1986

Report of the New Program Review Committee: Proposed M.S. Degree in Physical Therapy

University of Rhode Island Faculty Senate

Follow this and additional works at: http://digitalcommons.uri.edu/facsen_bills

Recommended Citation
University of Rhode Island Faculty Senate, "Report of the New Program Review Committee: Proposed M.S. Degree in Physical Therapy" (1986). Faculty Senate Bills. Paper 1130.
http://digitalcommons.uri.edu/facsen_bills/1130

This Article is brought to you for free and open access by the Faculty Senate at DigitalCommons@URI. It has been accepted for inclusion in Faculty Senate Bills by an authorized administrator of DigitalCommons@URI. For more information, please contact digitalcommons@etal.uri.edu.
TO: President Edward D. Eddy
FROM: Chairperson of the Faculty Senate


2. The original and two copies for your use are included.

3. This BILL was adopted by vote of the Faculty Senate on December 11, 1986.

4. After considering this bill, will you please indicate your approval or disapproval. Return the original or forward it to the Board of Governors, completing the appropriate endorsement below.

5. In accordance with Section 10, paragraph 4 of the Senate's By-Laws, this bill will become effective January 1, 1987, unless: (1) specific dates for implementation are written into the bill; (2) you return it disapproved; (3) you forward it to the Board of Governors for their approval; or (4) the University Faculty petitions for a referendum. If the bill is forwarded to the Board of Governors, it will not become effective until approved by the Board.

Richard Katula
Chairperson of the Faculty Senate

ENDORSEMENT

TO: Chairperson of the Faculty Senate
FROM: President of the University

Returned.

a. Approved ______.

b. Approved subject to final approval by Board of Governors ______.

c. Disapproved ______.

12/29/86

President

Form revised 4/86
On November 13, 1986, the New Program Review Committee voted unanimously to recommend:

That the Faculty Senate approve the proposed M.S. degree in Physical Therapy with a Class C* designation and with the condition that before the program is offered or listed in the catalog, the specific courses and the program of studies have approval from the Graduate Council and the Faculty Senate.

The proposal which is in the format required by the Board of Governors for Higher Education is on the following pages. Appendix B of the proposal is also included. Other appendices are available in the Faculty Senate Office for review.

* Class C approval, as defined in section 8.05.23 of the University Manual, recommends "funding of the proposed new program should additional funds be made available to the University."
Physical therapists is to correct, or alleviate acute or prolonged movement dysfunction.

2. Needs and Professional Opportunities

National Needs

According to the 1986-87 Occupational Outlook Handbook published by the Bureau of Labor Statistics, "Employment of physical therapists is expected to grow much faster than the average for all occupations through the mid-1990's because of anticipated growth in the areas of rehabilitation and long term care. Many additional openings will result from replacement needs."

New positions are needed to expand services for a wide range of individuals with physical disabilities. This highly diverse group includes the elderly whose number will rise sharply by 1995. Especially rapid increase is projected for those age 85 and above. The elderly suffer a high incidence of disabling conditions such as arthritis, stroke, and heart disease. Surgical procedures such as hip and knee replacement are becoming more common among the elderly and will increase the demand for post operative physical therapy.

As the baby-boom generation moves into middle age, the demand for services related to chronic diseases such as heart disease, diabetes, stroke, and arthritis is expected to rise. Cardiac rehabilitation programs involving physical therapy services are likely to continue to expand across the country. Advances in medical technology have and will continue to save lives that only a few years ago would have been lost. Examples include children with birth defects, accident and trauma victims, patients with severe burns, stroke and heart disease victims all of which require extensive rehabilitative care.

The growing popularity of physical fitness activities and sports participation has resulted in increasing demand for sports medicine services. As more people engage in regular exercise programs, the number of injuries that require physical therapy treatment will continue to grow. Health promotion and disease prevention programs are gaining in popularity across the country partly in response to the rapidly escalating costs of health care. Many of these programs are likely to require the expertise of the physical therapist.

Demand for physical therapists will be affected by changes in the way health care is delivered and paid for. In the future more and more health services will be provided on an out-patient basis. In addition to the traditional hospital based physical therapy services, a substantial number of physical therapists are establishing private practices that offer rehabilitative services with or without physician referral. Favorable third-party reimbursement policies are contributing to the very rapid growth in this area. Expansion of specialized facilities such as nursing homes, rehabilitation units and long term care centers will increase the need for trained physical therapists as well.

Home health care as an alternative to institutional care is rapidly increasing and should provide excellent opportunities for physical therapists. As a result of the Education for All Handicapped Children Act of 1975, there is an increasing demand for school based physical therapy services. Business and industry are now providing worksite clinics for a variety of health care needs for employees in an effort to cut their health care costs. In-house rehabilitative services are being provided because employers want the injured to return to work sooner.

In summary, job prospects in physical therapy across the nation should continue to be excellent through the rest of this century. Currently, the number of trained physical therapists falls short of the available number of job openings.

State and Local Needs

The physical therapy manpower needs in Rhode Island have been studied by a number of groups over the past ten or fifteen years. These efforts have not been coordinated in any systematic way by state health officials resulting in a lack of reliable data to accurately project the need for physical therapists in Rhode Island. Although there is a lack of comprehensive data, there appears to be a need for qualified physical therapists in Rhode Island. Many health care providers and administrators report difficulty in finding physical therapists to fill existing vacancies. It is also the belief of many health care providers and local..."
physical therapists that the future needs in Rhode Island will grow in much the same way as is expected nationally.

These state needs have resulted in some pressure on state education officials to establish an in-state educational program. In June 1978 the Association of Home Health Agencies (AHHA) conducted an informal survey of the physical therapy services in Rhode Island and concluded that a shortage existed. As part of that study, Mary Duvally, RPT, Physical Therapy Consultant for the Rhode Island Department of Health, indicated that there was a need for 66 additional physical therapists at that time. These figures were based on the American Physical Therapy Association (APTA) standards of one physical therapist for every 5,000 residents. As a result of the AHHA study, a request was submitted to the Board of Regents to consider the establishment of a physical therapy education program in Rhode Island.

In response to recent inquiries by URI representatives concerning the perceived needs of health care providers, we have received numerous letters expressing concern over the shortage of therapists and support for the establishment of a program at the University of Rhode Island. This support has come from the physical therapy professionals as well as other health care professionals including hospital administrators.

In 1981 the university engaged Dr. Samuel Fettelberg, Director of Physical Therapy at the University of Vermont as a consultant to assist us in determining the feasibility of establishing a program at URI. He identified a number of factors and/or trends which suggested that the future outlook for physical therapy was good both nationally and regionally. These include the following:

There has been a relatively high attrition rate in the physical therapy field, particularly at the baccalaureate level.

Population growth and aging trends will result in an increase in need.

A more health conscious public with increasing special needs.

An increase in number of patient services and diagnostic tests due to new technology.

Growth of group practices such as HMO's, extended care facilities and community health facilities.

Increased insurance coverage and payment plans.

Greater understanding and use of allied health personnel.

Access to physical therapy will expand from the traditional "by referral only" to limited direct access.

3. Source of Students

It is envisioned that the applicant pool for this program will come primarily from Rhode Island and the Northeastern states. Nationwide the competition for admittance to physical therapy programs is very high. We have every indication that there will be a highly qualified applicant pool for this program.

There are many undergraduates both at URI and at Rhode Island College who have expressed interest in physical therapy. Faculty advisors have been designated at both institutions to assist interested undergraduates in obtaining information concerning available programs, prerequisites, and admissions procedures. Pre-physical therapy advising has been focused on helping students as they prepare for junior transfer to the University of Connecticut and elsewhere. In addition, some students complete their Bachelor's degree here and then apply for admittance to a Master's degree program out-of-state.

A modest estimate is that there are at least 100 Rhode Island students studying physical therapy at other institutions at any given time. An informal survey conducted by Dean Luzzi in April 1984 revealed that 84 Rhode Island undergraduates were enrolled in five neighboring institutions in the New England area. This study did not include graduate programs or programs outside New England. It is anticipated that a significant number of the Rhode Island students who are currently required to go out-of-state for physical therapy education would be attracted to our program. In addition, since most physical therapy programs have far more applicants than they can accept, we would expect a large number of out-of-state students to be interested in the program.

4. Program Size

Student enrollment will be a maximum of twenty students per year to fit adequately into the University's existing resources of the University and to minimize the impact on clinical facilities. We are planning a 3-1-2 configuration (where URI students could use the fourth year of their undergraduate program to begin their professional studies in physical therapy). Admission to the graduate program would occur after the third year for URI students who have taken a pre-physical therapy minor as part of their Bachelor's degree. Students applying during their junior year could be admitted contingent upon completion of a Bachelor's degree. Transfer students would be required to complete appropriate pre-requisites, here or at their own institution, prior to acceptance into the graduate program.

Program size would be calculated on the basis of graduate program admittance, therefore we anticipate approximately 60 students to be enrolled in the program at any given time with additional students at the undergraduate level completing pre-requisites.

5. Admissions Requirements

Applicants to the graduate program must show evidence of a baccalaureate degree or its equivalent, an undergraduate grade point average of not less than 3.0, and a combined GRE Aptitude Score of 1,500. The following must be completed as part of the Bachelor's program:

- Biological Sciences - Minimum of 12 credits
  - Including Human Anatomy and Human Physiology
Physical Sciences - Minimum of 12 credits including 3 credits of Chemistry and 4 credits of Physics
Social Sciences - Minimum of 9 credits including developmental psychology
Mathematics - Minimum of 3 credits
Communications - Minimum of 3 credits. Course in Writing or Speech recommended

Recommended but not required - courses in abnormal psychology, statistics, exercise physiology, and computer science

C. Institutional Role

1. Relationship of the Program to Role of URI

A Master's degree program in Physical Therapy would make a significant contribution to the role and mission of the University. First, as there is no current program within Rhode Island, it would provide an in-state educational opportunity for Rhode Island students who are now required to go elsewhere for physical therapy training. Second, physical therapy fits well into the health priority of the University and as a graduate program would contribute to the graduate education and research mission of the University. Third, the presence of an educational program at URI would provide a source of stimulation to physical therapy professionals that could enhance their professional development as well as increase opportunities for cooperative activities between the University and the health care community.

2. Relationship to Existing Programs

There are a number of health related programs at URI that offer opportunities for close cooperation with a program in physical therapy. Current programs and activities that would be supportive of a physical therapy program include: Adapted Physical Education, Athletic Training, Communicative Disorders, Exercise Science, Gerontology, Health Education, Health Promotion, Human Development Counseling and Family Studies, Nursing, Pharmacology, Psychology and Sociology. In addition, opportunities would be available on campus for clinical research and practice in the Athletic Training Center, the Human Performance Laboratory, the Cardiac Rehabilitation Program and Student Health Services.

D. Content

1. The Curriculum

Since it is possible that the program proposal could be approved before the faculty and possibly the program director are hired, it is important to view the following curriculum components as subject to modification or revision. A sufficient amount of flexibility in the design of the curriculum must be retained to enable the program faculty and the director to make any changes that, in their view, are necessary for program excellence. These changes could include additions of courses, revisions in the sequencing of courses, modifications of course descriptions, program requirements, prerequisites, etc. Therefore, it is recommended that the curriculum approval process include provisions for an evaluation by the program faculty, under the leadership of the program director, to be conducted within the first two years after the program is approved and that a report of the evaluation process including recommendations for changes be submitted for review and approval by appropriate university groups.

The proposed Master's degree in Physical Therapy will require a minimum of 75 credits plus practicums. Applicants possessing an appropriate Bachelor's degree (see below) must take at least 45 credits at the graduate level. A written comprehensive examination is required.

Through proper utilization of electives, URI students could use the required prerequisites and up to 30 credits (the first year of the program) to fulfill requirements for the B.S. in Physical Education. Students with a Bachelor's degree from another institution or undergraduate transfer students would have to complete all prerequisites as well as all program requirements which normally would take a minimum of three years.

The curriculum presented below has been developed in cooperation with external consultants and includes the following major components: The Basic Sciences, the Interdisciplinary Foundations, the Clinical Foundations, and the Physical Therapist Professional Foundations. A bodily systems approach, progressing from the simple to more complex systems, is used in the sequencing of courses and experiences throughout the three year program. In addition, the bodily systems are used as organizing elements in providing an integration of the major curricula components listed above during each semester and year of the program.

The following new courses will be required:

PHT 400 Introduction To Physical Therapy (1,3) Physical Therapy as a profession and selected issues which affect physical therapy practice will be examined. Includes ethical and legal factors in health care and an introduction to the professional organization. (Lec. 3)

PHT 420 Human Anatomy for Physical Therapists I (1,3) Study of human development and the structure of major bodily systems. Emphasis placed on the cardiac, pulmonary, vascular, integumentary, muscular, skeletal and peripheral nervous system. Includes some biomechanics and kinesiology. (Lec. 2 Lab. 3)

PHT 421 Human Anatomy for Physical Therapists II (1,3) Continuation of PHT 420. Detailed consideration of the musculoskeletal and peripheral nervous system. Includes introduction to examples of disease and dysfunction and human locomotion. (Lec. 2 Lab. 3)
PHT 425 Psychology and Counseling for the Handicapped (1,3) A continuation of PHT 505 with a focus on the musculoskeletal and peripheral nervous systems and the spinal cord. Includes understanding disease and dysfunction as a basis for physical therapy program planning. An interdisciplinary approach to patient care management. (Lec. 3)

PHT 428 Clinical Foundations I (1,3) Provides a foundation for the evaluation of movement dysfunction and for planning and implementation of physical therapy interventions. Includes patient care documentation and procedures basic to safe management of patients. Integrated clinical experience is required. (Lec. 2 Lab. 3)

PHT 430 Human Physiology for Physical Therapists I (1,3) Physiological principles necessary for the assessment of normal and abnormal function and planning of appropriate therapeutic interventions. Includes biomechanical, nutritional and cellular aspects of the major bodily systems. (Lec. 2 Lab. 3)

PHT 431 Human Physiology for Physical Therapists II (1,3) Continuation of physiological principles required for physical therapy practice. Focus on musculoskeletal and peripheral nervous systems. Includes effects of exercise on normal individuals as well as those with selected dysfunctions. (Lec. 2 Lab. 3)

PHT 450 Community Health Education (1,3) Introduction to trends in health care and the health care system. The role of the physical therapist in promoting the health and well-being of the community is examined. Includes teaching and learning strategies and their application. (Lec. 3)

PHT 500 Management for the Physical Therapist (1,3) An overview of basic principles of management and the management process for physical therapists and physical therapy managers. Includes organizational development and human factors which affect management outcomes. (Lec. 3)

PHT 515 Pathology and Movement Dysfunction I (1,3) Study of cellular mechanisms and insult affecting the cardiopulmonary, integumentary, and endocrine systems. Focus on understanding disease and dysfunction as a basis for physical therapy program planning. An interdisciplinary approach to patient care management. (Lec. 3)

PHT 518 Clinical Foundations II (1,3) A continuation of PHT 428. Provides the theoretical basis and skills needed to assess and begin diagnosing, planning and implementing therapeutic interventions. Focus on cardiopulmonary problems. Integrated clinical experience is required. (Lec. Lab. 3)

PHT 520 Kinesiology for Physical Therapists (1,3) Principles of biomechanics which relate to the practice of physical therapy. Joint movement and effects on articular surfaces, inert tissues and contractile tissues as well as kinematic and kinetic activity in normal movement are studied. (Lec. 3)

PHT 525 Pathology and Movement Dysfunction II (1,3) A continuation of PHT 515 with a focus on the musculoskeletal and peripheral nervous systems and the spinal cord. Includes understanding disease and dysfunction as a basis for physical therapy program planning. An interdisciplinary approach to patient care management. (Lec. 3)

PHT 528 Clinical Foundations III (1,3) Provides the theoretical basis and skills needed to assess and begin diagnosing, planning and implementing therapeutic interventions for clients with integumentary, peripheral nervous system and musculoskeletal dysfunction. Integrated clinical experience required. (Lec. 2 Lab.)

PHT 530 Neuroscience (1,3) Study of the structure and function of the central nervous system. Focus on the sensory-motor system in the control of human movement. Includes the study of normal and abnormal neumotor function. (Lec. 3)

PHT 535 Pathology and Movement Dysfunction III (1,3) A continuation of PHT 525 with a focus on the central nervous system. Includes understanding disease and dysfunction as a basis for physical therapy program planning. An interdisciplinary approach to patient care management. (Lec. 3)

PHT 538 Clinical Foundations IV (1,3) Provides the theoretical basis and skills needed for assessment and diagnosis of musculoskeletal dysfunction. Planning and implementing therapeutic interventions including the prevention and treatment of musculoskeletal problems. Integrated clinical experience is required. (Lec. 2 Lab 3)

PHT 540 Normal Development and Movement (1,3) Principles of normal development and segmental motion. Includes the study of perceptual motor integration and psycho-social adjustment. (Lec. 3)

PHT 545 Physical Therapy and the Community (1,3) Current issues in physical therapy. Includes an examination of current trends in health care delivery. Focus on special need groups including school children, the elderly, and the mentally retarded as well as issues related to practice in non-conventional settings. (Lec. 3)

PHT 550 Introduction to Physical Therapy Research (1,3) Study of the basic research design and statistics used in the physical therapy literature. Emphasis on interpretation and evaluation of current literature and approval of written research. Includes introduction to development of a scholarly report. (Lec. 3)

PHT 560 Research Project Practicum (1,3) Application of analytical abilities gained from the curriculum through development of an individual project under the supervision of a faculty member. Requires a review of the literature and approval of written proposal by the student's advisory committee. (Lec. 3)

PHT 568 Clinical Foundations V (1,3) Provides the theoretical basis and skills for the assessment and diagnosis of neuromotor dysfunction. Planning and implementing therapeutic interventions including the prevention and treatment of neuromotor dysfunction is included. Integrated clinical experience is required. (Lec. 2 Lab 3)
PHT 575 Seminar in Physical Therapy (1,3)
Examination of special problems and current issues in the field of physical therapy. Includes public relations and marketing strategies. Students will develop a plan for continued personal and professional development (Sem. 3).

PHT 585 Clinical Internship I (SS,0-6)
Supervised clinical education in selected patient care settings. Emphasis on developing assessment, planning and treatment skills. Involvement in other practice related activities such as management and education is required.

PHT 590,591 Clinical Internship II,III (II,0-6 each)
Supervised clinical education in selected health care settings. Opportunity for the student to engage in the full scope of responsibilities required of entry level therapists.

There are currently a number of other health related programs on campus that offer courses that would support the physical therapy program. Some of these courses could be used as electives or in some cases, with prior approval, could be used in place of the required courses listed above. Following is a list of existing courses that could be used to support the program:

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>EST 407</td>
<td>Introductory Biostatistics</td>
</tr>
<tr>
<td>EHS 563</td>
<td>Public Health Administration</td>
</tr>
<tr>
<td>FSN 444</td>
<td>Nutrition and Disease</td>
</tr>
<tr>
<td>HCF 400</td>
<td>Child Development:Advanced Course</td>
</tr>
<tr>
<td>HCF 420</td>
<td>Human Development in Adulthood</td>
</tr>
<tr>
<td>HCF 421</td>
<td>Death, Dying and Bereavement</td>
</tr>
<tr>
<td>HCF 431</td>
<td>Family and the Elderly</td>
</tr>
<tr>
<td>HCF 435</td>
<td>Development Assessment in Children</td>
</tr>
<tr>
<td>HCF 450</td>
<td>Introduction to Counseling</td>
</tr>
<tr>
<td>HCF 520</td>
<td>Developmental Issues in Later Life</td>
</tr>
<tr>
<td>HCF 527</td>
<td>Health Care Policy and the Elderly</td>
</tr>
<tr>
<td>HCF 555</td>
<td>Gerontological Counseling</td>
</tr>
<tr>
<td>MTC 404</td>
<td>Pathophysiology</td>
</tr>
<tr>
<td>PAD 680</td>
<td>Legal Issues in Health Admin.</td>
</tr>
<tr>
<td>PED 410</td>
<td>Corrective and Adapted Phys. Educ.</td>
</tr>
<tr>
<td>PED 443</td>
<td>Advanced Athletic Training</td>
</tr>
<tr>
<td>PED 430</td>
<td>Adapted Aquatics</td>
</tr>
<tr>
<td>PED 530</td>
<td>Research Methods in Hlt &amp; Phy. Ed.</td>
</tr>
<tr>
<td>PED 562</td>
<td>Advanced Exercise Physiology</td>
</tr>
<tr>
<td>PED 564</td>
<td>Physiology of Aging</td>
</tr>
<tr>
<td>PED 585</td>
<td>Adapted Phys. Act. for Special Pop</td>
</tr>
<tr>
<td>PSY 432</td>
<td>Advanced Developmental Psychology</td>
</tr>
<tr>
<td>PSY 435</td>
<td>The Psychology of Social Behavior</td>
</tr>
<tr>
<td>PSY 464</td>
<td>Humanistic Psychology</td>
</tr>
<tr>
<td>PSY 601</td>
<td>Physiological Psychology</td>
</tr>
<tr>
<td>PSY 603</td>
<td>Development</td>
</tr>
<tr>
<td>PSY 605</td>
<td>Personality</td>
</tr>
<tr>
<td>RCR 416</td>
<td>Physical Aging and Leisure Skills</td>
</tr>
<tr>
<td>SOC 423</td>
<td>Mortality and Morbidity</td>
</tr>
<tr>
<td>SOC 438</td>
<td>Aging in Society</td>
</tr>
<tr>
<td>SOC 524</td>
<td>Issues in Med. Care Delivery Syst.</td>
</tr>
<tr>
<td>ZOO 548</td>
<td>Neurophysiology</td>
</tr>
</tbody>
</table>

### SUMMARY OF CURRICULUM REQUIREMENTS

<table>
<thead>
<tr>
<th>Category</th>
<th>Requirement</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prerequisites</td>
<td>See page II</td>
<td></td>
</tr>
<tr>
<td>First Year Requirements</td>
<td>30 credits</td>
<td></td>
</tr>
<tr>
<td>Graduate Program Requirements</td>
<td>39 credits</td>
<td></td>
</tr>
<tr>
<td>Electives</td>
<td>6 credits</td>
<td></td>
</tr>
<tr>
<td>Practicums</td>
<td>0-9 credits</td>
<td></td>
</tr>
<tr>
<td>Comprehensive Examination</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### SAMPLE PROGRAM CYCLE

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall (UG)</td>
<td>PHT 420</td>
<td>PHT 425</td>
<td>PHT 428</td>
<td>PHT 400</td>
<td></td>
<td>15</td>
</tr>
<tr>
<td>Spr (UG)</td>
<td>PHT 421</td>
<td>PHT 515</td>
<td>PHT 518</td>
<td>PHT 450</td>
<td></td>
<td>15</td>
</tr>
<tr>
<td>Fall (GR)</td>
<td>PHT 520</td>
<td>PHT 525</td>
<td>PHT 528</td>
<td>PHT 550</td>
<td>3 cr</td>
<td>15</td>
</tr>
<tr>
<td>Spr (GR)</td>
<td>PHT 530</td>
<td>PHT 535</td>
<td>PHT 538</td>
<td>PHT 500</td>
<td>3 cr</td>
<td>15</td>
</tr>
<tr>
<td>Summer</td>
<td>CLINICAL INTERNSHIP PHT 585</td>
<td></td>
<td></td>
<td></td>
<td>0 or 3</td>
<td></td>
</tr>
<tr>
<td>Fall (GR)</td>
<td>PHT 540</td>
<td>PHT 545</td>
<td>PHT 548</td>
<td>PHT 560</td>
<td></td>
<td>15</td>
</tr>
<tr>
<td>Spr (GR)</td>
<td>CLINICAL INTERNSHIP II AND III</td>
<td>PHT 590,595</td>
<td></td>
<td></td>
<td>0 or 6</td>
<td></td>
</tr>
</tbody>
</table>

### COMPREHENSIVE EXAMINATION

Graduates of the program are eligible for state licensure and are required to successfully pass the license examination in the state within which they intend to practice.
E. Interinstitutional Considerations

1. Similar Programs Offered in New England

There are nine other physical therapy programs offered in New England most of which are located at private institutions. They are the University of Connecticut, the University of Vermont, Northeastern University, Northeastern University, the University of New England, Quinnipiac College, Lowell University, Springfield College and Simmons College.

2. Comparison With Other New England Programs

The other New England Land Grant Universities that offer physical therapy are the University of Connecticut and the University of Vermont. All of the programs offer a bachelor's degree while Boston University offers baccalaureate through doctoral level training. Many of those programs are currently in the process of developing graduate programs in order to meet expected changes in the accreditation requirements of APTA. Since all programs in physical therapy require accreditation by APTA to ensure basic professional competencies, there are common characteristics that are evident in all physical therapy education programs. The proposed program will be similar, in many respects, to those already available in the region because of the need to meet national accreditation standards. Although the program will not be particularly unique, it will offer an in-state opportunity for Rhode Island students that is not currently available to them. In addition, the program would help meet the need for physical therapists in the state.

3. Cooperative Arrangements With Other Institutions

At present, no formal cooperative arrangements have been made between Rhode Island and any other institutions of higher education. Although, we expect that informal cooperation will always exist, we do not anticipate any formal cooperative agreements in the future.

4. Transfer Provisions With Other Rhode Island Institutions

Students from other Rhode Island schools could transfer into the program upon completion of appropriate undergraduate prerequisites either at their own school or at URI. Students with a bachelor's degree from another institution would need to complete all pre-physical therapy requirements before being admitted to the graduate program. Preliminary discussions have been held with faculty members at Rhode Island College concerning transfer arrangements and the identification of appropriate prerequisites.

5. Program Impact on Other Postsecondary Institutions

The proposed program should have no impact on other Rhode Island institutions of postsecondary education since it would be the only program in the state.

6. External Affiliations

Programs in physical therapy require extensive affiliation with health and medical facilities as part of the clinical education component for students. Rhode Island has excellent facilities for the clinical education of students that would lend strong support to a program. According to our consultant's report by Dr. Samuel Feitelberg, Rhode Island has the potential of developing more than 25-30 clinical sites within the state and within reasonable travel distances therefore minimizing the use of out-of-state facilities and the related costs.

Preliminary discussions have taken place with administrators of Rhode Island Hospital and the State General Hospital in Cranston concerning our clinical education needs. We have met with the Chiefs of physical therapy at most of the hospitals in the state as well as other representatives of the professional community. These meetings have been extremely positive and reflected both a sense of enthusiasm for the establishment of a program at URI and a willingness to contribute to the clinical education experiences of our students. Many of these facilities are currently providing clinical affiliations for other programs in the region and were enthused about the possibility of working cooperatively with a URI program.

7. Availability to Regional Students

Although we expect a significant number of regional students to be interested in the program, we do not anticipate that the program will become part of the New England Board of Higher Education agreement.

F. Resources

1. Administration

The program will be administered by the program faculty under the leadership of a faculty member appointed as Program Director. The specific responsibilities of the program director during the developmental stages are outlined in Appendix A. Initially, the program will be located in the Department of Physical Education, Health and Recreation in the College of Human Science and Services. Once the program is well established, the administrative arrangements would need to be re-evaluated. It is likely that separate departmental status, with a department chairperson, would provide the best administrative arrangement over the long term. If a separate Department of Physical Therapy is established, it would continue to be located within the College of Human Science and Services.

Administrative salaries and related costs of the proposed program can be found in Appendix B.

2. Faculty

A. At present there are no physical therapy faculty available within the institution to teach in the program. Faculty needed to offer the program must be new positions or reassignment of existing vacancies within the
A preliminary review of periodicals in physical therapy and related areas indicates that, of the approximately 100 journals identified, the URI library serials list contains around 40 titles listed under Physical Therapy. Existing library holdings are inadequate to support a graduate program in physical therapy. The APTA recommends a minimum of $15,000 be budgeted for library holdings for the first two years of a developing program. Since URI does not have a medical school or a division of allied health, it is likely that the library would need to increase substantially its holdings in physical therapy and the related medical sciences in order to support the program. Therefore, our estimated budget (Appendix B) provides for a total of $25,000 for the first two years. We are currently adding to the library holdings in some of the related areas (e.g., Sports Medicine) through the Department of Physical Education, Health and Recreation.

5. Facilities and Equipment

We estimate the need for approximately 8,000 square feet of space to support the proposed program. The space requirements include classrooms, a clinical education laboratory, office areas, a conference room and storage. The preferred location is the Keaney-Tootell Complex which currently houses the Athletic Training Center, the Human Performance Laboratory, the Cardiac Rehabilitation Program and the Exercise Science Program. There are at least two options available at this time. These include creating a new facility (new construction adjacent to the Keaney-Tootell Complex) or re-assignment of some of the existing space in Keaney (currently occupied) to physical therapy which appears to be the most feasible.

We are optimistic that the needs for the proposed program in physical therapy will be a high priority in the planned new construction and renovations of the Keaney-Tootell Complex. The major renovation expense would be the creation of a multipurpose laboratory and clinical education center (approximately 1500 sq. ft.) The estimated cost of renovating existing space in Keaney would be a minimum of $25,000. In addition, a substantial start-up expenditure would be required to fully equip the laboratory. (See Appendix B) Some of this equipment is available in the athletic training room and human performance laboratory so that some sharing arrangements are possible with existing programs and departments. A variety of physical therapy supplies and small equipment are also needed to support the educational activities of the program. The initial costs for these materials would be significant but replacement and recurring costs would be substantially less. (See Appendix E)

5. Operating Expenses

Normal operating expenses to support the program will be required and will be the equivalent to the needs of a small department. These expenses include travel, office supplies, repairs, consultant fees, lecturers etc. Estimated operating expenses can be found in the budget in Appendix B. Initially, the operating expenses will be included in the budgets of the Department of Physical Education, Health and Recreation and the College of Human Science and Services.
G. Evaluation

The development of the program will be subject to the same intensive internal review process that is required of any new program at URI. Throughout this process external consultants have been used to evaluate the resources available, facilities and equipment needed, and the general curriculum design. This process of external review will continue throughout the developmental and early implementation stages of the program.

This program will be eligible for accreditation by the American Physical Therapy Association. This process requires a preaccreditation phase called The Accreditation Candidacy Program. Candidacy status offers developing programs the opportunity to establish a relationship with APTA early on in the process. This enables the institution to work closely with APTA to help assure that the program is developing with adequate planning and with the necessary resources. The Accreditation Candidacy Program requires application by submission of a Declaration of Intent at least six months prior to the enrollment of the first class of students in the professional or technical phase of the program. A prerequisite to the submission of a Declaration of Intent is that the institution must have retained a program director. Once the program is established periodic reviews will be conducted by the program faculty as well as the University Program Review Committee. Periodic external evaluation will be required in order to maintain accreditation by APTA.
The Two Hundred and Thirty-Fourth Report of the Curricular Affairs Committee

At its meeting of November 18, 1986, the Curricular Affairs Committee considered the following matters now presented to the Faculty Senate.

SECTION I

Informational Matters

A. College of Arts and Sciences

1. Department of Art

CHANGE: Title and description for ART 374:

ART 374 Topics in Film (1.3) Explores the social, historical, and aesthetic development of the cinema from 1895 to the present. Three hours twice weekly. May be repeated twice with permission of instructor. Keeler

2. Department of History

CHANGE: Title and description for HIS 326:

HIS 326 German History (1.3) Survey of German history to 1914 with emphasis on the eighteenth and nineteenth centuries. (Loc. 3) von Hanno (F)

3. Department of Music

CHANGE: Expiration date for MUS 112X Intermediate Musicianship (1.0) to permit the department to offer the course during the spring semester 1987.

4. Women's Studies Program

CHANGE: Description for WMS 350 by deleting "May be repeated once with a change topic" and adding "May be repeated with a change in topic. Six credits may be applied to the Women's Studies major."

B. College of Resource Development

Department of Fisheries, Aquaculture and Pathology