

Report from the Program Review Committee for the Doctor of Physical Therapy
University of Washington, Seattle
Dates of Review: April 19-20, 2010

Doctor of Physical Therapy Program Review Committee Members:

Douglas A. Cheney, Professor, UW College of Education, Special Education Program,
Box 353600 (Committee Chair)

Peter R. Cavanagh, Professor, UW Department of Orthopedics and Sports Medicine,
Box 356500

James Gordon, Professor and Associate Dean, Division of Biokinesiology and Physical Therapy,
University of Southern California, 1540 Alcazar St., CHP 155, Los Angeles, CA 90089-
9006

Irene R. McEwen, George Lynn Cross Research Professor, Department of Rehabilitation
Sciences, University of Oklahoma Health Sciences Center, 1200 N. Stonewall, Oklahoma
City, OK 73117

Committee Charge

The committee's charge in this review was to assess the quality of the Doctor of Physical Therapy (DPT) degree program in the Department of Rehabilitation Medicine and provide the faculty with constructive suggestions for strengthening the program. The review intended to provide the University with a clearer understanding of the program's quality, educational value, role within the University and community, role within the academic discipline, and resource requirements. The DPT program has been operating with provisional status since Autumn Quarter 2003 and is a fee-based funded program.

Dates and Format of the Review

The two-day site visit occurred on April 19-20, 2010. The first day of the review included individual interviews with Peter Esselman, Chair of the Department of Rehabilitation Medicine, and Mark Guthrie, Head of the Division of Physical Therapy, and group interviews with faculty members in the physical therapy musculoskeletal, neuro/lifespan, clinical education, and post professional tracks. Current students and graduates were also interviewed in two separate groups. During the second day, the committee had another interview with Dr. Guthrie, along with interviews of Laura Robinson the Division's program manager, other faculty from Rehabilitation Medicine who collaborate/teach in the DPT program, and Stacia Lee, the UW physical therapy clinic manager.

The committee had time to deliberate during the noon hour of the second day, and then presented the initial findings in two meetings. During the first hour, the committee discussed its findings with administrators from the Department of Rehabilitation Medicine and Division of Physical Therapy, along with the Associate Vice Provost and Associate Dean of the Graduate School, the Vice Dean for Research and Graduate Education of the School of Medicine, a representative of the Graduate School Council, and the Executive Vice Provost for Academic Affairs and

Planning. In the final session, the division administrators left, and the committee discussed the recommendations with administrators of the Graduate School, School of Medicine, and university.

The four major questions that guided the review were:

- 1) Are they doing what they should be doing?
- 2) Are they doing it well?
- 3) How can they do things better?
- 4) How should the University assist them?

The Graduate School posed an additional question:

Should the DPT program status be changed from provisional to continuing status?

Major Recommendation

Regarding the final question, the committee was in unanimous agreement that the DPT program should be moved to continuing status. The committee thought the program should have a ten-year time frame before the next program review is scheduled, although there is one stipulation to this recommendation. Based on the findings of the review, the committee recommends that the faculty involved in the DPT engage in a strategic planning process during the 2010-12 academic years. Within these two years, a strategic plan should be developed that includes major goals; activities/resources to reach the goals, and benchmarks/outcomes to assess the movement the division makes over the next ten years. In our recommendations, the committee identifies some suggested goals for the division, although the division should also have additional goals to assess their progress.

Key Findings

The review committee's overall assessment is that the Doctor of Physical Therapy Program is healthy with definite potential for growth and development. The faculty are enthusiastic and highly committed, the students are pleased with the educational process, and the leadership is positive and constructive. Moreover, the program plays a critical role in educating an important class of health professionals for the state of Washington. The committee's comments, especially those that appear critical, are intended to assist the program in achieving excellence and especially to better position itself within the University's ambitious research environment.

Program Strengths

Collaboration

Across all of our interviews with administrators, faculty, and students, there was a clear theme of collaboration within rehabilitation medicine and university faculty to the benefit of the PT faculty and students. Faculty mentioned how they rely on others in occupational therapy and prosthetics and orthotics to teach classes and support student learning. Students noted the impact of this collaborative practice in their coursework. They greatly appreciated the multidisciplinary approach in their education. Faculty also noted that they work together well in the division and appreciate their colleagues. Evidence of this collaborative effort was also noted in frequent

weekly faculty meetings and quarterly retreats to review and discuss division work. Faculty seemed to genuinely enjoy working together within the division.

The program is poised for growth

The Division of Physical Therapy is poised for growth. The leadership has been working for several years to establish the foundation (via the self-sustaining funding model) for an increase in the number of students in the DPT program, with corresponding increases in faculty and teaching space. The critical elements of this foundation (especially the required teaching space) are now in place and the Division is now just beginning to ramp up the enrollment in the DPT program. Increased tuition revenue associated with increased enrollment will allow the Division to recruit new faculty members. Indeed, more faculty will be required. The Division has done an excellent job of recruiting new faculty this far. Several faculty with clear potential to excel in both research and teaching have been recruited in the last several years.

It would be a mistake, however, to view the Division's growth purely in terms of enrollments and student capacity. The growth in the Division's faculty will, if properly managed, allow for increased research and scholarly productive and will facilitate an increase in stature and visibility, both within the University and nationally. Indeed, growth of the Division, especially in the number of research-oriented faculty, is essential for the Division to achieving long-term stability and strength within the University.

Leadership is supportive

During our meetings with DPT program faculty, staff, and students, all commented about how supportive Peter Esselman, chair of the Department of Rehabilitation Sciences, and Mark Guthrie, head of the Division of Physical Therapy, have been. Dr. Esselman, for example, managed to obtain greatly improved office and classroom space in spite of severe space and resource limitations. The expanded classroom space and teleconferencing capability between the two physical therapy lab classrooms will allow the Division to increase the class size from 32 to 45 by 2011.

The faculty, staff, and students were equally complimentary about Dr. Guthrie's leadership; giving numerous examples of his efforts to ensure students and faculty have the supports and resources they need. Some of these include teaching help, extra labs for students, and arranging for students to have additional experiences with patients during their first two years in the program. The overall positive leadership has contributed greatly to the cohesiveness and collaboration among faculty, faculty commitment to students, and high student satisfaction.

Self-sustaining program

The university has been asking for units to decrease their reliance on state funding by developing self-sustaining programs that generate their own revenues to cover expenditures. The DPT is a prime example of how these programs can be fiscally responsible and develop into mature programs that educate professionals for a discipline. Each year the program is overwhelmed with applicants and this creates a pool of students to generate sufficient tuitions for the program to operate efficiently and effectively. The program has been successful not only in generating enough revenue to fund the program, but also having enough funding to support faculty efforts in research, travel, dissemination, and other essential budget items to create a positive, productive working environment for faculty and staff. Tuition rates appear to be reasonable for a diverse group of students to access the program and to address necessary expenditures.

DPT candidate pool

The Division participates in the American Physical Therapy Association's Physical Therapist Centralized Application Service (PTCAS). This service allows applicants to apply to one or more programs simultaneously by entering application materials into a single Web-based application. Since the Division began using the PTCAS, the number of applications to the program has increased from about 300 to over 500. Most of the applicants are highly qualified, although some do not meet admission criteria.

Discussions with faculty and staff indicate that the Division has had no difficulty filling the class with highly capable students and, because of limitations on class size, has had to deny admission to many outstanding students. Considering the large nationwide demand for physical therapists and the number of qualified applicants, the Division should have no difficulty filling the class of 45 students in 2011 – and probably could fill a much larger class with qualified students if the necessary space and other resources were available.

Faculty commitment

The committee was extremely impressed by the many reports received from students regarding the commitment of the DPT faculty to their roles as educators. Many examples were cited where faculty members went well beyond normal limits to give their own personal time to students who needed help. It was very clear to us that there is a deeply committed faculty in the DPT program and that this is one of the program's outstanding strengths.

High level of student satisfaction

The self-study described a number of ways in which students give feedback to faculty, including regular meetings with their advisors, formal evaluations of teaching, evaluations of guest lectures, anonymous e-mail to faculty via class web sites, minute papers, and participation of class representatives during faculty meetings. These and other opportunities for students to interact with faculty and give feedback likely contribute to the students' many comments about the openness and responsiveness of the faculty, and their overall high level of satisfaction with the program.

When we talked with first, second, and third year students they had two suggestions for improvement. One was for students to have more opportunities for involvement with patients in the UW physical therapy clinics, which the Division has addressed and is continuing to address. The other was for more communication and more responsive communication about their upcoming clinical experiences. The first and second year students also said they wished they had more hands-on opportunities with patients (a frequently stated desire among physical therapy students), but the third year students, who currently were involved in clinical experiences, assured them they would be able to apply what they were learning to patients.

The high level of satisfaction expressed by the students with whom we talked is consistent with the results of an April, 2010 survey of students by the Graduate and Professional Student Senate (GPSS). The survey addressed communication, community, intellectual support, personal and emotional support, funding, and climate. The only area with which the students expressed dissatisfaction was the amount of funding that the program receives. The GPSS report included statements that the students felt the department was underfunded, with little funding for students, and that students would like access to student aid for which they are not eligible because of the

Division's self-sustaining status. The overall conclusion of the report was "in general, the students seemed very satisfied with the program."

Program graduates echoed the satisfaction of current students. The graduates with whom we talked also were highly complimentary of the faculty and the education they received. They said the faculty were accessible and helpful, and the program's emphases on professionalism and evidence-based practice were important strengths. Overall, they felt well prepared for practice when they graduated. Several said they were better prepared to work with patients with primarily neurologic problems than patients with primarily musculoskeletal problems.

Good preparation of students

There is abundant evidence that University of Washington DPT students are well prepared for professional practice when they graduate. The curriculum is comprehensive, well organized, evidence-based, and executed with a high degree of attention to detail. Evaluation of students is ongoing, both in the classroom and in clinical internships. Interviews with students, graduates, professors, and clinical instructors confirmed that the students are skilled practitioners when they graduate. In particular, the students and graduates we interviewed all expressed that they were pleasantly surprised at how they compared with students from other schools when they were in internships or their first jobs. The program shows particular strength in preparing students for practice in neurologic and pediatric settings, but preparation other areas; especially musculoskeletal is more than adequate. Since the first class of DPT students graduated in 2007, 100% of graduates have passed the licensure exam on the first attempt.

Students and graduates are highly professional

We were especially impressed with the high degree of professionalism of the students and graduates. They conducted themselves as professionals, appeared aware of their professional responsibilities, and were highly motivated to contribute to the physical therapy profession through involvement and service. The Division's faculty should take particular pride in this characteristic, because it obviously derives from the student's modeling behaviors that they observe in their teachers.

Reliance on evidence based practice

Evidence-based practice is strongly advocated for physical therapy education and clinical practice. The students and graduates all commented that incorporation of evidence-based practices is a strength of the program and, as one student said, "everything is very up-to-date and evidence-based." Another student mentioned that when she attended the American Physical Therapy Association's Combined Sections Meeting in San Diego last February, information that was presented as being "new" was old to the students because they had previously covered it in class.

Although the emphasis on evidence-based practices (EBP) in the academic program appears to be strong, when we asked third year students if they had opportunities to observe and implement EBP during their clinical experiences, two of the three third students shook their heads and the third indicated that students could be responsible for promoting EBP with their clinical instructors. Limited opportunities to observe and practice EBP during clinical experiences is not

uncommon, but efforts to identify and maintain clinical sites that use EBP are important if students are to see and apply what they have learned in the classroom.

Program Weaknesses and Challenges

Developing Full Professors

When the academic profiles of the DPT faculty are reviewed as a group, there is a notable absence of appointments at the full professor rank. This is a faculty that is heavily weighted towards the junior ranks. We are aware that the recent retirement of a senior full professor who had an outstanding record has left somewhat of a void, but it would be desirable to bolster the senior ranks by promotion and/or recruitment.

Recommendation: We recommend that a mentoring program be instituted for associate professor level faculty to facilitate their progress towards promotion to full professor. We also suggest that the possibility of a senior recruitment should be considered as part of the Department's planned expansion program.

Strategic plan for growth

The Division needs a clear and comprehensive strategic plan to guide its growth and development over the next five to ten years. This plan must first establish what the Division wants to be – what its identity will be within the University and in the physical therapy profession. Will it be a relatively small program known primarily for its teaching with dedicated and skillful teachers? Will it be a nationally recognized center for the advance of rehabilitation and physical therapy? Will it be a center for rehabilitation research within the region? Will it be a highly valued component of the University's research efforts? Will it be ranked among the top programs in the country?

These questions must be addressed in the context of the environment in which the Division lives. It is part of one of the premier research institutions in the country. The School of Medicine has a strong focus on basic and translational research and has been highly successful in attracting outstanding researchers and the funding to support them. The Division's goal should be to play a valued role in accomplishing the University's overall mission. Indeed, by analyzing existing research programs within the Department and School, the Division can undoubtedly find key areas in which it can play an essential role in translating basic research into effective clinical interventions.

Therefore, the Division's faculty, in collaboration with leadership from the Department and School, need to engage in a focused discussion with the aim of reaching a consensus about what they want to be. Then they need to develop a plan for getting there. This plan should have clear objectives and benchmarks for measuring progress toward those objectives. For example, if one objective is to achieve a higher degree of scholarly and research productivity, standard measures of scholarly productivity would be identified, such as number and quality of publications, number of invited presentations, and number of grant proposals submitted and funded.

One important aspect of the strategic plan must be identification of key areas for development of strength in research. This necessitates identifying areas of existing strength both within the

Division and also in related Departments and then developing plans for using those existing strengths as a foundation to build on. These discussions and plans will form the basis for the next faculty recruitment efforts. Indeed, the Division needs to determine how many new faculty they will be able to support as they grow, and what are the most critical areas of research expertise to look for. Because the Division begins this process as a relatively small unit, it cannot look to simply fill holes. It would be better to look to build on existing areas of strength. In this regard, it would be a mistake to recruit new faculty according to what courses they can teach in the curriculum. Individual courses can always be taught by faculty from other departments in the University or by outside experts. Instead, the recruitment of new faculty should be focused on building the research strength of the Division as a whole.

There was a sense from our interviews with faculty that there is some ambivalence about growing into a larger and more research-oriented unit. The faculty are rightly proud of the teaching environment they have created. It is highly student-centered, involves a great deal of team teaching, and depends critically on ongoing monitoring by all faculty of what is taught and how well it is learned. The faculty worry, with some justification, which such a system might begin to break down if individual faculty take more responsibility for research. It was our observation that the culture of teaching within the Division, while laudable, pulls faculty away from other critical areas of responsibility, especially research. Indeed, development of the Division's research mission will necessitate a shift to a more structured curricular approach that does not depend so critically on continual sharing of information. In such a system, responsibilities for teaching can be better defined so that faculty will be able to plan their research activities. The division's faculty need to develop a consensus on how to transform the educational approach so that it facilitates rather than conflicts with faculty research and scholarship.

Recommendation: Develop the strategic plan taking into account the issues raised above.

Faculty recruitment

One of the most important elements in the Division's success in achieving its strategic goals will be to recruit accomplished research faculty who can thrive in the University environment from the moment they arrive. In order to accomplish this, newly recruited faculty should have an identified set of collaborators both within and outside the Division as they are recruited. Indeed, potential for collaboration should be a key criterion for hiring: Does there exist an established group of collaborators for this individual, and are those collaborators enthusiastic about this person's recruitment? To make these judgments, researchers from outside the Division should be involved in recruitment from the beginning.

Recommendation: When recruiting new faculty, assure that the faculty have internal and external collaborators for their research agenda.

Attaining And Maintaining Quality For Internships And Clinical Experience

As the class size increases from 32 to 40 in fall 2010 and then to 45 in fall 2011, the demands on the clinical education program also will increase. One demand will be to have a sufficient number of clinical sites for students. Even more important, however, is having high quality sites, particularly considering that over one-third of students' physical therapy education takes place in

clinical settings with clinical educators. As described above, a need appears to exist to identify or develop high quality clinical sites in which clinicians model evidence-based practices and students have the opportunity to practice them.

Another effect of increasing class size will be increased demand for communication between the Director of Clinical Education (DCE) and students. The only concern about communication with faculty that current students expressed was lack of information about the clinical sites for their upcoming clinical experiences, lack of communication when they request information, and some “stories” about appointments for phone visits with clinicians that were not kept and lack of responsiveness to clinical instructors who need help. The veracity of these comments and the magnitude of the problem, if real, are not known. But the concerns are worth noting and investigating. The DCE estimated that 50-75% of her time is related to clinical education. She currently has help from a .50 FTE staff member, who will become full time in June, which should help with the increased number of students.

Recommendation: As the program grows, carefully address the need to identify or develop high quality clinical sites in which clinicians model evidence-based practices and students have the opportunity to practice them. To coordinate this effort allot and increase sufficient FTE to the DCE to cover increased responsibilities.

Integration with UW Medicine Physical Therapy

In the conversations that committee members had with past and present DPT students, many students mentioned that a primary reason they decided to attend UW was because they anticipated being part of a major medical center. In particular, they anticipated being associated with the UW Medicine clinical physical therapy program since it was in the same UW Medicine department. Several students then mentioned that they were disappointed to find that the association between the educational and clinical components of the Department of Rehabilitation Medicine were not stronger.

We recognize that students will invariably say that they need more clinical experience even while they are still accumulating the knowledge that such exposure would require. Also, the results of our further explorations indicated that there was indeed a good relationship between the director of the DPT program and the Director of the UWMC clinical physical therapy program. It is also the case that a number of clinical PTs volunteer their time in the educational program, and that the clinical PT program hosts DPT student for their internships.

The missing piece of the puzzle is a student clinic in which advanced students can treat patients under the supervision of the clinical PTs in the UW Medicine system on a regular basis. This would likely be accompanied by the creation of courtesy academic appointments for the personnel involved in teaching and clinical appointments for the academic faculty engaged in supervision. While there is agreement in principle between the two arms of the department that such a clinic would be mutually beneficial, there appears to be resistance at the hospital administration level to making such a clinic a reality.

Recommendation: We recommend that the Department Chair take the creation of such a Student Clinic to the administration as a priority issue. The many precedents in other areas of the

University's medical education mission show that there are no over-arching barriers to creating such a clinic.

Research Laboratory Space

Impressive renovation of the space on the 9th floor of the BB Tower has been recently completed. However, the new space is primarily devoted to DPT teaching and faculty/staff offices. The lack of new space for research laboratories has the potential to influence the type of faculty members who can be recruited to fuel the Department's expansion in the next several years. It is highly likely that candidates with a strong research emphasis will require laboratory space as part of their start-up packages. The present plan for such a situation appears to be to assist such candidate in finding collaborators in other divisions or departments where space is available. While this may work in some cases, it is very possible that top-flight recruits will be lost unless a commitment to personal research space can be given. Taken to the limit, is possible that such a trend could lead to the de-emphasis of research in the division.

Recommendation: We recommend that the Department Chair work with the office of the Dean for Research of the Medical School to locate new research space that could be used for faculty recruits. As expansion at the University's South Lake Union Campus continues to the next phase, there will be "back-fill" opportunities on the main campus site that may suit the needs of the division's new researchers.

Faculty and Student Diversity

The Division's self study reported the challenges to recruiting students/faculty from underrepresented groups for both their faculty and student membership. This is an issue that several units on campus have faced and is an important issue to address as the program grows. The recruitment of new faculty should consider the issue of diversity in the review of files and selection of candidates. Faculty could, for example, contact their colleagues nationally/internationally to seek applicants from underrepresented group for any new positions in the Division. The admissions committee should attempt to increase the number of students from underrepresented groups as the program accepts more students in the coming years.

Recommendation: Commit to increasing the diversity of faculty and students in hiring and admissions.

Technology and Student Space

There was no space for students to congregate or call their own and only one dedicated computer for student use. While the students said that they could access computers in the Health Science library, it appeared to the committee that students should have greater access to computers and have a space to meet. There are clearly space limitations in the Health Sciences building, but as the program grows, additional space and technology should be a priority for students.

Recommendation: The Division and Department administrators should review access to technology and meeting space for students; and keep address this as a priority during future growth.

Program Direction Relative to the Field

We find the direction of the Division to be consistent with the dominant trends within physical therapy and rehabilitation. Two key decisions provide strong evidence of this. First, the Division moved the physical therapy degree from a master of physical therapy degree to a doctor of physical therapy in 2004. This transition occurred later than many other physical therapy programs, including the two other programs in the State of Washington. Clearly, the change to the DPT was necessary for the program to continue to attract students and prepare them for current practice. Over 95% of all physical therapy programs in the US now offer the DPT, and the Commission on Accreditation on Physical Therapy Education (CAPTE) recently decided to require the DPT for accreditation.

Second, the Division, in collaboration with other Divisions in Rehabilitation Medicine, recently developed a PhD in Rehabilitation Sciences. The top physical therapy programs across the nation all either have or participate in PhD programs. The involvement of PhD students in the research programs of the Division already has begun to expand its research capacity.

The Division's emphases on critical inquiry and decision-making, evidence-based practices, inter-professional education and practice, professionalism, and increasing diversity of faculty and students also are consistent with the direction of physical therapy education and practice. Research is another strong emphasis within the field, along with demands for faculty to be engaged in research and its dissemination. Considering the strong research culture and support for research within the department and the university and the research preparation of all faculty, the Division seems to be in an excellent position to increase its research productivity as the increased class size makes additional funds available to hire new faculty and lab assistants to reduce faculty teaching loads and increase their research responsibilities.

Respectfully submitted
Douglas Cheney, Committee Chair
May 21, 2010