

**STAFF ANALYSIS**  
**Proposed Doctor of Physical Therapy**  
**University of Central Florida**  
**(CIP #51.2308)**

**Estimated Costs:**

	Total	% & \$ Current	% & \$ New	% & \$ C&G	Cost per FTE	SUS 2004-2005 Average Costs
Year 1	\$1,004,544	90% \$905,259	10% \$99,285	0% \$0	\$7,727	\$24,174.40 for CIP 51 Doctoral Level
Year 5	\$1,226,659	78% \$953,424	22% \$273,235	0% \$0	\$7,571	

NOTE: The existing MPT is being converted to a DPT in accordance with industry standards.

**Projected FTE and Headcount are:**

	Projected Headcount	Student FTE
First Year	98	130
Second Year	100	137
Third Year	134	162
Fourth Year	134	162
Fifth Year	134	162

*On April 30, 2003, the Florida Board of Governors approved eight criteria, divided into the two categories of Readiness and Accountability, by which implementation authorization of new doctorates were to be assessed. The following is an analysis of the University's proposal based on further delineations of those eight criteria.*

**Page Numbers:**

READINESS					ACCOUNTABILITY		
Mission & Strength	Program Quality	Curriculum	Faculty	Resources	Need	Budget	Productivity
2	2-3	3-4	4-5	5-6	6-7	7-8	8

## **READINESS**

**1. Mission and Strength** - *The goals of the program are aligned with the university's mission and relate to specific institutional strengths. The program is aligned with goals identified within the State University Strategic Plan.*

### **Evidence that the proposed program is responsive to the goals of the current State University System Strategic Plan and the goals of the proposed program relate to the institutional mission statement as contained in the Strategic Plan**

The proposed Doctor of Physical Therapy (DPT) program is consistent with the 2005-2013 SUS Strategic Plan initiative of meeting statewide professional and workforce needs. The Commission on the Accreditation of Physical Therapist Education (CAPTE) supports and promotes the transition of existing MPT programs to DPTs. The American Physical Therapy Association (APTA) supports doctorally prepared practitioners as well. As of March 1, 2007, there are 170 DPT programs and 40 MS/MPT programs within the United States. All existing Masters in Physical Therapy (MPT) programs within the State University System are expected to convert to the DPT in the coming months. DPT's are currently offered in the SUS at the University of Florida and the University of South Florida. This degree is also offered in the independent sector.

### **Evidence of a relationship to specific institutional strengths**

The proposed DPT is consistent with university strengths at all levels. In UCF's 5-year strategic plan, the university sets goals of being recognized for its professional contributions and renowned for its outstanding programs and partnerships. The DPT is located in the College of Health and Public Affairs' (COHPA) Department of Health Professions, which has a goal of educating and training entry-level clinicians and administrators. Feeder programs where undergraduates may prepare for entry into a graduate Physical Therapy program are offered throughout the university. Faculty have strong relationships with administrative and rehabilitation staffs at Florida Hospital and the Orlando Regional Healthcare System. In addition, collaborative relationships have been developed between the Physical Therapy program faculty and the Nursing, Communicative Disorders, Engineering and Psychology faculty and students.

**2. Program Quality** - *Planning activities have been sufficient and responses to any recommendations to program reviews or accreditation activities in the discipline pertinent to the proposed program have been addressed.*

**Evidence that planning for the proposed program has been a collaborative process involving academic units and offices of planning and budgeting at the institutional level, as well as external consultants, representatives of the community, etc.**

Collectively, the planning process has included CAPTE, peer SUS institutions, senior departmental faculty, program faculty, alumni groups, various curricular review committees, the Dean of the College of Health and Public Affairs, the Provost's Office, and other relevant units within the University administration and governance structure. The University began planning the implementation of the DPT informally in 2001, soon after the publication of the American Physical Therapy Association vision statement. Formal planning began in 2004 when a new program director was hired. In the same year, the program director submitted a "white paper" to the College of Health and Public Affairs and the Office of Academic Affairs outlining a rationale and perceived need for a rapid transition to the DPT. The PT faculty and program director were then permitted to work on formal planning documents as required by the BOG. Program alumni were polled in 2004 regarding the need for a transition to the DPT and the transition was discussed with the program's Advisory Council.

**Evidence of an appropriate timetable of events leading to the implementation of the proposed program.**

The timetable for implementation provided anticipates that most, if not all, of the students currently enrolled at UCF in the MSPT program will take advantage of an optional program allowing them to complete the third year of the DPT program. The DPT program adds a third year of curriculum to the MSPT curriculum. If approved, the third year of curriculum will be offered in Fall 2007, allowing students who complete the MSPT program in Spring or Summer 2007 to continue to work toward the DPT. Because this proposal will elevate an existing degree program, faculty and resources will be in place for this timeline.

**Evidence that progress has been made in implementing the recommendations from program reviews or accreditation activities in the discipline pertinent to the proposed program**

The Master of Physical Therapy program is accredited by CAPTE through June 30, 2014 with no outstanding deficiencies, meaning that the program will not need reaccreditation when it transitions to a DPT. A self-study was required by CAPTE during the 2002-2003 academic year. During the 2003 site visit, CAPTE informally recommended a rapid transition to the DPT. At this time, CAPTE also voiced concern over the qualifications of the program's interim director. In January 2004, a new director was hired. In the Spring of 2004, the program also underwent the regularly scheduled SUS Program Review. The Dean recommended improving the quality and capacity of the program. The program has since implemented mentoring programs, hired additional faculty, developed a recruitment plan, and began planning for the DPT.

**3. Curriculum** - *The proposal describes an appropriate and sequenced course of study, admissions and graduation criteria are clearly specified and appropriate, and the appropriateness of specialized accreditation is addressed.*

**Evidence of an appropriate, sequenced, and fully described course of study; evidence of specific learning outcomes and industry driven competencies are discussed for any science and technology programs**

The relationship between curriculum planning and CAPTE standards is carefully outlined. While CAPTE does not (and cannot) specify how or where in a curriculum to teach the required content, it does specify the level of mastery that must be demonstrated in each domain.

The proposal explains that the foundational basic science courses have been “front-end loaded,” and the credit hours and difficulty of the coursework are balanced to help ensure student learning outcomes. Since the primary outcomes are clinical in nature, there is no thesis/dissertation component of the program. Students will be awarded the DPT degree after completing 111 credit hours of course work, including 32 weeks of full-time clinical internship, over the course of nine semesters. Students will move through the program in cohorts. This is consistent with the credit hour expectations of existing DPT programs, both SUS and Independent.

The program will be assessed on a yearly basis using the University’s Operational Excellence and Assessment Support (OEAS) reporting system, which measures achievement against predetermined outcome standards. To be admitted into the DPT program, a student must have a competitive grade point average in either the last 60 hours of bachelors course work or in PT prerequisite coursework, and a competitive GRE score (minimum 1000).

**Evidence that, if appropriate, the bachelor’s and master’s degree programs associated with the program are accredited and that the institution anticipates seeking accreditation for the proposed program if available**

CAPTE accreditation for both the MPT and the DPT uses the same Evaluative Criteria for Accreditation of Education Programs for the Preparation of Physical Therapists. Therefore, accreditation will be transferred from the MPT to the proposed DPT. The program will not need to be reaccredited until the next regularly scheduled accreditation cycle.

**Evidence that the institution has analyzed the feasibility of providing all or a portion of the proposed program through distance learning technologies via its own technological capabilities**

The proposal states that the majority of instruction will be face-to-face on the main campus. Two courses taught by Health Sciences Administration faculty which DPT students are expected to enroll in are currently offered online. The curriculum

maximizes the traditional method of instruction due to its practical and clinical nature.

**4. Faculty** – *A critical mass of faculty will be available to initiate the program based on estimated enrollments, and faculty in the aggregate has the necessary experience and research activity to sustain a doctoral program.*

**Evidence that there is a critical mass of faculty available to initiate the program based on estimated enrollments**

There is a 20:1 student FTE to faculty workload ratio in year one and a 19:1 ratio in year five.

According to Table 1-A, there are currently seventeen professors affiliated with the program, and the total faculty workload is 6.57. Five faculty members will devote 100% (1.0) of their workload to this program. Although only three professors are classified as adjuncts, an additional eight faculty members are not primarily affiliated with the PT program, thus carrying a teaching load for the department of .18 or less. There is a plan to bring in four more PT faculty members, two in May 2007 with a .12 workload each and two in May 2008 with a .85 workload each.

Currently, 64 students are enrolled in the MPT program. 98 DPT students are projected to enroll during the first year. By year five of the program, 134 DPT students are projected to enroll.

**Evidence that the faculty in aggregate have the necessary experience and research activity to sustain the program**

According to DPT Table 1-A, of the five faculty members who will devote 100% of their workload to the program, one (the program director) holds the rank of associate professor and four are instructors. One holds an MA in Biology and Anatomy, two hold DPTs and two hold PhD's in PT. All part time professors hold one or two doctorates (PhD, DPT, EdD, DDS or MD), except one adjunct professor who holds a Master of Health Sciences.

As a point of reference, of the eleven faculty members who were scheduled to devote 100% of their workload to UF's program at its inception, 9 have PhD's and 2 have MHS's. Of those with PhDs, five are associate professors, three are assistant professors and one is a lecturer. The two faculty with MHS's are lecturers. At USF, of the eight full time faculty members in the program at its inception, there were five PhDs, two MS degrees and one EdD. There were two full professors, four assistant professors and one instructor.

**Evidence that, if appropriate, there is a commitment to hire additional faculty in later years, based on estimated enrollments**

The proposal shows the intent to provide good coverage of teaching, advising and scholarly activity as enrollment increases. A plan is in place to hire two new part-time

faculty members at the onset of the program, and two faculty members who will spend the majority of their workload with the PT program after the first year. Compared to its peers in the SUS, this PT program will have a greater number of faculty members participating in the program part-time.

*5. Resources – The necessary library volumes and serials; classroom, teaching laboratory, research laboratory, office space, equipment, clinical and internship sites, fellowships, scholarships, and graduate assistantships will be sufficient to initiate the program.*

**Evidence that library volumes and serials are sufficient to initiate the program**

The proposal states that the UCF library is housed on the main campus, several hundred yards from HPA. Although the proposal states that additions are made annually to the Physical Therapy collection, no information is given with regard to the number of the Physical Therapy library resources available. The College has a medical librarian available by appointment to students and faculty for research assistance.

**Evidence that classroom, teaching laboratory, research laboratory, office, and any other type of space that is necessary for the proposed program is sufficient to initiate the program**

The PT program is located in the Health and Public Affairs building (HPA), where it is allocated over 8,000 square feet for teaching, laboratories, research, faculty and staff offices, and other programmatic functions, according to the proposal. Teaching space includes two 2000+ sq. ft. classrooms. There are additional common-use classroom and laboratory spaces in the HPA which may be used as needed.

**Evidence that necessary and sufficient equipment to initiate the program is available**

The proposal explains that approximately \$200,000 has been spent on new PT-specific equipment since the program moved into the HPA in 1998. Both classrooms have multi-media capability and house state-of-the-art PT-specific equipment. The first space has adjacent lockers/changing rooms for both male and female students. The second room was designed as an anatomical laboratory and has a walk-in cold storage facility with capacity for 12 human cadavers. There is also a dedicated computer laboratory with up to date hardware, software and printing capability available to students.

**Evidence that, if appropriate, fellowships, scholarships, and graduate assistantships are sufficient to initiate the program**

The College, through the Office of Graduate Studies, has a restricted number of Provost's fellowships available yearly. The College also has a number of assistantships for teaching and research purposes available. The proposal states that the program is typically allocated at least two assistantships annually and that the program has two endowed scholarships. It also explains that, due to the shortage of Physical Therapists nationwide, employers will commonly provide scholarships to students in return for a work commitment for a specified amount of time.

**Evidence that, if appropriate, clinical and internship sites have been arranged**

The Physical Therapy program maintains legally binding clinical affiliation agreements with 214 sites. These are 59 acute care hospitals, 22 pediatric hospitals, 22 elderly care facilities, 95 outpatient rehabilitation sites, 11 inpatient rehabilitation sites, 3 federal sites and 2 public school systems. Although the majority of these sites are geographically located in Central Florida, contracts are maintained nationwide, allowing some of the brightest students access to the nation's premier facilities.

**ACCOUNTABILITY**

*6. Need - There is a need for more people to be educated in this program at this level and if the program duplicates other professional and doctorate degrees in Florida, a convincing rationale for doing so is provided.*

**Evidence that there is a need for more people to be educated in this program at this level**

The proposal cites recent employment projections from the Florida Agency for Workforce Innovation that predict an estimated 3.52% upward trend in employment opportunities for Physical Therapists between 2004 and 2012, and that as "Baby Boomer" Physical Therapists retire, a shortfall in Physical Therapists can be expected.

According to the Bureau of Labor Statistics (BLS) *Occupational Outlook Handbook*, employment of physical therapists is expected to grow "much faster than the average" for all occupations through 2014. This level of growth is described as an increase of 27 percent or more. In 2004, physical therapists held about 155,000 jobs. The BLS states that there are currently more physical therapy positions than there are qualified, licensed physical therapists.

**Evidence that the proposed program does not duplicate other SUS or independent college offerings or, otherwise, provides an adequate rationale for doing so**

The proposed program is offered at UF and USF. All SUS schools offering the MPT are planning to convert to the DPT over the course of the next year. The three independent institutions in Florida with Physical Therapy programs, the University of Miami, Nova Southeastern and the University of St. Augustine for Health Sciences, have already converted to the DPT.

**Evidence of reasonable estimates of student headcount and FTE who will major in the proposed program, and commitment to a diverse student body**

The FTE estimates are higher than with other programs, averaging 1.3 FTE/graduate student. Because FTE is calculated using a 1 FTE per 32 annual credit hours formula, FTE will exceed headcount when students earn more than 32 credit hours per year, as in the cohort model this program uses. 98 students are projected to enroll in year 1 and 134 in year 5. There are currently 64 students enrolled in the MPT program, many of whom are expected to continue into the DPT program.

The proposal states that UCF will maintain a diverse student body by recruiting from a variety of in-state and out-of-state schools, including minority institutions with strong feeder programs. In addition, admissions decisions will be based more on academic scores (GPA) than test scores (GRE). Scholarships will be made available to qualified first generation, low-income, and/or minority students. This plan mirrors UNF's DPT diversity plan. The proposal is signed by the university's equal opportunity officer, Ms. Janet Park Balanoff.

*7. **Budget** - A complete and realistic budget for the program is provide, and any redirection of funding will not have an unjustified negative impact on other needed programs.*

**Evidence of a budget for the program that is complete and reasonable, and comparable to the budgets of similar programs at other SUS institutions, and reflective of the proposal's text**

The proposal estimates the costs of the DPT (including existing faculty and staff salaries) at \$1,004,544 in year 1 and \$1,226,659 in year 5. This includes filling two existing but vacant faculty positions for 2006-07 and two new faculty positions starting in 2008. One of the existing positions will be funded by the Center for Lifestyle Medicine. The other existing position and all additional costs of the program will be funded by the College of Health and Public Affairs. The costs for this program are quite low in comparison to the expected expenditures in the SUS for a Grad II program in the 51 CIP, and are slightly lower than the other programs that are coming forward at this time.

**Evidence that, in the event that resources within the institution are redirected to support the new program, such a redirection will not have a negative impact on undergraduate education.**

All resources from the MPT program will be shifted to the new DPT program. This will not have a negative impact on students in the MPT program, as they will be able to transition into the DPT program if they choose to do so. Because Physical Therapy is exclusively a graduate program, there is no anticipated impact on undergraduate education.

*8. **Productivity** - The academic unit(s) associated with this new degree have been productive in teaching, research, and service.*

**Evidence that the academic unit(s) associated with this new degree have been productive in teaching, research, and service.**

The fourteen faculty members listed have a combined 211 years of clinical experience, 231 journal publications, 50 book chapters, and 451 presentations. Only four have experience on thesis/dissertation committees. Eight faculty members are listed as primary or co-investigators to multiple grants and contracts from agencies including the National Science Foundation and the National Institutes of Health.