

**ACADEMIC
ACCREDITATION
STANDARDS
AND SELF-STUDY
GUIDE (2022)**



Academic Accreditation Standards and Self-Study Guide (2022)

Founded in 1926, the Canadian Association of Occupational Therapists (CAOT) is the national professional association for occupational therapy in Canada. The mandate of CAOT is to develop leadership, advance knowledge, develop and maintain professional and education standards, and build human resource capacity for excellence in occupational therapy.

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Table of contents

4	PREFACE	20	STANDARD 5: The human resources are adequate to support the occupational therapy program objectives
5	KEY FEATURES OF THE ACCREDITATION PROGRAM	24	STANDARD 6: The environmental resources are adequate to support the occupational therapy program objectives
7	INSTRUCTIONS FOR SUBMISSION OF SELF-STUDY	25	STANDARD 7: The learning resources are adequate to support the occupational therapy program objectives
8	SAMPLE SCHEDULE FOR THE ON-SITE VISIT	26	STANDARD 8: The occupational therapy program has a comprehensive planning, review and evaluation process for continuous improvement & long-term planning which is responsive to the changing context of the practice environment for occupational therapists
10	LIST OF APPENDICES	28	STANDARD 9: Knowledge generation through active research and scholarship informs, and is included in, the occupational therapy program
11	GLOSSARY	29	REFERENCES
14	STANDARD 1: The occupational therapy program is established in a university authorized to grant master's level and higher degrees.	30	APPENDICES
15	STANDARD 2: The occupational therapy program prepares graduates for entry level practice through high quality academic and fieldwork education, based on educational & professional conceptual frameworks that are articulated interrelated, knowledge-based, coherent, and consistent with the overall vision and mission.		
18	STANDARD 3: The student affairs services/resources are adequate to support the program objectives.		
19	STANDARD 4: The financial resources are adequate to support the occupational therapy program objectives		



Preface

The Canadian Association of Occupational Therapists (CAOT) strives to enable excellence in occupational therapy education. As a reflection of this mandate, CAOT is the sole accrediting agency in Canada for university programs that provide entry-level professional education in occupational therapy. Accreditation supports the development of quality occupational therapy education as a foundation for the profession. During the initial development of the accreditation standards, CAOT dedicated extensive resources over an eight-year period to collaborative activities with educational programs and external organizations to shape the future of professional education and accreditation in higher education.

The CAOT Academic Accreditation Standards and Self-Study Guide is unique to CAOT. It evolved from a collaborative initiative with input from a variety of professionals and external organizations involved in academic accreditation. The CAOT accreditation process follows an internationally accepted procedure and emphasizes consistency and transparency in the review of objective, tangible documentary, and observable evidence. On- and off-site accreditation reviews generate evidence of a program's achievement, or lack of achievement, of the individual indicators. The required evidence is organized under nine standards (degree granted, curriculum frameworks, student affairs, financial/human/environmental & learning resources, program evaluation & knowledge generation). Each of the nine standards are defined with tests of quality, and indicators (measures of effectiveness).

The revised 2022 Edition of the CAOT Academic Accreditation Standards and Self-Study Guide is derived from the earlier 2017 edition; the Competencies for OTs in Canada (2021), the Minimum Standards for the Education of Occupational Therapists (WFOT, 2016), and the revisions in 2022 were made to incorporate the following changes:

- Student competencies and program strengths/weaknesses mapped to relevant provincial competency documents (e.g. Competencies for OTs in Canada, 2021). This wording replaces the previous requirement to map to the Profile of Practice. Some programs may have other relevant or needed provincial competency documents and the mapping should also include these documents (e.g. Référentiel de compétences lié à l'exercice de la profession d'ergothérapeute au Québec) (Indicators revised: 2.79, 8.24, 8.3, 8.44)
- The "Competencies for Occupational Therapists in Canada" was added to the glossary
- Indicator 2.41 was revised to remove "client centred" which is no longer used in the new competencies and to input missing text from the indicator into the 'required evidence' section.

Acknowledgements:

We would like to express our appreciation to all the members of the Academic Accreditation Council (ACC) who examined and approved the updates in this edition of the CAOT Academic Accreditation Standards and Self-Study Guide (2022). CAOT also extends its ongoing thanks to the many volunteers who were involved in the creation of the new Competencies for OTs in Canada (2021).

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Key Features of the Accreditation Program

1 THE CAOT ACADEMIC ACCREDITATION PROGRAM

Accreditation is a quality review process, used by an organization whose authority to grant official status to a program of study that has met or exceeded predetermined standard outcomes has been publicly recognized. The purpose of the CAOT academic accreditation process is to:

- Promote quality occupational therapy education.
- Support the growth and development of occupational therapy educational programs.

This process also serves to promote the profession and the mobility of occupational therapists both nationally and internationally, by assuring consumers that graduates of accredited programs have received an education that meets nationally accepted standards.

2 PHILOSOPHY

Accreditation Standards and Self-Study Guide (2022) has been directed by the following philosophy:

- National academic accreditation supports quality education in occupational therapy and facilitates the advancement of education and practice of occupational therapy in Canada.
- National standards and the accreditation process support the best interests of the health of the Canadian public.
- Occupational therapy is a unique profession that is sufficiently complex and important to the health and well-being of Canadians that it requires a Master's entry-level degree to meet national accreditation standards.
- Students of occupational therapy have the right to quality education.
- National standards for quality education are best established and maintained by national academic accreditation.
- National academic accreditation is a process that involves all stakeholders working in partnership.

- National academic accreditation is a fair and supportive evaluation of university occupational therapy educational programs.
- National academic accreditation respects the autonomy of educational programs to develop curricula within the framework of national standards.
- National academic accreditation includes self-evaluation, peer review and critical reflection and supports continuous quality improvement.
- The academic process is transparent, consistent, fair and maximizes objectivity and confidentiality.

3 GUIDING PRINCIPLES

The practices of the academic accreditation process are guided by the following principles:

- Academic accreditation involves a process of peer review, where peer review is defined as reviews by individual(s) with expertise in the education of professionals and training in academic accreditation;
- Academic accreditation is collaborative and supportive;
- Academic accreditation provides fair, consistent evaluation;
- Academic accreditation respects the confidentiality of each program;
- Academic accreditation respects and values differences among programs;
- Academic accreditation is autonomous from professional organizations in accreditation decisions;
- An appeal process is an integral component of academic accreditation.

The Canadian Association of Occupational Therapists grants academic accreditation for a seven-year cycle of continuous quality improvement when educational programs under review have met the criteria. There are four levels of accreditation awards granted: accredited exemplary, accredited, accredited probationary and non-accredited.

4 SEVEN (7) YEAR ONGOING CYCLICAL CONTINUOUS QUALITY IMPROVEMENT (CQI) ACCREDITATION PROCESS- CATEGORIES (POLICY ACC.P.03 ACCREDITATION AWARDS)

ACCREDITED, EXEMPLARY: Programs will enter a seven year accreditation cycle when they have met 100% of category one and category two indicators and a minimum of 80% of category three indicators. These programs will also receive suggestions for continuous quality improvement and will typically not require progress report submission.

ACCREDITED: Programs that meet 100% of category one indicators, more than 80% of category two indicators and more than 70% of category three indicators will be awarded Accredited status. They will receive recommendations for continuous quality improvement and will be required to report on progress in a timeline as determined by the Academic Credentialing Council (ACC).

ACCREDITED, PROBATIONARY: Programs that meet 100% of category one, more than 60% of category two and less than 70% of category three indicators will be deemed Accredited, Probationary. The ACC will provide requirements for continuous quality improvement. (for procedures, see Policy ACC.P.03 Accreditation Awards).

NON-ACCREDITED: Programs which meet 100% or less of category one standards and/or less than 60% of category two indicators will be considered non-accredited. OR a program with probationary accreditation status has failed to demonstrate progress within the specified period.

ACCREDITATION STATUS	REPORTING TO ACC	CATEGORY 1 INDICATORS (8 indicators required)	CATEGORY 2 INDICATORS (72 indicators required)	CATEGORY 3 INDICATORS (20 indicators required)
Accredited- Exemplary	Suggestions for Continuous Quality Improvement (CQI)	100%	100%	More than 80% (16 indicators)
Accredited	Recommendations for Continuous Quality Improvement (CQI)	100%	More than 80% (58 indicators)	More than 70% (14 indicators)
Accredited-Probation	Requirements for Continuous Quality Improvement (CQI)	100%	More than 60% (44 indicators)	Less than 70% (Lower than 14 indicators)
Eligible for Accreditation	Prior to admission of first cohort of students	100%		
Non-Accredited	Return to pre-screening process	100% or less	Less than 60%	

5 THE ACCREDITATION DECISION

The accreditation process uses an objective approach to guide decision-making about the accreditation award for occupational therapy education programs. It is used within the context of qualitative information collected throughout the self-study and off/on-site reviews, a profile of the evidence across the nine standard outcomes and the collective wisdom of the accreditation experts. Identification of program evidence for the existence of absolute requirement (prescreening), recommended, and desirable indicator data will ensure that the accreditation decision is based on the evidence provided by the program.



Instructions for the Self-Study Submission

- When submitting the self-study report and all supporting documents, please password protect all the electronic documents and send to accreditation@caot.ca. No hard copies will be required. Submissions must be received by CAOT National Office seven (7) months before the on-site visit.
- Requested Format: Please contact accreditation@caot.ca for requested formatting of documents. Requests include a pdf organized into nine (9) sections for each of the Standards with links to appendices in each pdf. Note- all document formats and hyperlinks must be tested by submitting universities to ensure links will function for reviewers (e.g. not linking to internal university servers) The format should maximize user-friendliness to the benefit of the reviewers.
- Please read through the Glossary, Indicators and the Requested Sources of Information to guide the development of your Self-Study submission.
- Provide a proposed schedule of the on-site activities three months prior to the on-site visit for approval. A sample schedule and two examples are provided below as a guide.
- If you have any questions about the accreditation program, please contact accreditation@caot.ca.

Sample Schedule for the On-Site Visit

This is a sample schedule only to assist you with planning. It is to be used as a guide. The people listed should be seen and the length of the meeting respected, but the sequence may vary to accommodate your personal context. People may also be added if warranted and if time permits. This schedule will be drafted by the program and it will be revised and confirmed by the on-site team. Changes to the agenda may occur following the initial draft.

Here are a few important points to consider when preparing the on-site visit schedule:

- Meetings should start no earlier than 8h00 and end no later than 17h00.
- Individual meetings should be 15-45 minutes unless otherwise specified.
- Groups meetings should be 20-60 minutes unless otherwise specified.
 - o Homogenous groups often promote constructive and cohesive discussions during interviews.
 - o Avoid a group mixed with newer and seasoned faculty members. Avoid a supervisor in a group with subordinates.
- Effort should be made to include all stakeholders.
- Insert break times- can help with unexpected delays.
- To minimize travel time, plan most meetings in one room.
- The last day is reserved for the preparation of verbal report; no new information should be provided.
- Provide the on-site team with a private room throughout the day, for private discussions, breaks, and lunches.
- Arrange for catering (Please send invoice(s) to CAOT)
- **CAOT is responsible** for the reviewer’s travel, accommodations, and expenses.

List of people to be seen individually and people to be seen in groups:

INDIVIDUALLY:	GROUP:
OT Director – 1 to 1.5 hours	Regular-permanent Faculty (smaller groups are preferable)
Other Schools/Programs director- 30min.	Sessional/Part time faculty
Dean- 30 min	Students (separate year 1, year 2, recent grads, if possible)
Higher administration- 20 min.	Clinical supervisors / preceptors
Faculty who have important roles within the program (ie curriculum chairs, admissions chairs, program evaluation, etc...)	Support staff, IT, Librarian
Regulatory organization 20 min	
Fieldwork coordinator- 45min -1 hour	

Please note:

- Individual time with the OT Director/Head should be included at the beginning and the end of each day.
- A presentation of the curriculum is strongly recommended-especially when a new curriculum is being or has been implemented.
- If you have any questions, please contact accreditation@caot.ca.

Sample Schedule for the On-Site Visit

Address of location: _____

List of important contacts and cell phone numbers: _____

Special instructions, if needed: _____

TIME	BUILDING/ROOM	PARTICIPANT
8 :30	Room#	OT Director/Head
	Room#	Tour of facilities
	Room#	Introduction to faculty
		10 min break
	Room#	Curriculum presentation
	Room#	Fieldwork
1 hour	Room#	Lunch
	Room#	Dean
	Room#	Meetings with regular permanent faculty
		10min break
	Room#	OT Director/Head
5pm	Room#	End of Day

TIME	BUILDING/ROOM	PARTICIPANT
8 :30	Room#	OT Director/Head
	Room#	Meetings with regular permanent faculty
	Room#	Support Staff (Do not place supervisors with support staff)
		10 min break
	Room#	Higher Administration
	Room#	Other program/Schools Directors
1 hour	Room#	Lunch
	Room#	Students
	Room#	Regulatory organization
	Room#	Sessionals/Part time faculty
		10min break
	Room#	Clinicians
	Room#	OT Director/Head
5pm	Room#	End of day

DAY 3

TIME	BUILDING/ROOM	PARTICIPANT
8 :30	Room#	Preparation time
9 :00	Room#	OT. Director/Head, verbal report
10 :00	Room#	Dean, verbal report
11 :15	Room#	Faculty, students, support personnel, verbal report
12 :00- 5pm	Room#	Provide team a private space for lunch and time to complete the written report.

Example 1 On-Site Agenda

Example 2 On-Site Agenda

List of Appendices

Appendix A: Faculty Information Chart (sample) (Page 30)

Appendix B: Student Placement Chart (sample) (Page 31)

Appendix C: The Importance of Critical Reflections (Page 32)



Glossary

All Faculty: Core academic faculty + contracted/external instructors.

Core Academic Faculty:

The core academic faculty is composed of tenured, tenure/permanent-stream and continuing and renewable appointments, part-time or full-time with regular involvement in two or more of teaching, research and service. This does not typically include individuals contracted for isolated tasks (e.g. one course, and tutor with no additional responsibilities).

Full time equivalent (FTE): Working hours of multiple employees are added to represent the number of employees working 37.5 hours per week over a month's period.

Academic Qualifications: Requirements for entry into a profession, a higher-level educational institution, or demonstration of competencies for an academic position that involves a period of formal study in a recognized educational institution, and successful completion of its program.

Accessibility: The ability of individuals to obtain service at the right place and at the right time, based on respective needs.

Accreditation: Accreditation is a quality review process used by an organization whose authority has been publicly recognized to grant official status to a program of study that has met or exceeded pre-determined **standard outcomes**. Accreditation status may be subject to periodic review and may be withdrawn.

Appropriate: Especially suitable or compatible.

Competence: An individual's knowledge and skills are appropriate to the service being provided.

Competencies for Occupational Therapists in Canada (COTC) (2021): The document that describes the competencies required of occupational therapists developed through a partnership between CAOT, Association of Occupational Therapy University Programs (ACOTUP) and Association of Canadian Occupational Therapy Regulatory Organizations (ACOTRO) published in 2021 on the CAOT and ACOTRO websites.

Critical Reflection: A reflective practice that is a dynamic and cyclical (recurrent) mechanism by which a person or group of persons examine a situation or a process in order to identify its strengths and areas requiring improvement. The result of this mechanism should be used to improve their practice, teaching, research and/or service to the community. The mechanism will be influenced by the values, motives, perceptions, attitudes, and actions of the person or group of persons. Please see Appendix C, page 32.

Curriculum: List of subjects composing a structured training and/or educational program organized into a course, courses, or work experiences that develop the knowledge, skills, and abilities of learners. The curriculum has an implicit or explicit set of goals and objectives with respect to learning outcomes (Adapted from CICIC, 2005). This could be a pictorial model or a figure identifying concepts and links between concepts.

Curriculum Evaluation: is a systematic method for collecting, analyzing, and using information to answer questions about the mission, the vision and the objectives of the curriculum and their application in the sequence and content of courses, and the pedagogical strategies to reach them. Curriculum evaluation is sometimes incorporated into program evaluation.

Educational Conceptual Framework: A document and/or model that illustrates and describes the program's overarching educational/pedagogical values, beliefs, theory and strategies that contribute to effective student learning.

Effectiveness: The degree to which the service, intervention, or action achieves the desired results.

Efficiency: Achieving the desired results with the most cost-effective use of resources.

Evidence: The documents, actions, or other practical means by which a program of study demonstrates how it has met or not met each measure of effectiveness.

Faculty to Student Ratio: A ratio calculated using the typical number of core academic faculty FTE (see definition) with the total number of entry-level students in the program.

Fieldwork Education: Fieldwork education provides students of occupational therapy with opportunities to integrate knowledge and to acquire abilities and professional behaviors through a supervised and experiential learning experience (adapted from Canadian Guidelines for Fieldwork Education in Occupational Therapy (CGFEOT), 2011).

Global Citizen: Having an awareness and commitment to the rights and needs of fellow citizens of this world. The notion of citizenship refers to the quality of an individual's response to membership in a community. (WFOT 2016 page 57)

Global Expertise: Knowledge and skills that reflect current occupational therapy practice and general health care systems within a global context.

Goals: Broad statements that describe the desired state for the future as well as providing direction for day-to-day decisions and activities.

Inclusive Education: Inclusive quality education is based on the right of all learners to a quality education that meets basic learning needs and enriches lives. Focusing particularly on vulnerable and marginalized groups, it seeks to develop the full potential of every individual. The ultimate goal of inclusive education is to end all forms of discrimination and foster social cohesion. (WFOT position statement Inclusive Occupational Therapy Education- 2008, Pg. 1. Please refer to [Joint Position Statement on Inclusive Occupational Therapy Education for Persons with Disabilities](#), April 3rd, 2018.

Indicators: (see Measures of Effectiveness).

Interprofessional Education: Occasions when members or students of two or more professions learn with, from and about each other, to improve collaboration, and the quality of care and services (CAIPE (2002, modified 2017) (CAIPE, 2002, modified 2017). Interprofessional Education (IPE) is a complex educational approach that is most effective when integrated throughout a program of study in both academic and practice learning as the student moves from simple to more complex learning activities. Students who participate in interprofessional education will develop and manage the knowledge, skills and attitudes necessary for effective relationship focused collaborative practice.

Learning Outcomes: The achievement of pursuing a learning objective.

Local Expertise: Knowledge and skills that reflect current occupational therapy practice and general health care systems within a regional district, regional transit district, metropolitan area, or provincial context.

Measures of Effectiveness (Indicators): Measures of effectiveness (also described as indicators) provide factual information on the level of attainment required for each test of quality in question. In the context of accreditation, indicators serve as **evidence** of attainment of criteria (or standards), which form the basis for accreditation decisions.

Objectives: Concrete, measurable steps to achieve identifiable goals.

Outcome: Consequence, result, or impact of an intervention(s) that may or may not be intended.

Outcome Indicators: Indicators are variables associated with broadly stated program outcome criteria. In the context of accreditation, outcome indicators serve as **evidence** of attainment of outcomes presumed to be caused by the program. For example, student performance on an exam is an indicator of learning presumed to be the consequence of students' engagement in the educational process provided by the program.

Process: Series of inter-related activities and communications that accomplish a goal.

Professional Conceptual Framework: A document and/or model that illustrates and describes the program's overarching professional theory, values and beliefs and how they contribute to the development of knowledge, skills and behaviors that support a strong professional identity.

Program Evaluation: Program evaluation is a systematic method for collecting, analyzing, and using information to answer questions about policies, human resources and programs, particularly about processes of implementation and outcomes (e.g., effectiveness and efficiency)

Program Mission: The statement of the *raison d'être* of the program.

Quality Improvement: Organizational philosophy that seeks to meet customer, student, or clients' needs and exceed their expectations by using a structured process that selectively identifies and improves all aspects of service.

Regional Expertise: Knowledge and skills that reflect current occupational therapy practice and general health care systems within a cluster of provinces, e.g., the Maritimes, Atlantic Canada, Western Provinces, Central Canada or Canadian context.

Report: Tells what the occupational therapy program does. May be a brief statement or longer report.

Research: Inquiry into, and the development of, new knowledge that is both communicated to students and that involves students as research participants in examining their profession.

Scholarship: Scholarship refers to organized inquiry that helps to produce theory and **evidence** from multiple research paradigms using a dynamic process to move between: (a) knowledge of a specific situation; (b) generalized theories regarding the complex process of engaging or re-engaging people in valued occupations; and (c) emerging knowledge. In client/ clinical contexts, the process may include (d) how the client wishes to change or minimize change.

Self-Study Guide: The component of the academic accreditation process that guides the development of the program's self-study report.

Standards and Standard Outcomes: These are benchmarks that describe the minimum expectations of a program of study and provide the framework for the accreditation review. They are consensus-based and set the benchmark for the quality of the program and accreditation review.

Strategic Plan: A formalized, ongoing, long range plan used by an organization to align its organization and budget structure with its mission priorities and objectives.

Test of Quality: Describes a small element toward the attainment of the educational standards. The CAOT Standard Outcomes are organized hierarchically: there are 9 Standards, each with one or more Tests of Quality, and each Test of Quality has one or more Indicators. Scoring of the Indicators helps accreditors judge if, overall, Tests of Quality are achieved.

CANADIAN ASSOCIATION OF OCCUPATIONAL THERAPISTS ACADEMIC ACCREDITATION INDICATORS (2022)

100 Indicators: Category 1 = 8, Category 2 = 72, Category 3 = 20

STANDARD OUTCOME	Category 1 Pre- screening	Category 2 Required	Category 3 Desirable	Requested Sources of Information F =Off-site documents, N=On-site documents and/or discussion
STANDARD #1: THE OCCUPATIONAL THERAPY PROGRAM IS ESTABLISHED IN A UNIVERSITY AUTHORIZED TO GRANT MASTER'S LEVEL AND HIGHER DEGREES.				
1.1 The occupational therapy program has official standing within the university structure.				
1.11 The degree is conferred in occupational therapy at least at the Master's level.	X			F = Provide evidence of a recognized degree granting university. A copy of the relevant part of the appropriate university calendar.
1.12 The occupational therapy department/program/school, is represented on the official university organizational chart(s) in a similar manner to other academic department/schools in the university.		X		F = A copy of the university organizational chart and a report that documents and critically reflects upon the occupational therapy program (department, school, etc.) position within the university organizational structure.
1.2 The department or school is represented in the relevant university committees. The department/school is represented on appropriate university committees.				
1.21 Occupational therapy department/program/school self-manages or is represented in decision making in key areas, such as student recruitment, admissions, curriculum, evaluation, budget, promotion / tenure / appointments, etc.		X		F = A list of committees with a report that documents and critically reflects upon occupational therapy management of or representation on key decision-making committees or systems at all levels. Examples: admission, curriculum, budget, promotion/tenure, appointments, or other committees/systems. N = Interview with occupational therapy program leadership, dean, president as appropriate on quality of self-management.
1.22 The occupational therapy department/program/school has representation on appropriate faculty level committees.		X		F = A list of faculty level committees or other bodies with an occupational therapy voice and a report that documents and critically reflects upon the appropriateness of the level of representation. N = Interview with occupational therapy program leadership, dean, president as appropriate re: suitable representation.
1.23 The occupational therapy department/program/school has representation on appropriate university level committees.			X	F= A list of university level committees or other bodies with an occupational therapy voice and a report that documents and critically reflects upon the appropriateness of the level of representation. N = Interview with occupational therapy program leadership, dean, president as appropriate re: suitable representation.
1.24 The lines of communication for having the needs of the department/school met are clear.		X		F = A copy of any written document outlining the lines of communication and a report that documents and critically reflects its effectiveness. N = Interview with program leadership, dean, president as appropriate re: adequacy & power of decision-making representation.


STANDARD OUTCOME	Category 1 Pre-screening	Category 2 Required	Category 3 Desirable	Requested Sources of Information F =Off-site documents, N=On-site documents and/or discussion
STANDARD #2: THE OCCUPATIONAL THERAPY PROGRAM PREPARES GRADUATES FOR ENTRY LEVEL PRACTICE THROUGH HIGH QUALITY ACADEMIC AND FIELDWORK EDUCATION, BASED ON EDUCATIONAL & PROFESSIONAL CONCEPTUAL FRAMEWORKS THAT ARE ARTICULATED INTERRELATED, KNOWLEDGE-BASED, COHERENT, AND CONSISTENT WITH THE OVERALL VISION AND MISSION.				
2.1 The curriculum is articulated and based on educational and professional conceptual frameworks which are interrelated.				
2.11 There is a document that articulates a professional and educational conceptual framework, occupational therapy program vision mission, goals and objectives. The document situates the program in the local and regional context and includes an overview of the occupational therapy program and course sequencing.	X			F = A copy of a relevant document.
2.12 An occupational therapy program document has clear, comprehensive and integrated educational and professional conceptual frameworks.		X		F = A report that critically reflects upon the relevant document re: concepts and their interrelationship. N = Interview with faculty re occupational therapy program frameworks.
2.13 The occupational therapy program goals and objectives are congruent with the overall department/ school, vision and mission.		X		F = A report that documents and critically reflects upon the congruence between goals, objectives, mission, & vision. N = Interview with faculty re: occupational therapy program goals & objectives.
2.2 The educational conceptual framework is defined and documented.				
2.21 The educational conceptual framework includes an educational philosophy, values and beliefs statement expressed in terms that are inclusive and respectful of diversity		X		F = A report that documents and critically reflects upon congruence of the educational conceptual framework with the department/school's vision and mission. Highlight the concepts that demonstrate "the profession's concerns with inclusion, diversity, justice, and human rights in daily life." (WFOT (2016) Minimum Standards p. 5) N = Interview with faculty & students.
2.3 The educational conceptual framework is based on current and emerging educational practice.				
2.31 The educational conceptual framework is evidence-based and supported by cited sources that reflect current educational theories/ practices.		X		F = A critical reflection of the relevance and currency of the educational conceptual framework. N = Interview with faculty & students.
2.32 The educational conceptual framework incorporates new and emerging educational theories / practices / trends.			X	F = A critical reflection of the educational conceptual framework re: incorporation of new / emerging educational theories / practices / trends. N = Interview with faculty & students.
2.4 The professional conceptual framework of the occupational therapy program is defined and documented.				

STANDARD OUTCOME	Category 1 Pre- screening	Category 2 Required	Category 3 Desirable	Requested Sources of Information F =Off-site documents, N=On-site documents and/or discussion
2.41 A professional conceptual framework includes a professional philosophy, values and beliefs statement that is expressed in terms that are inclusive and respectful of diversity.		X		F = A critical reflection of the congruence of the professional conceptual framework with OT philosophy, values and beliefs on collaborative relationship-focused and occupation- based practice that is inclusive and respectful of diversity. N = Interview with faculty & students.
2.5 The professional conceptual framework is based on current and emerging occupation-based occupational therapy theory and practice.				
2.51 The professional conceptual framework is evidence-based and supported by cited sources that reflect current occupation-based practice/theories to meet the needs of individuals, groups and populations.		X		F = A critical reflection of the relevance and currency of the professional conceptual framework and how it guides the preparation of students as global citizens. N = Interview with faculty & students.
2.52 The professional conceptual framework incorporates new and emerging occupation-based professional practices/theories / trends.			X	F = A critical reflection of the curriculum document re incorporation of new / emerging professional theories / practices / trends. N = Interview with faculty & students.
2.6 The educational and professional conceptual frameworks are communicated to faculty, students, and others involved in the occupational therapy program.				
2.61 The educational and professional conceptual frameworks are documented and appear in the appropriate orientation documents for all those involved in the occupational therapy program.		X		F=A copy of the orientation and other documents used to communicate the educational and professional conceptual frameworks. N = Interview with faculty & students.
2.62 The faculty members, students, external instructors and field work educators report that they have access to documentation regarding the educational and professional conceptual frameworks and their interrelationship.		X		F = A report that documents and critically reflects upon the evidence and opinions of stakeholders on the adequacy of communication. N=Adequacy of communication verified during interviews.
2.7 The curriculum includes academic and fieldwork education and uses a range of inclusive educational methods.				
2.71 The courses, their titles, descriptions, and objectives are congruent and are consistent with the educational and professional conceptual frameworks.		X		F = A copy of the course outlines with titles, descriptions, and objectives. A report that documents and critically reflects upon the congruence of course outlines with both the educational and professional conceptual frameworks. N = Interview with faculty & students.

STANDARD OUTCOME	Category 1 Pre-screening	Category 2 Required	Category 3 Desirable	Requested Sources of Information F =Off-site documents, N=On-site documents and/or discussion
2.72 Academic and fieldwork education methods are consistent with the educational and professional conceptual frameworks.		X		F = A report that documents and critically reflects upon the inclusive educational methods (including fieldwork education) and their consistency with the educational and professional conceptual frameworks including interprofessional education and practice. N = Interview with faculty, students, and preceptors/clinical supervisors.
2.73 Academic and fieldwork methods of evaluating student learning are consistent with the educational and professional conceptual frameworks.		X		F = A report that lists methods of student evaluation and critically reflects upon their consistency with the educational and professional conceptual frameworks. N = Interview with faculty & students.
2.74 Fieldwork education includes a minimum of 1000 supervised hours	X			F = A copy of documentation that confirms a minimum of 1000 supervised hours as described by the WFOT (2016), i.e. "1000 hours refers to the time each student spends implementing an occupational therapy process or an aspect of an occupational therapy process involving human interaction with person or persons as client" (p.49) The document describes and critically reflects upon how fieldwork hours are counted.
2.75 The fieldwork component is embedded in the curriculum document.		X		F = The copy of the curriculum document.
2.76 The fieldwork component demonstrates that students acquire a range of experiences.		X		F = A completed chart that demonstrates how students engage in a wide range of experiences in several environments (practice area, age span type (e.g. hospital), site approval status, educator, placement hours). Select 10 students at random. If your database produces comparable info, you may use that chart. Please see appendix B. Completion of mapping conforms to WFOT "Minimum Standards for the Education of Occupational Therapists" (2016) p. 45. N = Interview with fieldwork education coordinator.
2.77 The academic curriculum includes content that represents a breadth and depth of knowledge in the person, environment and occupation, and more specifically, occupational, social, behavioural, and health sciences and investigative sciences.		X		F = A copy of the curriculum document and a report that documents and critically reflects upon the curriculum with reference to content in the areas required to meet adequate breadth and depth of knowledge, "60% of curriculum content to address occupation and occupational therapy content, 10-30% biomedical/psychological/ sociological sciences, and 10-30% social perspectives on health" (WFOT "Minimum Standards for the Education of Occupational Therapists (2016)". p. 45-46.)
2.78 The academic and fieldwork components are integrated and demonstrate learning outcome congruency.		X		F = Copy of the curriculum document, including a description and critical reflection of: a. how fieldwork is an integral part of the curriculum and is consistent with the conceptual and educational frameworks. b. the consistency of fieldwork and academic /classroom learning objectives.

STANDARD OUTCOME	Category 1 Pre- screening	Category 2 Required	Category 3 Desirable	Requested Sources of Information F =Off-site documents, N=On-site documents and/or discussion
2.79 The academic and fieldwork education are congruent with the relevant competency documents.		X		F = A report that documents the curriculum congruency with the relevant competency documents (e.g. Competencies for Occupational Therapists in Canada, 2021) . N = Interview with faculty & students.
2.710 The students, fieldwork educators, and academic faculty members can articulate the link between academic and fieldwork components of the curriculum.			X	F = A report that documents and critically reflects upon how the curriculum is presented to stakeholders such that they can articulate the link between the academic and fieldwork components of the curriculum. N = Interview with faculty & students.
2.711 The occupational therapy program has a policy for fieldwork site approval and all fieldwork occurs in approved sites.		X		F = Copy of the fieldwork site approval form & guidelines for preceptor supervision by registered practitioners with a minimum of 1 year experience, as established by the CUFÉ Committee of ACOTUP. A list of approved sites and sites in process of approval. N = Interview with fieldwork education coordinator.
2.712 Each student's fieldwork hours are supervised by an occupational therapist.		X		F = A report that confirms each student's fieldwork hours are directly or indirectly supervised on- or off-site by an occupational therapist. N = Interview with fieldwork education coordinator.
2.713 The academic and fieldwork education components incorporate interprofessional education and practice.		X		F= A report that documents and critically reflects upon the IPE activities and experiences integrated in the occupational therapy program. The report should describe the program offerings, and include considerations of space, human and learning resources required to deliver IPE. N= Interview with students and faculty.
STANDARD # 3: THE STUDENT AFFAIRS SERVICES/RESOURCES ARE ADEQUATE TO SUPPORT THE PROGRAM OBJECTIVES.				
3.1 The students receive accurate, current and complete information in a number of formats on the occupational therapy program, including practice, policies, regulations, resources, and services.				
3.11 Resources that convey information on the occupational therapy program, including practice, policies, regulations, resources, and services are accessible to all students, including students with special needs.		X		F = A report that documents and critically reflects upon the multiple formats in which the information including practice hours, is available and the mechanisms and resources available to accommodate special needs. N = Confirmation from students on information access and accommodations mechanisms.
3.12 The information in the university calendar about the occupational therapy program is accurate, current and complete.		X		F = A statement confirming the accuracy and currency of the information in the university calendar. N = Interview with faculty and staff on processes to update information.
3.13 Students receive information pertaining to safety and well-being.		X		F = A report that documents and critically reflects upon how students receive this information. Front page of the information with its source. N = Confirmation from students that they have access to this information on these resources.

STANDARD OUTCOME	Category 1 Pre-screening	Category 2 Required	Category 3 Desirable	Requested Sources of Information F =Off-site documents, N=On-site documents and/or discussion
3.14 Students have access to information on academic support.		X		F = A list of academic support services available to the students. N = Confirmation from students that they have access to this information.
3.2 Student records and personal information are kept confidential.				
3.21 Written policy and procedures for establishing and maintaining confidentiality of student information are current and accessible to faculty, staff and students.		X		F = A copy of the policy and procedures regarding confidentiality of student information. N = Interview with key staff members about existence and implementation of policy.
3.22 Confidential student information is stored in a secured area or computer with access limited to designated staff and faculty.		X		F = A report that describes how and where information is stored. N = Confirmation that confidential student information is stored in secure files with access limited to designated staff and faculty.
3.3 Students participate in administrative and academic activities of the occupational therapy program.				
3.31 There is an organized, explicit process for student representation in appropriate academic and administrative affairs.			X	F = A list of committees with student representation and a report that documents and critically reflects upon the processes for student representation in appropriate academic and administrative affairs of the occupational therapy program, department,/school and university. F = A list of committees with student representation.
3.32 Students and faculty are satisfied with the level of student representation on administrative and academic affairs.			X	F = A report from the student society or equivalent on their satisfaction with representation. N = Interview students and faculty that they are satisfied with the level of student representation on administrative and academic affairs.
STANDARD # 4: THE FINANCIAL RESOURCES ARE ADEQUATE TO SUPPORT THE OCCUPATIONAL THERAPY PROGRAM OBJECTIVES.				
4.1 The individual responsible for the occupational therapy program has formal documented authority for the occupational therapy program budget in accordance with university policies and procedures for fiscal planning.				
4.11 The individual responsible for the occupational therapy department/school has similar signing authority over the occupational therapy program budget and allocation of resources (including signing authority and allocation of discretionary funds) as those responsible for other comparable academic department/schools in the university.	X			F: A report that confirms and critically reflects upon the level of budget authority and the comparability with similar departments/schools in the university. A confirmation letter from a Dean or Vice-President as appropriate.
4.12 The individual responsible for the occupational therapy program has methods for budgetary redress.		X		F = A report that documents and critically reflects upon the process for budgetary redress. N = Interview with individual responsible for the occupational therapy program re: budgetary redress methods.

STANDARD OUTCOME	Category 1 Pre-screening	Category 2 Required	Category 3 Desirable	Requested Sources of Information F =Off-site documents, N=On-site documents and/or discussion
4.2 The occupational therapy program budget is based on long range planning and demonstrates anticipated changes in the occupational therapy program needs.				
4.21 There is a statement that confirms the financial sustainability of the occupational therapy program.	X			F= A critical reflection of the financial adequacy of the occupational therapy program that confirms that the program is financially sustainable. N = Interview with individuals responsible for the occupational therapy program re: sustainability.
4.22 The budget is documented and is adequate to support the occupational therapy program.		X		F = A critical reflection of the budget documents. Off-site documents need only contain percentages of budget allotted to various occupational therapy program expenditures. N = Confirmation of the occupational therapy program sustainability and financial adequacy with individuals responsible for the occupational therapy program budgets.
4.23 An adequate portion of the budget is designated as discretionary / unencumbered.		X		F = A report that documents and critically reflects upon the percentage of the budget designated as discretionary/unencumbered and its adequacy to support the occupational therapy program objectives. N = Interview with individual responsible for the program re discretionary budget.
4.24 There is a long-range financial plan that supports occupational therapy program objectives and future development.		X		F= A report that documents and critically reflects upon the long range financial plan. N = Interview with individuals responsible for the long range financial plan.
 STANDARD # 5: THE HUMAN RESOURCES ARE ADEQUATE TO SUPPORT THE OCCUPATIONAL THERAPY PROGRAM OBJECTIVES. Faculty's most current CVs are acceptable. No special formats required.				
5.1 The individual responsible for the occupational therapy department/ school is an occupational therapist with the relevant academic and professional qualifications and holds a full-time academic appointment in the university.				
5.11 The individual responsible for the occupational therapy department/ school has a) an entry level professional occupational therapy degree, a PhD or equivalent, and a full-time permanent position within the occupational therapy department/ school. The individual responsible for the occupational therapy program has occupational therapy qualifications.	X			F = Curriculum Vitae of the individual including reference to a Ph.D or equivalent. (If in progress, includes expected date of completion). Confirmation of full-time permanent position (letter of offer, Departmental organizational chart etc).
5.12 The individual responsible for the occupational therapy department/ school is a published scholar.		X		F = Curriculum Vitae of the individual, including the academic record of publications, presentations and research / scholarly projects.

STANDARD OUTCOME	Category 1 Pre-screening	Category 2 Required	Category 3 Desirable	Requested Sources of Information F =Off-site documents, N=On-site documents and/or discussion
5.2 The individual responsible for the occupational therapy department/school effectively leads and manages the occupational therapy program.				
5.21 The individual responsible for the occupational therapy department/school has similar authority to lead and manage the program as those responsible for other comparable academic department/schools at the University.		X		F = A copy of the job description and a report that documents and critically reflects upon the responsibilities and authority to lead and manage the occupational therapy program day to day. Assess whether this is similar to comparable department/school at the university. N = Interview with the individual, Dean and vice-president.
5.22 There is a documented process for performance evaluation of the chair/director of the occupational therapy department/school.		X		F = A report that documents and critically reflects upon the process for performance evaluation of the chair/director of the occupational therapy department/school. Copy of form if applicable. N = Interview with individual, a Dean and vice-president re: adequacy of process & methods for acting on recommendations.
5.3 All faculty hold professional and academic qualifications relevant to their assigned responsibilities.				
5.31 At least 75% of core academic faculty (see glossary) has an accredited occupational therapy degree.		X		F = For indicators 5.31 to 5.35 please provide a report that critically reflects on the collective credentials of the core faculty and their congruence with the programs goals and objectives. F=Faculty Curriculum Vitae. A list of total faculty names with occupational therapy and other credentials, and the percentage with FTE. Requested attachment: Faculty Information Chart (complete Appendix A for each indicator).
5.32 At least 75% of the core academic faculty has doctoral level credentials.		X		F = Faculty Curriculum Vitae. Faculty Information Chart (Appendix A) with a list of faculty with doctoral credentials, and the percentage of total faculty. If target has not been met there is a documented plan for achieving this level.
5.33 At least 75% of all faculty (see glossary) is in a permanent stream (including but not limited to tenure track).		X		F = Faculty Curriculum Vitae. Faculty Information Chart with a list of faculty names with a break-down of permanency and FTE status and the percentage of total faculty who are in a permanent stream and those who are .5FTE or more.
5.34 At least 75% of the core academic faculty is employed full-time.			X	F = Faculty Curriculum Vitae. Faculty Information Chart with a list of faculty names with a break-down of full and part-time status.
5.35 75% of core academic faculty are members of relevant professional associations.			X	F = Faculty Information Chart with a list of faculty names with their association membership.

STANDARD OUTCOME	Category 1 Pre-screening	Category 2 Required	Category 3 Desirable	Requested Sources of Information F =Off-site documents, N=On-site documents and/or discussion
5.36 Individual core academic faculty credentials are congruent with responsibilities.			X	F = A report that that offers a critical reflection of the credentials of the individual faculty and the congruence with their responsibilities. E.g. When possible, master's student projects are supervised by those with doctoral degrees. N = Interview with faculty re (in)congruence
5.37 100% of all faculty who are occupational therapists hold credentials from the regulatory occupational therapy organizations, where applicable.		X		F = Faculty Information Chart A list of total faculty names designating those with an occupational therapy degree with credentials from the applicable regulatory occupational therapy organizations, registration numbers and the associated percentages.
5.4 There are adequate resources to support the professional development of the faculty.				
5.41 Programs and resources within the university support professional development.			X	F = A report that documents and critically reflects upon how programs and resources within the university support professional development. Copy of professional development plan or policies. N = Interview with faculty re: professional development.
5.42 100% of the core academic faculty takes part in professional development.			X	F = A report that documents and critically reflects upon how occupational therapy faculty take part in professional development. N = Interview with faculty re: professional development.
5.43 The available resources for professional development are distributed according to explicit policy.		X		F = Copy of the policy (ies) regarding professional development resources in the department/school or university.
5.44 The occupational therapy department/school has a professional development funding process that is comparable to other academic departments/schools in the university.		X		F = A report that documents and critically reflects upon how the educational allowance is comparable to other academic departments/schools in the university. N = Interview with faculty re: educational allowance policy(ies).
5.5 There are sufficient human resources to administer and support the occupational therapy program objectives including research needs and community service requirements of the program.				
5.51 The occupational therapy department/school has at least one FTE core academic faculty member for every eight occupational therapy program students enrolled in the professional entry level program.		X		F = A report that documents and critically reflects upon how the ratio of core academic faculty member positions to students is calculated and how closely it meets the ratio required. Requested attachment: Faculty Information Chart (Appendix A) If the program does not meet the 1:8 ratio, justify how the current ratio is appropriate for the delivery approach. N = Interview with individual(s) responsible for the occupational therapy program re: budget resources related to meeting the ratio.

STANDARD OUTCOME	Category 1 Pre- screening	Category 2 Required	Category 3 Desirable	Requested Sources of Information F =Off-site documents, N=On-site documents and/or discussion
5.52 There are documented workload guidelines for core faculty regarding teaching, research, and service ratios.			X	F = A report that documents and critically reflects upon workload guidelines for faculty regarding teaching- including both occupational therapy content- research, and service ratios. Requested attachment: Faculty Information Chart. N = Onsite interviews with faculty, the occupational therapy program leader, and Dean confirm that guidelines are followed.
5.53 Workload allocations are comparable to other faculty in comparable academic departments/ schools in the university.		X		F = A report that documents and critically reflects upon the workload allocations of the occupational therapy faculty, in relation to other academic departments/ schools in the university. N = Interview with faculty, Dean, Vice- president.
5. 6 The practices in the occupational therapy department/school regarding appointments, re: appointments, promotions, tenures and all types of leaves are consistent with the university's policies and guidelines.				
5.61 The university/faculty policies regarding appointments, reappointments, promotions, tenures and all types of leaves are consistently applied within the occupational therapy department/ school.		X		F = A report that documents and critically reflects upon the consistency of the application of the policies and guidelines regarding appointments, reappointments, promotions, tenures and all types of leaves. N = Interview with individual responsible for the occupational therapy program, faculty, Dean, vice-president.
5.7 The individual (s) responsible for fieldwork education is an occupational therapist with post-professional, academic qualifications.				
5.71 The individual (s) responsible for fieldwork education is a member of the appropriate occupational therapy regulatory organization.		X		F = Curriculum vitae of the individual, including the regulatory organization and registration number
5.72 The individual (s) responsible for fieldwork education has at least four years occupational therapy experience including student supervision.		X		F = Curriculum vitae of the individual, including a list of occupational therapy experience, and of student supervision.
5.73 The individual(s) responsible for fieldwork education has a post-professional degree or higher and has a full time (or equivalent) continuing appointment for fieldwork education.		X		F = Curriculum Vitae of the individual(s). A report that confirms there is a full time (or equivalent) continuing appointment responsible for fieldwork education. Explain the position's status, if needed. N = Interview with individual(s) responsible for occupational therapy program and individual responsible for fieldwork education.

STANDARD OUTCOME	Category 1 Pre- screening	Category 2 Required	Category 3 Desirable	Requested Sources of Information F =Off-site documents, N=On-site documents and/or discussion
5.8 There are sufficient non- core faculty instructors to meet the instructional demands of the program.				
5.81 The number of teaching assistants is comparable to similar academic departments/schools and is adequate to meet the occupational therapy program needs.			X	F = A report that documents and critically reflects upon the number of teaching assistants in relation to the needs of the occupational therapy program and compares it with other similar academic departments/schools in the university. N = Interview with faculty re: access to teaching assistants.
5.82 The program demonstrates use of local expertise in educational delivery.		X		5.82: A report that documents and critically reflects on how the program uses local experts to enrich learning. Experts are "skilled and knowledgeable in content areas of local occupations and traditions...local traditions of teaching and learning are valued and incorporated" WFOT 2016, p.47.
5. 9 There are sufficient support staff members to meet the demands generated by the administration, teaching, research and community service activities of the occupational therapy program.				
5.91 The occupational therapy program has adequate support staff to fulfill program and curriculum objectives.		X		F = A report that documents and critically reflects upon the adequacy of this support and the impacts where it is inadequate. N = Interview with individual responsible for the occupational therapy program and staff.
5.92 There is dedicated support staff FTE for the occupational therapy program chair/director.		X		F = A report that confirms there is dedicated support staff FTE for the occupational therapy program chair/director.
5.93 The staff to faculty ratio is at least equivalent to the ratios in comparable departments/schools.			X	F = A report that documents that staff to faculty ratio is equivalent to the ratios in comparable departments/schools and critically reflects upon this ratio. N = Interview with individual responsible for the occupational therapy program and a Dean.
5.94 There is adequate support staff FTE dedicated to the fieldwork education coordinator.		X		F = A report that documents and critically reflects upon the amount of support staff FTE dedicated to the fieldwork education coordinator. N = Interview on site with the fieldwork education coordinator to confirm that there is adequate support staff.
STANDARD # 6: THE ENVIRONMENTAL RESOURCES ARE ADEQUATE TO SUPPORT THE OCCUPATIONAL THERAPY PROGRAM OBJECTIVES.				
6.1 The environment is safe and enables participation by all users.				

STANDARD OUTCOME	Category 1 Pre-screening	Category 2 Required	Category 3 Desirable	Requested Sources of Information F =Off-site documents, N=On-site documents and/or discussion
6.11 Physical space occupied by the occupational therapy program is safe and universally accessible and supports accommodations for special needs.		X		F = A report that describes and illustrates (floor plans, photos) the physical environment in which the occupational therapy program is located and critically reflects upon the adequacy and accessibility of the physical environment to support participation by all users. The report also outlines and critically reflects upon the process to determine and implement appropriate accommodations for participants with varying levels of abilities. N = Verified by tour on site.
6.2 There is sufficient space to support the occupational therapy program objectives.				
6.21 There is adequate designated space for the occupational therapy program.	X			F = A document that describes the designated space for occupational therapy with photos/floor plans.
6.22 The occupational therapy program space is adequate and suitable to the educational conceptual framework and to the fulfillment of the occupational therapy program objectives.		X		F = A report that documents and critically reflects upon how the occupational therapy program space meets the needs of the educational conceptual framework as well as the program objectives. N = Suitability verified by tour and interviews on site or via floor plans and photos that portray the designated program space.
6.23 Private offices are available to all full time faculty in permanent stream positions.		X		F = Floor plans and photos of office space for permanent stream faculty. N = Verified by tour on site.
6.24 All temporary stream faculty (contract), sessional and teaching assistants have designated workspace.			X	F = Floor plans and photos of office space for all temporary stream teaching faculty. N = Verified by tour on site.
6.25 100% of occupational therapy program space meet provincial or university guidelines (i.e. fire, safety guidelines and health and well-being).	X			F = A letter from the manager of university facilities to confirm that 100% of occupational therapy program space (classrooms and labs) meets provincial and university regulatory guidelines for fire and safety.
STANDARD # 7: THE LEARNING RESOURCES ARE ADEQUATE TO SUPPORT THE OCCUPATIONAL THERAPY PROGRAM OBJECTIVES.				
7.1 Learning resources are adequate to support the occupational therapy program objectives.				
7.11 The number and type of learning/ instructional resources are adequate and suitable to the educational conceptual framework and to the fulfillment of the occupational therapy program objectives.		X		F = A report that lists the types of learning / instructional resources and critically reflects upon the adequacy of these resources to carry out the occupational therapy program. Where resources are limited discuss the impact on the occupational therapy program delivery and student learning as well as the immediate and long term plan to resolve these insufficiencies. N = View learning/instructional resources on site.
7.12 Students are satisfied overall with learning/instructional resources.			X	F = A report from student representatives. A report that documents and critically reflects upon student satisfaction with learning / instructional resources. N = interviews with students on site.

STANDARD OUTCOME	Category 1 Pre-screening	Category 2 Required	Category 3 Desirable	Requested Sources of Information F =Off-site documents, N=On-site documents and/or discussion
7.13 Faculty is satisfied overall with the quality and access of learning/ instructional resources.			X	F = A report that documents and critically reflects upon faculty satisfaction with learning / instructional resources. N = interviews with faculty on site.
7.14 There are structures in place to permit students and faculty to access professional literature that is sufficient in number and scope to fulfill the occupational therapy program objectives.		X		F = A report that documents and critically reflects upon the adequacy of the number and scope of library resources to support the occupational therapy program objectives and highlights strategies to resolve deficiencies. N = Interview on-site with university librarian designated to occupational therapy
7.2 Technical services are adequate to support the occupational therapy program objectives.				
7.21 There are adequate technical support services for students, faculty and support staff.		X		F = A report that documents and critically reflects upon the students', faculty's and support staff's evaluation of the adequacy and timeliness of technical support services. N - Verify with onsite interviews with students and the program leader.
STANDARD # 8: THE OCCUPATIONAL THERAPY PROGRAM HAS A COMPREHENSIVE PLANNING, REVIEW AND EVALUATION PROCESS FOR CONTINUOUS IMPROVEMENT & LONG-TERM PLANNING WHICH IS RESPONSIVE TO THE CHANGING CONTEXT OF THE PRACTICE ENVIRONMENT FOR OCCUPATIONAL THERAPISTS.				
8.1 There is an explicit plan for the occupational therapy program evaluation.				
8.11 There is a documented plan for program evaluation that is consistent with the educational and professional conceptual frameworks.		X		F = A copy of the program evaluation plan.
8.12 There is a comprehensive occupational therapy program evaluation plan which includes both formative and summative methods.			X	F = A report that documents and critically reflects upon the components of the occupational therapy program evaluation plan, including input from multiple stakeholders. N = Interview with faculty re the plan components.
8.13 There is an established timeline for the occupational therapy program evaluation.		X		F = A report that documents and critically reflects upon the timeline & processes to collect & analyze data for the occupational therapy program evaluation. N = Interview with faculty & staff re: timeline & duties in implementing the plan.
8.2 There is an explicit plan for the occupational therapy curriculum evaluation.				
8.21 There is a documented curriculum evaluation plan that is consistent with the educational and professional conceptual frameworks.		X		F = A copy of the documented curriculum evaluation plan (may be included in the program evaluation plan, see glossary).
8.22 There is a comprehensive curriculum evaluation plan which includes both formative and summative methods.			X	F = A report that documents and critically reflects upon the components of the curriculum evaluation plan, including input from multiple stakeholders. N = Interview with faculty re: the plan components.

STANDARD OUTCOME	Category 1 Pre- screening	Category 2 Required	Category 3 Desirable	Requested Sources of Information F =Off-site documents, N=On-site documents and/or discussion
8.23 There is an established timeline for curriculum evaluation.		X		F = A report that documents and critically reflects upon the timeline & processes to collect & analyze data for curriculum evaluation.
8.24 The curriculum evaluation plan is congruent with the relevant competency documents and is sufficient in scope to guide ongoing curriculum development.		X		F = A report that documents and critically reflects upon how the curriculum evaluation plan is congruent with the relevant competency documents and is sufficient in scope to guide ongoing curriculum development. N = Interview with faculty & staff re: timeline & duties re: implementing the plan.
8.3 Students attain competencies as defined by the relevant competency documents				
8.31 The program will monitor and self-reflect on student outcomes.		X		F = A report that documents and critically reflects upon student outcomes including the percentage of students entering the program who complete the degree (may average over past 5 years) and CAOT exam results.
8.4 The results of the occupational therapy program evaluation, curriculum evaluation and student outcomes are used for continuous quality improvement.				
8.41 The results of the occupational therapy program evaluation, curriculum evaluation and student outcomes are reported with recommendations.		X		F = A copy of evaluation reports with recommendations. N = Interview with faculty & students re: evaluation results.
8.42 The occupational therapy program evaluation, curriculum evaluation and student outcomes results have been used to establish priorities and a plan to implement the recommendations for improvements.		X		F = A report that documents and critically reflects upon priorities and a plan to implement the recommendations for improvements N = Interview with faculty & students re: implementing results.
8.43 The occupational therapy program evaluation, curriculum evaluation and student outcomes results have been used to improve the occupational therapy program and curriculum in a timely fashion.			X	F = A report that documents and critically reflects upon the sources of evidence and how the evaluation results have been used to improve the occupational therapy program in a timely fashion.
8.44 The relevant competency documents are used to identify potential strengths and weaknesses of the occupational therapy program.		X		F = A report that documents and critically reflects upon how the program uses relevant documents to identify potential strengths and weaknesses of the program. Examples include CAOT exam results, Competencies for Occupational Therapists in Canada (2021) & WFOT (2016) Minimum Standards. N = Interview with faculty & students re: using the Exam results, relevant competency documents, & WFOT (2016) Minimum Standards in evaluation activities.

STANDARD OUTCOME	Category 1 Pre- screening	Category 2 Required	Category 3 Desirable	Requested Sources of Information F =Off-site documents, N=On-site documents and/or discussion
STANDARD # 9: KNOWLEDGE GENERATION THROUGH ACTIVE RESEARCH AND SCHOLARSHIP INFORMS, AND IS INCLUDED IN, THE OCCUPATIONAL THERAPY PROGRAM.				
9.1 The occupational therapy program is being delivered in a research context that contributes to the field of occupational therapy.				
9.11 All active researchers participate in teaching in the occupational therapy program.		X		F = Core faculty CVs and critical reflection that all active researchers participate in teaching in the occupational therapy program over a three-year window of time e.g. teaching courses supervising research projects, etc. Requested attachment: Faculty Information Chart N = Interview with faculty & students re research faculty participation
9.12 Curriculum learning outcomes demonstrate that students acquire skills as consumers of occupational therapy and other research.		X		F= A report that documents and critically reflects upon how students become consumers of health and other research. N = Interview with students re competency development for practice scholar role
9.13 Students report that current research in occupational therapy and other fields is used in teaching.		X		F = A report by student representatives documenting that current research in occupational therapy and other fields is used in teaching. N = Confirmed on-site with student interview.
9.2 There is active research and scholarship within the occupational therapy program.				
9.21 All students engage in research/ scholarship.		X		F= A report that documents and critically reflects upon student participation in scholarship, knowledge generation and/ or dissemination (posters, critical literature reviews, evaluation plans etc..) F = Copy of curriculum document & course outlines N = Interview with faculty & students re: student engagement in scholarship in the occupational therapy program
9.22 At least 75% of faculty engage in research/scholarship.		X		F= Faculty CVs (most current, no special format) including supervision of master's and doctoral research projects, grant submissions and funding, and presentations at professional conferences.



References

Competencies for Occupational Therapists in Canada (COTC) (2021).

Canadian Guidelines for Fieldwork Education in Occupational Therapy (CGFEOT) (2011).

World Federation of Occupational Therapists (WFOT) (2016). Revised minimum standards for the education of occupational therapists.



Appendices

Appendix A:

Faculty Information Chart (sample)

The following is a *sample chart* for completion of indicators requesting faculty information (e.g. Indicator 5.51, 5.52, 5.35, 5.36)

Core academic faculty: the core academic faculty is composed of tenured, tenure/permanent-stream/track and continuing and renewable appointments, part-time or full-time with regular involvement in two or more of teaching (including participation in program/university committees), research and service. This does not typically include individuals contracted for isolated tasks (e.g. one course, a few conferences, tutor with no additional responsibilities).

Students: entry level professional program students, including qualifying year (QC)

FACULTY NAME	DEGREES/ CREDENTIALS	FTE	TEACHING (%)	RESEARCH (%)	ADMIN (%)	MEMBERSHIPS (ASSOC. NAME)	REGISTRATION# (PROVINCIAL REGULATOR) (%)
Total number of students (all cohorts):							

Method: Please describe here how faculty and student numbers were reported (i.e. who was included in numerator and denominator):

Appendix B:

Student Information Chart (Sample): Indicator 2.76: This table is a sample to help the program indicate the variety of fieldwork experiences had by each student during their academic education. Please select 10 students at random and complete this table. If your database produces a table with comparable information, you may substitute that table.

STUDENT	PRACTICE AREA (PHYSICAL HEALTH, MENTAL HEALTH, MIXED, OR SPECIALTY)	AGE SPAN OF CLIENTS	TYPE OF ENVIRONMENT (HOSPITAL, COMMUNITY CENTER, REHAB CENTER, OTHER)	SITE APPROVAL STATUS	EDUCATOR: (OT OR NON- OT)	PLACEMENT HOURS

Appendix C:

Critical Reflection: A reflective practice that is a dynamic and cyclical (recurrent) mechanism by which a person or group of persons examine a situation or a process in order to identify its strengths and areas requiring improvement. The result of this mechanism should be used to improve their practice, teaching, research and/or service to the community. The mechanism will be influenced by the values, motives, perceptions, attitudes, and actions of the person or group of persons.

Rationale for Critical Reflections

Critical reflection is a requirement across numerous self-study report standards and related indicators. Through this requirement we are encouraging space for occupational therapy programs to reflect on and celebrate their strengths and identify areas where continued growth and work are required.

Through this process, program's gain a sense of pride through describing areas where they excel, while identifying areas of improvement to further enhance program quality. Broad and cohesive critical reflection across an entire program is not often facilitated in day-to-day operations of a program due to the amount of time and resources required. Thus, this is an opportunity for programs to think deeply about what is going well, what could be better, and what steps have been, should, or could be taken to address the latter.

The intent of critical appraisal is not to list deficiencies with programs, but rather to be aware of where the program could do better, develop ideas around how to achieve improvements, and consider what resources may be required.

Indicators that require a critical reflection:

STANDARDS	INDICATORS
1	1.12, 1.21, 1.22, 1.23, 1.24
2	2.12, 2.13, 2.21, 2.31, 2.32, 2.41, 2.51, 2.52, 2.62, 2.71, 2.72, 2.73, 2.74, 2.77, 2.78, 2.710, 2.713
3	3.11, 3.13, 3.31
4	4.11, 4.12, 4.21, 4.22, 4.23, 4.24
5	5.21, 5.22, 5.31, 5.36, 5.41, 5.42, 5.44, 5.51, 5.52, 5.53, 5.61, 5.81, 5.82, 5.91, 5.93, 5.94
6	6.11, 6.22
7	7.11, 7.12, 7.13, 7.14, 7.21
8	8.12, 8.13, 8.22, 8.23, 8.24, 8.31, 8.42, 8.43, 8.44
9	9.11, 9.12, 9.21

Writing a critical reflection while addressing an indicator:

When critically reflecting on a process, provide evidence of the current process and its benefits and limitations. Provide further evidence on how improvements to the current processes are being made and how they are measured and reflect on the learning outcomes from implementing these improvements. Expand on why the process (experience) worked or did not work. Based on the final experience, what actions are being taken?

Helpful steps:

1. Provide a detailed description about how the indicator is met (or not met) with supporting evidence.
2. Highlight what is working well and what isn't.

3. Provide analysis/reasons/full picture on what is working well and what needs improvements and establish an evidence-based conclusion.
4. Use headers to highlight critical reflections.

Examples of critical reflections:

Indicator 1.21 Occupational therapy program is represented in decision making in key areas, such as student recruitment, admissions, curriculum, evaluation, budget, promotion / tenure / appointments, etc.

Critical Reflection: Since our last accreditation, the Occupational Therapy Program has created three new committees (Curriculum; Program Development & Evaluation; Admissions) in an effort to clearly focus our curriculum renewal and evaluation processes. This has proven very beneficial as we undertook major changes, and sought to determine their impact. These committees also contribute to streamlining a continuous quality improvement process that has been our operational style for many years. The committee structure is quite demanding for a small unit, and thus we are seeking ways to add administrative support to each committee, and to download some responsibilities (for example, data analysis, report creation) as the processes themselves become well established. We are also attempting to stagger committee membership so that knowledge of procedures can be translated from chairperson to chairperson, and individuals can rotate off committees to ensure sharing and alternating of high demand roles while ensuring that expertise associated with the committees is not lost. It has worked well to recruit individuals with experience related to the committees (e.g. Dr. XXXX, as a PhD program evaluator, formerly chaired Program Development & Evaluation, and then moved to chair the Curriculum Committee, exploiting her skills as an award-winning educator; Dr. XXX, with strong data analysis skills co-chairing the Program Evaluation Committee with XXXX, a faculty member with strong knowledge of the whole curriculum, and connections to the clinical community).

5.91 The occupational therapy program has adequate support staff to fulfill program and curriculum objectives.

Critical Reflection: In our student exit survey, students reported a high level of satisfaction with support personnel. Overall, 64% of respondents indicated that office staff were helpful and supportive.

Survey item - % who Agree or Strongly Agree

Members of faculty were helpful and supportive in the administrative aspects of my learning (e.g., registration, scheduling, accommodating special needs due to illness, etc.)

63.8

Members of the office staff were helpful and supportive in the administrative aspects of my learning 63.8%

Members of faculty and staff were helpful and supportive in guiding the administrative aspects of clinical placements 46.8%

Critical Reflection: The number and nature of administrative staff is appropriate to support most core operations of the Occupational Therapy Program at a sustainable level. Further, student feedback from the Exit Survey indicates that these resources, at least those that students directly see, are deemed supportive of their learning (it is likely that students rate services relative to clinical placement less strongly due to various issues concerning the need to engage in placements outside the catchment area, and ongoing challenges with the national placement system). It is important to note that decisions related to staffing organization and complement have been informed by consultations with staff and faculty (e.g., retreat discussions) and student feedback. With respect to the newly implemented Admissions and Student Support Coordinator, we will need to determine if a 70% workload is sufficient to meet the operational needs of both professional programs and whether there are any ongoing and/or additional roles for faculty admission coordination duty. Other areas identified by faculty as unmet staffing priorities include: staff support of a lab manager (with the responsibility for (i) equipment and supplies inventories, ordering, and maintenance; (ii) lab set-ups, take-down, etc. and (iii) lab facilities and storage facilities organization and management) and staff support for data entry/management related to program evaluation.