Commission on Accreditation in Physical Therapy Education
American Physical Therapy Association

SUMMARY OF ACTION
Physical Therapy Program
Marymount University
2807 North Glebe Road
Arlington, VA 22207-4224

On October 25, 2022, the Commission on Accreditation in Physical Therapy Education made the following decision regarding the physical therapist education program at Marymount University.

Status: Accreditation
Action Taken: Approve Application for Substantive Change and Continue Accreditation
-- Permanent Increase in Class Size to 46 students. Expected date of implementation Fall 2023. The program is requested to note substantive change approval in future Annual Accreditation Reports (AARs) when asked to explain increases in class size.

Effective Date: October 25, 2022

Information Used to Make Decisions: Application for Approval of Substantive Change received September 13, 2022

Reason for Decision: The Commission's decision to approve the change described in the Application for Approval of Substantive Change is based on the program's proposal which substantiated the existence of appropriate resources to effectively implement the proposed change, a summary of which begins on page 4.

Continued approval of the substantive change is dependent on implementation of the program described in the Application for Approval of Substantive Change. That implementation must be appropriately documented in an annual Compliance Report through graduation of the first cohort affected by the change with continued approval of the substantive change dependent, at a minimum, on funding and resources as reported in the AASC.

The Commission's decision was also based on the belief that the program will maintain its compliance with the Standards and Required Elements as the approved change is implemented and will demonstrate continued compliance with all of the required elements, which must be appropriately documented in a Self-study Report during the program’s next scheduled comprehensive review.

The program is reminded that the status of accreditation has been continued based on the program described in the materials reviewed by the Commission. The institution and program are responsible for notifying CAPTE of any additional substantive changes in the program prior to implementation. Unexpected substantive changes are to be reported immediately after they occur. (See Part 9 of CAPTE's Rules of Practice and Procedure for more information about reporting changes.)
NOTICES

ACCURATE PUBLIC DISCLOSURE OF THIS DECISION BY THE INSTITUTION
The institution and program must make accurate public disclosure of the accreditation or pre-accreditation status awarded to the program. Further, the United States Department of Education (USDE) requires all recognized accrediting agencies to provide for the public correction of incorrect or misleading information an institution or program releases about accreditation or pre-accreditation status, contents of reports of on-site reviews, and accreditation or pre-accreditation actions with respect to the institution or program [34 CFR 602.23(d) and 602.23(e)]. If the institution or program chooses to disclose any additional information, beyond the accreditation or pre-accreditation status that is within the scope of the USDE rule, such disclosure also must be accurate. Any public disclosure of information within the scope of the rule must include the agency’s street address, email address and phone number: Commission on Accreditation in Physical Therapy Education, 3030 Potomac Ave., Suite 100, Alexandria, Virginia 22305-3085; accreditation@apta.org; (703) 684-2782 or (703) 706-3245. If the Accreditation staff finds that an institution or program has released incorrect or misleading information within the scope of the USDE rule, then, acting on behalf of CAPTE the Accreditation staff will make public correction, and reserves the right to disclose this Summary of Action in its entirety for that purpose.

PUBLIC NOTICE OF DECISIONS BY CAPTE
Following all decisions, including decisions to place a program on warning, probation or show cause, or to deny candidacy, withdraw candidacy, withhold accreditation, or withdraw accreditation, the Accreditation staff will, within 24 hours of the official notification of the programs and institutions of the decisions, provide notice to the public by placing notice of the decisions on its web site.

RESPONSIBILITY TO REPORT CHANGE(S)
The institution and program are responsible for notifying CAPTE of all reportable changes in the program prior to implementation. Unexpected changes are to be reported immediately after they occur. Reportable changes, some of which may require pre-approval, are described in Part 9 of CAPTE’s Rules of Practice and Procedure (http://www.capteonline.org/AccreditationHandbook/). It is the program’s responsibility to be familiar with these expectations and to provide notification of program changes as required.

TWO YEAR LIMITATION ON BEING OUT OF COMPLIANCE
CAPTE’s recognition by the United States Department of Education requires a limitation of two years for programs to be out of compliance with a required element [34 CFR 602.20(a)(2)(iii)]. When, after review of a Compliance Report, the program remains out of compliance with any required element and sufficient progress toward compliance has not been demonstrated, CAPTE may act to place the program on probationary accreditation or withdraw accreditation. CAPTE will place the program on probationary accreditation when a program remains out of compliance for 18 months. If the program continues to be out of compliance with any required element at the end of the two year period following the initial finding that the program is out of compliance, CAPTE will withdraw accreditation unless CAPTE judges the program, for good cause, to be making significant efforts to come into compliance with the standards and required elements. CAPTE defines a good cause effort as:

(a) a completed comprehensive assessment of the problem/issue under review,
(b) an appropriate plan for achieving compliance within a reasonable time frame not to exceed two years,
(c) a detailed timeline for completion of the plan,
(d) evidence that the plan has been implemented according to the established timeline, and
(e) evidence that the implemented plan is showing results that provide reasonable assurance the program will achieve compliance within the allotted time frame.

It is the program’s responsibility to make the case that a good cause effort has been made and continues to be in effect. During the extension for good cause, probationary accreditation status will be maintained and the program’s progress will be monitored. In no case, however, will an extension for good cause be longer than two years.
Commission’s Findings and Reasons for Decision:

Per CAPTE Rule 9.6(f)(3), annual reporting through graduation of the first cohort affected by the change with continued approval of the substantive change is dependent, at a minimum, on funding and resources as reported in the Application for Approval of Substantive Change (AASC).

The following is a summary of the information provided in the AASC. Errors, if any, in this summary should be immediately reported to Accreditation staff. Evidence that the approved changes are being implemented as delineated in the AASC will be required in the AASC Annual Report through graduation of the first cohort affected by the change. Changes that are not implemented as delineated in the AASC may result in CAPTE’s approval to be rescinded.