.2.d		
C	PC	NYC

D. OPERATIONAL POLICIES

1. Fair Practices:

a) The program marketing and advertising must accurately reflect the program offered.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.D.1.a		
C	PC	NYC

b) Student admission, faculty and staff recruitment, and faculty and staff employment practices shall be non-discriminatory.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.D.1.b		
C	PC	NYC

- c) The program must accurately publish academic credit and full program costs to the student.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.D.1.c		
C	PC	NYC

- d) The program shall have a defined and published policy and procedure for processing student and faculty grievances.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.D.1.d		
C	PC	NYC

- e) The policies and procedures for students' withdrawal, and for refunds of tuition and fees, shall be published.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.D.1.e		
C	PC	NYC

- f) The programs must submit a student code of conduct which clearly outlines the program expectations. This code of conduct must ensure that students are not substituted for regular staff in an experiential learning environment or practicum.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.D.1.f		
C	PC	NYC

2. Student Records:

Satisfactory records shall be maintained for student admission, attendance, and evaluation. Grades and credit for courses shall be recorded on the student transcript and permanently maintained by the post-secondary institution in a safe and accessible location. In partnership with the Office of the Registrar, a process must be known for accessing and/or verifying student records when required.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.D.2		
C	PC	NYC

E. PROGRAM EFFECTIVENESS

The program must:

1. Systematically obtain and provide substantial and accurate information on its educational effectiveness especially as measured by student achievements. Including metrics such as CATA certification rates, graduation rates, employability, attrition, and student satisfaction.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.E.1		
C	PC	NYC

2. Maintain a clearly articulated curriculum map.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.E.2		
C	PC	NYC

3. Ensure that there is a process in place for adequately documenting degree progression and completion. Also, verify that degrees are conferred on the basis of educational achievement assessed and documented through appropriate measures.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.E.3		
C	PC	NYC

4. Each Institution must have a policy regarding minimum passing grades for all AT core courses.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.E.4		
C	PC	NYC

F. CURRICULUM REQUIREMENTS

Competency Framework: programs will design curriculum to include the competency framework and competencies. Two guiding definitions of competency-based education and standards should help provide an overarching guide to program design and development:

Competency-based education is a strategy that progressively exposes students to a continuum of learning that fosters the development of general and specific knowledge, skills, and dispositions. CBE requires a combination of instruction, experiential learning, and assessment.

National Standards of Practice are performance benchmarks that Certified Athletic Therapists are expected to achieve in accordance with the Competencies as defined by the Canadian Athletic Therapists Association

1. Description of the Program:

- a. Faculty and students shall be provided with a clear written description of the program and its content including learning goals, course objectives, supervised practicum assignments and competencies required for graduation.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.1.a		
C	PC	NYC

- b. The program articulates a student competency framework that coincides with the overall program delivery and curriculum and CATA competencies.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.1.b		
C	PC	NYC

- c. Learning and scholarship must be demonstrated in the following subject matter areas:

- 1) concussion assessment and management*
- 2) prevention of athletic injuries/illness*
- 3) assessment of athletic injuries/illness*
- 4) emergency care*
- 5) therapeutic modalities*
- 6) rehabilitation principles*
- 7) taping and bracing*
- 8) ethics, professionalism, and cultural competence*
- 9) patient education and advocacy*
- 10) therapeutic exercise*
- 11) strength and conditioning
- 12) business of athletic therapy
- 13) human anatomy
- 14) human physiology
- 15) exercise physiology
- 16) biomechanics
- 17) food and nutrition
- 18) sport and exercise psychology
- 19) pharmacology

- 20) pathology
- 21) research methods and statistics
- 22) health
- 23) adapted physical activity
- 24) motor control and learning
- 25) Indigenization and decolonization
- 26) Equity, diversity, and inclusion
- 27) leadership and communication

* = Core Athletic Therapy Course, must be delivered by core athletic therapy teaching faculty

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.1.c

C

PC

NYC

- d. Clinical and field practica should be integrated and sequenced simultaneously with other theoretical and experiential learning in the curriculum. The curriculum shall include provision for clinical and field experiences under a clinical educator in an acceptable clinical and field setting.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.1.d

C

PC

NYC

- 2. The athletic therapy curriculum is to include provision of practicum courses that provide students with opportunity for field and clinical experience under the supervision of a qualified clinical educator. Programs must have a field and clinic practicum course in every semester in the last two years of a program at a minimum. Practicum courses must have two aspects to them: **1) Classroom with an instructor:** In this aspect of the course, instructors can debrief on the experiential components of practicum and provide an opportunity for students to practice clinical and field skills in a safe environment. **2) A practicum (aka internship) component** where the student is assigned a clinical educator to supervise and evaluate student competency development. The clinical educator will work with both the practicum instructor and the practicum coordinator on course specific duties and administrative duties, respectively.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.2

C

PC

NYC

- 3. Practicum experiences should be initiated early in the student's program and should be designed to provide the student with sufficient opportunity to develop specific competencies pertaining to the practice of athletic therapy. These experiences should assist the student to develop their knowledge and skill set that progresses from introduction, to application, to entry-level competence.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.3		
C	PC	NYC

4. Practicum experiences must provide each student with exposure to a variety of sports, genders, clinical educators, and clinical and field environments.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.4		
C	PC	NYC

5. Supervised clinical practicums must ensure that the clinical educator is readily accessible to students for instruction and guidance. A ratio which does not exceed four students to one clinical educator during the student's practicum at a single time.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.5		
C	PC	NYC

6. Supervised field practicums must ensure that the clinical educator is readily accessible to students for instruction and guidance. A ratio which does not exceed eight students to one clinical educator during the student's practicum at a single time.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.6		
C	PC	NYC

7. Entrustable Professional Activities (EPAs)

Supervision of students should be based on levels of entrustment that have been designed by the program and communicated by the practicum instructor and/or practicum coordinator. Clinical educators will work the programs to ensure they are aware of EPAs and if the students have achieved the required levels of entrustment. The evaluation of EPAs is an important variable that needs to be considered with the amount of direct versus indirect supervision. This evaluation must occur in both a field and clinic environment regularly.

According to Englander et al (2017), "an entrustable professional activity (EPA) is an essential task of a discipline that an individual can be trusted to perform without direct supervision in a given health care context, once sufficient competence has been demonstrated." Programs need an EPA plan that works closely with the Programmatic Evaluation Plan (PEP) to ensure that students are prepared to work independently with more or less supervision based on their competency development and the programmatic

curricular map. One example of an EPA is that students should not work autonomously in a field practicum environment unless they have achieved minimal competence in pre-hospital care standards such as Canadian Red Cross First Responder first.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.7		
C	PC	NYC

8. Interprofessional educational opportunities should be part of practica.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.8		
C	PC	NYC

Appendix E – Guidelines and Recommendations for Writing Site Visit Report

1. The report should be well written and professional in all aspects. There should be particular attention to choice of words and to correct use of spelling, punctuation and grammar since these components reflect on the professionalism of the PAC. While the length of reports varies, the content and scope should reflect the depth and thoroughness of the site visit on-site evaluation.
2. In preparing the report, the writer should remain cognizant of the two primary functions of the report:
 - a) It is an avenue for feedback to institution personnel regarding the site visit team's perception of their entry-level athletic therapy education program; and
 - b) It is a critical element the basis upon which the PAC members will make their decision regarding the accreditation status on the institution.
3. Direct quotes should not generally be attributed to specific individuals who were interviewed, especially if the quote could be construed in a negative manner or constitute a criticism of personnel or programs. Statements such as "There appears to be concern on the part of students regarding the quality of clinical instruction" may be appropriate. However, a statement such as "Susie Jones, senior student therapist, stated that Mr. Bill Smith is a poor clinical instructor" is inappropriate.
4. Site visitation team recommendations that might affect personnel should be developed carefully. For example, the report may point out that "there appears to be a faculty/student morale problem which is having a negative effect on clinical instruction" and that this problem must be addressed and resolved before accreditation can be granted. This approach allows the site visitation team to report its observations and permits institution personnel to draw their own conclusions as to the solution to the personnel problem.
5. In general, the report should clearly identify program strength and deficiencies violations (of the "Accreditation Standards") and include brief commentary or an explanation for how grading/scoring for each competency was determined (Not Yet Compliant, Partial-Compliant, or Compliant).
6. While some flexibility is permitted with regard to the amount and detail of commentary within the report, the outline provided in the site visit report document should be followed as closely as possible. Particular care should be taken when wording the deficiencies and the recommendations sections, since these sections of the report refer directly to program competencies in which an institution has been deemed to be of partial compliance (PC) or not yet compliant (NYC).

Appendix F – Accreditation Appeals Process

APPEAL PROCESS FOR 2-YEAR, SUSPENSION, OR WITHDRAWN ACCREDITATION STATUS

In the event of an unfavourable decision by the Canadian Athletic Therapists Association regarding program accreditation, the Chair of Program Accreditation Committee (PAC) will advise the Dean or Department Head and the Program Director of the decision and deficiencies as defined by the PAC. The institution may submit an appeal. Appeal is the process whereby the institution requests that a decision be examined because in their judgement they feel that the decision arrived at is flawed due to deviation from procedure, or a breach in policy is identified. Appeals must be in written form and must include a formal request for appeal of the proposed program. Reasons for the appeal must be clearly stated and must be accompanied by appropriate supporting information. The appeal must be directed to the *Executive Director* of the *Canadian Athletic Therapists Association* and must be received within 60 days following the institution's official notice of the decision. The written request must be accompanied by a fee of \$500, plus \$1000 deposit for appeal expenses (for details on costs, please see below).

The appeal process will proceed as outlined below.

The Executive Director will arrange an appeal hearing at which representation (maximum of 2 persons) of both the institution and the PAC will be scheduled for brief presentations. An alternate representative must be available should the original representative become unavailable. The Executive Director will contact the institution and PAC requesting four (4) potential dates for the hearing.

The Executive Director will appoint an appeal committee to adjudicate the appeal. The appeal committee will be made up of the following:

- (2) Certified Athletic Therapists in good standing with the Association.
- (1) un-named alternate Certified Athletic Therapist in good standing with the Association.
- (1) external individual who is not a Certified Athletic Therapist but is familiar with the CATA's accreditation process (i.e., a dean or administrator).

All appeal committee members will be appointed based on the following qualifications: post-graduate degree, post-secondary teaching experience, prior experience with an academic accreditation process in Canada, and curriculum development and evaluation experience. All committee members are required to complete a confidentiality and conflict of interest form from the CATA.

Consideration must be given to the potential dates as established by the Executive Director. The institution and the PAC will each have the right of one refusal of an appointed committee member of the appeal committee. This refusal should be communicated to the Executive Director via email within (7) days of the announcement of the appeal committee. In the case of one of the members not being able to participate after this time the alternate will replace that member.

The specific time and place of the hearing will be determined by the Executive Director. Once the dates are established, they are considered to be final. However, extreme circumstances may dictate a change in appeal date. This change must be acceptable to all parties. If either the appellant or respondent do not attend the appeal, the committee will make their decision without the respective input.

The Executive Director will ensure the appeal process. The Executive Director will distribute the agenda, the supporting information from the institution's appeal application, and the PAC accreditation documents to the appeal committee members a minimum of three weeks before the appeal date.

The appeal committee will select its own chairperson. Their decision must be made in person or via a virtual meeting, and this decision will be final. The appeal committee will report within two weeks to the Executive Director, who will forward the report to the Institution and PAC.

AGENDA

The following is the agenda as defined by the PAC. Items that are not subject to change are the order of the presenters, and length of the presentations and the rebuttals. The Chair can make other changes with mutual agreement from the parties respecting their needs.

Day 1

8:30-9 Introductory remarks by the Chair
9-10 Institution Presentation
10-10:15 Break if necessary
10:15-11:15 PAC Presentation
11:15-1:15 Lunch and Rebuttal Preparation
1:15-1:45 Institution Rebuttal
1:45-2:15 PAC Rebuttal
2:15- 3:00 Break (The appeal committee prepares questions for Appellant and Respondent)
3:00- 5:00 Question and Answer session

Evening session: The appeal committee sequestered to informally discuss and prepare for Day 2

Day 2

8:30-10:30 Formal deliberations of the appeal committee

10:30-12:00 Continuation of Questions and Answer session with Institution and PAC representatives, if required.

12:00 Lunch

1:00- 5:00 Sequestered deliberation

To ensure complete and fair discussion, the format and spirit of the question-and-answer section of the hearing will be at the discretion of the Chair of the appeal committee.

COST

There is a cost sharing mechanism in place to determine amounts incurred by the institution and PAC. An appeal fee of \$500 and an honorarium of \$1500 (\$500 per appeal committee member) are refundable in the situation of an overturned decision. It is not refundable in the event of a decision that is upheld. An additional \$1000 is a deposit towards the payment of expenses incurred by the appeal process (flights, conference calls, hotel, etc.). The institution will be billed or reimbursed for any costs above or below \$1000, respectively. Whenever possible, the appeal process will be handled virtually; however, when an in-person appeal is required, expenses will be paid by the respective parties in accordance with section 3.3.8.



Appendix G – PAC Annual Report

Accredited Athletic Therapy Program Annual Report

**Canadian Athletic Therapists Association
Program Accreditation Committee**

Documents are to be submitted to: pac_chair@athletictherapy.org

The purpose of this document is to provide a report regarding accredited Athletic Therapy program compliance with the educational practice standards of the CATA. The Annual Report must be submitted to the CATA Program Accreditation Committee by May 15th annually.

PLEASE TYPE OR PRINT INFORMATION CAREFULLY

Name of Sponsoring Institution

SPONSORING INSTITUTION'S OFFICIALS

President	Degree/Credentials	Date
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VP Academic	Degree/Credentials	Date
-------------	--------------------	------

Dean (or Comparable Administrator)	Degree/Credentials	Date
------------------------------------	--------------------	------

Signature	Date
-----------	------

PROGRAM INFORMATION

Degree Name and Credential

Major, where applicable

PROGRAM OFFICIALS

Program Director	Degree/Credentials
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Area Code & Telephone Number

Length of Program/Degree	Degree Granted (Specify – BA, BSc, BKin, etc.)
--------------------------	--

Average annual tuition for full-time students:	Domestic	International
--	----------	---------------

Number of students:	Within province	Out of province	International
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Maximum first year enrollment capacity

Expiration of Current Accreditation (Month/Year)

INTRODUCTION:

Each **Standard** must be assigned a compliancy benchmark.

- (C) **Compliant** Fully Meets the Standard
 (PC) **Partial-Compliance** Partially Meets the Standard
 (NYC) **Not Yet Compliant** Does Not Yet Meet Any Components of the Standard

The purpose of this annual report is for your accredited institution to self-identify your program's current status of each standard for accreditation. Include copies of faculty workload allocation, current program maps, Programmatic Evaluation Plan, and any proposed curriculum changes. Please identify your program's current benchmark for each standard, adding any additional commentary regarding standards undergoing change or explanation for any standards identified as PC or NYC.

STANDARDS FOR ACCREDITATION

A. POST-SECONDARY INSTITUTION STANDARDS

1. Educational programs are eligible for accreditation if the post-secondary institution is Association of Colleges and Institutes Canada (CICan) or Universities Canada accredited and meets the standards for education in athletic therapy as stated in the CATA Standards for Accreditation.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.A.1

C

PC

NYC

2. For programs in which academic and clinical instruction and supervised practice are provided by two or more institutions, responsibilities for program administration, instruction, supervision, and other functions of the sponsoring institutions and of each affiliate must be clearly documented in a formal affiliation agreement or memorandum of understanding among the parties.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.A.2

C

PC

NYC

3. Accredited educational programs must be established in a degree-granting post-secondary academic institution which meet standards for education in athletic therapy.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.A.3

C

PC

NYC

4. Post-secondary institutions assume primary responsibility for student admission, curriculum planning as per Association curriculum standards, selection of course content, co-ordination of classroom teaching and supervised practicum experiences, appointment of faculty, and granting the credential documenting satisfactory completion of the educational program.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.A.4		
C	PC	NYC

5. The institution must ensure full liability protection for students during field and clinical practicums.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.A.5		
C	PC	NYC

6. The institution must be authorized under applicable provincial law and statute to provide a program of post-secondary education.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.A.6		
C	PC	NYC

B. RESOURCES

1. Personnel Resources

a) Program Leadership/Athletic Therapy Education Program Direction

Qualifications: The Director of the program is to be a full-time paid employee of the institution. The Director of the program must also be a current certified athletic therapist of the Association for a minimum of 10 years. The Director of the program should have a strong academic orientation and should have demonstrated an interest and have experience in the professional preparation of students.

Academic qualifications for the Program Director are PhD preferred, thesis-based Master's required

Responsibilities: For each institution, the title of the individual(s) responsible for program direction, leadership, day-to-day operation, coordination, and supervision of the athletic therapy education program may vary. Notwithstanding their title, this individual is responsible for overseeing the curriculum of the program, inclusive of programmatic and course changes, evaluation plan for core athletic therapy competencies and for working

with core athletic therapy faculty in effective planning and implementation of student academic and practicum experience in the athletic therapy program. The Program Director will also serve as the institutional representative with the Committee of Accredited Institutions of the Association.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.1.a		
C	PC	NYC

b) Core Athletic Therapy Teaching Faculty

Qualifications: The full-time core athletic therapy teaching faculty must be a current certified athletic therapist of the Association for a minimum 3 years. Academic qualifications for the core athletic therapy teaching faculty are PhD preferred, thesis-based Master's required.

Number: There must be a minimum of two full-time core athletic therapy teaching faculty. The number of core athletic therapy teaching faculty must also be sufficient to maintain student-to-faculty ratios that allow for effective instruction and evaluation. The qualitative metrics for evaluating the appropriate full-time complement for an institution will include: 1) the ability to deliver a competency-based education curriculum, and 2) effectively evaluating students. PAC will rely on faculty interviews, student interviews, and practicum agency interviews to gather data to evaluate curriculum delivery and student evaluation. The recommended full-time faculty complement is one that maintains a ratio of one (1) core athletic therapy faculty member per eight (8) athletic therapy students, based on the program's first year intake.

Responsibilities: Faculty members responsible for teaching required athletic therapy core subject matter, must be a certified athletic therapist of the Association.

Athletic therapy education is interdisciplinary in nature. Therefore, teaching faculty for the discipline-based courses may be comprised of individuals from various academic units and disciplines including medicine, biology, chemistry, physics, psychology, education, nutrition, health, and kinesiology/physical education.

All faculty members teaching within the accredited athletic therapy program must be familiar with the athletic therapy competencies.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.1.b		
C	PC	NYC

c) Instructional Support Staff

c1) Teaching / Instructional Assistants/Laboratory Demonstrators

Qualifications: Any individual assisting with the instruction of core athletic therapy courses must be a current certified athletic therapist of the Association.

Responsibilities: As per institutional position responsibilities.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.1.c1		
C	PC	NYC

c2) Practicum Coordinator

Qualifications: The practicum coordinator must be a current certified athletic therapist of the Association. This individual may also be a part of the teaching faculty.

Responsibilities: A practicum coordinator provides administration of the field and clinical practicum experiences. This includes but is not limited to engagement with program curriculum, orientation of the clinical educators and site suitability.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.1.c2		
C	PC	NYC

c3) Practicum Instructor

Qualifications: The Practicum Instructor must be a current certified athletic therapist of the Association. This person is typically a faculty member (e.g., contract or full-time). There are many titles for this position at various institutions including, but not limited to: faculty member, instructor, professor, clinical mentor, and clinical supervisor.

Responsibilities: The Practicum Instructor is the primary person responsible for the final grade allocation from the accredited program but must work closely with the clinical educator to determine the grade. This person is responsible to liaise with both the clinical educator and the student placed at the clinical educator's field or clinic environment. This person helps build the clinical educator's capacity for student evaluation and feedback with the ultimate goal of student's becoming competent professionals in athletic therapy. Moreover, formative and summative feedback and capacity building for the clinical educators is the responsibility of the Institution-Faculty Liaison

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.1.c3		
C	PC	NYC

d) Administrative Support Staff

Sufficient clerical and other support staff should be readily available to the athletic therapy program.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.1.d		
C	PC	NYC

e) Clinical Educators

Qualifications: A clinical educator should be a current certified athletic therapist of the Association. Allied healthcare professionals may act as clinical educators provided that it is not the student's only experience throughout their program. This individual is not required to be an institutional employee.

Responsibilities: A clinical educator provides supervision and education of students in the practicum aspects of the athletic therapy education program. This includes but is not limited to engagement with program curriculum, orientation, training, and student evaluations. They work with the Institution-Faculty Practicum Liaison to complete student evaluation and provide feedback that optimizes student progress and competency development.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.1.e		
C	PC	NYC

2. Professional Development

Where collective agreements are silent on professional development, all full-time athletic therapy faculty teaching athletic therapy core curriculum should be afforded professional development opportunities by the sponsoring institution.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.2		
C	PC	NYC

3. Financial Resources

The financial resources for the athletic therapy educational program must be ensured to fulfil obligations for program ongoing development and delivery.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.3		
C	PC	NYC

4. Physical Resources

a) Facilities

The classrooms, laboratories, clinical and other facilities, faculty, and administrative offices must ensure adequate experiential learning opportunities for all students enrolled within the athletic therapy program to support the knowledge, skills and aptitudes needed for a competent entry-level athletic therapist.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.4.a		
C	PC	NYC

b) Equipment and Supplies

There must be appropriate and sufficient equipment, supplies, and storage space to ensure adequate experiential learning opportunities to support the knowledge, skills, and aptitudes needed for a competent entry-level athletic therapist.

There must be appropriate instructional and audio-visual aids included, but not limited to, clinical specimens, anatomical models, modalities, tables, tape, emergency care and rehabilitation tools to support the applied learning experiences delineated by the educational components of the curriculum.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.4.b		
C	PC	NYC

b1) Therapeutic Modalities and Rehabilitation

There must be a wide range of contemporary therapeutic modalities and rehabilitation tools available for instructional and practice purposes.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.4.b1		
C	PC	NYC

b2) First Aid and Emergency Care Equipment

There must be a range of contemporary equipment and supplies in emergency care for instructional and practice purposes.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.4.b2		
C	PC	NYC

c) Learning Resources

Students in the athletic therapy program must have ready access, in time and location, to an adequate supply of current books, journals, periodicals, and other reference materials related to the curriculum.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.B.4.c		
C	PC	NYC

C. STUDENTS

1. Admission Policies and Procedures:

The specific academic and technical standards for admission of students must be made in accordance with clearly defined and published policies of the institution.

The policies and standards regarding advanced placement, transfer of credit and credit for experiential learning must be available to students.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.C.1		
C	PC	NYC

2. Evaluation of Students:

a) Programmatic Evaluation Plan

Programs should have an overall evaluation plan for the program that aligns with the competency development model. Student evaluation should be frequent, regular, formative, and summative to facilitate competency development. Programs should have a student remediation policy and procedures. Evaluation of students should assess the acquisition of knowledge, problem identification and problem-solving skills, and psychomotor, behavioral, clinical, and on-field competencies. To help describe the programmatic evaluation plan, a template has been provided in Appendix H.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.C.2.a		
C	PC	NYC

b) Student Course Evaluation Methods

The criteria for successful completion of each course of the curriculum shall be given in advance to each student. Evaluation methods shall include content related to the objectives

and competencies described in the curriculum for both didactic and supervised clinical education. Students must document appropriate learning experiences and curriculum sequencing to develop the competencies necessary for graduation, including appropriate instructional materials, classroom presentations, discussions, demonstrations, supervised clinical and on-field practica, and other practical evaluations.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.C.2.b		
C	PC	NYC

c) Frequency and Level of Competency Evaluation

The program must identify the frequency to which competencies are evaluated at levels of introduction, applied, and entry level competence.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.C.2.c		
C	PC	NYC

d) Graduation Requirements

The program specific graduation requirements must be made available to each student

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.C.2.d		
C	PC	NYC

D. OPERATIONAL POLICIES

1. Fair Practices:

a) The program marketing and advertising must accurately reflect the program offered.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.D.1.a		
C	PC	NYC

b) Student admission, faculty and staff recruitment, and faculty and staff employment practices shall be non-discriminatory.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.D.1.b		
C	PC	NYC

- c) The program must accurately publish academic credit and full program costs to the student.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.D.1.c		
C	PC	NYC

- d) The program shall have a defined and published policy and procedure for processing student and faculty grievances.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.D.1.d		
C	PC	NYC

- e) The policies and procedures for students' withdrawal, and for refunds of tuition and fees, shall be published.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.D.1.e		
C	PC	NYC

- g) The programs must submit a student code of conduct which clearly outlines the program expectations. This code of conduct must ensure that students are not substituted for regular staff in an experiential learning environment or practicum.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.D.1.f		
C	PC	NYC

2. Student Records:

Satisfactory records shall be maintained for student admission, attendance, and evaluation. Grades and credit for courses shall be recorded on the student transcript and permanently maintained by the post-secondary institution in a safe and accessible location. In partnership with the Office of the Registrar, a process must be known for accessing and/or verifying student records when required.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.D.2		
C	PC	NYC

E. PROGRAM EFFECTIVENESS

The program must:

1. Systematically obtain and provide substantial and accurate information on its educational effectiveness especially as measured by student achievements, including metrics such as CATA certification rates, graduation rates, employability, attrition, and student satisfaction.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.E.1		
C	PC	NYC

2. Maintain a clearly articulated curriculum map.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.E.2		
C	PC	NYC

3. Ensure that there is a process in place for adequately documenting degree progression and completion. Also, verify that degrees are conferred on the basis of educational achievement assessed and documented through appropriate measures.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.E.3		
C	PC	NYC

4. Each Institution must have a policy regarding minimum passing grades for all AT core courses.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.E.4		
C	PC	NYC

F. CURRICULUM REQUIREMENTS

Competency Framework: programs will design curriculum to include the competency framework and competencies. Two guiding definitions of competency-based education and standards should help provide an overarching guide to program design and development:

Competency-based education is a strategy that progressively exposes students to a continuum of learning that fosters the development of general and specific knowledge, skills, and dispositions. CBE requires a combination of instruction, experiential learning, and assessment.

National Standards of Practice are performance benchmarks that Certified Athletic Therapists are expected to achieve in accordance with the Competencies as defined by the Canadian Athletic Therapists Association

1. Description of the Program:

- a. Faculty and students shall be provided with a clear written description of the program and its content including learning goals, course objectives, supervised practicum assignments and competencies required for graduation.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.1.a		
C	PC	NYC

- b. The program articulates a student competency framework that coincides with the overall program delivery and curriculum and CATA competencies.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.1.b		
C	PC	NYC

- c. Learning and scholarship must be demonstrated in the following subject matter areas:

- (1) concussion assessment and management*
- (2) prevention of athletic injuries/illness*
- (3) assessment of athletic injuries/illness*
- (4) emergency care*
- (5) therapeutic modalities*
- (6) rehabilitation principles*
- (7) taping and bracing*
- (8) ethics, professionalism, and cultural competence*
- (9) patient education and advocacy*
- (10) therapeutic exercise*
- (11) strength and conditioning
- (12) business of athletic therapy
- (13) human anatomy
- (14) human physiology
- (15) exercise physiology
- (16) biomechanics
- (17) food and nutrition
- (18) sport and exercise psychology
- (19) pharmacology
- (20) pathology
- (21) research methods and statistics

- (22) health
- (23) adapted physical activity
- (24) motor control and learning
- (25) Indigenization and decolonization
- (26) equity, diversity, and inclusion
- (27) leadership and communication

* = Core Athletic Therapy Course, must be delivered by core athletic therapy teaching faculty

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.1.c		
C	PC	NYC

- d. Clinical and field practica should be integrated and sequenced simultaneously with other theoretical and experiential learning in the curriculum. The curriculum shall include provision for clinical and field experiences under a clinical educator in an acceptable clinical and field setting.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.1.d		
C	PC	NYC

2. The athletic therapy curriculum is to include provision of practicum courses that provide students with opportunity for field and clinical experience under the supervision of a qualified clinical educator. Programs must have a field and clinic practicum course in every semester in the last two years of a program at a minimum. Practicum courses must have two aspects to them: **1)** Classroom with an instructor: In this aspect of the course, instructors can debrief on the experiential components of practicum and provide an opportunity for students to practice clinical and field skills in a safe environment. **2)** A practicum (aka internship) component where the student is assigned a clinical educator to supervise and evaluate student competency development. The clinical educator will work with both the practicum instructor and the practicum coordinator on course specific duties and administrative duties, respectively.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.2		
C	PC	NYC

3. Practicum experiences should be initiated early in the student's program and should be designed to provide the student with sufficient opportunity to develop specific competencies pertaining to the practice of athletic therapy. These experiences should assist the student to develop their knowledge and skill set that progresses from introduction, to application, to entry-level competence.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.3		
C	PC	NYC

4. Practicum experiences must provide each student with exposure to a variety of sports, genders, clinical educators, and clinical and field environments.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.4		
C	PC	NYC

5. Supervised clinical practicums must ensure that the clinical educator is readily accessible to students for instruction and guidance. A ratio which does not exceed four students to one clinical educator during the student's practicum at a single time.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.5		
C	PC	NYC

6. Supervised field practicums must ensure that the clinical educator is readily accessible to students for instruction and guidance. A ratio which does not exceed eight students to one clinical educator during the student's practicum at a single time.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.6		
C	PC	NYC

7. Entrustable Professional Activities (EPAs)

Supervision of students should be based on levels of entrustment that have been designed by the program and communicated by the practicum instructor and/or practicum coordinator. Clinical educators will work the programs to ensure they are aware of EPAs and if the students have achieved the required levels of entrustment. The evaluation of EPAs is an important variable that needs to be considered with the amount of direct versus indirect supervision. This evaluation must occur in both a field and clinic environment regularly.

According to Englander et al (2017), “an entrustable professional activity (EPA) is an essential task of a discipline that an individual can be trusted to perform without direct supervision in a given health care context, once sufficient competence has been demonstrated.” Programs need an EPA plan that works closely with the Programmatic Evaluation Plan (PEP) to ensure that students are prepared to work independently with more or less supervision based on their competency development and the programmatic curricular map. One example of an EPA is that students should not work autonomously in a field practicum environment unless they have achieved minimal competence in pre-

hospital care standards such as Canadian Red Cross First Responder first.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.7		
C	PC	NYC

8. Interprofessional educational opportunities should be part of practica.

SUMMARY OF COMPLIANCE WITH STANDARD 4.2.F.8		
C	PC	NYC

Appendix H – Programmatic Evaluation Plan Template

All accredited programs must create a programmatic evaluation plan that helps to guide and coordinate all evaluations in the program that help to build competent professionals.

Programmatic assessment has been defined as “an integral approach to the design of an assessment program with the intent to optimise its learning function, its decision-making function and its curriculum quality-assurance function” (van der Vleuten et al, 2015, pg. 641).

van der Vleuten et al (2015) go on to provide twelve tips to implement a programmatic evaluation plan and therefore, we encourage programs to account for these in their plans:

1. Develop a master plan for assessment
2. Develop examination regulations that promote feedback orientation
3. Adopt a robust system for collecting information
4. Assure that every low-stakes assessment provides meaningful feedback for learning
5. Provide mentoring to learners
6. Ensure trustworthy decision-making
7. Organise intermediate decision-making assessments
8. Encourage and facilitate personalised remediation
9. Monitor and evaluate the learning effect of the programme and adapt
10. Use the assessment process information for curriculum evaluation
11. Promote continuous interaction between the stakeholders
12. Develop a strategy for implementation

There is a copy of a template attached in this appendix. It is only intended as a guide, but basically, programmatic evaluation plans must include a master plan (#1 above), and also all the details that summate and build student competence. The template attached are the building blocks that would summate to help create the plan.

Key References:

Bok et al., (2013). Programmatic assessment of competency-based workplace learning: When theory meets practice. *BMC Medical Education*, 13, 123-132.

Van der Vleuten, C. P. M., Schuwirth, L. W. T., Driessen, E. W., Govaerts, M. J. B., & Heeneman, S. (2015). Twelve tips for programmatic assessment. *Medical Teacher*, 37, 641-646.

Sample Programmatic Assessment Plan (Year 1 out of a 4-year program)

CATA Competency List	Year 1					
	Semester 1			Semester 2		
	Course #	Course Name	Evaluation Method	Course #	Course Name	Evaluation Method

Evaluation Method Legend:

T = theory or written evaluation

P = practical evaluation (simulated)

AA = authentic assessment (clinical educator)

Appendix I - Course Equivalency Checklist

This is a sample, and the Program Accreditation Committee will recognize the institutional autonomy to make these choices based on their own policies and procedures. However, this template may be used as a guide to assist institutions in their process if something similar does not currently exist.

Each time a course is evaluated for equivalency, one should follow the same standard checklist system as a starting point. Often, the notion of professional judgment comes into play. However, there are some basic principles that must be met first and foremost.

- Logo at the top of the outline
- Course number – is it commensurate with our “level” or number?
- Course name – less important
- Number of credit hours
- Number of lecture hours
- Number of lab hours (or tutorial where appropriate)
- When it was taught (the date or semester of this specific course outline)
- Prerequisites? Do they align with our prerequisites?
- Instructor – credentials – must have a minimum of a Master’s Degree.
- Course description – does it match closely with our course?
- Course objectives – does it match closely with our course?
- Textbook – is it the same or a book that is in the same caliber as our course?
- Evaluation – does the grading align with institutional policies closely? Or the course that is transferring?
- Are there examinations and if so, what type? Practical, written or other assignments? Alignment with the institutional course is important. For example, if it is nutrition course, one may have a dietary analysis assignment that they want students to perform. It doesn’t have to be exactly this assignment, but the outcomes of this assignment should be similar.
- Does the grading scheme translate closely to the institution’s grading scheme? For example, what percent is required to obtain an “A” grade? What percent is required to pass the course?
- Content and schedule – what specific topics are covered each week and what are the assigned readings for those topics from the textbook or other resources?
- Is there a lab component where the institution has a lab component? If not, the course is not considered. If so, what are the topics and do they align with the institution’s course?