**Annual Report Worksheet Guide for OT/OTA Programs**

Accreditation is a system for recognizing educational institutions and professional programs affiliated with those institutions for a level of performance, integrity, and quality which entitles them to the confidence of the educational community and the public they serve. ACOTE is recognized as the accrediting agency for occupational therapy education by the United States Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA). Since accreditation status goes through a comprehensive review every 5, 7 or 10 years, USDE recognized institutions and professional programs are encouraged to maintain self-study and improvement mechanisms on a continuous basis, which may include collecting data on student debt, distance education, and demographics. ACOTE utilizes the Annual Reports for this purpose.

**Accredited programs only:** Annual Reports must be electronically submitted via ACOTE Online (<https://acote.aota.org/login>) on or before **February 4**. **Program directors will be notified in January by email when the online version is available for data input.** This version is to provide program directors with a paper version to aid in data collection throughout the year. This is only a general guide as the electronic version may have minor changes year-to-year.

**Please respond using the timeframe indicated in each question and if applicable, include all additional program locations.**

**“REPORTING PERIOD” refers to the calendar year prior (Example: If the Annual Report is due February 4, 2023, the reporting period is 1/1/2022-12/31/2022).**

**“CURRENT/CURRENTLY” refers to information as of the time you complete the survey.**

**“PREVIOUS YEAR” refers to the calendar year prior to the reporting period (Example: If the reporting period is 1/1/2022-12/31/2022, the previous year is 1/1/2021-12/31/2021).**

**SECTION I: General Program Information**

I.1 Degree level (Select only 1 level per survey)

☐ OT Doctorate (OTD)

☐ OT Masters (OTM)

☐ OTA Bachelors (OTA-B)

☐ OTA Associates (OTA)

I.2. Program options currently offered (select one):

☐ Full-time only

☐ Part-time only

☐ Full-time & part-time options

I.3. Did you make any changes in the full-time or part-time program options offered during this reporting period?

☐ Yes

☐ No

If yes, please explain:

I.4. Current program format(s) (check all that apply):

☐ Weekdays

☐ Weekends

☐ Evenings (after 5 pm)

☐ Weekends & evenings

I.5. Did you make any changes in the program formats offered during this reporting period?

☐ Yes

☐ No

If yes, please explain:

l.6.  Not including fieldwork, what percentage of your program is typically offered by distance education? *(This information is available to the public in the Distance Education Lists on ACOTE’s Schools page (*[*https://acoteonline.org/all-schools/*](https://acoteonline.org/all-schools/)*).* Distance education is a delivery method used in whole or in part within an academic program regardless of whether face-to-face, on ground or residential option.

***DISTANCE EDUCATION****: Education that uses one or more of the technologies listed below to deliver instruction to students who are separated from the faculty and to support regular and substantive interaction (as informed by the Higher Learning Commission* [*https://www.hlcommission.org/General/glossary.html*](https://www.hlcommission.org/General/glossary.html)*) between the students and the faculty, either synchronously or asynchronously. The technologies that may be used to offer distance education include:*

1. *the internet;*
2. *one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices;*
3. *audio conference; or*
4. *other media used in a course in conjunction with any of the technologies listed in items 1-3 above.*

☐0%

☐1-24%

☐25-49%

☐50-74%

☐75-100%

I.7. Did you make any permanent changes in the student cohorts admitted during this reporting period?

☐Same/unchanged

☐Reduced class size

☐Increased class size

☐Other, briefly describe:

I.8. For reasons other than COVID, did the percentage of your program offered by distance education format increase in this reporting period in comparison to the prior year?

☐Yes

☐No

If yes, please explain:

I.9. During this reporting period, were any changes made to space available for classrooms, laboratories, offices, or private advising of students?

☐Yes

☐No

If yes, please explain:

I.10.  How many credit hours are required to obtain the occupational therapy or occupational therapy assistant degree program of study? This number should include only the credits within the program and NOT include prerequisites.  
  
Number of credit hours to complete program: \_\_\_\_\_\_\_\_\_

I.11. What system does the program follow?

☐Semester

☐Quarter

☐Trimester

☐Other, please explain: \_\_\_\_\_\_\_\_\_\_

I.12. Beginning when students are considered enrolled in the program:

a. Indicate the length of the program in months, only including the months that classes are in sessions, or the students are on fieldwork (e.g., 24 months): \_\_\_\_\_\_

b. Indicate the total length of time it will take students to complete the program, including the months that students are in class, on fieldwork, or on breaks (e.g., 28 months): \_\_\_\_\_

c. If you are a master’s degree program, are students required to complete their Baccalaureate degree before they start the master’s program? (yes/no) \_\_\_\_\_\_\_\_\_

I.13. Degree currently awarded (check all that apply to the survey you are completing):

☐OTD

☐Combined BS/OTD

☐MOT

☐MSOT

☐MA

☐MS

☐Combined BS/MS

☐BS

☐BA

☐AAS

☐AS

☐AHS

☐Other, please specify:

1.14. Did you make any changes in the degree awarded during this reporting period?

☐Yes

☐No

If yes, please explain:

**Section II:  Applicants and Enrollment**

II.1. What was the number of annual slots available for admission to the program during this reporting period (including all accredited program locations)?

Annual Admission Slots #\_\_\_\_\_\_\_\_\_\_

II.2. For the slots indicated in question II.1, what was the number of completed applications for admission to the program (including all accredited program locations)?

Completed Applications #\_\_\_\_\_\_\_\_\_\_\_

II.3. For the slots indicated in question II.1, what was the number of students who were admitted and entered into the program (including all accredited program locations)?

Students Admitted and Entered #\_\_\_\_\_\_\_\_\_

II.4. The total number of enrollment (head count) of all students CURRENTLY enrolled in this program. Include students from all current cohorts, including fieldwork students if they are considered enrolled during fieldwork. (Include all accredited program locations):

Current Total Enrollment #\_\_\_\_\_\_\_\_\_\_

II.5. Did the total annual student enrollment slots increase by 25% or more from the number last approved by ACOTE through a report (e.g., substantive change reporting, self-study)?

☐Yes

☐No

If yes, please explain and describe the impact on faculty and resources and indicate if this increase was reported to ACOTE as a significant program change:

II.6. The total number of all currently enrolled students in the program that identify with the following USDE categorized racial groups. *Enter numbers only. This question addresses race rather than ethnicity. For example, some African Americans (race) are also Hispanic (ethnicity). The total of the numbers entered must equal the head count of your program, including all locations (total of the numbers entered for question II.4). For none, enter 0. Individual students are not identified.*

American Indian or Alaska Native #\_\_\_\_\_\_\_\_\_\_

Asian #\_\_\_\_\_\_\_\_\_\_

Black or African American #\_\_\_\_\_\_\_\_\_\_

Native Hawaiian or Other Pacific Islander #\_\_\_\_\_\_\_\_\_\_

White #\_\_\_\_\_\_\_\_\_\_

Other #\_\_\_\_\_\_\_\_\_\_

II.7 The total number of all currently enrolled students in the program that identify with the following USDE categorized ethnic groups. *This question addresses ethnicity rather than race. For example, one student could be Hispanic and also white; another could be Hispanic and also African American. The total of the numbers entered must equal the head count of your program, including all locations (total of the numbers entered for question II.6). For none, enter 0. Individual students are not identified.*

   Hispanic/Latino #\_\_\_\_\_\_\_\_\_\_

Non-Hispanic/Non-Latino #\_\_\_\_\_\_\_\_\_\_

   Other #\_\_\_\_\_\_\_\_\_\_

II.8. The gender, as self-identified by the student, of all students currently enrolled in the program (*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 #\_\_\_\_\_\_\_\_\_\_

   Female #\_\_\_\_\_\_\_\_\_\_

    Other #\_\_\_\_\_\_\_\_\_\_

II.9. The number of student admission cycles offered during the reporting period: #\_\_\_\_\_\_\_\_\_\_

II.10. The student cohort size (average number of available slots) per admission cycle: #\_\_\_\_\_\_\_\_\_\_

**SECTION III: Faculty**

III.1. Have there been any faculty changes during this reporting period?

☐Yes

☐No

If yes, please list new faculty, credentials, and title:

III.2. a. The program's average faculty-student ratio in lab courses during this reporting period (for an average ratio of 1 faculty member per 10 students, enter 1:10, for an average ratio of 2 faculty members per 30 students, enter 1:15, for an average ratio of 2.5 faculty members per 30 students, enter 1:12):

Average faculty-student ratio in lab courses \_\_\_\_\_\_\_\_\_\_

b. For ratios greater than 1:15, provide additional information of lab content/structure: \_\_\_\_\_\_

III.3. Are all core faculty who are occupational therapists or occupational therapy assistants currently licensed or otherwise regulated in the state or jurisdiction in which the program is located?

☐Yes

☐No

If no, please explain:

III.4. Do all full-time faculty in the program hold the minimum degree required by 2018 Standard A.2.7 that was awarded by an institution that is accredited by a USDE-recognized institutional accrediting body?

☐Yes

☐No

If no, please explain:

**SECTION IV: Program Operations**

IV.1. Have there been any changes to your budget since your last report?

☐Yes

☐No

If yes, please describe how budget changes have impacted the program during this reporting period: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IV.2. Has your program been awarded federal funds or a grant that requires accreditation by ACOTE?

☐Yes

☐No

IV.3 If you have been awarded federal funds or a grant, please indicate which program:

☐Research Enhancement Award Program (REAP) for Health Professional Schools and Graduate Schools

☐Allied Health Projects Grant Program

☐Other: ­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION V: Outcomes**

V.1 The total number of students who graduated from the program in the previous calendar year

Graduates #\_\_\_\_\_\_\_\_\_\_\_\_\_

N/A New Programs Only \_\_\_\_\_\_\_\_\_\_\_

V.2. Graduation rates for the last three years: (graduate rates are the percentage of students who are enrolled on the institution’s official enrollment date (ten-day census date) at the start of the students’ program and complete the program within the program’s published academic terms).

3 years ago \_\_\_\_\_\_\_\_\_\_\_\_\_\_

2 years ago \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last year\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_ N/A (New Programs Only)

V.3. What percentage of (previous year) graduates are employed in an OT/OTA or OT/OTA-related position?

☐0%

☐1-24%

☐25-49%

☐50-74%

☐75-100%

☐New program - no data available

V.4.  Indicate the employment status of the previous year graduates using the following categories. If your program did not have graduates in the previous year, please enter "0" in each response box and explain in the comment box. Include each graduate in only 1 of the categories below so that the total matches your response to question V.1.

1. Number of graduates employed in an OT/OTA or OT/OTA-related position \_\_
2. Number of graduates employed but not in an OT/OTA or OT/OTA-related position: \_\_
3. Number of graduates still seeking employment in an OT/OTA or OT/OTA-related position: \_\_
4. Number of graduates who will be continuing their higher education: \_\_
5. Number of graduates whose employment status is unknown: \_\_

Total graduates *\_\_\_*

Comment:

V.5. Enter the following information to determine attrition rate (Example: if the Annual Report is due February 4, 2023, (a) the previous academic year is referencing 2021/2022, and (b) is 2022/2023).

1. The total head count of students who newly enrolled in the program in previous academic year : #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. The number of newly enrolled students in previous academic year that returned to the program in the next academic year: #\_\_\_\_\_\_\_\_\_\_\_\_
3. Additional information regarding attrition rate (optional) (for example, explain if a 1-year program or a transitioning program. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

V.6. Fieldwork Level II placement during this reporting period:

1. Total number of FW Level II placements PASSED: #\_\_\_\_\_\_\_\_
2. Total number of FW Level II placements FAILED: #\_\_\_\_\_\_\_\_\_\_
3. Total number of FW Level II placements students were WITHDRAWN (without failing)
4. Comment regarding FW Level II pass rate (optional):

V.7. The median student debt load for all students who graduated from your program in the previous calendar year (year prior to reporting period)?

☐ $0 - 20,000

☐ $20,001 - $40,000

☐ $40,001 - $60,000

☐ $60,001 - $80,000

☐ $80,001 - $100,000

☐ $100,001 - $120,000

☐ $120,001 - $140,000

☐ $140,001 - $160,000

☐ $160,001 - $180,000

☐ $180,001 - $200,000

☐ >$200,000

☐ New program - no data available

Number of students reporting: \_\_\_\_\_\_

Percentage of students reporting (enter as decimal):

V.8. For those students who graduated from your program in the previous calendar year (year prior to reporting period) and are employed in an OT/OTA or OT/OTA-related position, please indicate the average graduate’s full-time starting salary:

☐ $0 - 20,000

☐ $20,001 - $40,000

☐ $40,001 - $60,000

☐ $60,001 - $80,000

☐ $80,001 - $100,000

☐ $100,001 - $120,000

☐ >$120,000

☐ New program - no data available

Number of students reporting: \_\_\_\_\_\_

Percentage of students reporting (enter as decimal):

**SECTION VI: Access to Information**

VI.1. Provide the addresses (URLs) to the following information on your website.   
Please provide a valid URL (e.g., <https://www.yoursite.edu/page.html>):

1. URL of your program's webpage that includes the link to NBCOT Exam Data (<https://secure.nbcot.org/data/schoolstats.aspx>) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. I have verified that this webpage meets all the requirements of 2018 Standard A.4.2: Publication of Program Outcomes.

☐ Yes

☐ No

1. URL of your program’s webpage that includes ACOTE contact information (address, phone number, and web link to ACOTE’s webpage) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. I have verified that this webpage meets all the requirements of 2018 Standard A.4.3: Publication of ACOTE Information.

☐Yes

☐No

1. As required by Standard A.4.4: Published Policies and Procedures, I have verified that the cost of attendance for the OT/OTA program is displayed on the program’s homepage or there is a link to the information posted on the program’s homepage.

☐Yes

☐No

VI.2. Person completing the survey:

First & Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College/University \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Faculty Profile**

Data on all current faculty will be requested in the web-based report, including name, credentials, rank/position title, full-time/part-time status, gender, ethnicity, race, highest degree earned, years of experience, and state licensure information.