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To: Lee Huntsman, Provost
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From: Marsha Landolt 

Re: 10-year review of Rehabilitation Medicine programs

Enclosed is the Department of Rehabilitation Medicine self study, the report of the review committee and the response of the Department. The paragraphs below present a brief description of the programs reviewed, a summary of the significant findings of the review, and recommendations for action.

Program description

The Department of Rehabilitation Medicine includes approximately 50 MDs and PhDs primarily devoted to education of medical students and residents, provision of clinical services and research. There are 4 FTE faculty occupational therapists and 4 physical therapists committed to the education of occupational and physical therapists.

The Department offers the Master of Science in Rehabilitation Medicine with tracks in Physical Therapy (PT), Occupational Therapy (OT) and Rehabilitation Medicine, Master of Rehabilitation Medicine (MRM), and the Master of Physical Therapy. In addition, the department offers Bachelor's degrees in OT and PT.

The Master of Science in Rehabilitation Medicine is a post-professional degree that imparts research and leadership skills needed for pursuing advanced practitioner and faculty roles for occupational and physical therapists as well as physicians specializing in psychiatry (rehabilitation medicine). The program admits approximately 5 students in each of the OT and PT tracks in each of the years it has been available (funding is dependent on training grant income from NIH).

Until 1994 either the MS in Rehabilitation Medicine or the MRM was a requirement of psychiatry (medical) residents in the Department. Since neither degree is currently required of residents, enrollment has declined to 0-2 total per year for both programs.

The current Master of Physical Therapy is more a clinical than research degree, but was not active at the time of the review. This degree must assume a new role due to the national requirement that all professional entry-level programs be master's programs by the year 2000 to be eligible for accreditation. The Department therefore proposes that the Bachelor of PT, the current professional-level entry program, be eliminated and the MPT be expanded to serve as the entry-level program. Twenty-five students now enter the BPT program per year and it is desired to retain this level in the entry-level master's program. The difference between the current BPT and revised entry-level MPT is an additional quarter of instruction (bringing the total to 7 plus 2

quarters of full time practical field work), upgrading the bachelor's coursework to the graduate level and adding a capstone professional project course. The Department estimates that it will need one additional faculty FTE to offer the MPT to 25 students per year. Since the time to degree is two years, there will be 50 students in the program at any one time.

The OT and PT programs are parallel degrees sharing several courses and laboratories. The level of sophistication and training of the entry-level practitioners in OT and PT are similar. The national trend in OT programs is to convert to entry-level master programs. The Department therefore proposes to convert the Bachelor of OT program to a Master of OT program in a manner similar to the MPT. Thus, one additional quarter will be required over the existing BOT program, the coursework will be upgraded to the graduate level and a capstone project course will be required. The entry-level program will remain at 25 students per year. The Department estimates that it will need one additional faculty FTE to offer the MPT to 25 students per year. Since time to degree is two years, there will be 50 students in the program at any one time.

Recommended action

The following recommendations are based on the review committee's report and Graduate School Council deliberations.

1. *Discontinue the Masters in Rehabilitation Medicine (MRM).* In the past, the MRM was required of physiatry residents to provide research experience. A research project is now required of these residents outside the MRM and the MRM is no longer a requirement for successful completion of the residency. Thus, the demand for the degree has declined to virtually nil. Removing this offering is largely a technicality and will not disadvantage any student. The Department concurs with this recommendation.
2. *Eliminate the current post-professional MPT degree to make the MS in Rehabilitation Medicine the only post-professional degree.* The name of the MPT degree will be used for the new professional entry-level program that will replace the bachelor's degree program. The existence of the MPT as a post-professional (academic) degree creates confusion as the bachelor degree in physical therapy is converted to a master degree. The MS in Rehabilitation Medicine fills the need of PT students pursuing advanced training in research to assume leadership roles. The Department concurs with this recommendation.
3. *Continue the MS in Rehabilitation Medicine track in Physiatry.* This is an advanced training program for physicians. It is a small program of high quality and adds negligibly to the cost of training a resident in physiatry.
4. *Add Master's programs in OT and PT as the professional entry-level degrees,* as requested by the Department with the support of the Dean of Medicine. It is recommended that the programs be allowed to enroll students at the present rate of entry for the bachelor's program (25 per year) *only* if 5 faculty FTE are committed to each track *on a permanent basis*. The Dean of Medicine added 0.5 FTE to PT between the time the review committee report was completed and the time the Council considered it. Thus, 0.5 FTE in PT and 1.0 FTE in OT are still needed for the proposed conversion at the current number of entry-level professional students. If this level of funding is not provided, the Council recommends authorization of this conversion, but *only at an entry rate of 16 students per year*. The Council understands, through Associate Dean Dan Hunt, that the School of Medicine values these programs highly and will find additional support, although a specific mechanism has not yet been identified.

Due to changes in accreditation requirements, failure to convert this program will terminate education of entry-level physical therapists at the University of Washington. PT education would then be available at Eastern Washington University and the University of Puget Sound, both of which offer the MPT. The University of Washington is a leader in PT education in the region, and offers the only program in a Health Science Center in which the training of PT students is done in a multidisciplinary fashion exposing the students to the entire health care team. It is a program whose quality cannot be duplicated anywhere in the state.

Although the conversion of the bachelors in OT to a master's degree is not required for accreditation, it is highly desirable for several reasons. First, the national trend in OT programs is in the direction of master's entry degrees. Second, the students in OT and PT share 8 courses and 2 laboratories. It would be economically impossible and educationally undesirable to separate them and inappropriate to offer graduate credit to one set of students and undergraduate to another completing the same course. Third, it is reasonable to assume that the master's may eventually become the entry-level professional degree for OT. Their accrediting body, the American Occupational Therapy Association, now encourages this trend. Currently, 42 of 124 (34%) entry-level OT degree programs nationally are master's programs in comparison to 57 of 159 (36%) PT programs.

The Federal Bureau of Labor Statistics estimates a growth of 82-83% in the need for OT and PT professionals by the year 2005 due to the aging of the population, the survival of individuals sustaining previously fatal injuries and illnesses and advances in medical technology. Eighty-eight percent of OT graduates and 79% of PT graduates from the UW's OT and PT professional programs report taking jobs in Washington. The admission of students into the OT and PT professional programs is limited to those applying from WICHE and WWAMI states that do not have their own program.

Given the very strong demand for these programs, their high quality and the continuing need for practitioners in the state, it is the unanimous hope of the Graduate Council that funds will be made available to maintain enrollment at the current 25-entering students per year. The recommendation to reduce the enrollment to 16 if additional funding is not made available is based on the recommendation of the review committee and has the concurrence of the Department.

Adoption of this recommendation requires eliminating the bachelor degrees in OT and PT.

- 5 *Continue and increase support for the post-professional Master of Science pathways in Occupational Therapy and Physical therapy.* The Department is now able to offer these programs only when educational grant money supports the needed faculty. Thus, the program has been available irregularly. In the last academic year, no students were accepted due to lack of funds. The NIH has made such money available in the past because of the need for leadership in the area of Occupational Therapy and Physical Therapy, but this support is not likely to continue.

The program is of high quality, is in demand by students and serves a vital need of the state and region. The Council urges the School and the University to consider placing the funding for this program on a permanent basis. It was the opinion of the review committee, based on the Department's experience with training grant funding, that one additional faculty FTE in addition to those for the MOT and MPT programs is needed each in OT and PT to ensure the continuous availability of this program. The recommendation of the Council to continue

authorization to offer this degree is *not* contingent upon additional funding.

6. *Consider the development of a Ph D in Rehabilitation Sciences.* The current MS in Rehabilitation Medicine program is the only post-professional program for occupational and physical therapists in Washington. It plays a key role in educating professionals for advanced practice and teaching roles. For example, the two primary occupational therapists in the Neonatal Intensive Care Unit at Children's Hospital and Medical Center, also the authors of a leading book on feeding disorders in children, are program graduates. Many other graduates serve similar roles in other medical centers, public schools and the Tulalip Reservation. The head of the OT program at the University of Puget Sound is a graduate of this program, as is the head of the program at the University of British Columbia. Several other graduates play central roles in the education of OTs, PTs, or their assistants at other institutions.

In 1977 the Institute of Medicine stated that, "Rehabilitation science and engineering should be more widely recognized and accepted as an academic field of study ... and should serve as the basis for developing new opportunities in multidisciplinary research and education." A master's degree at one time was the terminal degree in OT and PT, but it no longer is. Several institutions now offer a PhD on OT or PT. The University of Washington has outstanding strengths upon which multidisciplinary Doctoral education in OT and PT could be based. These include its programs in Speech and Hearing Sciences, Special Education, Physiology and Biophysics, Nursing, Biostatistics, Health Services, Epidemiology, Medical Education, Industrial Engineering, Bioengineering and Anthropology. It is to be expected that new research collaborations would come of the development of a Ph.D program in OT and PT. The Department would like to consider the development of such a program, but a serious undertaking is likely to be dependent on sustained funding for the current MS program.

- c Paul Ramsey, Dean, School of Medicine
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