



**Commission on Accreditation in Physical Therapy Education  
American Physical Therapy Association**

**SUMMARY OF ACTION**

Doctor of Physical Therapy Program  
Indiana State University  
Sycamore Center for Wellness & Applied Medicine  
567 North 5th Street, Room 248  
Terre Haute, IN 47809

On May 2, 2018, the Commission on Accreditation in Physical Therapy Education made the following decision regarding the physical therapist education program at Indiana State University.

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| <b>Status:</b>                             | <b>ACCREDITATION</b>  |
| <b>Action Taken:</b>                       | Grant Accreditation   |
| <b>Effective Date:</b>                     | May 2, 2018   |
| <b>Information Used to Make Decisions:</b> | Self-study Report received 8/31/2017<br>Visit Report with Institution Response received 1/9/2018<br>Comments from the Program Director<br>Comments from the Team Leader<br>Additional Materials received 3/25/2018 regarding faculty member Idlewine and 3/26/2018 regarding clinical education information for the charter class |

**Reason for Decision:** The Commission based its decision to grant accreditation status [for a period of five years] on the program's general compliance with the Standards and Required Elements and on the expectation that the program can and will, within the next two years, bring itself into compliance with the following elements noted in the attached Commission's Findings: 4K, 6L3, 6L4, 7D23, 7D26, 7D27a, 7D29, 7D38, 7D39, and 7D40.

That compliance must be appropriately documented in a Compliance Report which will be used by the Commission to determine compliance with the elements noted in the Findings and to monitor compliance with all the required elements.

The program is accredited during this period to implement the program described in the Self-study Report, especially as it relates to enrollment and resource levels consistent with the admission of one cohort of students annually unless and until the program seeks approval of substantive change(s).

**Graduate Performance:** Because the program has not yet graduated its first class, the Commission is unable to comment at this time on student achievement.

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| <b>Next Activity:</b> | Compliance Report due August 15, 2018<br>Request for Additional Information due March 1, 2019 |
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## NOTICES

### SCOPE OF COMMISSION REVIEW

Independent of any long term plans described, or alluded to, by the program in its Self-study Report, the scope of the Commission's review at the time of this decision to grant initial Accreditation was based on actual and verified resources and related considerations, and not on planned or projected program resource levels to address future program changes (e.g., expansion and other program offerings, the number of cohorts admitted annually, etc.). The program is limited to enrolling one cohort annually and to limiting enrollment growth to under 10% of CAPTE set class size. Enrollment growth beyond these limits is a substantive change that requires pre-approval by CAPTE. (See Part 9 of the CAPTE Rules of Practice and Procedure.)

### REQUIRED STATEMENT OF ACCREDITATION STATUS

Once a program has been accredited, and for as long as it remains accredited, the program **MUST** use the statement provided in §8.20 on all educational and promotional materials, including the institution/program web site, where the program's accreditation status is disclosed.

[INSERT Name of Program] at [INSERT Name of Institution] is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 1111 North Fairfax Street, Alexandria, Virginia 22314; telephone: 703-706-3245; email: [accreditation@apta.org](mailto:accreditation@apta.org); website: <http://www.capteonline.org>. If needing to contact the program/institution directly, please call [INSERT Direct Program Phone Number] or email [INSERT Direct Program Email Address].

NOTE: If the institution offers other physical therapy programs not subject to accreditation by CAPTE (e.g., transitional DPT, post-professional degree program, residency or fellowship), the above statement must be edited to clearly indicate that the additional programs are not accredited by CAPTE. Additionally, the information available to the public regarding these programs must clearly state that they are not accredited by CAPTE.

### REQUIRED USE OF "ACCREDITED BY CAPTE" LOGO

Accredited programs are required to include the "Accredited by CAPTE" logo supplied by the Accreditation staff on the program home page or where the program's accreditation information can be found to indicate that CAPTE has accredited the program. If the logo is not on the program's home page, there needs to be easy access to the logo from the program's home page. **Programs are expected to contact the Accreditation staff to obtain instructions for adding the logo to the webpage.** The logo may also be used on other institutional web pages where the program's accreditation status is described. The supplied logo will be protected from use by anyone other than approved users. It may NOT be used, however, on any webpage where its use could imply that CAPTE accredits programs that are not subject to CAPTE accreditation (e.g., post-professional degree programs, residency or fellowships) unless there is clear language that indicates those programs are NOT accredited by CAPTE.

### 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 to be making a good faith effort to come into compliance with the standards and required elements. CAPTE defines a “good faith 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 faith effort has been made and continues to be in effect. During the extension for good faith, probationary accreditation status will be maintained and the program’s progress will be monitored. In no case, however, will an extension for good faith be longer than two years.

### **PUBLIC NOTICE OF REASONS FOR DECISIONS**

Pursuant to expectations of the Council for Higher Education Accreditation, CAPTE provides public notice of the reasons for its decisions to grant candidacy, or grant or reaffirm accreditation. These notices are in addition to the notices of reasons for probation and for final adverse actions as required by the US Department of Education. The front page of this Summary of Action will be used for this purpose.

### **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, 1111 North Fairfax Street, Alexandria, Virginia 22314; 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.**

**Commission’s Findings and Reasons for Decision:**

The Commission on Accreditation in Physical Therapy Education judged the program to be in compliance with all of the Standards and Required Elements for Accreditation of Physical Therapist Education Programs except those noted below:

**The program was judged to be in CONDITIONAL COMPLIANCE with the following required elements. Conditional compliance means that the program has in place a substantial portion, but not all, of the components necessary to meet all aspects of the elements.**

**1. Collective Academic Faculty**

**4K The collective core and associated faculty include an effective blend of individuals with doctoral preparation (including at least 50% of core faculty with academic doctoral degrees) and individuals with clinical specialization sufficient to meet program goals and expected program outcomes as related to program mission, institutional expectations and assigned program responsibilities.**

According to the Self-study Report and the Visit Report with Institution Response, the program currently has six core faculty members, with two vacant positions. Two out of the six (33%) core faculty members hold an academic doctoral degree (Tapley & Coover). Three of the core faculty (Harper-Hanigan, Millspaugh-Storms, & Houser) are currently enrolled in academic doctoral degrees. All six faculty have either a clinical or academic doctoral degree. Five of the core faculty members (Tapley H, Tapley S, Houser, Millspaugh-Storms, & Harper-Hanigan) are physical therapists who are licensed in Indiana. The Commission’s expectation for this element is that at least 50% of the core faculty have an academic doctoral degree.

In the Compliance Report due August 15, 2018, provide evidence that the program has at least 50% of its core faculty holding an academic doctoral degree. If appropriate, provide a detailed plan with timelines for how the program plans to come into compliance with this element. If new faculty are hired, provide an updated element 4K narrative which describes the effectiveness of the core faculty blend to meet program goals and expected outcomes as related to program mission and institutional expectations, and to meet assigned program responsibilities. Also, include a CV for each new hire.

**INSTITUTION RESPONSE:**

**2. 6L The curriculum plan includes clinical education experiences<sup>1</sup> for each student that encompass, but are not limited to:**

**6L3 involvement in interprofessional practice<sup>2</sup>**

The Visit Report with Institution Response states interprofessional practice has not formally been included in the program’s curriculum, and that interviews with program faculty and administration indicated expectations that interprofessional practice would be developed and implemented in the

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<sup>1</sup> **Clinical education experiences:** That aspect of the professional curriculum during which student learning occurs directly as a function of being immersed within physical therapist practice. These experiences comprise all of the formal and practical “real-life” learning experiences provided for students to apply classroom knowledge, skills, and professional behaviors in the clinical environment.

<sup>2</sup> **Interprofessional practice:** “When multiple health workers from different professional backgrounds work together with patients, families, careers [sic], and communities to deliver the highest quality of care” (WHO, 2010).

future. The institution also indicated that there have been limited interprofessional activities, but that they plan to expand interprofessional activities in the near future.

In the Compliance Report due August 15, 2018, describe the program's expectation for opportunities for involvement in interprofessional practice during clinical experiences. Also, provide evidence that students have opportunities for interprofessional practice.

**INSTITUTION RESPONSE:**

3. **6L4 [The curriculum plan includes clinical education experiences<sup>3</sup> for each student that encompass, but are not limited to:] direction and supervision of the physical therapist assistant and other physical therapy personnel.**

The Self-study Report in response to this element stated: "ISU DPT students are clearly meeting the expectation for interprofessional involvement in nearly all CE practice settings, as noted on the CI and Student midterm interviews." However, this element relates to the direction and supervision of the physical therapist assistant and other physical therapy personnel. The Visit Report with Institution Response indicated "Most students gain the exposure to work with PTAs in their clinical experiences."

In the Compliance Report due August 15, 2018, describe the program's expectation for opportunities for direction and supervision of physical therapist assistants and other physical therapy personnel during clinical experiences. In addition, provide evidence that students have an opportunity for direction and supervision of physical therapist assistants and other physical therapy personnel.

**INSTITUTION RESPONSE:**

4. **7D The physical therapist professional curriculum includes content and learning experiences designed to prepare students to achieve educational outcomes required for initial practice of physical therapy. Courses within the curriculum include content designed to prepare program students to:**

**Prognosis and Plan of Care**

**7D23 Determine patient/client goals and expected outcomes within available resources (including applicable payment sources) and specify expected length of time to achieve the goals and outcomes.**

After review of the Self-study Report, the Commission notes the description related to objectives and strategies to build competence in students' ability to determine patient/client goals and expected outcomes. However, the examples and descriptions do not provide information regarding the program's curriculum content to address the students' ability to consider available resources including applicable payment resources in the planning process.

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<sup>3</sup> **Clinical education experiences:** That aspect of the professional curriculum during which student learning occurs directly as a function of being immersed within physical therapist practice. These experiences comprise all of the formal and practical "real-life" learning experiences provided for students to apply classroom knowledge, skills, and professional behaviors in the clinical environment.

In the Compliance Report due August 15, 2018, provide evidence that the curriculum has course objectives and learning experiences related to Element 7D23. The evidence should describe where the content is presented in the curriculum and provide example(s)/descriptions(s) of the learning experiences that are designed to meet the practice expectations (i.e., describe where and how the content is taught throughout the curriculum). In addition, it should provide a maximum of five examples of course objectives that demonstrate the highest expected level of student performance. Also, include outcome data, where available, that demonstrates the level of actual student achievement.

**INSTITUTION RESPONSE:**

5. **7D26 [The physical therapist professional curriculum includes content and learning experiences designed to prepare students to achieve educational outcomes required for initial practice of physical therapy. Courses within the curriculum include content designed to prepare program students to] Create a discontinuation of episode of care plan that optimizes success for the patient in moving along the continuum of care.**

The Commission notes the Self-study Report describes objectives in response to this standard that are related to building student competence, primarily to refer patients to other providers when appropriate, and establish time-oriented goals and outcomes. The response in the Self-study Report to this specific standard does not provide evidence of student-oriented objectives and activities to address the discontinuation of the episode of the care plan, which optimizes success for the patient moving along the continuum of care.

In the Compliance Report due August 15, 2018, provide evidence that the curriculum has course objectives and learning experiences related to Element 7D26. The evidence should describe where the content is presented in the curriculum and provide example(s)/descriptions(s) of the learning experiences that are designed to meet the practice expectations (i.e., describe where and how the content is taught throughout the curriculum). In addition, it should provide a maximum of five examples of course objectives that demonstrate the highest expected level of student performance. Also, include outcome data, where available, that demonstrates the level of actual student achievement.

**INSTITUTION RESPONSE:**

6. **Intervention<sup>4</sup>**  
**7D27a [The physical therapist professional curriculum includes content and learning experiences designed to prepare students to achieve educational outcomes required for initial practice of physical therapy. Courses within the curriculum include content designed to prepare program students to] Competently perform physical therapy interventions to achieve patient/client goals and outcomes. Interventions include: Airway Clearance Techniques**

After review of the Self-study Report, the Commission notes the program's response to this element includes a description of the program's preparation of the students to perform wound care

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<sup>4</sup> **Interventions:** This list is adapted from the *Guide to Physical Therapist Practice (2014)*.

assessment and other general assessments. The objectives and descriptions provided do not address content to prepare students for their role in providing interventions appropriate for airway clearance.

In the Compliance Report due August 15, 2018, provide evidence that the curriculum has course objectives and learning experiences related to Element 7D27a. The evidence should describe where the content is presented in the curriculum and provide example(s)/descriptions(s) of the learning experiences that are designed to meet the practice expectations (i.e., describe where and how the content is taught throughout the curriculum). In addition, it should provide a maximum of five examples of course objectives that demonstrate the highest expected level of student performance. Also, include outcome data, where available, that demonstrates the level of actual student achievement.

**INSTITUTION RESPONSE:**

7. **7D29 [The physical therapist professional curriculum includes content and learning experiences designed to prepare students to achieve educational outcomes required for initial practice of physical therapy. Courses within the curriculum include content designed to prepare program students to] Delineate, communicate and supervise those areas of the plan of care that will be directed to the PTA.**

The Commission noted that none of the curriculum objectives provided as evidence of compliance for this element in the Self-study Report specifically described how students are prepared for their responsibility to delineate, communicate, and supervise those areas of the plan of care that will be directed to the PTA.

In the Compliance Report due August 15, 2018, provide evidence that the curriculum has course objectives and learning experiences related to Element 7D29. The evidence should describe where the content is presented in the curriculum and provide example(s)/descriptions(s) of the learning experiences that are designed to meet the practice expectations (i.e., describe where and how the content is taught throughout the curriculum). In addition, it should provide a maximum of five examples of course objectives that demonstrate the highest expected level of student performance. Also, include outcome data, where available, that demonstrates the level of actual student achievement.

**INSTITUTION RESPONSE:**

8. **7D38 [The physical therapist professional curriculum includes content and learning experiences designed to prepare students to achieve educational outcomes required for initial practice of physical therapy. Courses within the curriculum include content designed to prepare program students to] Participate in activities for ongoing assessment and improvement of quality services.**

The Commission noted that in the Self-study Report the program's response to this element primarily described the preparation of students for their role in addressing health promotion and wellness.

In the Compliance Report due August 15, 2018, provide evidence that the curriculum has course objectives and learning experiences related to Element 7D38. The evidence should describe where the content is presented in the curriculum and provide example(s)/descriptions(s) of the learning experiences that are designed to meet the practice expectations (i.e., describe where and how the content is taught throughout the curriculum). In addition, it should provide a maximum of five examples of course objectives that demonstrate the highest expected level of student performance. Also, include outcome data, where available, that demonstrates the level of actual student achievement.

**INSTITUTION RESPONSE:**

9. **7D39 [The physical therapist professional curriculum includes content and learning experiences designed to prepare students to achieve educational outcomes required for initial practice of physical therapy. Courses within the curriculum include content designed to prepare program students to] Participate in patient-centered interprofessional collaborative practice.**

In the Self-study Report, the learning objectives provided for PHTH 724, 725, and 885, do not appear to directly address this element. The Commission noted the program's response to this element described the responsibility of the physical therapist to deliver culturally competent care, refer to other professionals as appropriate, and communicate effectively. The preponderance of written objectives do not address the preparation of the students to participate in interprofessional collaborative practice.

In the Compliance Report due August 15, 2018, provide evidence that the curriculum has course objectives and learning experiences related to Element 7D39. The evidence should describe where the content is presented in the curriculum and provide example(s)/descriptions(s) of the learning experiences that are designed to meet the practice expectations (i.e., describe where and how the content is taught throughout the curriculum). In addition, it should provide a maximum of five examples of course objectives that demonstrate the highest expected level of student performance. Also, include outcome data, where available, that demonstrates the level of actual student achievement.

**INSTITUTION RESPONSE:**

10. **7D40 [The physical therapist professional curriculum includes content and learning experiences designed to prepare students to achieve educational outcomes required for initial practice of physical therapy. Courses within the curriculum include content designed to prepare program students to] Use health informatics in the health care environment.**

After review of the Self-Study Report, the Commission notes that the program's response to this element does not provide evidence of objectives and learning experiences that meet the definition of health informatics, as provided in the Standards and Required Elements for Accreditation of Physical Therapist Education Programs.

In the Compliance Report due August 15, 2018, provide evidence that the curriculum has course objectives and learning experiences related to Element 7D40. The evidence should describe where

the content is presented in the curriculum and provide example(s)/descriptions(s) of the learning experiences that are designed to meet the practice expectations (i.e., describe where and how the content is taught throughout the curriculum). In addition, it should provide a maximum of five examples of course objectives that demonstrate the highest expected level of student performance. Also, include outcome data, where available, that demonstrates the level of actual student achievement. The course objectives, learning experiences and student outcomes should be compatible with the definition of health informatics provided by the U.S. National Library of Medicine.

**INSTITUTION RESPONSE:**

**Request for Additional Information**

Since the program has not yet graduated its first cohort, the Commission is unable to determine compliance with the following required elements and therefore requests additional information.

- 1. 1C The program meets required student achievement measures<sup>5</sup> and its mission and goals as demonstrated by actual program outcomes.**

**1C1 Graduation rates<sup>6</sup> are at least 80% averaged over two years. If the program admits more than one cohort per year, the two year graduation rate for each cohort must be at least 80%. When two years of data are not available, the one-year graduation rate must be sufficient to allow the program to meet the expectation for a two-year graduation rate of at least 80%.**

Since the program has yet to graduate its first class, the Commission is unable to determine compliance with this element at this time.

In the Compliance Report due March 1, 2019, provide the Graduation Rate Table for the charter class and the Retention Rate Table for all current cohorts. Forms are located in the Self-study Report Instructions and Forms packet.

**INSTITUTION RESPONSE:**

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<sup>5</sup> **Graduate and Student Achievement Measures:** The measures of outcome required by USDE (graduation rate, licensure pass rate, employment rate).

<sup>6</sup> **Graduation Rate:** The percentage of students who are matriculated in the first course in the professional program after the drop/add period and who complete the program.

2. **1C2 Ultimate licensure pass rates<sup>7</sup> are at least 85%, averaged over two years. If the program admits more than one cohort per year, the ultimate two-year licensure pass rate for each cohort must be at least 85%. When two years of data are not available, the one-year ultimate rate must be sufficient to allow the program to meet the expectation for an ultimate two-year licensure pass rate of at least 85%.**

Since the program has yet to graduate its first class, the Commission is unable to determine compliance with this element at this time.

In the Compliance Report due March 1, 2019, provide the number of graduates from the charter class who took the NPTE, the number of graduates who passed on the first attempt, and the number of graduates who ultimately passed the licensure exam. Calculate the first-time and ultimate licensure pass rates for the charter class. Note: CAPTE will also receive and use the most relevant quarterly FSBPT licensure pass rate report.

**INSTITUTION RESPONSE:**

3. **1C3 Employment rates<sup>8</sup> are at least 90%, averaged over two years. If the program admits more than one cohort per year, the two year employment rate for each cohort must be at least 90%. When two years of data are not available, the one-year employment rate must be sufficient to allow the program to meet the expectation for a two-year employment rate of at least 90%.**

Since the program has yet to graduate its first class, the Commission is unable to determine compliance with this element at this time.

In the Compliance Report due March 1, 2019, provide the employment rate for the charter class based on the number employed within one year of graduation, for those that were seeking employment.

**INSTITUTION RESPONSE:**

4. **1C4 Students demonstrate entry-level clinical performance prior to graduation.**

Review of the Self-study Report, Visit Report with Institution Response, CE Analysis of Student Performance, and CE Student Performance Summary indicates that students are progressing towards achieving entry-level clinical performance. Since the final clinical rotation has not occurred, complete data is not available at this time.

In the Compliance Report due March 1, 2019, provide evidence that all students in the charter class demonstrated entry-level clinical performance prior to graduation. Evidence should include but is not limited to, a summary report of the final assessment for all students in the charter class at the conclusion of the last clinical experience.

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<sup>7</sup> **Licensure pass rate:** The percentage of graduates who take and successfully pass the National Physical Therapy Examination (NPTE). Rates are considered to be stabilized one year after graduation.

<sup>8</sup> **Employment rate:** The percentage of graduates who sought employment that were employed (full-time or part-time) as a physical therapist within 1 year following graduation.

**INSTITUTION RESPONSE:**

**5. 1C5 The program graduates meet the expected outcomes as defined by the program.**

Since the first class has not yet graduated, the program does not have data to demonstrate that graduates are meeting the expected outcomes of the program. Therefore, the Commission is not yet able to determine compliance with this element.

In the Compliance Report due March 1, 2019, list the expected graduate outcomes. If the outcomes are not written in measurable terms, provide the indicators that, if met, would demonstrate meeting the expected outcome. Provide evidence that the graduates meet the expected outcomes defined by the program.

**INSTITUTION RESPONSE:**

**Consultative Comments:**

1. In the materials provided, the Commission noted that one faculty member holds a post-professional Master's degree in PT rather than a doctoral degree. Please note that CAPTE will begin enforcing the requirement for doctoral preparation of all core faculty effective January 1, 2020, except for individuals who are enrolled in an academic doctoral degree program on that date, in which case the effective date will be extended to December 31, 2025; and that this will be monitored in the Annual Accreditation Report. (Element 4A)
2. Although the majority of course objectives are written in measurable, behavioral terms, the course syllabi for most courses also include objectives that use verbs that are not measurable (e.g., understand). Additionally, many of the objectives are low level (e.g., describe, demonstrate, name, identify). The Commission encourages the program to develop a mechanism to review and revise course objectives so that they reflect the depth and breadth of expected course outcomes and entry-level practice. (Element 6H)
3. The Commission noted that the majority of curriculum content the program included in the Self-study Report to demonstrate compliance with element 7D25 are not specifically related to the physical therapist's role to direct the physical therapist assistant in the context of the plan of care. The program should consider formalizing the documented curriculum to specifically address the ability of program graduates to direct patient management activities to the physical therapist assistant that takes into account the PTA's education, training, jurisdictional law, practice guidelines, and facility policies. (Element 7D25)