

# **Physical Therapy**

# Final Assessment Report & Implementation Plan June 2021

Faculty / Affiliated University College	Faculty of Health Sciences		
Degrees Offered	Master of Physical Therapy (MPT)		
Date of Last Review	2012-2013		
Approved Fields	NA		
External Consultants	Susan Murphy, BHSc, MEd ,UBC Dina Brooks, PhD, Msc, BSc (PT), McMaster		
Internal Reviewer  Dr. Nandi Bhatia, Associate Dean (Graduate Studies), Faculty of Arts 8 Humanities			
Date of Site Visit	May 6 - 7, 2021 (virtual visit)		
Date Review Report Received	May 10, 2021		
Date Program/Faculty Response Received	Program - June 14, 2021 Dean - June 14, 2021		
Evaluation	Good Quality		
Approval Dates	SUPR-G: November 8, 2021 SCAPA (rating approval, and academic program change recommendation): November 24, 2021 Senate (FYI for program recommendation, approval for academic program changes): December 3, 2021		
Year of Next Review	Year of next cyclical review- 2028-2029		

#### **Overview of Western's Cyclical Review Assessment Reporting Process**

In accordance with Western's Institutional Quality Assurance Process (IQAP), adopted on May 11, 2011, and revised June 22, 2012, this Final Assessment Report provides a summary of the cyclical review, internal responses and assessment and evaluation of the **Physical Therapy** Graduate Program delivered by the Faculty of Health Sciences.

This report considers the following documents:

- the program's self-study Volume 1
- the external consultants' report
- responses to the consultants' report by the Departments and Faculty.

This Final Assessment Report identifies the strengths of the program, opportunities for program enhancement, and prioritizes the recommendations of the external consultants. The Implementation Plan details the recommendations from the Final Assessment Report that are selected for implementation, identifies who is responsible for approving and acting on the recommendations, any action or follow-up that is required, and the timeline for completion.

The Final Assessment Report and Implementation Plan is sent for approval through SUPR-G and SCAPA, then for information to Senate and the Ontario Universities' Council on Quality Assurance and is made available on a publicly accessible location on Western's IQAP website.

The Final Assessment Report and Implementation Plan is the only document resulting from the Graduate cyclical review process that is made public, all other documents are confidential to the Program/School/Faculty and SUPR-G.

#### **Executive Summary**

Physical Therapy education began at Western University as an undergraduate program in 1967 with a shift to graduate status in 2001 as was the norm across Canada at the time. The School of Physical Therapy has a complement of 49 full-time and part-time faculty members, 45 of whom are registered physiotherapists. Eight faculty members are Fellows of the Canadian Association of Manual and Manipulative Physical Therapists and three members hold research chairs.

The School of Physical Therapy trains and certifies physical therapists to sit the national Physiotherapy Competency Examination to qualify to become accredited Physiotherapists in Canada.

#### The MPT mission is

To deliver collaborative, case-based experiential learning opportunities that prepare graduates to master the essential entry-level competencies for physical therapy practice in Canada, embrace life-long professional growth, and be leaders in the communities they serve.

# The MPT Program holds as its values:

- 1. Health and wellness, mobility and function
- 2. Adaptive learning environment
- 3. Patient-centered, evidence-informed, ethical clinical practice anchored in principles of social equity
- 4. Clinical skills embedded within a biopsychosocial approach
- 5. Strong collaborative relationships with our research, community, and academic partners

Students complete the two-year program with a research project supervised by a faculty member. Completion rates are excellent with high employment. The Learning Outcomes for the program, recently revised, are consistent with those of the Faculty of Health Sciences, accreditation bodies, and Western.

**Strengths identified by the Physical Therapy Graduate Programs** (summarized from the self-study brief)

- Accredited by Physiotherapy Education Accreditation Canada (~2022)
- Excellent space and laboratory facilities
- Excellent library resources

- Strong faculty
- Expanded administrative team to support the program
- Ongoing curriculum renewal practices (see section below)

#### **Innovative Features**

- Offers a combined 5-year MPT/PhD program for exceptional students
- Partnership with Anatomy & Cell Biology Department for cadaveric Functional Human Anatomy courses
- Interprofessional partnership with School of Communication & Science Disorders
- Course collaboration with the School of Occupational Therapy
- Strong faculty who also teach in the Health Studies and Rehabilitation Sciences
- Partnerships with other MPT programs in Canada providing opportunities for students to do their practica outside of southwestern Ontario in national and international placements
- PT Clinic that provides care to patients with spinal cord injuries
- Summer paediatric multidisciplinary camp
- Postgraduate professional development series

# **Ongoing Curriculum Renewal Practices**

As part of continuous improvement practices put in place since the last cyclical review, the MPT program assesses and reviews program design on an ongoing basis (see Appendix A in program self-study for an example of the MTP evaluation plan). As part of this process, below is a summary of recently approved and proposed minor modifications for implementation.

#### **Currently Approved**

#### **Proposed Changes**

- ACB 9501, Functional Human Anatomy: MPT students are enrolled in Fall and Winter terms
- PT9523: Cardiorespiratory physiology (Term 2a, Jan-Feb) and PT9526: Physical Therapy in Acute Care Settings I (Term 2b, Feb-May)
- 3. Winter and Summer Terms, year 1

Term 2a (6 weeks + reading week)

- ACB 9501, Functional Human Anatomy
- IPE 9802, Critical Appraisal

- ACB 9501: Fall term only (starting 2020-2021; drafted for MPT Committee September 2020)
- Combine PT9523 and PT9526 into PT9526: Physical Therapy in Acute Care Settings I (starting Winter 2021; drafted for MPT Committee September 2020)
- Winter and Spring/Summer Terms, year 1 (starting 2021; approved at MPT program August 13, 2020).
   Term 2 (Winter)

Module 1 (6 weeks + reading week)

- PT9521, PT in Clinics Settings I, Lower Extremity
- PT9523, Cardiorespiratory Physiology

Term 2b (14 weeks)

- IPE 9802, Critical Appraisal
- PT9524, PT in Community Settings I
- PT9525, PT in Rehabilitation Settings I
- PT9526, PT in Acute Care Settings I
- PT9527, PT in Clinics I, Upper Extremity

Term 3 (6 weeks +summer break)

• PT9581, Junior clinical experience

- IPE 9802
- PT9521
- PT9526

Module 2 (7 weeks)

- IPE 9802
- PT9525
- PT9526

Term 3 (Spring/Summer)

Module 3 (7 weeks)

- PT9524
- PT9527

Junior Clinical Experience (6 weeks) • PT9581

### Notes re changes:

The MPT Program has been in a curriculum renewal process since 2019 with involvement of:

relevant stakeholders and guiding documents: employers, clinicians/clinical instructors/preceptors, patients with lived experiences, past-graduates, current students, faculty, National Physiotherapy Entry-to-Practice Curriculum Guidelines (Canadian Council of Physiotherapy University Programs, CCPUP), 2012 Accreditation Standards for entry-to-practice physiotherapy programs (Physiotherapy Education Accreditation Canada, PEAC), and the IQAP. Where existing processes do not exist for data collection from these sources, the curriculum renewal project lead has hosted focus group sessions or facilitated content working groups.

The changes have been fully discussed and approved by the MPT Program Committee and have been reviewed and approved in SGPS.

#### **Review Process**

In addition, the Physical Therapy Department recently underwent a full external review in its (successful) national accreditation process and this information was useful for formulating the Self-Study for this review.

During the external review associated with Western's cyclical review process, the committee, comprised of the two external reviewers, one internal reviewer and a doctoral student, were provided with Volume I and II in advance of their visit and then met over two days (virtually due to the pandemic) with:

- Dr. Linda Miller, Vice Provost, School of Graduate & Postdoctoral Studies
- Dr. Ruth Martin, Associate Vice Provost, School of Graduate & Postdoctoral Studies
- Dr. Margaret McGlynn, Vice Provost, Academic Planning, Policy and Faculty
- Dr. Jayne Garland, Dean, Faculty of Health Sciences
- Dr. Laura Graham, Graduate Chair
- Dr. Alison Rushton, Director, School of Physical Therapy
- Physical Therapy Fulltime and Part-time Graduate Faculty
- Physical Therapy Year 1 Graduate Students
- Physical Therapy Graduate Program Assistants
- Robert Glushko, Associate Chief Librarian

Following the onsite review, the external reviewers submitted a comprehensive report of their findings which was sent to the Graduate Chair and the Dean for review and response.

These formative documents, including Volumes I and II of the Self-Study, the External Report, the program response and the Dean's response, have formed the basis of this summative assessment report of the **Physical Therapy Graduate** Program, collated and submitted to SGPS and the Senate Graduate Program Review Committee (SUPR-G) by the Internal Reviewer, Dr. Bhatia.

#### Summative Assessment – External Reviewers' Report

# **Strengths of the Program**

- The curriculum renewal process
- Strong musculoskeletal focus
- World-class Library resources
- Visionary leadership
- Faculty and student satisfaction
- Strong mentorship for new faculty
- Wide variety of formative and summative assessments
- Well qualified faculty with several recognized internationally

#### Areas of Concern Identified:

- No interview component in selection of students for admission
- No facilitated admission process for equity-seeking groups
- Review process

...Some key stakeholders were not included in the assigned schedule; for example, the Administrative Manager, and the clinical education and admissions team. There was also no graduate student as part of the review team, and no second-year students available for an in- person meeting - although written comments were sent from this group, an opportunity to discuss their feedback would have been appreciated. For future reviews it is suggested that the review team is given the opportunity to provide input into the key stakeholder groups who they consider it important to meet with.

#### **Reviewers' Recommendations**

The following are the recommendations in order as listed by the external reviewers.

Reviewers' Recommendation		Program/Faculty Response	
Recommendations requiring implementation have been marked with an asterisk (*). The process for implementation can be found in the Implementation Plan below.			
1.	Potential curricular deficits. While the emphasis and expertise on MSK practice is a program strength, it is also a potential weakness, in that other curricular areas may be marginalised. The program needs to graduate well-rounded practitioners who have entry level skills in a range of core areas; there is potential for neurological and cardiorespiratory practice in particular to	Departmental Response: -weight of MSK influence has been recognized and the curriculum map has been reviewed and revised with the addition of new faculty hires. Concerns have also been ameliorated with inclusion of diverse faculty from other areas to balance the curriculum	
	become somewhat secondary. A recent hire with neuro expertise will help bolster the neuro curricular components; it will be important that the focus in other areas of practice such as cardiorespiratory are maintained. A greater emphasis on exercise prescription would also be welcomed by both students and faculty.	<u>Dean</u> : -since the self-study was completed, two faculty have been hired in cardiorespiratory curriculum and neurology with a 3 <sup>rd</sup> hire in progress in cardiorespiratory practice	
2.	*Admissions. Ensuring the diversity of the applicant pool should be a priority. This includes collection of data related to student diversity (for example, related to ethnicity and	<u>Departmental Response</u> : Agreed and under study for implementation by Fall 2021	

socioeconomic status). Outreach and recruitment strategies are suggested to reach those from alternate backgrounds who would increase diversity of the applicant pool and who could contribute to the depth and breadth of practitioners in the profession. Facilitated admission for equity seeking groups (including those other than indigenous students) may need to be considered. Consideration should also be given to increasing the % of seats for indigenous applicants to match the % of indigenous citizens in the population. Engagement of indigenous or BIPOC physiotherapists to identify the best way to promote and consider admission (and support for marginalised and indigenous students once admitted to the program) would likely be beneficial.

Dean: Agreed

3. Consider the role of the Graduate Chair. The current allocation of 30% for service translates to 10% for the role of the graduate chair position. It is hard to think that this small allocation can be effective. The individual currently holding the Graduate Chair position has dealt with this allocation by adopting a distributed model of leadership but this unfortunately leads to fragmentation. We recommend that the service component related to the Grad Chair role be significantly increased to allow the Chair to participate more fully in all areas of MPT program leadership.

#### Department:

-discussions are underway with senior administration

#### Dean:

- -Graduate Chair carries a similar load to the other Chairs in the six Schools within Health Sciences
- -to be discussed within the School

4. Staff. There appears to be a wide depth and breadth of skills and experience in the staff group which could provide helpful insights and suggestions into administrative functioning. Staff expressed that they did not have a role in decision making that affected their roles and would appreciate consultation into administrative changes and reorganisation. Staff also expressed a concern related to heavy workloads since the restructuring and

#### Department:

-Agreed and under current review

#### Dean:

-situation exacerbated for the past year by COVID but a process is in place -Faculty is consulting with staff to jointly problem-solve for creative positive outcomes

nor con full	gration of their roles. As processes start to malise post-Covid, it may be beneficial to sider the need for staff to be in the office time, in order to increase staff satisfaction in the work environment.	
yea this can com SPT In a that opp guic disc SPT	uity Diversity and Inclusion. Over the last r, there have been some efforts made on front. This effort needs to continue and focus on working towards shared practices, munication, language, and initiatives in while cultivating a diversity of approaches. ddition, there is a need to shape curriculum a promotes anti-bias, anti-racism and anti-ression. There is a need to consider how to de individuals who have experienced erimination and/or bias and/or trauma in or from recent events on how to proceed.	Department: -commitment to prioritizing diversity with need for small budget for resources and training  Dean: -a university priority -agreed with commitment to address this issue within the Faculty and University

# **Implementation Plan**

of faculty and students will ensure that efforts can be made to increase representation by

equity seeking groups.

The Implementation Plan provides a summary of the recommendations that require action and/or follow-up. In each case, the Graduate Program Chair and/or the Department Chair/Director, in consultation with SGPS and the Dean of the Faculty of Health Sciences will be responsible for enacting and monitoring the actions noted in Implementation Plan. The details of progress made will be presented in the Dean's Annual Planning Document.

Recommendation	Proposed Action and Follow-up	Responsibility	Timeline
List recommendations requiring implementation	Describe the action and/ or follow-up required to implement the recommendation	Identify those responsible for implementation	Required date of completion
Admissions. Ensuring the diversity of the	-Collect data related to student diversity	Western Sr Administration SGPS	-Develop plan by January 2022

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applicant pool should be	-Develop outreach and	Dean	-Implement in Fall
a priority.	recruitment strategies	Graduate Chair	2022 for all current
	aimed at reaching those	Graduate faculty	and incoming
	from a variety of		students
	backgrounds		
	-Facilitate admission for		
	equity-seeking groups		
	- Increase the % of seats		
	for Indigenous applicants		
	-Engage Indigenous and		
	BIPOC physiotherapists		
	to identify the best way		
	to promote and consider		
	admission (and support		
	for marginalized and		
	Indigenous students		
	once admitted to the		
	program)		
*Equity Diversity and	-review entire curriculum	-Dean	This work is in
Inclusion Shape	by faculty	-Graduate Chair	progress with
curriculum that	-work with EDID Group	-EDID group with	updated report,
promotes anti-bias,	in Faculty of Health	Dr J Unger's	January 2022
anti-racism and anti-	Sciences	leadership	
oppression. There is a		-PT faculty	
need to consider how to			
guide individuals who			
have experienced			
discrimination and/or			
bias and/or trauma in			
SPT or from recent			
events on how to			
proceed. Finally, a			
better understanding of			
the diversity of faculty			
and students will ensure			
that efforts can be			
made to increase			
representation by			
equity-seeking groups.			