

TO: Graduate Affairs Committee (GAC), IUPUI Campus

FROM: Austin Agho, Dean, School of Health and Rehabilitation Sciences (SHRS)
Joyce Mac Kinnon, Associate Dean, SHRS

SUBJECT: Response to reviewers for the Master of Physician Assistant Studies
proposal

DATE: 3/11/10

We thank the reviewers for their careful reading and thoughtful comments regarding our proposal to offer a Master of Physician Studies degree through the School of Health and Rehabilitation Sciences. As noted by all reviewers and echoed during the discussion at the February Graduate Affairs Committee meeting, the program is a good fit with the other programs currently offered in the School and is reflective of both the School and campus mission. It also would provide needed personnel for the State of Indiana and beyond. Since we have been speaking with other departments and organizations about our plans to offer this degree, we have been receiving many phone calls from prospective students expressing a sincere interest in applying to the program.

Before responding to specific questions raised by the reviewers, we would like to emphasize that even after the degree is approved by university, IU Board of Trustees, and the Indiana Commission on Higher Education, the program will be subjected to a rigorous external review through the Physical Assistant (PA) accrediting body. It is a requirement of the PA accrediting body that no students can be admitted until the program has hired a medical director, a program director, a clinical placement director, and one additional faculty, and these four people must have one year to refine curricula and make the necessary arrangements for clinical placement. Furthermore, the program must receive provisional accreditation before students can be accepted. Therefore, at this point, we see the curriculum as a work in progress. Our PA Advisory Committee has been diligent in identifying the necessary knowledge and skills that graduates of the program must possess. As noted in the preceding paragraph, we have been in contact with the departments that offer the necessary didactic courses and with the facilities in which the students will practice their skills prior to graduation. We have also spoken with the Director of the IUPUI Simulation Center since this is a resource that would be most useful to the program. We believe we have all the necessary arrangements in place to quickly solidify the curriculum and clinical placements once this proposal is approved and the four core faculty members are hired.

With regard to specific courses, we have been in contact with Dr. David Burr, Chair of the Department of Anatomy and Cell Biology; Dr. Michael Vasko, Chair of the Department of Pharmacology and Toxicology; and Dr. Michael Sturek, Chair of the Department of Cellular and Integrative Physiology to talk about existing courses that the PA students might take, or existing faculty that might be willing to teach these students. Our conversations have been very successful. We have identified a human gross anatomy course, ANAT D505, currently offered to the MS in Medical Science students

and taught by a faculty member with prior experience with PA students that has space for the PA students in the existing course. Our conversations with the pharmacology and physiology chairs have also been positive, with dialogue continuing on possible courses and faculty. As noted in the original proposal, our proposal has the support of the Dean of the School of Medicine, the Dean of the School of Nursing, and the Chair of the Nurse Practitioner program.

Provided below is a summary of our responses to the issues/questions raised by GAC.

Issue: Prerequisite courses as listed may preclude some students from a liberal arts or general studies background from being eligible to apply to the program.

Response: As with any other graduate program, prerequisite course work is required in areas in which students would be disadvantaged in the program without specific foundational information. This is true of programs such as physical therapy, occupational therapy and nursing, for example. It is not the intent of the PA program to use prerequisite courses to exclude specific groups of students from applying, but rather to insure that students accepted into this intense academic program have the requisite background to be successful.

Issue: Number of credit hours in the proposal degree program seems high.

Response: PA programs across the country were surveyed to determine appropriateness of credit hour expectations (see table in proposal). As can be seen from the table included in the proposal, the number of credit hours proposed for this professional graduate program appears reasonable when compared with other programs.

Issue: No courses included in teaching or interprofessional collaboration.

Response: It is not an expectation of program graduates that they are prepared to engage in formal teaching. It is an expectation that they are prepared to teach patients and family, and this skill acquisition and demonstration will be integrated in several of the foundation courses. It is also an expectation that graduates of the program be able to collaborate with other health care professionals for the benefit of their patients. This is a skill that will be taught and evaluated within several of the program courses. Physician Assistants function in a team environment, both while in school and when in practice. Most of the physician assistant programs in the country use the team model to enhance the professional development and learning experiences of their students, and it is our intention to do likewise. The importance of collaboration will be introduced in the interprofessional course that is offered in the first semester of the program. Collaboration skills will be assessed in the simulation experiences, and will be manifested and evaluated in the clinical rotations where PA students assume the same sort of responsibilities as do medical students on the same rotations.

Issue: Concern about the time required by the University for new course approval.

Response: It is our expectation that all new courses will go through the new course approval process in 2010-11 so that they may be offered beginning in 2011-12.

Issue: No ratio provided for clinical/clock hours

Response: We agree with the reviewer that this is something that should be addressed. We have clinical/clock hour ratios in the other professional programs we currently offer in the school, and these ratios will probably be appropriate for this degree program as well. However, we would prefer to defer this decision until a program director is hired.

Issue: The number of students in the program at any one time could reach 150 and there is concern about adequate faculty resources to support this number as well as the number of new faculty hires.

Response: The actual number of students in the program at any one time once the program is fully subscribed should be no more than 100. Faculty in the Department of Health Sciences in the SHRS will be engaged with these students, as will the medical director, the program director, and the clinical coordinator. In addition, as seen from the projections in the proposal, at full capacity the program is projected to have a total of 10 full time faculty and several associate faculty. These would all be new faculty hires, and are included in budget projections. This does not include faculty who would be teaching only one course in the program and who would not have primary appointment in the SHRS.

Issue: Number of doctorally prepared physician assistants that might be hired to teach in the program.

Response: There are very few doctorally prepared physician assistants in the country. It is our expectation that faculty who possess the PA credential and no doctoral degree would be hired on a clinical track.

Issue: There is no option for part-time study.

Response: This was a deliberate choice by the School, with input from the PA Advisory Committee, to NOT offer the option of part time student status. It is also comparable with program requirements for the other professional graduate programs in our School. As with the other programs offered through the School, there are policies in place to deal with extraordinary extenuating circumstances that might occur once a student has been accepted into the program and cannot complete requirements in the usual timeframe.

Issue: Availability of clinical rotations.

Response: This program has the support of the School of Medicine, the Indiana AHEC, and numerous clinical facilities within the city and state to include the Clarian system, the Community Health network, IU hospital, and St Vincent. Representatives of all of these entities serve on our PA Advisory Committee. Being in a clinically rich environment such as Indianapolis, we are positioned to have an adequate number and variety of clinical rotations available to the PA students. Specific contracts will be signed once we have hired both a director and a clinical coordinator for the program. As a School we have extensive experience in identifying, forming, and maintaining contractual relationships with clinical sites for student placement. For example, we currently have approximately 250 clinical sites on contract for our physical therapy program and approximately 200 clinical sites on contract for our occupational therapy program. We understand the necessity of cultivating new sites and maintaining relationships with existing sites so as to meet the needs of our students for clinical placement. We realize

that these relationships must be nurtured and that it will be our responsibility, led by the clinical coordinator for the PA program, to continuously identify new sites, nurture existing sites and evaluate all sites on an annual basis.

Issue: Availability of adequate faculty with necessary expertise to teach the didactic courses.

Response: Initial conversations have been held with all departments that offer the courses the PA students will need to include the departments of Anatomy and Cell Biology, Pharmacology and Toxicology, and Cellular and Integrative Physiology. We have identified specific courses and faculty for several of the courses in our proposed curricula, and have identified other possible courses and faculty. We are choosing to wait until a program director has been hired, which, if this proposal is accepted, would be in 2010-11, before committing to specific courses and personnel for all of our curricula.

Issue: Some reviewers either did not have access or were unable to access the letter of support from the Dean of the School of Medicine or the consultant report written by Dr Dana Sayre-Stanhope.

Response: We will make sure that both of these documents are available for review.

Issue: Confusion about the budget provided by central University administration

Response: The financial detail provided in this proposal actually exceeds the requirement for new program proposals. However, people in central administration and in the SHRS thought this level of detail was appropriate due to the fiscal requirements of the program.

Issue: What is the source of initial program funding ?

Response: Per the PA program accreditation requirements, at least four faculty must be hired a full year before provisional accreditation is granted and students can be admitted. Hence, there is no tuition revenue from the program that might support faculty salaries in the first year of program inception. Therefore, IUPUI has agreed to provide start-up funds of \$200,000 to assist in meeting expenses of the first year of the program. Additional funds to implement the program will be obtained through internal reallocation of monies available in the school.

By way of this memorandum, we believe that we have answered all of the reviewers' questions. The proposal has been revised based on their comments. Again, we thank the reviewers for their willingness to spend their time to read and reflect on our proposal for a Master of Physician Assistant Studies degree.