

FLORIDA BOARD OF GOVERNORS

October 21, 2004

SUBJECT: Implementation Authorization for a Doctor of Physical Therapy
at the University of South Florida

PROPOSED BOARD ACTION

Consider implementation authorization for a Doctor of Physical Therapy (CIP 51.2308) at the University of South Florida.

AUTHORITY FOR BOARD OF GOVERNORS ACTION

Article IX, Section 7 (d), Constitution of the State of Florida

BACKGROUND INFORMATION

This USF request is the first of several which may come forward over the next few months, because seven of the state universities currently offer master's-level physical therapy programs (UF, FAMU, USF, UCF, FIU, UNF, and FGCU). The desire to transition from the master's to the Doctor of Physical Therapy (DPT) is driven in part by the national trend towards more autonomous practice on the part of physical therapists, which in turn is driving an expansion in the breadth and content of professional preparation programs. There is also a desire to remain competitive in the recruitment of new students, many of whom are now choosing institutions that do offer the DPT. SUS physical therapy programs underwent a transition from the bachelor's to master's level in 1998 in preparation for accreditation changes that went into effect in 2002.

In Florida, persons are eligible to take the physical therapy licensure examinations if they have received a degree in physical therapy from an institution that has been approved by the Commission on Accreditation for Physical Therapy Education (CAPTE). Both the MPT and the DPT are accredited by CAPTE, using the same evaluative criteria. The 2000 American Physical Therapy Association (APTA) House of Delegates endorsed *Vision 2020*, a vision statement for the next 20 years that contains a clear reference to "doctors of physical therapy," reflecting the Association's support for doctorally prepared practitioners and the clinical doctorate as the first professional degree. The movement towards doctorally prepared professionals and autonomous practice could have significant cost implications for the healthcare industry and federal programs such as Medicaid and Medicare.

This proposal also raises the issue of implementing "professional tuition" for the DPT in order to fund a significantly expanded curriculum for essentially the same number of students.

USF's Board of Trustees approved this transition in May 2004. If the proposal is approved, the University plans to implement the program in spring of 2005.

Supporting Documentation Included:
Facilitators / Presenters:

Staff Analysis
Chancellor Austin / R. E. LeMon
USF Representatives

STAFF ANALYSIS
Proposed Doctor of Physical Therapy
University of South Florida

Estimated Costs:

	Total	% & \$ Current	% & \$ New	% & \$ C&G	Cost per FTE	SUS 02-03 Average Costs
Year 1	\$1,705,646	59.5% \$1,014,037	39% \$664,851	1.5% \$26,758	\$46,635	\$25,717 for CIP 51
Year 5	\$2,298,840	23.2% \$534,022	75% \$1,734,700	1.3% \$30,118	\$22,026	

NOTE: SUS Average Costs are calculated using the 2002-03 Expenditure Analysis.

Projected FTE and headcount are:

	Projected Headcount	Student FTE
First Year	36	36
Second Year	70	70
Third Year	103	103
Fourth Year	103	103
Fifth Year	103	103

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.

Evidence that the proposed program is listed in the current State University System Master Plan, and/or that the goals of the proposed program relate to the institutional mission statement as contained in the Master Plan.

Although the Doctor of Physical Therapy (DPT) was not on the 1998-2003 SUS Strategic Plan, it is consistent with the emphasis on expanding access to healthcare education within the current BOG strategic planning documents. The DPT also supports the USF Strategic Plan, which includes strategic directives to "Advance Collaborative Learning and Discovery to Improve Health in the Community" and advance "Health Professions Education."

This proposal for a Doctor of Physical Therapy is the first of several which may come forward for review during the next few months, because seven of the state universities currently offer master's-level physical therapy programs (UF, FAMU, USF, UCF, FIU, UNF, and FGCU). The desire to transition from the master's to the Doctor of Physical Therapy is driven in part by the

national trend towards more autonomous practice on the part of physical therapists, which in turn is driving an expansion in the breadth and content of professional preparation programs. The state universities also need to remain competitive in the recruitment of new students, and have begun to lose students to institutions that do offer the DPT. The three Florida independent universities that have physical therapy programs have already transitioned to the DPT. The state university physical therapy programs underwent a transition from the bachelor's to master's level in 1998 in preparation for accreditation changes that went into effect in 2002.

In Florida, persons are eligible to take the physical therapy licensure examinations if they have received a degree in physical therapy from an institution that has been approved for the training of physical therapists by the Commission on Accreditation for Physical Therapy Education (CAPTE). Although this requirement does not distinguish among degree levels, CAPTE no longer accredits bachelor-level degrees (effective January 1, 2002). Both the MPT and the DPT are accredited by CAPTE using the same evaluative criteria, and the institution determines the degree to be offered. In the current health care environment, and depending upon the employer, the DPT graduate will not necessarily be favored over the MPT graduate. However, as more professional entry-level programs make the transition to or develop at the doctoral level, this situation may change substantially.

The 2000 American Physical Therapy Association (APTA) House of Delegates endorsed *Vision 2020*, a vision statement for the next 20 years that contains a clear reference to “doctors of physical therapy,” reflecting the Association’s support for doctorally prepared practitioners and the clinical doctorate as the first professional degree. APTA consciously made a decision not to mandate this transition; however, the transition to the DPT across the discipline is a growing trend. APTA and the Commission on Accreditation in Physical Therapy Education (CAPTE) both support and promote the transition. It is expected that, when the preponderance of institutions are offering the DPT as the professional entry degree, CAPTE accreditation standards will be revised to limit accreditation to the doctoral level. The movement towards doctorally prepared professionals and autonomous practice could have significant cost implications for the healthcare industry and federal programs such as Medicaid and Medicare.

This proposal also raises the issue of implementing “professional tuition” for the DPT in order to fund a significantly expanded curriculum for the same number of students.

Evidence of a relationship to specific institutional strengths

The proposed program is located within the USF College of Medicine and will continue to benefit from that relationship, which includes opportunities to interact with medical practitioners. It will also benefit from other established relationships with the College of Public Health and the College of Nursing, providing students with the opportunity to work with other healthcare providers in a clinical setting.

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.

Significant planning for this program began in April of 2003 when directors of all of the state

university physical therapy programs met to discuss transition to the DPT. All of them were in agreement that their programs needed to make the transition because they were losing 10-15% of the students accepted into their existing MPT programs to DPT programs elsewhere. After the initial group decision, each university began the planning for its program's transition. The USF planning process has involved the program faculty, director, and administration of the Health Science Center, along with other relevant units within the University administration and governance structure.

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

The proposal provides a timetable for implementation that identifies key events beginning with the enrollment of the first DPT students in April 2004 and continuing through until graduation.

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 USF Physical Therapy program received initial accreditation by the Commission on Accreditation in Physical Therapy Education (CAPTE) in October of 2001. Since initial accreditation, program personnel have submitted three *Progress Reports* responding to requests by CAPTE for clarification and additional information. There are no pending issues related to CAPTE accreditation at this time.

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

Based on a recent American Physical Therapy Association (APTA) information survey, accredited and transitioning DPT programs have augmented the breadth and depth of content in a typical two- or three-year professional (entry-level) MPT program (with specific augmented content typically including, among others, differential diagnosis, pharmacology, radiology/imaging, health care management, prevention/wellness/health promotion, histology, and pathology). Also, the final or culminating clinical education experiences are typically extended beyond the average of 15 weeks, with some being 1 year in length.

The proposed DPT curriculum at USF builds upon the current master's curriculum, expanding it from 6 to 9 semesters, and it is consistent in content and length with other DPT programs in the U.S. The program reflects the breadth of coursework required to meet expected criteria for accreditation while addressing in depth those content areas of professional education considered essential for future PT practice expectations. These include clinical decision making and critical thinking required for autonomous practice. The number of course credits for the curriculum has been increased from 71 to 101-103. There are no research-based dissertation requirements, because this is a professional degree.

The proposal states that major areas of content expansion include:

- ! Expansion of the foundational (basic science) component of the curriculum
- ! Creation of a series of Medical Management courses to include the clinical sciences of

Pathology and Pharmacology

- ! Expansion of Critical Inquiry and the concepts of Evidence Based Practice
- ! Adding a Clinical Competency Exam course each semester to prepare students for Clinical Internship Education and direct patient care
- ! Expansion of Clinical Education to 3 blocks (two 6-week and one 16-week blocks)
- ! Re-arranging current content to enable a series of Movement Science courses to focus on the foundational basis for physical therapy as a profession

Admission requirements for the program will remain the same as with the current master's program. Students currently enrolled in the master's program at USF will be given the option of graduating at that level, or continuing on into the advanced coursework of the DPT.

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

The master's degree is already accredited, and the DPT will be included in the next CAPTE accreditation review. Because the accreditation standards for the MPT and DPT degrees are the same, there should be no accreditation problems related to this transition. The process by which programs convert to offering the DPT depends on whether the program has been evaluated by CAPTE against the *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 other changes in the next available reporting mechanism, usually the *Interim Accreditation Report*. CAPTE expects that the program will have achieved all necessary approvals to offer the new degree as required by the institution, the state higher education board, and the institutional accreditor.

Evidence that the proposed institution has analyzed the feasibility of providing all or a portion of the proposed program through distance learning technologies via its own technological capabilities, as well as through collaboration with other universities

The proposed program will utilize a variety of instructional modes (lecture, lab, seminar, discussion groups, etc.), but will be primarily an institutional-based program, with the exception of the required internship component. The Health Science Center Clinical Assessment Center will be used for demonstration and practice of clinical skills on models, simulators, and clinical standardized patients. Instructional technologies will be used as appropriate, but it is not feasible to offer a practice-based program entirely through such modalities.

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

The proposal identifies 13 current faculty who will be used to implement the DPT program, most of whom will be engaged with the program full time. In addition, the University is in the process of recruiting two new faculty members who will be fully engaged with the DPT. This will provide a student-to-faculty ratio of 2.4:1 in the first year of implementation, increasing to 5.4:1 by Year Five. The low student-to-faculty ratio is expected for a clinical practice-based program.

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

All of the current faculty have earned either the MPT, DPT, or Ph.D. in physical therapy. Because physical therapy programs are professional education, the bulk of faculty effort goes into instruction. Even so, the faculty have been active in scholarly activities and research, publishing in the major journals of the discipline and netting \$90,844 in external funding, with additional federal grant funding that has not as yet been awarded.

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

The proposal provides a plan for hiring four additional faculty members in the third and fourth years of implementation. The new faculty will be 100 percent engaged with the DPT program, and will be on tenure-earning clinical educator tracks. There is an expectation that new faculty will hold a terminal research-based Ph.D. or Ed.D. degree in addition to a PT degree. This will enable them to establish research and scholarship productivity concurrent with teaching in the professional curriculum. Expected areas of competence include movement science, orthopedic physical therapy, neuro-rehabilitation, and exercise science.

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

The USF Tampa Campus and Health Sciences Center libraries have extensive holdings of books, serials, and on-line databases that support physical therapy professional education. A complete listing of these holdings was not requested with the proposal, because this is a transition of an existing accredited program to a new level, which will require substantially the same level of library support.

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 School of Physical Therapy is housed in the Medical Therapy (MDT) building, which is part of the Health Science Center complex. Approximately 20,000 square feet of space supports the professional education component, and there is 10,000 square feet of newly renovated space in the patient care center. The PT Treatment Center is an outpatient care facility certified by Medicare as a rehabilitation agency, and is used to provide relevant patient care experiences for students during the professional didactic component of the curriculum.

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

The School currently has the essential, professional equipment that is needed for the professional curriculum in physical therapy. No major capital equipment expenses are expected with the implementation of the DPT, except for office support equipment and personal computers needed for new faculty and staff. AV equipment exists in the major classrooms and teaching laboratories, as well as a wireless computer network for students. It is expected that a \$50,000 to \$75,000 equipment budget will be needed for the recruitment of each new physical therapy faculty member to relocate and establish a plan for scholarship at USF and has been identified in the program financial proforma as OCO expenditure. Major pieces of research equipment currently on site include Biodex- strength assessment, research

grade treadmill, metabolic cart-exercise and cardiopulmonary assessment, selected equipment for gait and movement assessment, and software titles to support statistical evaluation and qualitative research methodology.

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

Students may compete for University scholarship resources as they become available through either allocation or the annual Faculty Staff Scholarship Campaign or other sources that may be identified in cooperation with the University Office of Development. The USF Financial Aid Office is available to work with students seeking loans, and student loan programs are available through Federal Stafford subsidized and unsubsidized loan programs.

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

Currently, the School of Physical Therapy has 75 affiliation agreements to accommodate 60 students in internships. Although some of these sites may increase the number of students they will accept, it is expected that additional clinical sites will be needed for the DPT curriculum. The USF Physical Therapy Center is designed to provide students with patient care experiences during their didactic class work in preparation for placement into the community clinical internship sites. The proposed curriculum is designed to prevent the need to place more than one class of students into internships concurrently, and allows consecutive placement of students in clinical education in the 6-week rotations, because different types of physical therapy settings will be used each year. The 16-week internship in the spring of the third year avoids conflict with these earlier placements.

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

The need for the DPT degree at USF is driven by the escalating demand by student applicants to enroll in programs that are preparing them for both current and future practice. USF and other state institutions are losing potential students who elect instead to enroll at private universities in Florida where the DPT is awarded. CAPTE has projected that, within the next five years, more than 80% of all accredited physical therapy educational programs will be awarding the DPT degree as the entry level for professional practice. Although continued accreditation by CAPTE is not currently at risk without this transition, in order to effectively compete for the strongest students and most qualified faculty, USF must offer the professional degree preferred and promoted by the American Physical Therapy Association.

Nationally, the unemployment rate for physical therapists is less than two percent. The aging population in Florida and especially the Tampa Bay region ensures that all licensed practitioners have employment opportunities. All USF licensed graduates are working and report that there is considerable choice for them among potential employers.

Physical therapists held about 137,000 jobs in 2002. The number of jobs is greater than the number of practicing PTs, because several PTs hold two or more jobs (e.g., working in a private practice, as well as part-time in another healthcare facility). Employment of PTs is expected to “grow faster than the average” for all occupations through 2012 (meaning it will increase 21 to 35 percent). Whereas there may be individual exceptions, any implications regarding the

employability of DPT graduates are uncertain at best at the moment. In the current health care environment, and depending upon the employer, the DPT graduate will not necessarily be favored over the MPT or the BSPT graduate. Because licensure to practice does not distinguish among degrees, the BSPT, MPT, and DPT are all permissible. However, as more professional entry-level programs make the transition to or develop at the doctoral level, this may change substantially, and the number of graduates will offer a credible basis for the collection of data regarding employability and performance of the DPT graduate.

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

USF is the first of the seven state universities with Physical Therapy programs to request implementation authorization for a DPT. Currently, the DPT is offered at the University of Miami, the University of St. Augustine, and Nova Southeastern University. Duplication does not have the same meaning within the context of this proposal because this is an existing professional educational program that seeks to transition to a new degree level.

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

The estimated headcount and FTE are the same, because the Doctor of Physical Therapy will only enroll students who are full time in the program. Enrollment projections are for 36 students in the first year, with a presumed average award of 33 DPT degrees annually commencing in spring 2008. It is anticipated that most of the enrollments will be students who previously completed an undergraduate degree at USF.

Admission into the School of Physical Therapy is masked to race, gender, and ethnicity. However, the School participates in initiatives that expose 400 underserved minority students per year to health careers at the Health Science Center of USF. For the last three years, the School's admission has reflected approximately 10-15% underrepresented minority enrollment. A signed EEO statement is included in the proposal.

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

Initial programmatic cost for the commencement of the proposed DPT program has been derived from FY 2003/04 resource allocations projected forward with a 3% annual inflation rate to equal \$1,705,646 in 2005/06. This projection includes student tuition derived funding (which was \$298,603 in FY 2003/04). The addition of 4.0 FTE faculty and 1.0 FTE USPS plus modest changes in lapse, expense, and special categories provides a projected cost of \$2,298,840 in the fifth year of the program. While first year costs per student FTE are somewhat high, fifth year estimated costs are in line with the SUS average for CIP 51, which is \$25,717 (as calculated using the 2002-03 Expenditure Analysis).

Because no significant increase in student enrollment is anticipated with the transition from MPT to DPT, the University proposes to charge professional in-state tuition of \$12,000 per student rather than the current graduate credit hour-based tuition. The proposed professional tuition is less than that currently charged by Florida private university PT programs.

According to a 2002 American Physical Therapy Association (APTA) fact sheet, the average annual tuition in 2001-2002 was \$5,100 for public PT programs and \$18,585 for private PT programs. It could not be determined from the APTA information if any of the current public DPT programs were charging a tuition rate different from the regular graduate tuition at their institutions. The University believes that professional tuition would provide stable funding to support the expanded curriculum and educational experiences that will be a part of the DPT program. It is not clear in the proposal as to how the University would shift funding to cover these costs if they do not receive authority to charge a professional tuition rate.

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

This is not a new program, so no reallocation of resources is expected. No adverse impact is anticipated in the number of students expected to enroll in the proposed program, because the DPT degree has become the “first choice” of the most qualified students. If the University is unable to implement professional tuition, then the issue of reallocation of resources becomes pertinent.

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

With the exception of Anatomy and Physiology, all courses are taught by the physical therapy faculty independent of student enrollment or headcounts. Therefore, the faculty carry a significant and recurring teaching assignment that averages about 45% annually. Enrollment and student headcount has increased every year since 1999 with a full class of 30 students matriculating in fall 2003. All faculty are also engaged in professional service at USF and to their profession. Collectively, faculty members have been presenting their scholarship at state and national meetings, writing grants to support their research plans, and are meeting the expected publication benchmark of one research publication per year in a major professional journal.