

IUPUI GAC Reviewer Form

Date Reviewed: July 31, 2013

Documents Reviewed:

OTD New Degree Proposal ASRD Approved.pdf

OTD Exec Summary ASRD Approved.pdf

OTD Projections_DRAFT_tuition rateV7_OS_1-_2013.xsl

IUPUI GAC Reviewer Form.doc

Summary of Proposal:

1. Are the goals clear and achievable?

The goal of offering a Post-professional Doctorate in Occupational Therapy (OTD) is clear.

The goal of offering the program to those who already have a professional degree in occupational therapy is clear.

The curriculum presented is clear. It has many strengths including the four interprofessional collaborative practice competencies, linking of coursework with external professional association credentialing, and evidence based orientation.

The required prerequisites (Licensure as an occupational therapist) and possession of a master's degree is clear.

The employment possibilities for the graduates are clear and this level of degree offering is sorely needed.

The need for the program is clear.

There is a good match of mission of institution and mission of program.

This highly ranked program that needs to offer OTD to remain highly ranked and competitive.

The linkages with hospitals in the region are a real strength and an advisory board incorporating their input should commence in a timely manner.

The opportunities for applied and translational research exposure at IUPUI are extraordinary.

The total and actual cost of the program is provided.

The State of Indiana does need to offer a clinical doctorate in occupational therapy.

The proposed assessments and assessment plan seems adequate.

Goals that are less clear or not evidence based:

- a. *Use of Interview for admissions requirement. Use of interview to assess leadership potential.*
- b. *Parameters of writing sample and rubrics for grading.*
- c. *Recommendation versus requirement of MS in Health Sciences if the applicant lacks a Master's degree (which had previously been stated as required)*
- d. *Rationale for the goal of including part time students in a new start up program.*
- e. *Curriculum is clear but appears to be spread out over a two year period. This is not consistent with the desire and need for most students to finish in a timely manner.*
- f. *The predominate use of adjunct faculty.*
- g. *Use of capstones not based upon evidence. They are labor intensive and there does not appear to be sufficient faculty to support the concept.*
- h. *I could not understand the projected headcounts on page 16. It is too complex for beginning a program. Restrict it to full time students for one calendar year of study.*
- i. *I was also confused by full time and part time student counts on page 17. Use of full time students only would clarify this.*
- j. *Should there have been a letter of support from the Dean? I did not see one (page 26).*
- k. *It is not clear how Appendix F goals of no additional faculty in year one is realistic or practical.*
- l. *It is not clear how students serving as graduate assistants would have office space.*
- m. *Page 33 presents a curricular plan that is very light in terms of professional level education. If I understand it correctly, semester one is 10 credits and semester two is 13 credits, with only 3 credits in the summer. It would be clearer to present a sample of how one full time student would proceed through the program.*

2. Is the program academically sound?

As presented, the program is not academically sound due to lack of a plan to acquire qualified faculty (2 more needed) and a qualified staff member (to conduct assessment work and fieldwork assistance).

3. Are faculty resources available to offer this certificate without undercutting other key missions of the unit?

As presented, the program is not academically sound due to lack of a plan to acquire qualified faculty (2 more needed) and a qualified staff member (to conduct assessment work and fieldwork assistance).

4. Is there overlap, either real or potential, with any other unit that could harm the program or be exploited to help the program?

There is no reference to overlap or coordination with DPT or DNP that may also be on this campus.

5. My recommendation, comments/concerns regarding this proposal...

5.1 Without sound evidence and clear operations for interview of student applicants, strongly suggest this be removed.

5.2. Clarify operations and process for writing sample as well as rubric for evaluation of it.

5.3 Rethink how to assess leadership potential of students based upon evidence and current literature.

5.4 Require Masters for entry and leave it at that for first five years of program. After success of program, the use of the MS in Health Sciences for those who are interested but lack a master's degree could be phased in at that time.

5.5 Revise plan to begin first five years with full time students only. Maximum likelihood of success should be the "operational directive" for the first five years of this new program. Inclusion of part time students will likely compromise this (lower completion rates), and tracking them could require a full time staff member (it gets very complex when a single plan is not followed by a single cohort). After the program is successful for five years, incorporation of part time students could be considered.

5.6 The curriculum of 35 semester hours should be completed within a one calendar year time period using fall, spring and summer semesters with full time students only. This would be attractive to students to complete in one year, and is financially feasible – especially if stipends or graduate assistant support is available. A standard model would be 12 SH in the fall, 12 SH in the spring and 12 SH in the summer.

5.7 The total and actual cost of the program is provided. The cost projection, however, does not appear realistic or sufficient to assure program success. It is not feasible to operate a quality clinical doctoral program with only one faculty member. At least two additional faculty members, at a senior level, should be incorporated with the addition of a full time staff member.

5.8 The use of adjunct faculty is worthy and good when linked to specialization in areas of practice or expertise. The planned use of adjunct faculty as presented, however, will not assure a well-integrated, cohesive doctoral program.

5.9 Instead of capstone experiences, consider preparation of a proposal for submission to Indianan Occupational Therapy Annual Conference. If accepted and implemented, this would enhance scholarly training of the students at standards that are appropriate, and market the program in Indiana!

5.10 Provide office space for students who will serve as graduate assistants or research assistants.

Summary:

This is an important and very necessary program for the State of Indiana. Yet, the proposal as stands is not feasible. Planning needs to be redone and the addition of two new faculty and one support staff to be phased in over a five year period is recommended, along with restriction of the student body to full time students taking the curriculum over a one calendar year period (and deletion of the capstone project) with substitution of paper or poster proposal submission for the state conference.