

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

NCOPE/CAAHEP Accreditation Management Portal - V2.0

Annual Report Sample

Submission Type and Basic Information

Identify the program type you wish to complete documentation for:*

- Orthotist/Prosthetist
- Technician
- Orthotist/Prosthetist Assistant
- Pedorthist

Identify the document you wish to complete via this tool:*

- Annual Report
- Self-Study

Identify the type of self-study you wish to complete:*

- Candidacy
- Initial
- Continuing
- Transfer of Sponsorship

Identify the Sponsor Institution:*

Primary Contact

Please enter the information for the individual principally responsible for the completion of the annual report in the fields below. A confirmation email will be sent to that person granting them access to return to the annual report until final submission.

In order to improve the likelihood that the confirmation email will be successfully

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

delivered to the recipient below, we strongly encourage you to enter a University or Professional Organization based email account. A personalized link will also be sent to that individual to allow them to continue the [question('value'), id='2'] at a later date/time.

- First Name*:
- Last Name*:
- Title*:
- Email Address*:
- Phone Number*:

Did the person identified above serve as the program director during the period of time being reflected in the annual report?

- Yes
- No

Annual Report - Reporting Year

Identify the most recently completed academic year that you would like to document

*Please note that the annual report presents information from the most recently completed academic year and not the current academic year in progress. **

- 2015/2016
- 2016/2017
- 2017/2018
- 2018/2019
- 2019/2020

Annual Report Basic Information

Provide the following information for the individual who served as the dean that the program director reported to during the academic year being reported.

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

- First Name*:
- Last Name*:
- Title*:
- Email Address*:
- Phone Number*:

Provide the following information for the individual who served as the program director during the academic year being reported.

- First Name*:
 - Last Name*:
 - Title*:
 - Email Address*:
 - Phone Number*:
-

Programmatic Changes

Sponsorship *

	Yes	No
Sponsorship was transferred to/from [question("value"), id="99"]		
A consortium institution was added to execute the O&P program		

I.A - Sponsoring Educational Institution

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

Select the institution type (based upon [Carnegie Classification](#)) that best describes the sponsor institution:

- Doctoral Universities
- Master's Colleges and Universities
- Baccalaureate Colleges
- Baccalaureate/Associate's Colleges
- Associate's Colleges
- Special Focus Institutions

Identify the funding type that best describes the sponsor institution.

- Public - State Institution
- Public - Federal Institution
- Private - Not for Profit Institution
- Private - For Profit Institution

Identify the following contact information for the Chief Executive Officer (CEO), President, or Provost at [question("value"), id="99"]:

- First Name:
- Last Name:
- Title:
- Institution*:
- Street Address:
- Apt/Suite/Office:
- City:
- State:
- Zip:
- Country:
- Email Address:
- Phone Number:

Does the O&P program director report directly to the CEO / Chief Academic Officer listed above?

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

- Yes
 - No
-

I.A - Sponsoring Educational Institution (Continued)

Identify the regional or national accrediting agency that awarded accreditation to the sponsor institution:

Please note that the North Central Association of Colleges and Schools (NCA-HLC) is now referred to as The Higher Learning Commission

- Middle States Association of Colleges and Schools (MSA), Middle States Commission on Higher Education
- New England Association of Schools and Colleges (NEASC-CIHE), Commission on Institutions of Higher Education
- New England Association of Schools and Colleges (NEASC-CTCI), Commission on Technical and Career Institutions
- North Central Association of Colleges and Schools (NCA-HLC), The Higher Learning Commission
- Northwest Commission on Colleges and Universities (NWCCU)
- Southern Association of Colleges and Schools (SACS), Commission on Colleges
- Western Association of Schools and Colleges (WASC-ACCJC), Accrediting Commission for Community and Junior Colleges
- Western Association of Schools and Colleges (WASC-ACSCU), Accrediting Commission for Senior Colleges and Universities National
- Other

Enter the accreditation start and end dates for the regional accreditor identified above

If the accreditor does not provide a specific day that the accreditation cycle starts/ends, please enter January 1 for the starting date and December 31 for the ending date.

Start Date*:

End Date*:

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

Does [question("value"), id="99"] hold any other accreditation that directly affects the administration or delivery of the [question("value"), id="56"] Program outside of CAAHEP/NCOPE and the regional accreditor identified above?

- Yes
 - No
-

I.B - Consortium

Is there a consortium or other legally binding agreement in place to facilitate the delivery of the program?*

- Yes
 - No
-

I: Sponsorship- B. Consortium

This page is only presented to institutions that answered "Yes" to the question above.

How many institutions participate in the consortium in addition to [question("value"), id="99"]? *

Enter the name for the 1st institution participating in the consortium:

Enter the name for the 2nd institution participating in the consortium:

Enter the name for the 3rd institution participating in the consortium:

Enter the name for the 4th institution participating in the consortium:

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

O&P Program Information

Enter the following information for the O&P Program:

Official Program Name:

Street Address:

Apt/Suite/Office:

City:

State:

Zip:

Country:

Phone Number:

Fax Number:

General Department/Program Email Address:

Education Program Website:

Provide the following information about the O&P Program:*

Academic units granted / academic calendar format:

If you select Other, please enter the unit using a plural noun. If the Summer term is different than the language used to describe the academic terms listed below, please do not select "other"; instead choose term used to identify the Fall or Spring academic term.

- Quarters
- Trimesters
- Semesters
- Other - Write In (Required): *

Does the format identified above adhere to the [federal definition of a credit hour?](#)*

- Yes
- No

Does the sponsor institution have a specific amount of classroom instruction and / or out-of-class activity defined to earn the academic unit identified above?

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

- Yes
- No

Is the O&P Program cohort based?

*A cohort is defined as a class of students that matriculate at the same time and progress through an academic/professional program at the same pace.**

- Yes
- No

Does the O&P Program offer multiple tracks or pathways to completion?

*Select "Yes" if students can meet the CAAHEP/NCPE standards by completing a different course series/sequence. This pathway may exist if students can pursue a specialization in a different area (for example: Engineering Management vs Biomedical Engineering) or take additional coursework to enhance their education (for example: completing a fitter certification course in addition to a prosthetic technician curriculum). **

- Yes
- No

Based upon the following definitions, what delivery method best describes the O&P Program?

- A **Distance Education Program** is defined as the delivery of the complete program that **allows the completion of the entire curriculum without the need to attend any instruction on a campus location.** (Note: this delivery is not hybrid or partial e-learning delivery.)
- A **Blended Learning Program** (also referred to as a Hybrid Learning Program) is defined as the delivery of the program using both face-to-face and distance learning methodology.
- A **Traditional Seated Program** is defined as the delivery of the program using face-to-face methodology requiring the student to be physically present for didactic and laboratory based course work (Note: clinical placements can be done away from the primary education program location without being considered a blended learning program).
 - Distance Education Program
 - Blended Learning Program
 - Traditional Seated Program

Is the NCOPE Clinical Residency Program integrated into the degree program?*

- Yes

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

- No
-

Education Tracks

This page is only presented to institutions that answered “Yes” to the question inquiring about multiple program tracks on the previous page.

How many different tracks are available to students attending the O&P Program?*

- 1
- 2
- 3
- 4 or More

Enter the title / name of the 1st track:*

Enter the title / name of the 2nd track:*

Enter the title / name of the 3rd track:*

Provide a brief description about each track identified above including key differences such as:

- Departmental affiliations
 - Course titles/numbers/faculty
 - Program Duration
 - Unique/additional skills taught*
-

O&P Program Information (Cont.)

Program Sequencing and Cohort Information:

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

What is the total number of academic units (commonly referred to as credit hours at most academic institutions) required to complete the [question('value'), id='56'] program?

How many total academic [question('value'), id='294'] must a student successfully complete in order to earn their degree/certificate?

This number should be lower than the value entered above as students typically take multiple academic units during each of the [question('value'), id='294'] that the program is taught. Most programs require between 2 and 10 semesters/trimester/quarters/sessions.:*

What is the duration of program in months?

If this is variable, provide an average time to complete:*

How many times per academic year do students admitted to the [question("value"), id="56"] program have the ability to begin their studies?*

How many cohorts does the program matriculate per year?*

- 1
- 2
- 3

In what month does the program typically start?*

In what month does the program typically end?*

What is the maximum number of students in each cohort?*

Do students have the opportunity to take elective courses?*

- Yes
- No

What financial support options are available to students enrolled in the O&P program?

Choose all that apply

- Scholarships / Grants
- Work-Study
- Federal Loans
- Private Loans
- Other - Write In (Required): *

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

O&P Program Information (Cont.)

Provide the following admissions information:

Does [question("value"), id="99"] participate in the OPCAS system?*

- Yes
- No

Does [question("value"), id="99"] allow applicants to apply via a mechanism other than OPCAS? *

- Yes
- No

Is an interview required in order to gain admission to the [question("value"), id="56"] program? *

Interviews can be performed in-person, using video conference, via a phone call or other means. Please do not select "Other" to identify the technology or means used to conduct the interview.

- Yes - Always required
- Yes - Sometimes required
- No
- Other - Write In (Required): *

Is the GRE required to apply for the [question("value"), id="56"] program?*

- Yes
- No

Is there a minimum required or recommended combined Verbal/Quantitative GRE score defined? *

- Yes
- No

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

What value is the minimum required or recommended combined verbal and quantitative GRE score?:

What type of admission model is utilized by the [question("value"), id="56"] program?*

- Fixed deadline
- Rolling admissions
- Other - Write In (Required): *

Enter the final day that applications were accepted for the [question("value"), id="56"] program during the [question("value"), id="1111"] academic year*:

Enter the final day that applications were accepted for the [question("value"), id="56"] program during the most recently completed academic year*:

Provide the following information about student financial responsibilities:

Is in-state tuition or discount tuition offered for residents of the state the O&P program is located?*

- Yes
- No
- Other - Write In (Required): *

Enter the Full/Out-of-State tuition and other required expenses associated with attendance of the [question('value'), id='56'] program for the entire duration of the program. Enter a 0 if students enrolled in the program are not charged any fees for that category. Only whole numbers should be entered in the fields below.

*

If the program requires students complete coursework at any institution besides the sponsor (as is typical via a consortium) in order to complete a CAAHEP education, please combine the tuition and fees across all institutions.

	Full / Out-Of-State Rate
Tuition	
Laboratory Fees	
Other Instructional Fees Not	

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

Defined Above	
Administrative Fees	
Technology Fees	
Student Health Fees	

Enter the Discount/In-State tuition and other requires expenses associated with attendance of the [question('value'), id='56'] program for the entire duration of the program. Enter 0 if students enrolled in the program are not charged any fees for that category. Only whole numbers should be entered in the fields below.

*

If the program requires students complete coursework at any institution besides the sponsor (as is typical via a consortium) in order to complete a CAAHEP education, please combine the tuition and fees across all institutions.

	Discount / In-State Tuition
Tuition	
Laboratory Fees	
Other Instructional Fees Not Defined Above	
Administrative Fees	
Technology Fees	
Student Health Fees	

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

Distance Education and Blended Learning (Continued)

This page is only presented to institutions that answered "Yes" to the question inquiring about blended and distance teaching methodologies

For the XX months the program runs, how many total months is the content delivered using an online or distance learning format?

For how many months during the O&P Program, must students attend coursework on campus?

What percentage of the total program based upon time spent in learning activities is delivered using an online or distance learning format?

For online and distance learning content, what percentage of of that material is delivered synchronous (live) versus asynchronous?

There is no need to enter a "%" symbol. Only enter whole numbers in the spaces below

- Synchronous: _____
 - Asynchronous: _____
-

Annual Report Program Goals Updates

Did the educational objectives for the O&P Program change during the academic year? *

- Yes
- No

Did the minimum expectations for the &P Program change during the academic year? *

- Yes
 - No
-

II. Program Goals

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

This page is only presented to institutions that answered “Yes” to the question on the previous page

Enter the program objectives using the space provided below:

OR

Enter the URL for the web page that contains the program objectives:

OR

Upload the file that contains the [question("value"), id="56"] program objectives in PDF format. If you have multiple files, please combine them into a single PDF.

You may enter a comment about the file uploaded should you feel it would be beneficial to the review team members or NCOPE staff.

II.B - Appropriateness of Goals and Learning Domains

How many times did the advisory panel convene during the academic year?*

Enter the date for the first advisory panel meeting during the [question("value"), id="1111"] academic year*

This question is repeated once for each advisory panel meeting

Provide the minutes for the first advisory panel meeting held during the [question("value"), id="1111"] academic year in PDF format:

In the event the full names members of the advisory committee are not clearly listed in the minutes, please enter their names in the comment box below

This question is repeated once for each advisory panel meeting

Did any programmatic changes result due to input that occurred during an advisory panel meeting?

- Yes
- No

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

Identify any programmatic changes that resulted based upon the input of the advisory panel during the [question('value'), id='1111'] academic year*

II.C - Minimum Expectations

This page is only presented to institutions that answered “Yes” to the question inquiring about a change in minimum expectation for the O&P Program

Does the program at [question('value'), id='99'] have a clearly defined minimum expectation of: "To prepare a competent entry-level [question('value'), id='56'] in the cognitive (knowledge), psychomotor (skills), and affective (behavioral) learning domains" or higher?

- Yes
- No

Explain how the program defines the minimum expectations of the graduate of the O&P program.

OR

Upload the file that demonstrates the minimum expectations defined in standard II.C is met with a PDF file. If you identified that more than 1 file is available to demonstrate minimum expectations, you will be prompted for additional files below.

Please enter information about the nature of the supporting documents being provided via the "Comments" box listed below.

III.A - Resources - Financial

Previous Academic Year Expenses

Please round amounts to the nearest whole number and refrain from entering the dollar symbol (\$)

- Salaries, wages, and benefits
- Faculty/Staff Development
- Teaching materials and supplies (Including laboratory materials)
- Facility rent, taxes, utilities, maintenance

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

- Administrative supplies and information technology
- Capital improvements / infrastructure
- Other Expenses

Comments:

Previous Academic Year Revenue

Please round amounts to the nearest whole number and refrain from entering the dollar symbol (\$)

- Student tuition and fees
- Grants and contracts
- Clinical services
- Other educational activities / operations
- Private gifts
- State / federal appropriations
- Other

Comments:

Are any program resources such as faculty member effort, physical space (for example rent/utilities) or other aspects of the [question('value'), id='56'] program paid for using funds not defined in the expenses listed above? *

- Yes
- No

Provide a brief summary of the O&P program resources that are covered outside of the expenses in addition to the department/organization or alternative funding mechanism that covers the cost:

III.A - Resources - Physical

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

Has there been a change in the amount or adequacy of physical resources utilized to execute the [question("value"), id="56"] program at [question("value"), id="99"] since the previous annual report was completed? *

- Yes
- No

Describe the resource changes that have occurred using the space below

III.B - Resources - Personnel (General)

Enter the total number of full-time faculty members contributing to the O&P Program:*

Enter the total number of part-time faculty members contributing at least 0.1 FTE or 4 hours per week to the O&P Program:*

Were any of the faculty members listed above hired during the academic year?*

- Yes
- No

Enter the total number of full-time staff members contributing to the O&P Program:*

Enter the total number of part-time staff members contributing to the O&P Program:*

III.B - Resources - Personnel (Continued)

Enter the total number of full-time faculty members that were hired during the academic year

Enter the total number of part-time faculty members (employed at a level of .1 FTE or higher) that were hired during the academic year

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

III.C - Curriculum

Were any new courses added to the O&P program during the academic year?*

- Yes
- No

Were any courses in the O&P Program changed significantly (over 50% of the course content) during the academic year?*

- Yes
- No

Enter the number of courses that were added or significantly changed during the academic year*

New / Changed Course Information

This page is only presented to institutions that answered “Yes” to the question inquiring about a changes to a course or additional courses being added on the previous page. It is repeated once for each course changed/added.

Course Title*

Course Number*

Primary faculty member*

- First Name:
- Last Name:
- Title:
- Email Address:
- Phone Number:

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

Provide a copy of the course syllabus in PDF format

IV. Student and Graduate Evaluation and Assessment - Outcomes Assessment

First Year Student Enrollment & Retention

This question block is repeated once for each concurrent cohort present

Please complete the following fields for the cohort that matriculated during the academic year

- Enrollment Date:
 - "On-time" Graduation Date:
 - Number of applicants:
 - Number of students initially enrolled:
 - Number of students added to the 1st year cohort after the enrollment date listed above:
 - Number of 1st year students that did not complete the [question("value"), id="1111"] academic year:
 - The number of applicants that applied outside of the OPRESCAS system:
-

Attrition Information

1st Year Student Attrition

This question block is repeated once for each concurrent cohort present if attrition was documented above

On the previous page you have identified that XX students did not complete the academic year. For each reason listed below, enter the number of students who did not complete the academic year.

- Non-Academic Reasons
- Failure to Pass Coursework
- Failure to Maintain Minimum Aggregate GPA
- Other

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

Comments:

Positive Placement Data

Provide the following information for the cohort that graduated during the during the academic year

- Total Number of Graduates:
- Total Number of Graduates that attained "Positive Placement" within 6 months of graduation:
- Total number of graduates that did not attain positive placement within 6 months of graduation (including individuals who failed to follow-up):

Comments:

Positive Placement Data (Continued)

On the previous page you identified that XX graduates during the academic year did not attain positive placement or were lost to follow-up. For each reason listed below, identify the number of individuals that were not positively placed for that reason. If you have individuals not placed for "Other" reasons, please provide a brief explanation in the comments box.

This question block is only shown if 100% positive placement was not documented

- Inability to find a residency position or other placement in O&P
- No longer wishes to pursue a career in O&P
- Health / personal reasons (including child-rearing)
- Lost to follow-up
- Other

Comments:

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

ABC Board Exam Performance - Practitioner Annual Report

ABC Orthotic Written Exam

Only enter data for your specific institution using whole numbers. You do not need to report aggregate data across all accredited O&P programs.

Exam performance information is provided annually by ABC during the summer. Please use the report that was provided during the academic year.

	First Time Exam Takers	Repeat Exam Takers	All Exam Takers
Number of Candidate Attempts			
Number of Candidates Passing			
Number of Candidates Failing			

Comments:

ABC Orthotic Written Simulation Exam

Only enter data for your specific institution using whole numbers. You do not need to report aggregate data across all accredited O&P programs.

Exam performance information is provided annually by ABC during the summer. Please use the report that was provided during the academic year.

	First Time Exam Takers	Repeat Exam Takers	All Exam Takers
--	------------------------	--------------------	-----------------

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

Number of Candidate Attempts			
Number of Candidates Passing			
Number of Candidates Failing			

Comments:

ABC Orthotic Clinical Patient Management Exam

Only enter data for your specific institution using whole numbers. You do not need to report aggregate data across all accredited O&P programs.

Exam performance information is provided annually by ABC during the summer. Please use the report that was provided during the academic year.

	First Time Exam Takers	Repeat Exam Takers	All Exam Takers
Number of Candidate Attempts			
Number of Candidates Passing			
Number of Candidates Failing			

Comments:

ABC Prosthetic Written Exam

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

Only enter data for your specific institution using whole numbers. You do not need to report aggregate data across all accredited O&P programs.

Exam performance information is provided annually by ABC during the summer. Please use the report that was provided during the academic year.

	First Time Exam Takers	Repeat Exam Takers	All Exam Takers
Number of Candidate Attempts			
Number of Candidates Passing			
Number of Candidates Failing			

Comments:

ABC Prosthetic Written Simulation Exam

Only enter data for your specific institution using whole numbers. You do not need to report aggregate data across all accredited O&P programs.

Exam performance information is provided annually by ABC during the summer. Please use the report that was provided during the academic year.

	First Time Exam Takers	Repeat Exam Takers	All Exam Takers
Number of Candidate Attempts			
Number of Candidates Passing			

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

Number of Candidates Failing			
------------------------------	--	--	--

Comments:

ABC Prosthetic Clinical Patient Management Exam

Only enter data for your specific institution using whole numbers. You do not need to report aggregate data across all accredited O&P programs.

Exam performance information is provided annually by ABC during the summer. Please use the report that was provided during the academic year.

	First Time Exam Takers	Repeat Exam Takers	All Exam Takers
Number of Candidate Attempts			
Number of Candidates Passing			
Number of Candidates Failing			

Comments:

ABC Board Exam Performance - Technician Annual Report

ABC Orthotic Technician Written Exam

Only enter data for your specific institution using whole numbers. You do not need to report aggregate data across all accredited O&P programs.

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

Exam performance information is provided annually by ABC during the summer. Please use the report that was provided during the academic year.

	First Time Exam Takers	Repeat Exam Takers	All Exam Takers
Number of Candidate Attempts			
Number of Candidates Passing			
Number of Candidates Failing			

Comments:

ABC Prosthetic Technician Written Exam

Only enter data for exam attempts that occurred during the year that this annual report covers.

Exam performance information is provided annually by ABC during the summer. Please use the report that was provided during the academic year.

	First Time Exam Takers	Repeat Exam Takers	All Exam Takers
Number of Candidate Attempts			
Number of Candidates Passing			
Number of Candidates Failing			

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

Comments:

Graduate & Employer Satisfaction Surveys

Provide the following information about the graduate surveys administered during the academic year

- How many surveys were sent out to graduates during the academic year list above?
- How many surveys were returned by graduates during the academic year?

Which format(s) were used to distributing the graduate surveys?

Choose all that apply

- Paper-based (physically provided to the graduate)
- Electronic (using a web-based or kiosk based system)
- Other - Write In (Required): *

Provide the following information about the employer surveys administered during the [question('value'), id='1111'] academic year

- How many surveys were sent out to employers during the academic year list above?
- How many surveys were returned by employers during the academic year?

Which format(s) were used to distributing the employer surveys?

Choose all that apply

- Paper-based (physically provided to the graduate)
- Electronic (using a web-based or kiosk based system)
- Other - Write In (Required): *

Upload a copy of the blank survey instrument provided to graduates in PDF format. Please note that this tool can only accept files up to 10mb in size. You may need to compress the PDF depending on formatting.

Upload a copy of the blank survey instrument provided to employers in PDF format. Please note that this tool can only accept files up to 10mb in size. You may need to compress the PDF depending on formatting.

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

Graduate & Employer Satisfaction Survey Responses

Provide data requested from the students that graduated in each academic year listed at the top of each column. The sum of rows 3-5 should equal the value entered in row 2 for the identified academic year.

of graduate surveys sent out
of graduate surveys completed
of graduate surveys with mostly negative feedback
of graduate surveys with mostly neutral feedback
of graduate surveys with mostly positive feedback

Upload a PDF file of the graduate survey results. The PDF may be in aggregate report format, but should provide the text and results for each question including any open-ended text responses when that question format is used. You may upload up to 10 separate files.

Provide a brief narrative summarizing the employer survey results based upon the data previously entered and PDF documents uploaded.

Provide data requested from the employers of students that graduated in each academic year listed at the top of each column. The sum of rows 3-5 should equal the value entered in row 2 for identified academic year.

of employer surveys sent out
of employer surveys completed

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

of employer surveys with mostly negative feedback
of employer surveys with mostly neutral feedback
of employer surveys with mostly positive feedback

Upload a PDF file of the employer survey results. The PDF may be in aggregate report format, but should provide the text and results for each question including any open-ended text responses when that question format is used. You may upload up to 10 separate files.

Provide a brief narrative summarizing the employer survey results based upon the data previously entered and PDF documents uploaded.

Student Demographics

This page is NEW to the Accreditation Management Portal (AMP) but prompts for CHEA / DOE required information typically provided for regional accreditation as well

1st Year Student Race / Ethnic Origin

The following demographic questions are repeated once for each concurrent cohort

Enter the number of students enrolled in the cohort of the following race or ethnic origin

- Hispanic/Latino of Any Race
- American Indian/Alaskan Native
- Asian
- Black or African-American
- Native Hawaiian or Other Pacific Islander
- White (not of Hispanic/Latino Race)
- Two or More Races
- Unknown

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

1st Year Student Gender

Enter the number of students enrolled in the cohort of the following gender

- Male
- Female
- Other
- Unknown

1st Year Student Age

Enter the average age for students enrolled in the 1st year cohort

V - Fair Practices

Since the previous annual report was submitted, have any changes been made to the following aspects of program and/or sponsoring institution in its execution of publications/disclose, lawful and discriminatory practices, safeguards, record keeping policies or agreements? *

	Yes	No
University catalogs / bulletins		
Information for prospective/current students		
Academic calendars		
Student grievance procedures		
Admissions policies		
Non-discriminatory policies		
Health and safety requirements for students / faculty		
Student record keeping		

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

Provide a brief explanation about the changes that have occurred in relation to the topics discussed above during the academic year

You will have the ability to upload supporting documentation once text is entered into this field

OR

If you wish to provide additional information about the changes identified above, you may upload supporting documentation in the form of a PDF, MS Word, or MS Excel Document. Up to 10 files may be attached, each up to 10MB in size.

Core Curriculum Guide (Appendix B) - Orthotist / Prosthetist - Self Study

Orthotist / Prosthetist - Core Curriculum Guide (Appendix B) - Annual Report

This page is only presented to institutions delivering O&P Practitioner Programs

Identify if the [question("value"), id="56"] program is in compliance with the following standards defined in the Core Curriculum Guide*

	Met	Partially Met	Not Met
C.1.0 - Foundational Content Areas			
C.2.0 - Patient Assessment			
C.3.0 - Formulation of a Treatment Plan			

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

C.4.0 - Implementation of a Treatment Plan			
C.5.0 - Follow-Up			
C.6.0 - Practice Management			
C.7.0 - Professional / Personal Development			
C.8.0 - Experience in a Patient Care Setting			

Comments:

Identify if the O&P program is in compliance with the follow standards defined in the Core Curriculum Guide*

	Met	Partially Met	Not Met
C.9.1 - Comprehension and Evaluation			
C.9.2 - Prefabricated and Custom Fit Orthoses			
C.9.3 - Custom Fabricated and Custom Fit Orthoses / Prostheses			

Comments:

Enter the total number of times a student performs comprehensive management (including evaluation, recommendation, implementation, material selection, application of biomechanical principles, fitting/adjustment, troubleshooting, and evaluation of outcomes) with the following custom fabricated orthoses/prostheses

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

Only enter whole numbers. If comprehensive management is not performed for a specific orthosis/prosthesis please enter zero "0" in the space provided *

- Functional OR Accomodative FO:
- UCBL (Including Carlson Modification):
- Shoe Modification - Rocker:
- Thermoplastic AFO (Including articulated & non-articulated):
- Thermoplastic KAFO (With articulated knee joints):
- LSO OR TLSO:
- Transradial/Wrist Disarticulation Prosthesis- Anatomical Suspension:
- Transradial/Wrist Disarticulation Prosthesis - Harness Suspension:
- Transhumeral Prosthesis (Including simulated) - Dual Control Harness:
- Patellar Tendon Bearing TT Prosthesis:
- Total Surface Bearing TT Prosthesis:
- Ischial Containment TF Prosthesis:

Identify if the O&P Program is in compliance with standard D.1.0 - Research/Capstone Project? *

- Met
- Partially Met
- Not Met

Comments:

Orthotic / Prosthetic Technician - Core Curriculum Guide (Appendix B) - Annual Report

This page is only presented to institutions delivering O&P Technician Programs

Identify if the O&P program is in compliance with the following standards defined in the Core Curriculum Guide*

	Met	Partially Met	Not Met

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

C.1.0 - Lower Extremity Orthoses			
C.2.0 - Upper Extremity Orthoses			
C.3.0 - Spinal Orthoses			
C.4.0 - Computer Aided Design & Manufacturing (Orthotic Applications)			
C.5.0 - Lower Extremity Prostheses			
C.6.0 - Upper Extremity Prostheses			
C.7.0 - Computer Aided Design & Manufacturing (Prosthetic Applications)			
D.1.0 - Practicum Content			

Comments:

Enter the total number of times a student performs fabrication of the following custom fabricated orthoses/prostheses

*Only enter whole numbers. If fabrication of a specific orthosis/prosthesis is not performed, please enter zero "0" in the space provided **

- Functional OR Accomodative FO:
- UCBL:
- Non-articulated Thermoplastic AFO:
- Articulated Thermoplastic AFO:
- Metal AFO with Attached Shoe:
- Metal KAFO:
- Thermoplastic KAFO:
- Plastic and/or Metal Wrist Hand Orthosis:
- Plastic Bivalve TLSO or LSO:
- Single Opening TLSO or LSO:

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

- Symes Medial Opening or Expandable Wall Prostheses:
 - Exoskeletal TT Prosthesis:
 - Endoskeletal TT Prosthesis:
 - TT Soft Interface:
 - TT Diagnostic Sockets:
 - Endoskeletal TF Prosthesis:
 - TF Diagnostic Sockets:
 - Transradial/Wrist Disarticulation Prosthesis:
 - Transhumeral /Elbow Disarticulation Prosthesis:
 - Control Harness and Cabling Systems:
-

Supervised Clinical/Technical Experience

Enter the total number of clinical / technical hours a student enrolled in the O&P Program must complete in order to meet graduation requirements*

Enter the total number of clinical/technical sites that have a formal agreement in place with the O&P Program

What is the minimum level of autonomy that a student enrolled in the O&P Program is expected to function at during their final off-campus placement/rotation? *

- Observe
 - Assist
 - Perform
-

Public Disclosure Verification

Visit the CAAHEP website by selecting the link below and verify that the posted information is correct.

<https://www.caahep.org/Students/Find-a-Program.aspx>

Is the information posted about the [question('value'), id='56'] program at [question('value'), id='99'] correct?*

This document is intended for review purposes only. Self-study submissions are only accepted using the online Accreditation Management Portal (AMP).

- Yes
- No

Identify the correct information that you wish to have shared via the CAAHEP website using the space below:*

Visit the NCOPE website by selecting the link below and verify that the posted information is correct.

Orthotist/Prosthetist Programs: <http://ncope.org/accredited/practitioner/>

Technician Programs: <http://ncope.org/accredited/technician/>

Is the information posted about the [question('value'), id='56'] program at [question('value'), id='99'] correct?*

- Yes
- No

Identify the correct information that you wish to have shared via the NCOPE website using the space below:*

Enter the public website address where the [question('value'), id='56'] Program shares required outcome information:*

Does the website listed about contain programmatic outcome information for the academic year?*

- Yes
- No

Identify the outcome information posted to the URL listed above*

- Graduate Satisfaction
 - Employer Satisfaction
 - Graduate Placement
 - Board Exam Performance
 - Other - Write In (Required): *
-