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Home Annual Report Review History

Annual Report Review 2014

Annual Report Review - Commission Decision

CAATE Commission has reviewed your Annual Report and voted to Accept your Annual Report with no further action 06-12-2015. Click here to see the Review.

Annual Report 2015

Directory information (Faculty, Clinical Sites and Preceptors), Profile, Officials and Student Inf[o]
Report.

Please complete the following sections for this year's Annual Report. Please take a few minutes to read the directions at the beginning of every section. As you complete your Report, the table below will show your progress as **Not Started**, **In Progress** or **Complete**. When all sections are **Complete** a Submit button will appear on the Annual Report tab. You must click the Submit button in ord[er] completing and submitting your Annual Report is on or before **Oct 15, 2015**.

For your convenience, last year's responses have been pre-populated. Please update these with the current reporting period's data.

Your program's annual report appears to be missing some information.
Please complete the indicated sections below, and r[...]

SECTION		STATUS
Clinical Site Profiles		Not Started
Faculty Profiles		Not Started
Preceptor Profiles		Not Started
Annual Report		
Section I: General Program Information		Not Started
Section II: Applicants & Enrollment		Not Started
Section III: Faculty		Not Started
Section IV: Program Operations		Not Started
Section V: Outcomes		Not Started
Section VI: Access to Information and Compliance		Not Started

SUBMIT to CAATE button will become available after all sections have status Complete.

> After log in, start by clicking on the Annual Report tab.

> This table will show you your progress

> Use these links to navigate to the sections you wish to complete. (You may also use the tabs on the black bar above)

The Directory tabs (Faculty, Clinical Sites and Preceptors) have been prepopulated with previously submitted data. This will make the completion process easier. However, you must review each entry and update necessary information. Also, CAATE has added new required fields, so you must review each entry and click the "Save" button illustrated below.

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Faculty Clinical Sites Preceptors

Name: Alex Montoye

1 Name:

First Name

6 Role(s): (Select all that apply)

- ☐ Program Director
- ☐ Clinical Education Coordinator
- ☐ Medical Director
- ☐ Chair
- ☐ Dean
- ☐ Assistant/Associate Dean
- ☐ Head Athletic Trainer
- ☐ Athletic Trainer
- ☐ On Site Staff
- ☐ Off Site Staff
- ☑ Other, please specify:

Warning: *Please specify other*

7 BOC Certification #:

n/a

If no BOC number, please enter N/A

8 State Credential #: (includes AT, PT, MD, etc...)

	STATE	PROFESSION	CREDENTIAL #
1	▼	Not a licensed healthcare provider ▼	
			Warning: *Please complete. Type NA if not available.
2	▼	▼	
3	▼	▼	
4	▼	▼	

11 Was this faculty member active during the reporting year?

Warning: *Please complete*

- ○ Yes
- ○ No

After reviewing all the required fields, click the SAVE button. You will need to do this on each entry.

SAVE

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Faculty Clinical Sites Preceptors

Clinical Site: Ithaca Physical Therapy Clinic

In accordance with Standard 3, all clinical sites that involve either patient care or observation-only experience need to be listed in the Clinical Sites Directory for the Annual Report. Please ensure that you have included all sites used for any clinical education.

1 Was this site active during the reporting year?

4 This site provides student clinical experiences with the following populations (Select all that apply):

- ☐ Individual Sports
- ☐ Team Sports
- ☐ Sports Requiring Protective Equipment
- ☑ Patients of different sexes
- ☑ Non-Sports Patient Population
- ☐ Non-Orthopedic Conditions
- ☑ Other

Warning: *Please specify other*

5 The site is:

- ○ Hands-On
- ○ Observation
- ● Both Hands-On and Observation
- ○ Employer Only - No students
- ○ Employer Only - No students

- ○ Yes
- ○ Facility is externally accredited (e.g. Joint Commission, HFAP, etc?)
- ● No
- ○ N/A

Warning: *Please complete*

If no, please explain:

9 Individual with Administrative Authority for Signature:

First Name

James

Last Name

Tilton

Position

Physical Therapist

Same action is needed for each Clinical Site

SAVE

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Faculty Clinical Sites Preceptors

Preceptor Profile

In accordance with Standards 3 and 37, all preceptors at all clinical sites involving either patient care or observation-only experience need to be listed in the Preceptor Directory for the Annual Report. Please ensure that you have included all preceptors who are supervising your students at all clinical sites.

1 Is/Was Preceptor active for the reporting year?

- ○ Yes
- ○ No

2 Name:

First Name

Last Name

3 Credentials: (list all heath care credentials)

9 Preceptor Training: (most recent training date) *All preceptors must be trained. If preceptor has not been trained, leave the field blank

Note: Please note that all preceptors need to be reported and that all preceptors will need a preceptor training date, as the standard states that all preceptors must receive "planned and ongoing education" from the program designed to promote a constructive learning environment and that anyone supervising your students during clinical education (hands-on or observation) is considered a preceptor. If you entered 1/1/2014 on your last annual report (as directed), you will need to change this date for this reporting period (due October 15, 2015) since this standard was in effect for the 2014-2015 academic year.

2014-2015 academic year.

10 Maximum Number of Students this Preceptor Supervises at any given time:

And for Preceptors.

SAVE

Faculty Clinical Sites Preceptors

Clinical Site Profiles

Please create a profile for each clinic that the program uses for clinical experience, clerkships, internships and/or externships. The capture of this information allows for summary analysis each year. Please be as accurate as possib

When all required fields for each Clinic have been completed, you will see a **Mark a** section, i.e., when there are no more Clinics for you to add. A new link will appear, **M** Clinics or edit existing profiles. If you want to make additions or changes, and you ha will unlock. Make your edits or additions, then click **Mark as Complete** again.

Search [   ] Search 🔍

View All Clinical Site Profiles

Add Clinical Site Profile

Mark as Complete

Search [   ] Search

View All Preceptor Profiles

Mark as In Progress

> Once you've completed each entry in each Directory, a link for "Mark as complete" will appear. In order to finish, you must click on this link

> If you need to edit or add other entries, you'll need to click on this link

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Your program's annual report appears to be missing some information.
Please complete the indicated sections below, and return here to submit your annual report.

SECTION	STATUS
Clinical Site Profiles	Complete
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Annual Report	
Section I: General Program Information	Not Started
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SUBMIT to CAATE button will become available after all sections have status Complete.

After you've updated the Directories, you can start the Annual Report sections.

Please note that the annual report sections will be prepopulated with the information you submitted the previous year. These must be updated prior to clicking on the "SAVE", "NEXT" or "PREVIOUS" buttons. These buttons will save your data. The system won't know if it is new data or previous year data.

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Section II: Applicants & Enrollment

(1) Please answer all questions for the reporting period. (2) All fields are required, so you must answer all questions. (3) You can tab from question to question. (4) Many questions with yes/no choices ask you to complete a text field if you answer yes. You must enter text in this field for the system to recognize your answer as complete. (5) Some questions ask you for numbers. For these, enter zero rather than leaving an entry empty. (6) You can complete the survey in several sittings. Just remember to click Save or Next at the end of every page to save what you have done. (7) Error and warning messages will be displayed both within the survey and on the top of every survey page. (8) Incomplete sections will be noted section by section on the Annual Report tab. (9) When all sections are complete, you will see a Submit button on the Home tab. Click this button to submit your report to CAATE.

II1 Please indicate which admission process the program uses:

○ Direct (student is directly admitted to program when admitted to institution)

◉ Secondary (secondary application and admission process is used by the program)

20

II3 For the slots indicated in question II.2, what was the number of completed applications for admission to the program?

numbers before submitting.

II11 Please indicate the number of male and female students (as self-identified by the student) enrolled in the program during the

Note: Enter numbers only. The total of the numbers entered should equal the head count of your program, including all locations (total of the numbers entered for question II.6).

Male

15

13

The total number of students should be equal to the total number of students enrolled, which was provided in question II.6. Please check these numbers before submitting.

Comments: for further explanation of any question, please indicate the question number before the explanation.

Please remember that these fields are prepopulated with last year's data. Before clicking on any of these buttons, please be sure you've updated the data.

« PREVIOUS   SAVE   NEXT »

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Congratulations, your program's annual report appears to be complete.

Please click the below check box to see the Submit button.

☑ Directory information (Faculty, Preceptors and Clinical Site tabs) have been updated.

Click the Submit to CAATE button below to submit your annual report to CAATE.

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SECTION	STATUS
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Section V: Outcomes	Complete
Section VI. Access to Information and Compliance	Complete

SUBMIT TO CAATE

After all the sections have been completed, check the box to confirm you've updated the Directory information, and submit to the CAATE.