PROPOSAL

FOR IMPLEMENTATION OF A

DOCTOR OF PHYSICAL THERAPY (DPT) DEGREE

February 2001

PROGRAM DESCRIPTION

1. Briefly describe the proposed new program. Please indicate if it is an expansion of an existing program; a new program; a cooperative effort with another institution, business, or industry; or an on-campus or off-campus program. Attach any formal agreements established for cooperative efforts.

The proposed Doctor of Physical Therapy (DPT) degree is an expansion of the current Master of Science Degree program in Physical Therapy by one year. The current Master of Science Degree in Physical Therapy consists of 83 credits and is 5.5 semesters in length. The increase of 33 credits in this proposal involves expanded curricular content in management and administration, case management, primary care, prevention and wellness, case reports, expanded clinical skills, and additional internship hours. For example, physical therapists can legally see patients without referral in many states (including Montana) and are now functioning as primary care professionals for musculoskeletal injuries in many settings. The proposed DPT program would then be 110 graduate credits which is appropriate for a professional doctorate degree. It would add one year to the current physical therapy program. The DPT degree is a clinical doctorate degree similar to a PharmD (Doctor of Pharmacy) or OD (Doctor of Optometry) degree. In order to accommodate students currently in pre-physical therapy programs, students would have a choice until FY 06 when all students would complete the third year of the DPT degree. Until that time, entering professional students could complete the current program in 5.5 semesters for a MS degree or choose to remain an additional year to complete the requirements for the DPT degree. This proposal is similar to the current PharmD program in the School of Pharmacy and Allied Health Sciences. In that program, students may complete a BS in Pharmacy or choose to remain an additional year for the PharmD degree. This BS in Pharmacy option expires in 2004.

2. Summarize a needs assessment conducted to justify the proposal. Please include how the assessment plan was developed or executed and the data derived from this effort.

I. Background

Entry level professional physical therapy education moved to the graduate level during the 1980's and 1990's. Most programs began to offer masters degrees, although DPT degrees were offered by a few institutions. In the late 1990's many programs began converting their graduate masters degree programs to DPT programs. As of January 2001, there are 21 accredited DPT programs, three developing DPT programs, 18 DPT programs with institutional but not accreditation approval, and 20 DPT programs in some stage of the process of conversion to the DPT. This constitutes about one third or the programs nationwide. More importantly, PT programs in Idaho, Colorado, Oregon, and Arizona have or are converting to the DPT degree. Two additional programs in Washington have proposed their conversion. This rapid growth was initiated by expanded accreditation criteria adopted in 1998 as well as increased expectations of entry level practitioners as health care became more complex and demanding. The depth and breadth of physical therapy practice inherent in the client management model in the

<u>Guide to Physical Therapist Practice</u> reflects the educational preparation represented by a clinical doctorate program. While most PT programs in the West converted to graduate status for physical therapy in the 1980's, the PT program at The University of Montana was quite late in converting to graduate status. This was caused by the freeze on new programs in the late 1980's and early 1990's. The Master's degree in Physical Therapy at The University of Montana was approved in 1995. Thus the evolution to the DPT degree must be more rapid at this institution in order to maintain a viable program.

II. Current Issues

The Vision Statement of the APTA states that physical therapists should be educated at the doctorate level. Expanded accreditation criteria and practice call for an increase in the current physical therapy curriculum. There are many areas of change reflected in the new accreditation criteria; of particular interest is the expansion in the areas of primary care and prevention and wellness. Within the past ten years, the practice of physical therapy has also changed. Entry level practitioners are now expected to have advanced competencies such as the ability to practice autonomously in musculoskeletal assessment as well as enhanced management skills. The fast pace of current health care practice requires a more highly skilled entry level professional. In recognition of this expanded accreditation criteria and practice, approximately 60% of the professional PT programs in the Western United States have converted or are converting to offering the DPT degree. Thus this degree is now becoming the expected entry level degree of students entering this profession. Many highly qualified students are leaving the state in order to receive this degree. In 2000, ten students who were originally accepted at The University of Montana went instead to DPT programs in Arizona, Oregon, California, Colorado, or Nebraska. It is therefore imperative that the professional physical therapy program at The University of Montana have the choice of an entry level DPT degree.

However, there are many pre-physical therapy students currently enrolled in the Montana University System. In recognition of the additional time and cost involved in a DPT degree, the Physical Therapy Faculty have determined that until FY 06 applicants should be allowed the choice of completing the current MS in physical therapy or remaining for an additional year and completing the requirements for the DPT degree. If fewer than 20% of the students in the professional program choose the MS degree, the faculty would recommend discontinuation of this degree sooner. This choice of programs would allow Montana residents to receive the DPT degree within Montana while still allowing current pre-PT students to plan their graduate programs within their time and budget constraints.

III. Development of the Current Proposal

With the expansion of accreditation criteria and the knowledge that nearby programs were beginning to offer the DPT degree, the Physical Therapy Faculty have been looking at curricular changes for several semesters. Loss of nearly one third of the selected class of the Year 2000 to DPT programs reinforced the need for an expanded curriculum. While opinions vary within the PT profession, many physical therapists and applicants perceive that the DPT degree is the degree of the future for the profession of physical therapy. The Physical Therapy faculty have worked hard over the last year to develop a DPT program that can meet the future needs of education for the physical therapy profession while still allowing current students in the system a choice and the opportunity to plan within their time and cost constraints.

3. Explain how the program relates to the Role and Scope of the institution as established by the Board of Regents.

The University of Montana - Missoula is already authorized to be the sole provider of professional physical therapy education within the state of Montana. The University is chartered to provide doctorate level education. The program's mission in terms of developing students' critical thinking skills and communication as well as the generation of new knowledge correspond to the Mission of the University.

4. Please state what effect, if any, the proposed program will have on the administrative structure of the institution. Also indicate the potential involvement of other departments, divisions, colleges, or schools.

The proposed DPT program would continue to reside within the School of Pharmacy and Allied Health Sciences. Students choosing the DPT degree would enroll in the curriculum for eight semesters. This would expand the time spent in the professional PT curriculum by one year. It is anticipated that enrollment in the professional physical therapy program would increase by approximately 25% during the first year of the DPT program. These numbers are projected to increase each year. By the third year of the program, PT enrollment should increase by 50%. The required prerequisite undergraduate courses would not change and there should be no effect on those undergraduate courses. Currently, the athletic training students take two courses with the professional physical therapy students. This has already become problematic as the level of coursework must differ between the graduate and undergraduate levels; also, coordination of the two separate programs makes the appropriate curriculum development for physical therapy difficult. These curricular issues have raised concerns for physical therapy's accreditation agency. It is inappropriate that undergraduate students take doctoral level courses. In response to these concerns, the respective Deans and Department Chairs for physical therapy and athletic training have met and resolved this problem. The athletic training program will be seeking appropriate resources for its program. In the interim, the physical therapy program will continue to provide the necessary coursework for athletic training students.

5. Describe the extent to which similar programs are offered in Montana, the Pacific Northwest, and states bordering Montana. How similar are these programs to the one herein proposed?

There are no other professional entry level programs for physical therapists in Montana. Idaho State University in Pocatello is currently converting to the DPT degree. Other DPT programs are available in Oregon, Washington, Arizona, and Colorado. The curricula for these programs are unique but are, of course, somewhat similar due to accreditation criteria.

6. Please name any accrediting agency(ies) that would be concerned with the particular program herein proposed. How has this program been developed in accordance with the criteria developed by said accrediting body(ies) or learned society(ies)?

Professional physical therapy education is accredited by the Commission on Accreditation for Physical Therapy Education (CAPTE) of the American Physical Therapy Association (APTA). New accreditation criteria adopted by that agency in 1998 look to expanded curricula in many areas including management, primary care, wellness, and prevention. While the current program is accredited, CAPTE has requested that the program demonstrate how it will cover these expanded areas. Thus the Physical Therapy Faculty have developed both revisions to the current MS program as well as additional coursework in the DPT degree choice. The MS curriculum will meet accreditation criteria with little opportunity for development of advanced knowledge and skills. The DPT curriculum will provide more in-depth theory and practical application as well as an opportunity to focus in advanced areas.

7. Prepare an outline of the proposed curriculum showing course titles and credits. Please include any plans for expansion of the program during its first three years.

The proposed DPT curricula will cover 110 credits of graduate work. As now, students would be expected to complete a bachelor's degree before entrance. Pre-requisite courses would remain the same. The program would continue to enroll 32 students per year. Students would decide at the end of their first year which option they will take (MS or DPT degree). The curriculum would remain the same for all students through the first four semesters and would begin to vary in the Spring semester, second year. It is anticipated that all students would enroll in the third year DPT program by FY 2006.

Year 1 - Autumn Semester		Spring Semester (includes Jan. Intersession)		
	Credits	,	Credits	
Anatomy & Kinesiology	5	Neuroscience	5	
PT & Health Care	4	Modalities & Electrotherapy	3	
Musculoskeletal Evaluation I	3	Musculoskeletal Evaluation II	3	
Therapeutic Exercise I	3	Therapeutic Exercise II	3	
Motor Development	2	Biomechanics and Function	2	
•		Part-time clinical experience	1	
Total	16	-	16	

Summer Session - 6 week clinical Internship - 4 credits

Year 2 - Autumn Semester		Spring Semester (in	clu	des Jan Intersessi	on)
Clinical Medicine and	5	Clinical Internship I (first 5 weeks)		reeks)	5
Therapeutic Interventions		• `		,	
Manual Therapy		Adv. Therapeutic Procedures (wounds,		s (wounds,	3
		Prosth & Orthot, Industrial PT)			
Neuro Rehab	5	Anv. Anatomy		1	
Research Design and Analysis	2	Psychology of Illness & Disability			2
Advanced Anatomy	1	Administration			2
Total	16				
		MS Students		DPT Students	
		Synthesis	2	Research	3
		Research	1	Elective	2
		Elective	2		
		Total	17		18

Summer Semester

MS students - 2 eight week clinical internships (12 credits)
DPT students - 1 eight week internship (rest of summer in research, electives, or work) (7 credits)

Year 3 - DPT Students only - Autumn Semester Spring Semester (incl Jan Intersession)

Advanced Administration & Practice Primary Care & Wellness	3 3	15 week internship 1 week wrap-up	16
Case Reports	2		
Choice of 9 credits in:	9		
Advanced Clinical Topics			
Education			
Research			
Total	17	_	16

TOTAL PROGRAM 110 credits

FACULTY AND STAFF REQUIREMENTS

1. Please indicate, by name and rank, current faculty who will be involved with the program proposed herein.

Physical Therapy Department

Richard Gajdosik, PT, PhD Professor **Chuck Leonard**, PT, PhD Professor

Ann Williams, PT, PhDProfessor and ChairCarrie Gajdosik, PT, MSAssociate ProfessorBeth Ikeda, PT, MSAssociate ProfessorJames Laskin, PT, PhD Cand.Assistant Professor

Steve Fehrer, PT, PhD Adjunct Assistant Professor

Dave Levison, PT, MHS Adjunct Assistant Professor, ACCE

2. Please project the need for new faculty over the first five-year program. Include special qualifications or training. If present faculty are to conduct the new program, please explain how they will be relieved from present duties.

All of the current faculty would be involved in the new program. In addition, 1.5 faculty FTE would need to be added. It is anticipated that this would involve a combination of a full time faculty position and adjunct faculty. The one full-time faculty position would be added in the first year of the new program (FY 04). This faculty position would need to be a physical therapist with an advanced (post-entry level) degree, preferably a doctorate degree. The additional part-time faculty would be added in the second and third years (FY 05 and 06). These should be physical therapists who have advanced education, preferably a degree or clinical specialty. These new faculty will share teaching in both the MS and DPT programs so that teaching loads should remain about the same once the full program is implemented.

In the second and third years of the program, \$23,000 is added for funding clinical educators in the new internships needed for the DPT program.

3. Please explain the need and cost for support personnel or other required personnel expenditures.

The expanded number of students, recruitment and student selection, increased faculty, and increased internship requirements would require some additional support personnel time. The increase in FTE is 0.5 in support personnel that would be added during the second year of the program (FY 05).

CAPITAL OUTLAY, OPERATING EXPENDITURES, AND PHYSICAL FACILITIES

1. Please summarize operating expenditure needs.

Added operating funds are needed for travel and faculty development. This is an area of deficiency noted by our accreditation agency at the present time. Base reductions and OTO budget adjustments for the last two years have forced us to request these funds from other sources in order to maintain our accreditation. An additional \$5000 is added for this purpose in FY 06.

2. Please evaluate library resources. Are they adequate for operation of the proposed program? If not, how will the library need to be strengthened during the next three years?

The library needs of the program would be similar to the current MS PT program as the areas of research are comparable. Currently, the library provides many biomedical journals both on campus and at St Patrick's Hospital. Electronic access to journals through Uncover and Interlibrary loan is only adequate and would need some expansion. The Library and all the biomedical sciences will need to work

together to provide better electronic access to abstracts and journal articles. Options allowing easier access to St. Patrick's Hospital Library would also be desirable.

3. Please indicate special clinical, laboratory, and/or computer equipment that will be needed. List those pieces of equipment or computer hardware presently available in the department.

The excellent student computer laboratory equipment available in the new Skagg's Building should be adequate for the increased number of students. Computers will need to be made available for the new faculty.

4. Please describe facilities and space required for the proposed program. Are current facilities adequate for the program? If not, how does the institution propose to provide new facilities?

The new Skagg's Building already provides a substantial increase in the laboratory space available for teaching and research in PT. The new program's internships are timed to minimize the need for additional classroom and laboratory space. While some adjustment will be needed, the current facilities should be adequate for the new program. One additional faculty office would be needed requiring some minor reconstruction.

FISCAL IMPACT AND BUDGET INFORMATION

Explanation of Form

Student Enrollment

Students entering in FY 02 would be the first students with the choice of the DPT program. Those students in that class choosing the DPT degree would then enter their final year in FY 04. Projecting the number of students who will choose the DPT degree is difficult. We have made a conservative estimate at 16. We have estimated that 24 would choose the DPT program in FY 05. By FY 06 all physical therapy students are projected to enter the DPT program.

During FY 02 and 03, 64 students would continue to be enrolled in the first two years of the program. This would continue in all years, so that the enrollment in FY 04 would increase to 80 (64 + 16), 88 in FY 05 (64 + 24), and 96 in FY 06 (64 + 32). After FY 06, enrollment would continue at 96. Professional physical therapy students take 15+ graduate credits per semester so that the FTE become 110 in FY 04, 121 in FY 05, and 132 in FY 06.

Expenditures

FY 04

The tuition surcharge from the first year is projected to be \$64,000. This would be used to fund a full time faculty position.

FY 05

The expenses from FY 04 would continue. The additional tuition surcharge from the second year is projected to be an additional \$32,000. This would be divided as follows: funding for part-time faculty, \$13,000; support of clinical faculty, \$7,000 (total of \$20,000 for adjunct faculty); and, an additional 0.5 FTE staff support, \$12,000. The total expenditures for FY 05 would be \$96,000.

FY 06

The expenses from FY 05 would continue. The final additional tuition surcharge of \$32,000 would be divided as follows: part-time faculty, additional \$14,000; support for clinical faculty, additional \$13,000

(total of \$47,000 for adjunct faculty); additional faculty development monies, \$5,000. The total expenditures for FY 06 would be \$128,000.

Revenues

Physical therapy students pay an additional \$4000 per year in tuition surcharges. The revenue from this source would increase as enrollment increases from FY04 through FY06. The program based upon this tuition surcharge would provide an adequate program. The program will continue to seek additional funding through campus budget processes, grants, and other sources to provide the resources for an excellent program. Increasing the student tuition surcharge is not feasible as our costs for out-of-state students are now comparable to many private schools offering DPT programs. Competing schools such as Idaho State University have lower costs.

FISCAL IMPACT AND BUDGET INFORMATION

On this form, indicate the planned FTE enrollment, estimated expenditures, and projected revenues for the first three years of the program. Include both the reallocation of existing resources and anticipated or requested new resources. Second and third year estimates should be in constant dollars.

	FY04 FIRST YEAR FTE HEADCOUNT		FY05 SECOND YEAR FTE HEADCOUNT		FY06 THIRD YEAR FTE HEADCOUNT	
I. PLANNED STUDENT ENROLLM	IENT					
A. New Enrollment B. Shifting Enrollment	22	16	33	24	44	32
GRAND TOTAL PLANNED STUDENT ENROLLMENT	110	80	121	88	132	96
	FIRST YEAR FTE COST		SECOND YEAR FTE COST		THIRD YEAR FTE COST	
II. EXPENDITURES						
A. Personnel Cost1. Faculty2. Administrators	1.0	52,000	1.0	52,000	1.0	52,000
3. Adjunct Faculty 4. Graduate/Instruc/Assistants 5. Research Personnel			0.4	20,000	0.9	47,000
6. Support Personnel7. Fringe Benefits8. Other ()		12,000	0.5	12,000 12,000		12,000 12,000
Total Personnel FTE/Cost	1.0	64,000	1.9	96,000	2.4	123,000
R Operating Expenditures						

B. Operating Expenditures

- 1. Travel 5,000
- 2. Professional Services
- 3. Other Services
- 4. Communications
- 5. Utilities

Manufacturing & Resale 10. Miscellaneous 5,000 **Total Operating Expenditures** FIRST YEAR **SECOND YEAR** THIRD YEAR COST **COST COST** C. Capital Outlay 1. Library Resources 2. Equipment **Total Capital Outlay** D. Physical Facilities **Construction or Major** Renovation E. Indirect Costs (Overhead) 64,000 **GRAND TOTAL EXPENDITURES** 96,000 128,000 III. REVENUES A. Source of Funds 1. Appropriated Funds-Reallocation 2. Appropriated Funds-New 3. Federal Funds 4. Other Grants 5. Fees 6. Other (Student Tuition 64,000 96,000 128,000 Surcharge) **Total Source of Funds** 64,000 96,000 128,000 B. Nature of Funds 1. Recurring Χ Χ Χ 2. Non-Recurring

64,000

96,000

128,000

6. Materials & Supplies

8. Repairs & Maintenance9. Materials & Goods for

GRAND TOTAL REVENUES

7. Rentals