Considerations in Converting Physical Therapy Programs to the Doctor of Physical Therapy

A Briefing Paper Provided to the Florida Board of Governors

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Division of Colleges and Universities Office of Academic and Student Affairs

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Executive Summary

This paper is written to provide the Florida Board of Governors general information with respect to the concept of converting existing Master in Physical Therapy (MPT) programs to the accreditation-driven Doctor of Physical Therapy (DPT). The most salient points of this paper can be presented in abbreviated form as follows:

- In October 2004, the Board of Governors authorized the first (USF) of several SUS institutions interested in converting their MPT to a DPT as the entry-level professional degree. Board staff received another proposal (UF) in December 2004. The other SUS institutions offering the MPT are FAMU, UCF, FIU, UNF, and FGCU.
- The three independent universities in Florida with programs in Physical Therapy (University of Miami, Nova Southeastern University, and University of St. Augustine for Health Sciences) have already converted to the DPT.
- Transition to the DPT is a growing trend, and the American Physical Therapy Association (APTA) and the Commission on Accreditation in Physical Therapy (CAPTE) both support and promote the transition.
- Physical Therapy is listed as one of the Critical Needs in Health Care on the March 2004 BOG List of Targeted Programs.
- Nationally, the number of DPT programs is increasing, the number of MPTs is decreasing, and more than half of the Physical Therapy programs are at the DPT level.
- > Employment of physical therapists is expected to "grow faster than the average" for all occupations through 2012 (meaning it will increase 21 to 35 percent). Florida employment projections estimate average annual openings at 366, due primarily to growth rather than separation. Such data indicate a need for more Physical Therapists in coming years, and that need is not currently being met by existing programs.
- Converting existing MPTs to DPTs will not increase the number of programs on the SUS Academic Degree Program Inventory; however, the Board of Governors may see offering professional-level doctorates as an issue for some of these institutions.

Physical Therapy Generally

A nation wide transition from baccalaureate to graduate-level education in physical therapy has been ongoing for almost two decades. Changes within the United States healthcare system have led to a dramatic expansion of the roles and responsibilities of today's physical therapists, as they now assume leadership roles in prevention and healthcare maintenance programs, rehabilitation services, and community organizations (USF, 2004).

In October 2004, the Board of Governors authorized the first (USF) of several SUS institutions interested in converting their MPT to a DPT as the entry-level professional degree. Board staff received another proposal (UF) in December 2004. The other SUS institutions offering the MPT are FAMU, UCF, FIU, UNF, and FGCU. All three of the independent universities in Florida with degree programs in Physical Therapy (University of Miami, Nova Southeastern University, and University of St. Augustine for Health Sciences) have already transitioned to the DPT. Converting existing MPTs to DPTs will not increase the number of programs on the SUS Academic Degree Program Inventory; however, conversion may have distinct implications for each university, which requires independent consideration of each proposal. For instance, it may result in an institution's being classified as "doctoral-level" by the regional accrediting body (SACS), or it may require more resources than are defensible.

Physical Therapy is one of the Critical Needs in Health Care listed on the March 2004 BOG List of Targeted Programs. The U.S. Department of Labor, Bureau of Labor Statistics' (BLS), Occupational Outlook Handbook, describes the procedures of physical therapists as involving examination of patients' medical histories to test and measure "strength, range of motion, balance and coordination, posture, muscle performance, respiration, and motor function," as well as determining the ability of patients to be independent and/or to reintegrate into community or workplace following injury or illness. Physical Therapists also develop treatment plans for patients to ensure proper rehabilitation (Bureau of Labor Statistics, U.S. Department of Labor, Occupational Outlook Handbook, 2004-05 Edition).

Recently, several SUS institutions have indicated an interest in converting from the MPT to the DPT as the entry-level professional degree, a move advocated by the physical therapy community. The 2000 APTA House of Delegates endorsed *Vision 2020*, a vision statement for the profession through the next 20 years containing a clear reference to "Doctors of Physical Therapy." APTA consciously made a decision not to mandate this transition, as it did not want to "compromise higher education prerogatives or mandate higher education decisions or degrees;" however, DPT conversion is a growing trend, and APTA as well as CAPTE, the accrediting body for physical therapy programs, both support and promote the transition (APTA, 2004). Both the MPT and the DPT are accredited by CAPTE using the same criteria.

The process by which programs convert to the DPT depends on whether the program has been evaluated by CAPTE against its 1998 Evaluative Criteria. If the program has been determined to be in substantial compliance with the 1998 Criteria, then CAPTE considers the change of degree to be an institutional prerogative and requires only a notification of the intended degree change and a description of the program changes in the next available reporting mechanism, usually the Interim Accreditation Report. For conversion to the DPT, CAPTE expects that the program will have achieved all necessary approvals by the institution, the state higher education board, and the institutional accreditor (CAPTE, 2004).

APTA argues for converting to the DPT based on four factors:

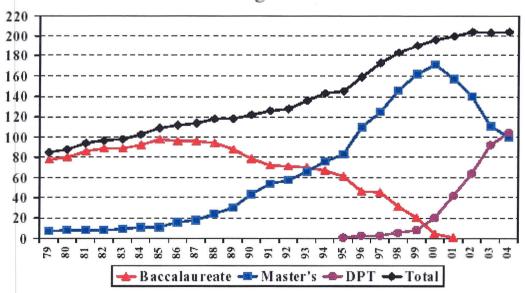
- the level of practice inherent to the patient/client management model in the Guide to Physical Therapist Practice requires a breadth and depth in educational preparation not easily acquired within the time constraints of the typical MPT;
- society expects the fully autonomous healthcare practitioner to be a clinical doctor;
- realizing the profession's goals in the coming decades, including direct access, 'physician status' for reimbursement purposes, and clinical competence consistent with the preferred outcomes of evidence-based practice, will require that practitioners possess the clinical doctorate, consistent with medicine, osteopathy, dentistry, veterinary medicine, optometry, and podiatry;
- many MPTs already meet the requirements for the clinical doctorate (APTA, 2004).

Institutions Currently Offering Physical Therapy Education

In Florida, ten institutions offer physical therapy degrees, including three independents and seven SUS institutions (UF, FAMU, USF, UCF, FIU, UNF, and FGCU). The independents have already converted to the DPT. In October 2004, the BOG approved the first conversion at an SUS institution (USF), and UF submitted a proposal for conversion in December 2004.

Nationally, the number of accredited DPTs has increased, while MPTs have decreased. In 2000, there were 184 MPTs and 19 DPTs. In 2002, the figures became 146 MPTs and 67 DPTs. As of February 2005, the figures had shifted to 89 MPTs and 121 DPTs. In July 2004, the number of accredited DPTs rose above 50% of the total programs offered. Trends indicate that over 94% of the current accredited and developing programs will offer the DPT in the next 5 to 10 years. The decrease in MPT programs and the corresponding growth of accredited DPT programs can be seen in the diagram below (APTA, 2004).

Accredited PT Programs: 1979-7/2004



Source: CAPTE Accreditation Update, August 2004, http://www.apta.org/documents/public/accred/August2004Update.pdf

In the most recent update of U.S. News and World Report Rankings, 28 of the top 30 institutions offering physical therapy do so with the DPT. The two not yet offering the DPT are the

University of North Carolina-Chapel Hill (ranked 8th) and the **University of Florida** (ranked 25th). Only one other Florida institution appears in the top 30 -- the University of Miami (ranked 10th) (U.S. News and World Report, 2004).

Education of Physical Therapists

Programs in physical therapy start with basic science courses such as biology, chemistry, and physics and then introduce specialized courses, including biomechanics, neuroanatomy, human growth and development, manifestations of disease, examination techniques, and therapeutic procedures. In addition to the classroom/ laboratory experience, there is also a clinical component. Many programs require experience as a volunteer in physical therapy clinic prior to admission. Physical therapists are also expected to continue their professional development through continuing education workshops and coursework (APTA, 2004).

Although CAPTE has not mandated specific curricular changes for DPT conversion. DPTs have typically augmented MPT breadth and depth with exposure to differential diagnosis, pharmacology, radiology/imaging, health care management, prevention/wellness/health promotion, histology, and pathology. Of the accredited DPT programs, the length of most extends beyond the 2-year masters program, as indicated below.

Distribution of Curricular Formats (arranged by total length) 50 45 40 Number of Programs 35 30 25 20 15 10 5 24 343 548 W المريع الريع 3835 XX5 Curricular Format ■ Master's ■ DPT

2003-04 Curricular Format:

Source: APTA 2004 Fact Sheet, Physical Therapist Programs, September 2004, https://www.apta.org/documents/Public/Accred/2004PTFactSheet.pdf

The clinical component of the DPT is also typically extended beyond the MPT average (about 15 weeks), with some DPT clinicals up to one year. As seen in the figure below, the clinical component of physical therapy programs has grown substantially with conversion to the DPT.

Length of Final Clinical Education Experience

		All Programs			Master's			DPT		
		2000	2002	2004	2000	2002	2004	2000	2002	2004
Number of weeks in final clinical experience	Mean Range	13.9 4-40	15.3 4-40	16.1 0-50	13.4 4-40	14.5 4-40	13.6 0-40	22.7 12-40	18.5 6-40	21.9 8-50

Source: APTA 2004 Fact Sheet, Physical Therapist Programs, September 2004, https://www.apta.org/documents/Public/Accred/2004PTFactSheet.pdf

The recently approved DPT conversion at USF expanded the program, including the clinical component, from 71 hours and 6 semesters to 101-103 hours and 9 semesters. Similarly, the UF proposed program expands from 78 hours and 6 semesters to 113 hours and 8 semesters.

Enrollment and Degree Productivity

The table below shows the enrollment over the last five years for SUS degrees in physical therapy (CIP 51.2308).

SUS Enrollment in Physical Therapy Programs (51.2308)

	2000	2001	2002	2003	2004
FAMU*	48	27	27	20	28
FGCU	27	24	37	41	39
FIU	22	98	119	114	128
UCF	UCF 55 UF 84	59	40	49	54 85 67
UF		110	84	91	
UNF	-	68	60	61	
USF 34	45	50	53	58	
Total	270	431	417	429	459

Source: Division of Colleges and Universities Factbook, http://www.fldcu.org/factbook *FAMU figures were obtained directly from the University to address apparent errors in data reporting/collection. Totals have been amended to reflect these changes.

The table below shows degrees conferred over the last five years for SUS physical therapy programs (CIP 51.2308). The data indicate variations among degrees awarded between universities, with some maintaining as others sharply increase or decrease.

SUS Degrees Awarded in Physical Therapy Programs (51.2308)

	99-00	00-01	01-02	02-03	03-04
FAMU*	58	46	39	7	8
FGCU	-	12	3	9	8
FIU	64	81	18	53	66
UCF	-	7	27	41	14
UF	7	61	62	15	36
UNF	-	-	26	24	11
USF	-	-	11	19	21
Total	129	207	186	168	164

Source: Division of Colleges and Universities Factbook, http://www.fldcu.org/factbook. Degrees awarded data has been updated with final 2003-04 data as of 11/25/2004. The next update will occur in 7/2005. *FAMU figures were obtained directly from the University to address apparent errors in data reporting/collection. Totals have been amended to reflect these changes.

Licensure

The minimum educational requirement for becoming a Physical Therapist is a post-baccalaureate degree from an accredited Physical Therapy education program. According to APTA, DPTs constitute 55% of all programs, with another 40% already planning to convert to the DPT (APTA, 2004). Following graduation, candidates must pass a state-administered national exam (NPTE). Other requirements for licensure vary by state, and some states require continuing education as a condition of maintaining one's licensure.

In Florida, the Board of Physical Therapy Practice is the body responsible for the licensure and regulation of Physical Therapists. For U.S. graduates, candidates must have received a physical therapy degree from a CAPTE-accredited institution. Applicants who have taken and failed the NPTE exam more than five times are ineligible for licensure in Florida. In addition to the NPTE, all Florida applicants are required to pass an examination on Florida laws and rules related to physical therapy practice (Chapter 456, Florida Statutes, *Health Professions and Occupations: General Provisions*; Chapter 486, Florida Statutes, *Physical Therapy Practice Act*; and Rule 64B17, Florida Administrative Code). All applicants are also required to have three hours of training in HIV/AIDS and two hours of training in prevention of medical errors (Florida Department of Health, *Physical Therapy Board Overview*, 2005).

U.S. graduates with a physical therapy degree from a CAPTE-accredited program who have passed the American Registry Exam or the NPTE, and who have an active license in another jurisdiction may receive Florida licensure via endorsement, rather than examination. All endorsement applicants are still required to take the examination on Florida laws and rules related to Physical Therapy practice. Provision is also made for foreign-educated physical therapists to become licensed in the U.S. (Florida Department of Health, *Physical Therapy Board Overview*, 2005).

Employment Outlook and Earnings

Physical therapists typically practice in hospitals; outpatient clinics/offices; inpatient rehabilitation facilities; skilled nursing, extended care, or subacute facilities; education or research centers; schools; hospices; and fitness and training facilities. As found in the 2000 Standard Occupational Classification System, physical therapists fall under the category heading of "therapists" under the broader classification of "health diagnosing and treating practitioners." Other fields grouped in that category include audiologists, occupational therapists, radiation therapists, recreational therapists, respiratory therapists, and speech-

language pathologists (Bureau of Labor Statistics, U.S. Department of Labor, *Standard Occupational Classification System, 2000*).

According to APTA, more than 120,000 physical therapists are licensed in the United States today, with a median salary dependent upon position, experience, education, geographic location, and practice setting. The U.S. Department of Labor, Bureau of Labor Statistics (BLS) estimates that physical therapists held about 137,370 jobs as of November 2003, and notes that the number of jobs is greater than the number of practitioners because many physical therapists hold two or more jobs. Further, it is stated that, as of November, 2003, the nationwide average annual earnings estimate for physical therapists was \$61,240. The Florida-specific estimates, at that time, were 7,580 jobs and estimated mean annual earnings of \$60,010 (Bureau of Labor Statistics, U.S. Department of Labor).

Employment projections derived from the Florida Agency for Workforce Innovation indicate an estimated annual percent change from 2004 to 2012 of 3.52%. The table below indicates that openings in the profession are much more due to growth than separations, with total average annual openings being projected at 366 (*Florida Employment Forecast*, Florida Agency for Workforce Innovation).

FLORIUA JOSS 5y Occupation									
			Annual	Average Annual Openings			2003	Education	
Occ	upation	Employment		Percent	Due To	Due To		Average	& Training
Code	Title	2004	2012	Change	Growth	Separations	Total	Wage	Code
	Physical					4			
291123	Therapists	8,246	10,567	3.52	290	76	366	29.66	5

SOURCE: Florida Agency for Workforce Innovation, *Florida Employment Forecast*, Labor Market Statistics, http://www.labormarketinfo.com/, Accessed March, 2005.

BLS indicates that employment of Physical Therapists is expected to "grow faster than the average" for all occupations through 2012 (defined as an anticipated increase of 21 to 35 percent). It was further noted that federal legislation imposing limits on reimbursement for therapy services may have short-term impacts on job outlook, however, the long-run demand for Physical Therapists should continue to rise as growth in the number of individuals with disabilities or limited functions spurs demand for Physical Therapists and therapy services (Bureau of Labor Statistics, U.S. Department of Labor).

In the current health care environment, and depending upon the employer, the DPT graduate will not necessarily be favored over the MPT graduate. Since licensure to practice does not distinguish among degrees, the MPT and DPT are both permissible to meet the requirement. However, as the DPT becomes the norm over time this may change substantially (APTA, 2004).

Conclusion

The data strongly suggest that physical therapy programs are moving toward the DPT as the entry-level professional degree, a move that has engendered significant support from both the accreditation body and the profession. Florida's independent institutions have already transitioned to the DPT. Data indicate a need for more physical therapists in coming years, and that need is not currently being met by existing programs.

The Florida Board of Governors will need to consider any requests to convert to the DPT independent of one another to determine if a doctoral-level program fits with the institution's mission, and whether each argument of need, demand, and return on investment is compelling when set against the costs associated with conversion.

Bibliography / Resources

American Physical Therapy Association (APTA), http://www.apta.org/

Bureau of Labor Statistics, U.S. Department of Labor, *Occupational Outlook Handbook, 2004-05 Edition*, Physical Therapists, on the Internet at http://www.bls.gov/oco/ocos080.htm (visited March 07, 2005).

Bureau of Labor Statistics, U.S. Department of Labor, *Standard Occupational Classification System*, *2000*, on the Internet at http://www.bls.gov/soc/home.htm (visited March 07, 2005).

Commission on Accreditation in Physical Therapy Education (CAPTE), http://www.apta.org/Education/accreditation

Florida Department of Health, *Physical Therapy Board Overview*, 2005, http://www.doh.state.fl.us/Mqa/physical/pt_home.html)

Florida Employment Forecast, Florida Agency for Workforce Innovation, Labor Market Statistics, http://www.labormarketinfo.com/library/ep/p12sw00.xls

Integrated Postsecondary Education Data System (IPEDS), National Center for Education Statistics (NCES), http://nces.ed.gov/ipeds/

University of South Florida, School of Physical Therapy Website, http://dpt.hsc.usf.edu

U.S. News and World Report Rankings, *Health Disciplines, Physical Therapy*, http://www.usnews.com/usnews/edu/grad/rankings/hea/premium/pht.php