



AUSTRALIAN
PHYSIOTHERAPY
COUNCIL



GUIDELINES FOR INTERNATIONAL ACCREDITATION

ENTRY-LEVEL PHYSIOTHERAPY PRACTITIONER
PROGRAMS OF STUDY

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Guidelines for International Accreditation of Entry-level Physiotherapy Practitioner Programs of Study
VI.0

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I. INTRODUCTION

This is a guide for education providers seeking international program accreditation, re-accreditation or engaged in the monitoring process of entry-level physiotherapy education programs of study. The content in this guide may be updated from time to time as the context of entry-level physiotherapy education changes and as the regulatory framework in which the accreditation is conducted changes. The current version will be located on the Australian Physiotherapy Council Limited website.

I.1 Australian Physiotherapy Council Limited

The Australian Physiotherapy Council Limited (the Council) is the accreditation authority for entry-level physiotherapy practitioner programs in Australia. The Council also provides international accreditation services for physiotherapy education programs outside Australia, drawing on its established accreditation expertise and outcomes-based assessment processes.

For international accreditation, programs are assessed against the Council's International Accreditation Standards. International accreditation by the Council does not confer registration, licensure, approval to practise, or legal recognition in any jurisdiction.

Education providers remain responsible for meeting all applicable national, regional, regulatory, professional and legal requirements in the jurisdiction in which the program is delivered.

The International Accreditation Standards set out the minimum requirements for physiotherapy programs to prepare graduates with the knowledge, clinical skills and professional attributes required for physiotherapy practice.

The titles 'physiotherapist' and 'physical therapist' may be protected by legislation or regulation in some jurisdictions. Graduates must meet the registration, licensure or other requirements of the relevant regulatory authority before practising or using any protected professional title.

I.2 Accreditation

International accreditation is a peer-review quality assurance process through which the Council assesses whether an entry-level physiotherapy program meets the International Accreditation Standards.

The process considers whether the program prepares graduates with the required knowledge, clinical skills, professional attributes and competencies, including those described in the International Physiotherapy Practice Thresholds.

International accreditation does not replace national, regional, regulatory or legal requirements for program approval, graduate registration, licensure or use of protected professional titles.

Education providers should ensure they meet all applicable national (and, where relevant, regional) accreditation and regulatory requirements in their jurisdiction before, or in parallel with, seeking international accreditation.

Entry-level programs must address all the competencies and foundational abilities defined in the International Physiotherapy Practice Thresholds (2026), producing graduates who can practise safely within an ethical framework.

I.3 Accreditation Standard Adapted for International Use

The Council's international accreditation standards are derived from the Australian Physiotherapy Council's entry-level physiotherapy accreditation standards. To support their application across a range of jurisdictions, references to Australian legislation, regulation, registration requirements, and other Australia-specific elements have been removed or adapted for international contexts.

The standards retain the core quality expectations and outcomes of the Australian standards while recognising the diversity of healthcare systems, regulatory environments, academic structures, and cultural contexts in which physiotherapy education is delivered.

Table 1 — International Accreditation Standard Summary

Domain	Standard Statement
Public Safety	Public safety is assured.
Academic Governance and Quality Assurance	Academic governance and quality assurance processes are effective.
Program of Study	Program design, delivery and resourcing enable students to achieve the required professional attributes and competencies.
The Student Experience	Students are provided with equitable and timely access to information and support.
Assessment	Assessment is fair, valid and reliable.

Each Domain is articulated by a Standard Statement, and each Standard Statement is supported by a set of Criteria and intent of criteria. The criteria have been contextualised to the physiotherapy profession. The standard is met when every criterion is met.

It is the responsibility of the education provider to demonstrate how its program meets the International Accreditation Standard. The International Accreditation Standard is outcomes focused, the Council does not prescribe program structures and curricula, or any other approach to educational delivery.

In undertaking its accreditation function the Council acknowledges the innovation and diversity of teaching and learning approaches of the various education providers within the continuum of Physiotherapy education and also recognises that this diversity can strengthen the education system, provided that each education provider continually evaluates its program and methods of delivery. The accreditation process is conducted in a collaborative, constructive manner based on peer review.

1.4 Accreditation Outcomes

For a new program applying for accreditation, the outcome of the application may be: Accreditation with Conditions; or Not Accredited. New programs will always have conditions as some criteria cannot be met until students have commenced and progress through the program.

For an existing accredited program, the outcome of the application for re-accreditation may be: Accreditation; Accreditation with Conditions; or Accreditation Revoked.

The period of accreditation that will be granted is based on a risk assessment and is usually up to four years.

2. ACCREDITATION PROCESS

For initial international accreditation the process begins with an education provider contacting the Council to discuss its intentions to either develop a program or initiate the process with an existing program, and to clarify the process and indicative timelines. The Council will provide access to the online accreditation portal where the formal Expression of Interest to accredit a program can be lodged. When the Council is satisfied that appropriate planning is taking place the Education Provider will be invited to proceed with an application and will be provided with a time-frame.

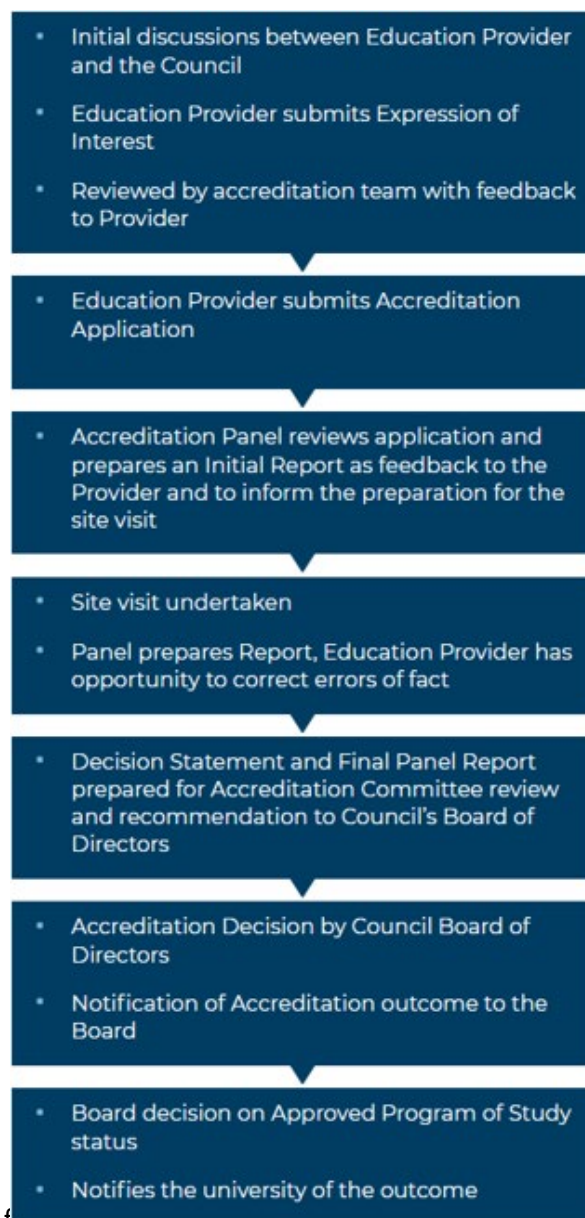
Programs due for re-accreditation are not required to submit an Expression of Interest. For re-accreditation the Education Provider must submit an application on-line, nine months prior to the current accreditation expiry date.

Applications are lodged via an online portal. Education providers are required to include a short statement addressing each criterion and an explanation of the evidence files uploaded to demonstrate the criterion is met.

All new accreditations and re-accreditations will include a site visit to the university by three panel members. The visit will verify the adequacy, breadth, and quality of the learning environments in the local context and clarify any questions arising from the statements and evidence submitted for each accreditation criterion. Further details about the site visit are below.

The Council relies on both the application submitted by the education provider and experiential evidence obtained by the Accreditation Assessment Panel at a site visit, to make its decision.

Figure 1 —Accreditation process for new program of study



2.1 Accreditation Criteria and Intent of Criteria

Public Safety Domain

Standard statement: Public safety is assured.

Criteria	Intent of criteria
<p>PS1 Public safety and consumer-centred care are prioritised in the guiding principles of the educational program, clinical training and student learning outcomes.</p>	<p>The program is considering public safety and consumer-centred care first and foremost when designing and delivering the program. This includes:</p> <ul style="list-style-type: none"> the way the program is designed (i.e. that the public are safe when interacting with students as part of the program) that the teaching methods used are safe for the public

	<ul style="list-style-type: none"> • that the provider promotes and instils ongoing public safety in the learning outcomes (i.e. public safety is taught) <p>Safety reflects physical safety and psychological safety of consumers. Safety should include consideration of all forms of diversity.</p>
<p>PS2 Management processes are effective in ensuring students are fit to practise.</p>	<p>The education provider has effective processes (including impairment screening and management) to ensure students are safe and fit to practise throughout the length of the program, and to be responsive in addressing this appropriately. This includes when students are participating in clinical education. Fit to practise encompasses physical and psychological fitness, and compliance with regulatory and legislative requirements.</p>
<p>PS3 Students achieve the relevant competencies before providing supervised consumer care as part of the program.</p>	<p>Assessment sequencing allows the education provider to assess that students have relevant competencies to deliver safe (supervised) care as part of the program. Relevant competencies (based on the International Physiotherapy Practice Thresholds) would include technical competencies as well as competencies relevant to the legal, professional and ethical responsibilities of practitioners, communication, inclusive practice and equitable care responsiveness, consumer-centred care, trauma informed practice and psychological safety for consumers and staff in clinical education sites.</p>
<p>PS4 Students receive effective and appropriate supervision by suitably qualified and registered physiotherapists and/or other relevant personnel during clinical education.</p>	<p>The education provider needs to ensure students are supervised by appropriate personnel. The education provider evaluates the supervision for both quality and quantity to ensure that the public is receiving safe and effective care from students.</p> <p>This aims to support diversity in clinical placements and encourage interprofessional collaborative practice. From a workforce perspective, this is aimed at supporting the growth of clinical placement opportunities.</p>
<p>PS5 Health services and physiotherapy practices providing clinical placements have robust quality and safety policies and processes and meet all relevant regulations and standards.</p>	<p>Clinical education takes place in environments where there are appropriate policies and processes to ensure safe and high-quality care for consumers.</p>
<p>PS6 Consumers consent to care by students.</p>	<p>To ensure consumers and other relevant people involved in their care understand they are being provided care by</p>

	students and the supervision that is in place to support this. This may include consent by guardians and substitute decision makers (for example family members) with the legal authority to provide consent. This does not impact or negate other consent-to-care requirements such as informed consent about the specific care they will receive.
PS7 The education provider demonstrates accountability in holding students and staff to high levels of ethical and professional conduct.	The education provider has strategies to monitor and ensure that relevant codes of conduct (for example, university codes of conduct) are being upheld at all times. The education provider will need to demonstrate they have effective strategies to address this appropriately.
PS8 The education provider complies with its obligations under any applicable national/regional/regulatory/legal framework.	The education provider has formal mechanisms to show compliance with the national law national/regional/regulatory/legal frameworks, including student registration requirements, mandatory and voluntary notification processes.

Academic Governance and Quality Assurance Domain

Standard statement: Academic governance and quality assurance processes are effective.

Criteria	Intent of criteria
GQ1 The provider has robust academic governance structures in place for the program of study.	<p>A governance structure that includes the following components:</p> <ol style="list-style-type: none"> 1. Documented governance structure that outlines the authority, responsibility and capacity to plan, develop, implement, and improve the program. 2. Governance that achieves oversight and academic integrity of the program. 3. Governance mechanisms to identify and manage risk. 4. Governance mechanisms to identify and manage conflict of interest.
GQ2 The program has rigorous monitoring, evaluation and continuous improvement processes, including relevant internal and external input.	<p>The education provider has defined the core elements of their monitoring, evaluation and continuous improvement processes including:</p> <ul style="list-style-type: none"> • inputs • outputs • intended outcomes (aligned to the Accreditation Standards) <p>The education provider should outline the sources of data that feed into the monitoring, evaluation and continuous improvement processes.</p>

	<p>The education provider should outline how results from monitoring and evaluation inform the program design and management so that continuous improvement is achieved.</p> <p>The education provider should seek relevant internal and external input from a broad range of stakeholders, including (but not limited to) individuals from underrepresented or underserved communities, students, health consumers, and other evaluations, academic and professional peer review to improve the program.</p>
<p>GQ3 The program is responsive to contemporary, evidence-based approaches to health professional education.</p>	<p>The education provider has strategies to be aware of, and incorporate, contemporary educational methods and pedagogy.</p> <p>This should include that the program uses evidence-based teaching and learning strategies and is responsive to potential changes as evidence develops.</p> <p>It is intended that the education provider should outline their response to emerging technologies, for example AI, as part of this criteria.</p>
<p>GQ4 The program is responsive to contemporary developments in physiotherapy practice.</p>	<p>The education provider is aware of, and incorporates, contemporary methods relevant to physiotherapy practice.</p> <p>This should include how the program ensures it is incorporating recent advances in evidence-based practice and is responsive to potential changes as evidence develops.</p> <p>The education provider should demonstrate how they identify the potential future role of physiotherapists and prepare students for future practice.</p>
<p>GQ5 The education provider has appropriate and effective partnerships with clinical education providers.</p>	<p>The education provider demonstrates they have:</p> <ul style="list-style-type: none"> • formal agreements with clinical education providers • mechanisms to prepare supervisors (orientation, training in supervision and/or assessment if required) • two-way feedback mechanisms with clinical education providers • periodic reviews of clinical education partnerships • strategies to ensure clinical education is delivering high quality education experiences appropriate for the specific context of the partnership.
<p>GQ6 The program has appropriate physical, staffing and online resources to sustain the quality of education that is required to ensure the achievement of the necessary attributes and capabilities.</p>	<p>The education provider has the resources required to sustain the program and commits to these being made available to the program. This should be proportional to the number of students enrolled.</p> <p>This includes physical resources, staffing and online resources. This also includes staff who are supported in achieving their research, continuous professional development (CPD) and teaching requirements.</p>

Program of Study Domain

Standard statement: Program design, delivery and resourcing enable students to achieve the required professional attributes and competencies.

The professional attributes and competencies are based on the International Physiotherapy Practice Thresholds.

Criteria	Intent of criteria
ST1 The educational philosophy is aligned with the design and delivery of the program of study.	The education provider has set out the particular philosophy for their program and has designed a program that aligns with this.
ST2 Learning and teaching methods are aligned with the required learning outcomes.	The education provider demonstrates that the learning and teaching methods are effective and appropriate in supporting students to achieve the learning outcomes being taught.
ST3 Program learning outcomes address all the relevant attributes, physiotherapy roles and capabilities.	<p>The program learning outcomes address all of the relevant graduate outcomes set out in the International Physiotherapy Practice Thresholds.</p> <p>As well as technical capabilities, the education provider needs to demonstrate that the program is designed to prepare students with professional capabilities.</p>
ST4 The program is designed to prepare students with the capabilities for evidence-based practice.	The education provider has specific strategies to embed development of evidence-based practice capabilities throughout the curriculum. This criterion reflects the importance of these capabilities in developing a workforce capable of providing safe and quality care over the duration of their careers.
ST5 Students learn with, about, and from other health professionals, throughout the curriculum to ensure graduates are capable of interprofessional collaborative practice.	<p>The education provider has integrated interprofessional education and interprofessional practice throughout the curriculum.</p> <p>This should encompass both theory-based learning and clinical education opportunities.</p>
ST6 The program and defined learning outcomes are responsive to national health priorities.	The education provider identifies and incorporates national and local health priorities and embeds these into their programs. Programs are also encouraged to report how they are responding to local health priorities if these differ from the national priorities.

	The education provider is encouraged to describe how the learning outcomes are responsive to these priorities.
ST7 The quality and quantity of clinical education is sufficient to produce a graduate capable to practise across the lifespan, with diverse consumer populations and in a range of environments.	The education provider demonstrates that the clinical education components of the program allow students to build capability across the range of consumers they may treat once registered. This criterion also encompasses the requirements of consumer-centred care.
ST8 Teaching staff are suitably qualified and experienced to deliver the units that they teach.	Staff that teach each unit are appropriately qualified and experienced. For example, consideration of qualifications, prior experience completion of required training to ensure suitable education skills, such as expertise to facilitate learning about diverse communities.
ST9 The program is appropriately supported by technical and laboratory personnel.	The program is supported by appropriate types and numbers of technical and support staff.
ST10 Physical and digital learning environments and resources support the achievement of the required learning outcomes.	This includes ensuring that facilities and equipment are appropriate for the size of the student cohort, well maintained, accessible and fit for purpose. Online learning is accessible and technology is used appropriately to support learning. That resources are appropriate and accessible.

Student Experience Domain

Standard statement: Students are provided with equitable and timely access to information and support.

Criteria	Intent of criteria
EX1 Program information is clear and accessible.	This refers to the availability of information for prospective students such as inherent requirements as well as information relevant to current students in the program.
EX2 Admission and progression requirements and processes are fair and transparent.	This refers to the quality of the processes that govern admission and progression.

<p>EX3 Students have access to effective grievance and appeals processes.</p>	<p>Grievance and appeals processes are accessible and are evaluated for effectiveness.</p>
<p>EX4 The provider identifies and provides support to meet the academic learning needs of students.</p>	<p>Students are provided with support to meet academic learning needs. Information on available supports should be provided to all students in the program.</p> <p>The education provider should be proactive in identifying students who require support services and facilitate access to the support.</p>
<p>EX5 Students are informed of and have access to personal support services provided by suitable personnel.</p>	<p>All students are provided information about how to access personal support services including, for example, cultural support services, language support services, financial support services and mental health services. These should be delivered by suitable personnel within the context of the service being delivered and be culturally appropriate.</p>
<p>EX6 Students are consistently represented within the deliberative and decision-making processes for the program.</p>	<p>Students are explicitly represented in the decision making for the program.</p>
<p>EX7 Equity and inclusiveness principles are observed and promoted in the student experience.</p>	<p>This criterion refers to promoting equity and inclusiveness to all students in the program. This includes consideration of all forms of diversity.</p> <p>It is also important to consider intersectionality and its impacts when developing and implementing equity and inclusion measures.</p> <p>The success of the education provider in meeting this criterion should be reflected in the monitoring and evaluation processes.</p>
<p>EX8 There are effective strategies for the recruitment, admission, participation, and completion of the program by underrepresented groups in the profession and groups who experience health inequity.</p> <p>This includes provision of ongoing support for students across the duration of the program.</p>	<p>The education provider has strategies to facilitate the participation in their programs of people from a range of backgrounds, particularly those from groups who experience health inequity. The effectiveness of these strategies should be evaluated and be subject to continuous improvement measures.</p>

EX9 Students learn in physical and digital environments that are both physically and psychologically safe.

The education provider has systems in place to promote a safe learning environment and has measures in place to monitor this and address appropriately. This includes when students are learning in clinical education sites.

Assessment Domain

Standard statement: Assessment is fair, valid and reliable.

Criteria	Intent of criteria
AS1 A contemporary, evidence-based assessment strategy is used across the program.	<p>The education provider demonstrates how they developed the assessment strategy used in the program and how this is reviewed and evaluated on an ongoing basis. This should include reference to assessment policy and procedures.</p> <p>It is intended that the education provider should outline their response to emerging technologies, for example AI, as part of this criteria.</p>
AS2 Assessment methods, which include direct observation in the clinical setting, are diverse and appropriate for the learning outcomes being assessed.	<p>The education provider demonstrates that the appropriate assessment tool has been used to assess each learning outcome.</p> <p>To ensure diversity in methods used and to make clear that direct observation is a required modality of assessment.</p>
AS3 Physiotherapy roles, attributes, capabilities and all graduate outcomes are assessed.	<p>The education provider demonstrates that across the program, students are assessed on all of the relevant graduate outcomes. This is to ensure that graduates meet the attributes and capabilities as set out in the International Physiotherapy Practice Thresholds and other relevant attributes related to the national scope of practice.</p>
AS4 Program management and co-ordination, including moderation procedures ensure valid, transparent, consistent and appropriate assessment.	<p>Assessment is moderated and validated. There are systems in place to ensure that equivalent performance is awarded equivalent performance outcomes, including across cohorts and sites (if applicable).</p>
AS5 Effective, appropriate and timely feedback is provided to students	<p>Feedback to students is appropriate, learner centred and provided in a timely manner to support students to reflect and improve on their performance.</p>
AS6 Assessment is conducted by appropriate personnel including by	<p>When considering appropriateness, the education provider should consider qualifications and experience but also conflict of interest etc. This includes that suitably qualified and experienced</p>

suitably qualified physiotherapists for the assessment of physiotherapy specific competencies.

physiotherapists undertake the assessment of physiotherapy specific competence.

2.2 Accreditation Application – Evidence Requirements

The Council is committed to ensuring the appropriate evaluation of programs and education providers to determine whether they meet the required Accreditation Standard, while avoiding unnecessary administrative burden. The Council has approved a list of indicative evidence items, some of which may be used to demonstrate multiple criteria.

Table 2 — Evidence Requirements

DOMAIN – PUBLIC SAFETY Standard Statement - Public safety is assured	
ACCREDITATION STANDARDS	EVIDENCE REQUIREMENTS
PS1 Public safety and consumer-centred care are prioritised in the guiding principles of the educational program, clinical training and student learning outcomes.	<ul style="list-style-type: none"> • <i>Statement of overall education philosophy curriculum design and learning outcomes for the program of study.</i> • <i>Outline of principles used to guide and assess public safety.</i> • <i>Site visit – meeting with academic and clinical education staff.</i> • <i>Site visit to range of clinical education providers.</i>
PS2 Management processes are effective in ensuring students are fit to practise.	<ul style="list-style-type: none"> • <i>Examples of mechanisms in place to deal with impaired students.</i>
PS3 Students achieve the relevant competencies before providing supervised consumer care as part of the program.	<ul style="list-style-type: none"> • <i>Documentation describing the course structure that demonstrates timing of assessment of competency prior to clinical placement.</i>
PS4 Students receive effective and appropriate supervision by suitably qualified and registered physiotherapists and/or other relevant personnel during clinical education.	<ul style="list-style-type: none"> • <i>Policies and procedures on endorsement of student clinical placement and standards for supervision.</i> • <i>Site visit to range of clinical education providers.</i>
PS5 Health services and physiotherapy practices providing clinical placements have robust quality and safety policies and processes and meet all relevant regulations and standards.	<ul style="list-style-type: none"> • <i>Examples of clinical placement agreements.</i> • <i>Clinical placement policies.</i> • <i>Clinical education handbooks for students and for educators</i> • <i>Site visit to range of clinical education providers.</i>
PS6 Consumers consent to care by students.	<ul style="list-style-type: none"> • <i>Identification of where patient consent is taught and assessed in the curriculum.</i> • <i>Examples of clinical placement agreements.</i> • <i>Site visit to range of clinical education providers.</i>

PS7 The education provider demonstrates accountability in holding students and staff to high levels of ethical and professional conduct.	<ul style="list-style-type: none"> • <i>Policies and procedures on ethical and professional behaviour.</i>
PS8 The education provider complies with its obligations under any applicable national/regional/regulatory/legal framework.	<ul style="list-style-type: none"> • <i>Examples of mechanisms in place to deal with mandatory notifications by education providers to the relevant authorities.</i>

DOMAIN – ACADEMIC GOVERNANCE AND QUALITY ASSURANCE
Standard Statement – Academic governance and quality assurance processes are effective

ACCREDITATION STANDARDS	EVIDENCE REQUIREMENTS
GQ1 The provider has robust academic governance structures in place for the program of study.	<ul style="list-style-type: none"> • <i>Overview of formal academic governance arrangements for the program including program quality assurance, review, and improvement.</i> • <i>Participation of a range of consumers in governance and decision-making bodies and processes which influence the program.</i>
GQ2 The program has rigorous monitoring, evaluation and continuous improvement processes, including relevant internal and external input.	<ul style="list-style-type: none"> • <i>Reports from internal reviews and evaluations describing mechanisms of the review and actions taken in response to feedback received.</i> • <i>Reports of external stakeholder input to quality assurance and benchmarking activities. Where such a group does not exist, the education provider should demonstrate how external stakeholder perspectives are incorporated into quality assurance processes and outline plans for establishing a formal external stakeholder engagement mechanism.</i> • <i>Site visit – meeting with academic staff and students.</i> • <i>Site visit – meeting with the external program advisory group, where one exists.</i>
GQ3 The program is responsive to contemporary, evidence-based approaches to health professional education.	<ul style="list-style-type: none"> • <i>Examples of updating curriculum to contemporary development.</i> • <i>Site visit – meeting with academic staff.</i>
GQ4 The program is responsive to contemporary developments in physiotherapy practice.	<ul style="list-style-type: none"> • <i>Examples of updating curriculum to contemporary development.</i> • <i>Site visit – meeting with academic staff.</i>
GQ5 The education provider has appropriate and effective partnerships with clinical education providers.	<ul style="list-style-type: none"> • <i>Examples of clinical placement agreements.</i>
GQ6 The program has appropriate physical, staffing and online resources to sustain the quality of education that is required to ensure	<ul style="list-style-type: none"> • <i>Formal confirmation from the provider of their commitment to future program resourcing</i> • <i>Report on strategic direction for the program of study.</i>

the achievement of the necessary attributes and capabilities.

- *Site visit – meeting with senior management to verify commitment of support for the program of study.*

DOMAIN – PROGRAM OF STUDY

Standard Statement – Program design, delivery and resourcing enable students to achieve the required professional attributes and competencies

ACCREDITATION STANDARDS

EVIDENCE REQUIREMENTS

ST1 The educational philosophy is aligned with the design and delivery of the program of study.

- *Statement of overall education philosophy curriculum design and learning outcomes for the program of study.*
- *The program of study title includes the word ‘Physiotherapy or Physical Therapy’.*
- *Sample student time-table for each year to show sequencing of the units of instruction and clinical placements.*

ST2 Learning and teaching methods are aligned with the required learning outcomes.

- *Unit of instruction outlines that are made available to students and detail how the unit is structured and enacted at each stage.*
- *Outline of teaching and learning approaches and pedagogies.*
- *Examples of how topics within the curriculum are integrated both horizontally and vertically.*

ST3 Program learning outcomes address all the relevant attributes, physiotherapy roles and capabilities.

- *Curriculum mapping including alignment of unit of instruction learning outcomes to the International Physiotherapy Practice Threshold key competencies and foundational abilities.*

ST4 The program is designed to prepare students with the capabilities for evidence-based practice.

- *Examples of where research literacy is covered in the program of study.*

ST5 Students learn with, about, and from other health professionals, throughout the curriculum to ensure graduates are capable of interprofessional collaborative practice.

- *Examples of how students interact with other health profession students and/or other health professionals through the program of study.*

ST6 The program and defined learning outcomes are responsive to national health priorities.

- *Brief description of how the national health priorities is integrated into the curriculum.*
- *Examples of learning and assessment, and teaching materials from across the program of study demonstrating the integration of national health priorities.*

ST7 The quality and quantity of clinical education is sufficient to produce a graduate capable to practise across the lifespan, with diverse consumer populations and in a range of environments.

- *De-identified summary table of the clinical placements completed by each student demonstrating experience across acute, rehabilitation and community practice in a range of environments and settings across the lifespan. For new programs detailed planned clinical placements.*

	<ul style="list-style-type: none"> • <i>Examples of quality assurance processes to evaluate placements.</i> • <i>Examples of mechanisms the students use to record their clinical placements and how the education provider reviews and uses this information.</i>
<p>ST8 Teaching staff are suitably qualified and experienced to deliver the units that they teach.</p>	<ul style="list-style-type: none"> • <i>Evidence that the program leader is a Physiotherapy academic, with sufficient authority and recognition to manage and represent the program, (Curriculum Vitae, Position Description, Organisation Chart).</i> • <i>Evidence of the level of experience and expertise of staff as it relates to the program overall, including aspects such as program leadership, curriculum design and review, coverage of curriculum content.</i> • <i>Evidence that the overall staffing profile includes sufficient experience, continuity, and expertise to ensure students are appropriately exposed to professional role models to enable them to develop professional attributes and behaviours.</i> • <i>Academic staffing profile including professional qualifications, registration status, engagement with the profession/research and teaching and supervision responsibilities. (Completion of staff profile data sheet, Curriculum Vitae of physiotherapy discipline staff.)</i> • <i>Evidence of the processes by which all staff are able to access appropriate support and resources including regular opportunities for professional review and development.</i> • <i>Site visit – interviews with academic staff.</i>
<p>ST9 The program is appropriately supported by technical and laboratory personnel.</p>	<ul style="list-style-type: none"> • <i>Professional and support staffing profile.</i> • <i>Site visit – interviews with academic staff and students.</i>
<p>ST10 Physical and digital learning environments and resources support the achievement of the required learning outcomes.</p>	<ul style="list-style-type: none"> • <i>Report on learning environments, facilities, equipment and resources available to deliver the program of study.</i> • <i>Documented processes for maintenance, renewal and access to equipment and facilities.</i> • <i>Site visit – meeting with senior management to verify commitment of support for the program.</i> • <i>Site visit – interviews with academic staff.</i> • <i>Site visit - tour of facilities.</i>

<p>DOMAIN – THE STUDENT EXPERIENCE Standard Statement – Students are provided with equitable and timely access to information and support</p>	
<p>ACCREDITATION STANDARDS</p>	<p>EVIDENCE REQUIREMENTS</p>

<p>EX1 Program information is clear and accessible.</p>	<ul style="list-style-type: none"> • Program of study information provided to prospective and enrolled students, (link to website). • Site visit interviews with cross section of students.
<p>EX2 Admission and progression requirements and processes are fair and transparent.</p>	<ul style="list-style-type: none"> • Admission and progression policies and procedures. • Site visit interviews with cross section of students.
<p>EX3 Students have access to effective grievance and appeals processes.</p>	<ul style="list-style-type: none"> • Grievance and appeals policy and procedures. • Site visit interviews with cross section of students.
<p>EX4 The provider identifies and provides support to meet the academic learning needs of students.</p>	<ul style="list-style-type: none"> • Details of the academic learning needs support services available to students. • Site visit - interviews with cross section of students.
<p>EX5 Students are informed of and have access to personal support services provided by suitable personnel.</p>	<ul style="list-style-type: none"> • Details of the personal support services available to students. • Site visit - interviews with cross section of students.
<p>EX6 Students are consistently represented within the deliberative and decision-making processes for the program.</p>	<ul style="list-style-type: none"> • Evidence of student representation within the management of the program of study. • Site visit - interviews with cross section of students.
<p>EX7 Equity and inclusiveness principles are observed and promoted in the student experience.</p>	<ul style="list-style-type: none"> • Policies and procedures on equity and diversity with examples of implementation and monitoring. • Site visit - interviews with cross section of students.
<p>EX8 There are effective strategies for the recruitment, admission, participation, and completion of the program by underrepresented groups in the profession and groups who experience health inequity. This includes provision of ongoing support for students across the duration of the program.</p>	<ul style="list-style-type: none"> • Report on the program of study's recruitment, admission, participation and completion of students from underrepresented groups and groups who experience health inequity. • Provide evidence of specific initiatives taken by the program of study regarding recruitment, admission, participation, and completion by students from underrepresented groups and groups who experience health inequity.
<p>EX9 Students learn in physical and digital environments that are both physically and psychologically safe.</p>	<ul style="list-style-type: none"> • Report on learning environments and how they are safe for students. • Site visit - tour of facilities. • Site visit - interviews with students.

DOMAIN – ASSESSMENT

Standard Statement – Assessment is fair, valid and reliable

ACCREDITATION STANDARDS	EVIDENCE REQUIREMENTS
<p>AS1 A contemporary, evidence-based assessment strategy is used across the program.</p>	<ul style="list-style-type: none"> • <i>Brief description on how assessment strategy is contemporary and evidence-based.</i> • <i>Site visit – interviews with academic staff.</i>
<p>AS2 Assessment methods, which include direct observation in the clinical setting, are diverse and appropriate for the learning outcomes being assessed.</p>	<ul style="list-style-type: none"> • <i>Assessment policies and procedures.</i> • <i>Unit of instruction outlines that are made available to students and detail how the unit is structured and enacted at each stage.</i> • <i>Assessment blueprint/matrix which details assessment methods and weightings and demonstrates alignment of assessment to unit of instruction learning outcomes.</i>
<p>AS3 Physiotherapy roles, attributes, capabilities and all graduate outcomes are assessed.</p>	<ul style="list-style-type: none"> • <i>Assessment blueprint/matrix which details assessment methods and weightings and demonstrates alignment of assessment to unit of instruction learning outcomes.</i>
<p>AS4 Program management and co-ordination, including moderation procedures ensure valid, transparent, consistent and appropriate assessment.</p>	<ul style="list-style-type: none"> • <i>Policies on and examples of assessment moderation.</i> • <i>Site visit – interviews with academic staff.</i> • <i>Site visit – interviews with a cross section of students.</i>
<p>AS5 Effective, appropriate and timely feedback is provided to students.</p>	<ul style="list-style-type: none"> • <i>Procedures in place to ensure effective, appropriate and timely feedback provided to students.</i> • <i>Site visit – interviews with a cross section of students.</i>
<p>AS6 Assessment is conducted by appropriate personnel including by suitably qualified physiotherapists for the assessment of physiotherapy specific competencies.</p>	<ul style="list-style-type: none"> • <i>Academic staffing profile including professional qualifications, registration status and teaching and supervision responsibilities.</i>

2.3 Site Visits

Following an initial review of the application, the Council will provide an interim report which will identify any further information or evidence required before or at the site visit. Site visits are usually conducted during academic semester to enable meetings with students and staff.

The duration of the site visit is usually two days, but may vary according to the number of campuses, number of programs and complexity of matters to be addressed. A site visit will typically cover:

- Verification of evidence provided in the application.
- Evaluation of aspects of the program that are not able to be assessed adequately from the written application, e.g. physical spaces, resources and equipment.
- Conducting interviews with a sample of clinical education providers to verify student experience and capacity for placements.
- Conducting interviews with senior education provider and academic unit staff to verify program design, delivery and resourcing.
- Conducting interviews with students and /or graduates for the purpose of determining satisfaction with the educational program. For a new program and provider interviews with students and/or graduates from another health science program.
- Meeting with members of the external advisory group to verify quality assurance and industry advice.

An indicative site visit schedule is provided below.

Table 3 — Indicative Site Visit Schedule

DAY I Time	Activity	
8.45-9.00	Arrival and set-up	
9.00-9.50	Meeting with Senior Executive members	<p>5 min – Host Welcome</p> <p>5 min – Introductions</p> <p>10 min – Panel Chair Brief overview of purpose and process for the site visit as part of the accreditation process.</p> <p>30 min – Senior Executive Team Discussion and confirmation of the strategic direction for the program, resourcing, governance.</p>
9.50-10.30	Meeting with Head of Physiotherapy and quality assurance staff	<p>40 min – Academic Governance & Public Safety (Domain I)</p> <ul style="list-style-type: none"> • Systems of monitoring and review • Quality improvement processes • External input to the program <p>• Compliance with any applicable national regulatory requirements</p>
10.30-10.45	Break	15 min – panel only debrief
10.45-11.15	Morning tea	30 min – Panel & staff involved in physiotherapy program to join Morning Tea (if available)

11.15 - 12.45	Meeting with Head of Physiotherapy and subject/unit Coordinators	<p>90 min – Curriculum and Assessment (Domains 2 & 4)</p> <ul style="list-style-type: none"> • Overview of educational philosophy and design of the program <ul style="list-style-type: none"> • Learning outcomes and assessment address International Physiotherapy Practice Thresholds and graduate attributes • Learning environment and teaching methods • Learning and teaching methods including inter-professional learning • Integration of cultural responsiveness in the curriculum. <ul style="list-style-type: none"> • Development of student research literacy <ul style="list-style-type: none"> • Program assessment strategy • Range of assessment methods • Moderation of assessment
12.45-1.45	Lunch	60 min – working lunch – panel only
1.45-2.30	Meeting with cross section of staff for the program	<p>45 min – Appropriate Staffing (Domain 2)</p> <ul style="list-style-type: none"> • Teaching staff suitably qualified and experienced. <ul style="list-style-type: none"> • Workload model • Support for professional development • Support staff: technical, laboratory, teaching and learning, administrative
2.30-3.30	Guided tour of program facilities	<p>60 min – Tour of facilities (Domain 2)</p> <ul style="list-style-type: none"> • Facilities and equipment support the achievement of learning outcomes <ul style="list-style-type: none"> • Specialist teaching spaces and key equipment, laboratories, simulation, clinics etc. <ul style="list-style-type: none"> • General teaching spaces • Resources to sustain the quality of education required <ul style="list-style-type: none"> • Student support areas
3.30-3.45	Break	15 min afternoon tea – panel only
3.45-4.30	Meeting with Head of Physiotherapy and Clinical Education Manager and representative from central clinical education unit (if applicable)	<p>45 min – Clinical Education and Public Safety (Domain 2)</p> <ul style="list-style-type: none"> • Clinical education model • Students achieve relevant competencies before providing supervised care • Students supervised by suitably qualified clinical educators • Quality and quantity of clinical placements across the lifespan and in a range of environments and settings

		<ul style="list-style-type: none"> • Education provider support for clinical educators • Monitoring process for students on placement • Monitoring of placement providers
4.30-4.45	Break	Short break – panel only
4.45-5.30	Meeting with representatives from the Physiotherapy program External Advisory Committee	45 min – External Input to Program of Study (Domains 1 & 2) <ul style="list-style-type: none"> • Specifically addressing outcomes associated with the role of the program's external advisory panel

DAY 2		Activity
Time	Discussion Guide	
9.00-12.00	Clinical education site visits The panel will split up to visit 6 sites (2 each) If regional sites used, please include a teleconference with a regional provider.	180 min – Clinical Education Sites (Domain2) Visits to key clinical education sites, specifically addressing: <ul style="list-style-type: none"> • Education provider engagement with clinical sites (i.e., support, professional development of clinical educators, assessment, resourcing etc.) • Alignment of placements with the curriculum • Student engagement with placements (e.g., preparedness, support, facilities etc.)
12.00-1.00	Lunch	60 min – working lunch – panel only
1.00-2.00	Meetings with a cross section of students – representing each year level. If students are based in different regions, access via teleconference	60 Min – Student Experience (Domains 2, 3 & 4) <ul style="list-style-type: none"> • Program information is clear and accessible • Academic program – teaching, assessment and clinical education placements <ul style="list-style-type: none"> • Access to facilities • Access to support services • Access to effective grievance and appeals processes <ul style="list-style-type: none"> • Student representation
2.00-3.00	Panel	60 min – Panel only discussion & drafting panel report
3.00-3.30	Meeting with Head of Physiotherapy and senior staff	30 min – Debrief General feedback and confirmation of next stages of the accreditation process

2.4 Accreditation fees

Fees are payable for the accreditation of programs and are reviewed annually by the Directors and published at www.physiocouncil.com.au.

Education providers with accredited programs will be invoiced annually in July as per the published fee schedule. There is no additional fee for re-accreditation of a program however, the education provider is required to cover the site visit costs, which include panel member airfares, transportation, accommodation and meals.

3. MONITORING OF ACCREDITED PROGRAMS

An accredited program (with or without Conditions) is required to complete an Annual Monitoring Report to the Council. Where an education provider has multiple programs, such as an undergraduate and a graduate entry program, reporting is required for each program. Where there are multiple campuses, education providers must report on campus specific information.

3.1 Monitoring Reports

Education providers are required to report annually to the Council. The Monitoring Report is completed via the online accreditation portal and will include:

- Student enrolment data
- Detailed evidence of clinical education placements
- Changes to academic staffing
- Progress work on any existing conditions on accreditation
- Identification of a material change
- Other reporting that may be identified by the Council as part of audit procedures.

For accredited programs without conditions, the Chair of the Accreditation Panel will complete an assessment of the Monitoring Report submission. Where a Condition(s) is in place, all panel members will review the report to determine progress against the Condition(s).

The outcome of the Monitoring Report assessment is reported to the Board of Directors. Any outcome that impacts the accreditation status of the program will be identified in a Decision Statement.

The accreditation outcome for a program following the Monitoring Report process will be one of the following:

- **Accreditation** - the accreditation status of the program remains unchanged, or a condition(s) has been met that enables the program to achieve Accreditation; or
- **Accreditation with Conditions** – the accreditation status remains unchanged, or a condition(s) is imposed on Accreditation, as an assessment has been made that criteria are only substantially met; or
- **Accreditation Revoked** – the program no longer meets or substantially meets the accreditation standard, and it is not expected the program can meet the standard in a reasonable period of time.

Where a decision is made to revoke the accreditation of a program, the education provider will be notified in writing. The letter will be accompanied by a report, which includes the evidence applied to determine that the program no longer meets, or is unable to meet in a reasonable time, the Accreditation Standards.

3.2 Material Change

The education provider must notify the Council as soon as it becomes aware of actual or planned changes to an accredited program that are outside the usual evolution of quality improvement initiatives, so that the impact on the ongoing compliance of the program with the Accreditation Standard can be assessed.

In this notification, the provider must explain the impact of the changes and the strategies, including risk mitigation, that will be applied to manage the change. Detailed plans covering the relevant strategies should be submitted with the notification.

An assessment of the reported change(s) will be undertaken based on the evidence presented and the Council will determine the likely impact on compliance with the Accreditation Standard.

Determination of a material change **may** require a full application for accreditation with associated fees.

A material change is a change that will or may significantly affect the way the education provider meets the requirements of the Accreditation Standard. Material changes may include but are not limited to:

a) **An increase in student head count compared to the last accredited projections.**

Increasing student numbers may significantly impact the resources available to deliver the program in academic and clinical education settings and affect the student experience. Education providers must explain how their program continues to meet the accreditation standard across a range of areas, including the availability of appropriate, experienced staff to support teaching and learning; the provision of sufficient infrastructure and resources to support learners and their progression; and the availability of suitable clinical placements and supervisors to support the development of professional practice.

An increase in student head count by 25% or 30 students or more, whichever is lesser, must be reported to the Council.

b) **Changes to resources and infrastructure including:**

- Changes to program leadership or academic staff that affect the provider's capacity to deliver the program(s).
- Changes to education provider funding models or financial position that affect the provider's capacity to deliver a quality physiotherapy program.
- Organisational changes that will affect governance, quality improvement, and/or staffing.
- Changes to educational facilities that affect the provider's capacity to deliver the program(s).
- Changes to program delivery such as, but not limited to: change of site or addition of new sites (including offshore) (includes additions and withdrawals); contracting with another organisation to deliver a significant proportion of a program or services (i.e. third party provider).
- Changes to the legal status of the corporate entity of the education provider.
- Any incident or circumstance, which could affect the education provider's integrity or capacity to conduct its business or deliver the program.

c) **Changes to program attributes including:**

- Change to the program duration.

d) **Changes to curriculum including:**

- Significant variation to the currently accredited curriculum with respect to course structure, units, learning outcomes, content, or delivery methods.
- Significant changes to the clinical education program model or level of support from clinical education partners.

4. CONFLICT OF INTEREST

The education provider is given an opportunity to comment on the proposed membership of an accreditation panel and may query the composition if it believes a proposed member has a bias or conflict of interest that could cast doubt on their capacity to objectively evaluate a program. The Council will revise the composition of a panel where such claims are substantiated. Actual or potential conflicts of interest that may arise for International Accreditation Committee members and members of the Council Board during the accreditation process are managed according to the Council's Conflict of Interest Policy.

5. CONFIDENTIALITY

The accreditation process is confidential to the participants. In order to undertake their accreditation role, the Council requires detailed information from education providers. This typically includes sensitive or commercial-in-confidence information such as plans, budgets, appraisals of strengths and weaknesses and other confidential information. The Council require members of accreditation panels, members of the Accreditation Committee, Council members and staff to keep confidential all material provided to the Council by education providers for the purpose of accreditation of their programs. Information collected is used only for the purpose for which it is obtained.

6. COMPLAINTS AND APPEALS AGAINST DECISIONS

6.1 Policy

An education provider has thirty (30) days to seek a review of an accreditation decision, including the outcome from an Annual Report.

There are two grounds for an application to review a decision:

The manner in which the accreditation process was conducted was procedurally unfair. This may include, but is not limited to, matters such as the sequence and timing of the accreditation process, the process of review and evaluation of documentation and the conduct of the site visit.

or

The decision of the Directors was unjustified or patently unreasonable in the circumstances, i.e. that the decision was not supported by substantial evidence on the record or that the decision was made on capricious or arbitrary grounds and not the application of objective standards.

6.2 Procedure

The education provider is required to:

- Lodge the appeal with the CEO of the Australian Physiotherapy Council Limited in writing within thirty (30) days of the date of the Council letter advising the education provider of the accreditation decision; and
- Pay the scheduled fee to meet the cost of the review at the time of lodgement of the appeal. The fee will be refunded in part or full if the outcome of the review is in favour of the education provider; and
- Clearly state the grounds for seeking a review of the decision supported by evidence. The onus is on the education provider to provide such evidence.

Upon receipt of an application for an internal review of the decision, the Council CEO will acknowledge receipt of the application and establish an Internal Review Panel comprising of three members.

The nominees must be familiar with accreditation processes, and must not have been involved in the accreditation of the program that is the subject of the review, nor have any perceived or actual conflict with the education provider or its personnel, in accordance with procedural fairness. This panel must be convened within thirty (30) days of the receipt of the appeal.

The Internal Review Panel will limit its scope to the grounds stated by the education provider in the application for review of the decision.

The Internal Review Panel shall be provided with the documentation lodged by the education provider, a copy of the accreditation decision letter, the Executive Summary and Accreditation Report, and any other documentation from the record of accreditation process, as requested. Although the Internal Review Panel will predominantly make its decision based on documentary material, it has the discretion to make any such inquiries as it deems necessary to inform deliberations before coming to its conclusion.

The Internal Review Panel is entitled to obtain independent legal advice if a question of law arises during the review. The Australian Physiotherapy Council Limited is responsible for the cost of its independent legal advice.

The outcome of the review by the Internal Review Panel should be notified to the education provider no later than ninety (90) days from date of lodgement of the appeal with the Council. A statement clearly outlining the reason for the decision of the Internal Review Panel will be provided.

The decision of the Internal Review Panel is taken to be the decision of the Board of Directors and supersedes any prior decision made by the Board of Directors. The decision by the Internal Review Panel is final.

The Council CEO will provide a notification of outcome to the: Education provider and Board of Directors.

GLOSSARY OF TERMS

Academic staff - all teaching and research staff in a program and includes tenures, contract and sessional teaching staff.

Academic unit - the physiotherapy academic unit, school, department or other separately identifiable academic entity within the education provider organisational structure that defines the physiotherapy operational unit.

Accreditation - process that an education provider undertakes to become an accredited program of study.

Accreditation Committee - appointed by the Australian Physiotherapy Council Limited, the committee has responsibility to develop, monitor and report on the implementation of accreditation processes.

Accreditation Panel - primary function is the analysis and evaluation of the physiotherapy program against the Accreditation Standard.

Accreditation Panel Report - panel assessment of the evidence provided against the accreditation standard. The Australian Physiotherapy Council Limited determines the accreditation decision based on the findings of the Accreditation Panel report.

Accreditation Standard - the standard against which a program is evaluated to determine its accreditation status.

Clinical educator - also known as clinical supervisor or clinical tutor. Is usually a physiotherapist with the responsibility for the clinical education of physiotherapy students, as designated by the education provider or clinical facility

Clinical placement - clinical education that enables each student to develop, consolidate and expand their knowledge and skills across a range of learning opportunities in the key areas of physiotherapy, demonstrating experience across acute, rehabilitation and community practice in a range of environments and settings across the lifespan

Condition - a mandatory reporting obligation imposed on an accredited program to be addressed in a set time frame to enable a criterion of accreditation to be met.

Directors - Board of Directors of the Australian Physiotherapy Council Limited.

Education provider - the academic institution governing the operation of the academic unit delivering the program of study.

Evidence-based practice – the integration of the best available evidence, professional expertise, and the values, preferences, and circumstances of individuals and populations to inform decision making and support safe, effective, and person-centred physiotherapy practice.

Health inequity – avoidable and unjust differences in health outcomes, functioning, wellbeing, or access to healthcare that arise from unequal social, cultural, economic, environmental, political, or structural conditions.

Intersectionality- the way multiple social, cultural, demographic, and personal identities intersect and influence an individual's experiences, health outcomes, access to services, and interactions with healthcare and educational systems

Lifespan - age groups from infants through to adolescents, from adults through to older persons.

Material change - is a change that will or may significantly affect the way the education provider meets the requirements of the Accreditation Standard.

Program of study - a set of courses, subjects or units of study (as defined by the education provider) that forms the requirements for award of the degree.

Psychological safety- an environment in which learners, educators, staff, and stakeholders feel safe to speak up, ask questions, seek support, provide feedback, acknowledge mistakes, and raise concerns without fear of humiliation, discrimination, retaliation, or other adverse consequences.

Thresholds - International Physiotherapy practice thresholds describe the thresholds of competence for initial and continuing practice as a physiotherapist in.

Trauma informed practice- an approach that recognises the effects of trauma on individuals and incorporates principles of safety, trust, choice, collaboration, and empowerment into interactions, services, and learning environments to support wellbeing and avoid re-traumatization.

Unit of instruction - a subject, course or identifiable component of a program, with discrete learning outcomes and credit points.

Australian Physiotherapy Council Accreditation Decision Framework

The following table provides a risk level for the different scenarios for accreditation/re-accreditation applications and provides guidance for the appropriate accreditation period to be granted and identifies the appropriate approval body.

Risk Level	Scenario	Accreditation Period	Decision Approver
Higher Risk	New provider and new program in first cycle of accreditation (will always have conditions)	Up to 4 years	Board
Medium Risk	Established provider, new program, new campus in first cycle of accreditation (will always have conditions)	Up to 4 years	Board
Medium Risk	Established provider, established program new campus , established program and provider applies to offer at new campus first cycle of accreditation (will always have conditions)	Up to 4 years	Board
Lower Risk	Established provider, new program same campus first cycle of accreditation (will always have conditions)	Up to 4 years	Board
Lower Risk	Established provider and program, re-accredited with conditions	Up to 4 years	Board
Minimal Risk	Established provider and program, re-accredited, no conditions	Up to 4 years	Board