May 30, 2010

Elizabeth Watkins, PhD
Chair, Graduate Council
University of California, San Francisco

Dear Dr. Watkins,

On behalf of the faculty and staff of the UCSF/SFSU Graduate Program in Physical Therapy, thank you for the recent comprehensive review of the Program. Please extend our appreciation to the members of the review committee and the Graduate Council. The faculty have reviewed the recommendations of the committee and discussed them during a faculty retreat. Our discussions and program modifications will continue in FY 2011. I have detailed below our responses to the specific recommendations of the committee with regard to the Program, Students, Faculty, and Facilities and Other Resources.

**Program Recommendations**

**Entry-level curriculum**

- Reduce the courses required in the research thread. Current required biostatistics course can become a prerequisite and research design course [may be integrated] with other content.

- Decrease the requirement for two writing assignments. Decrease the quality of the final product and shift the emphasis in the curriculum to professional rather than scientific writing in the curriculum. Professional writing includes clinical documentation, writing letters of medical necessity, development of brochures, etc.

**Comment:** We assume that the committee did not truly intend for us to "decrease the quality of the final product", but rather to lighten the load on both students and faculty members, perhaps by shifting the Program emphasis from scientific writing to professional writing. The committee suggested modifications in research activities to free up time for practice of manual skills and treatment progression (needs identified by students), and the faculty are amenable to this suggestion, with the caveat that the strengths of the Program be maintained. The faculty members believe that one of the current strengths is the depth of training in clinical research. Though an introductory statistics course is one of the prerequisites for the entry-level DPT degree, the students’ ability to apply statistical knowledge is limited. In the second-year PT 251 Research Design course the students first learn the pros and cons of different study designs and begin to analyze the literature, judging the quality of evidence for physical therapy and medical interventions. The content from the PT 251 course is reprinted and applied in the students’ clinical courses and rotations. The second-year Biostat 135 Biostatistics course, taught by a faculty member in the School of Medicine, provides a review of parametric and non-parametric...
methods, as well as demonstrations of applicability in clinical research. Learned principles are further applied in the PT 209/910 Evidence Based Practice course in which students develop clinical questions in their areas of interest. Our Program is unique in physical therapy educational programs in that in our transition from the MS to the DPT we maintained a requirement for hands-on research. In FY 2010, as a requirement for PT 419 Mentored Clinical Research, we offered students the opportunity to participate in ongoing faculty-directed research or to engage actively in a faculty-directed journal club with both basic and clinical/translational components. We were encouraged by the students’ level of participation and learning in these two research experiences.

**Action items:** We will modify the course requirements for PT 910 Evidence-Based Practice and PT 920 Case Report to require one formal manuscript, rather than one in each course. In addition to the manuscript, students will present the culminating project in oral format in the annual PT Spring Symposium. For the non-culminating project, we will require homework-type assignments and oral presentation of the project in class. We will also make every effort to match students by interest into either research or journal club experiences in PT 419 Mentored Clinical Research. Student participation in research should enhance faculty productivity, as well as facilitate students’ application of research and statistical knowledge. We will continue to encourage and assist students in publication and regional or national presentation of their scholarly work. Lastly, to address the suggestion to increase students’ professional writing, we will identify opportunities for learning within existing courses and clinical rotations. Professional documentation is included already in several of the clinical skills courses. There may be opportunities to add legislative and lay public advocacy and brochure writing in the PT 704 Education and Learning and PT 908 Professional Colloquium courses.

- Explore the development of inter-professional entry-level learning.

**Comment:** As noted in the committee’s report, inter-professional education is a method to be explored to increase efficiency of curriculum delivery. Inter-professional training in such areas as ethics, health policy, and health team training also enables culture changes for improved communication, quality and safety in health care. A UCSF Deans’ Task Force for Inter-professional Education that includes dentistry, medicine, nursing, pharmacy and physical therapy is in its fourth year of providing inter-professional educational experiences. A newly formed Vice-Chancellor’s Workgroup is developing a 5-year educational plan for inter-professional education at UCSF.

**Action item:** Continue active participation in both the Task Force and the Workgroup to develop courses that provide curricular content and achieve learning objectives in an inter-professional format.

- Consider developing on-line content to prepare students for postgraduate modes of learning.

**Comment:** The recommendation of the committee was to explore distance learning, podcast or on-line modules as an efficient way to deliver some of the standard curricular content.

**Action item:** The faculty will continue discussions and consider content in several courses that may be delivered in digital format. Video-conferencing has been utilized in PT 209 to facilitate distance learning by students from CSU Fresno. On-line chat and other group interactions are planned for PT 910 and 920 during the mentored clerkships next January-March. On-line modules will be piloted in the PT 200 Neuromusculoskeletal Anatomy course for the students entering June 2010.

- Integrate the faculty practice within the entry-level curriculum.
Comment: The review committee acknowledged the quality care and teaching expertise provided by the faculty and staff in the UCSF PT Faculty Practice. The clinic environment may be leveraged to provide the increased time for students to practice their manual skills and treatment progression suggested by the committee. Additional hands-on experience may be gained through the PT Health and Wellness Center.

Action items: With the move of the clinic to Mission Bay we anticipate increased integration of the clinical and academic faculty, in fact this was one of the goals of the departmental consolidation. One example of academic/clinical integration was piloted this spring quarter. Two evenings of skills practice for the PT 743 Musculoskeletal Pathokinesiology III course were held in the Divisadero clinic. Faculty from the clinic stayed late and joined core academic faculty and third-year students in training second-year students in manual therapy, evaluation and treatment progression. Students were pleased to be in the clinic environment and to have access to functional high-low treatment tables and expert direction from the faculty. Expansion of the clinic space will enable us to accept additional students in clinical rotations and advanced clinical experiences. The Curriculum Committee is planning expansion of educational opportunities in the faculty-staffed PT Health and Wellness Center, an ideal venue for service learning and clinical research. Wellness education may be incorporated into PT 410 Part-time Clinical Clerkship and PT 704 Education and Learning. As learning opportunities are added to the curriculum, it will be important to ensure that the activities do not add significantly to the current teaching loads of the core faculty or compromise the ability of the clinical facility to meet clinic expenses.

Other programs
- Discontinue the post-professional DPT program when current class is graduated; eliminate the connection with California State University, Fresno.

Action item: Discontinuation of the post-professional DPT is planned coincident with the graduation of the MS-DPT class of 2010-2012. By that time, it is expected that the California legislature will have enabled the professional doctorate to be offered through the CSU system. This will allow CSU Fresno to independently offer the DPT. UCSF will continue to partner with SFSU to jointly offer the DPT and DPTSc degrees.

- Consider eliminating the DPTSc program to begin to explore the development of a Rehabilitation Science PhD program within the department or in conjunction with other UCSF programs, e.g. BMS.

Comment: The faculty members agree with this suggestion, as one of the program goals is to develop a PhD program in rehabilitation science. In recent years we have recruited research faculty and increased extramural funding, in anticipation of funding requirements for PhD students.

Action item: We will continue to investigate options for an independent PhD or a PhD within an established graduate program such as the Biomedical Sciences Graduate Program. Included in that plan will be a T-32 grant application to support this graduate program. Phasing out the DPTSc program will be discussed as a PhD program becomes viable.

Student Recommendations
- Streamline Application process

Comment: The committee suggested working with the two graduate schools and PTCAS to streamline the process of application to the joint DPT program. In discussions with the Review Committee, it was also suggested that we discontinue admissions interviews.
**Action item:** The faculty members discussed discontinuing applicant interviews, but are reluctant to do so before gathering and analyzing data that best predict success in the program and the clinic. Although literature has failed to support a correlation between applicant interviews and academic performance, an association has been seen with clinical performance. We plan to review our program data this year and make a decision regarding interviews for the class entering 2011. We will also investigate the possibility of including questions from the UCSF supplemental application in the PTCAS application.

- Keep working on diversity

**Action items:** As suggested by the review committee, we will strengthen the recruitment efforts on the SFSU campus, targeting students in the pre-physical therapy club and undergraduates with an interest in the field of Physical Therapy. We will also create opportunities for work/study within the SFSU and UCSF departments, such as assisting with basic administrative duties or working as an aide in the faculty practice. In the case of improved funding from the state, we would consider again offering the PT 300 Introduction to Rehabilitation course for undergraduates at SFSU.

- Department should develop criteria for financial aid in conjunction with student financial services that are judicious.

**Action item:** In accordance with the committee’s suggestion, we will establish criteria and guidelines for distribution of financial support to entry-level DPT students. The guidelines should assist the Program in its efforts to recruit and support a diverse population of students.

**Faculty Recommendations**

- Which is better to support research needs of the faculty? DPTSc or PhD

The DPTSc degree enabled the Program to offer advanced doctoral education while increasing the numbers of research faculty and pursuing extramural funding for nacent research programs. Faculty members acknowledge that the PhD is the more accepted degree and four- to six-year focused training would better support the research needs of the faculty. As noted above, the PhD is a goal of the Program. The size of the Program is insufficient to support both the DPTSc and PhD degrees. With the establishment of a PhD degree, the DPTSc degree would be discontinued.

- Increase diversity of core faculty through a targeted hire

**Action item:** We will place concerted effort into targeted recruitments in our next open faculty positions to hire faculty members who represent the diverse populations of California. Data from the APTA indicate that the number of physical therapists from underrepresented minority populations is low, and the number of PhD-trained therapists is but a small fraction. We may require university support for start-up funding to complete targeted recruitments, and will make requests as necessary.

- Enhance the opportunity for faculty practice to engage in clinical research

- Enhance future department-dedicated research space

**Comment:** The Review committee made the suggestions to increase faculty research and enhance research space to enable the Program to “be a major contributor to the profession of physical therapy, while at the same time advancing the reputation of the institution”.

**Action items:** We are pursuing assignment of the PT Health and Wellness Center as clinical and research space. With the build-out of the Cardiovascular Research Institute, Orthopaedics Institute and Neuroscience building at Mission Bay, we recognize a unique opportunity for the Wellness Center to support clinical research and development of grant
funding for collaborative translational research. The proximity of the Wellness Center and the new Faculty Practice site at 1500 Owens St. at Mission Bay will enable clinical faculty to participate more easily in research studies at either site. Co-location of several core academic and clinical faculty members will facilitate collaboration amongst Program faculty. Lastly, we are incorporating clinical research equipment including a motion analysis system into the Faculty Practice gym.

- Work towards increasing tenure (ladder slots) for recruitment and retention of faculty

**Action item:** The historical assignment of only two FTE to the Department has been discussed with the School of Medicine Dean. The Department chair will continue efforts toward increasing the assignment. A targeted hire to increase faculty diversity may also help the university meet its strategic goals.

- Consider use of professional fees or some other sources to cover for research leaves (sabbatical-like opportunities) for promoted in-residence faculty.

- Mentor junior faculty related to promotion

- Expand travel support for faculty.

**Comment:** The Review committee acknowledged the extraordinary efforts of both teaching-heavy and research-heavy faculty. The Committee accurately noted the heavy teaching loads and the challenge of maintaining independent research programs. The last sabbatical leave for a ladder-rank faculty member was in 1994.

**Action items:** The initiation of professional fees in FY 2010 will enable the Program to accumulate reserves to be used in part to support research leaves for ladder rank and in-residence faculty and academic travel for adjunct and clinical faculty. With regard to mentoring faculty for promotion, all Assistant Professor level faculty members have chosen career mentors. In accordance with the UCSF Academic Affairs Mentoring Program, the mentor-mentee pairs meet at least twice per year to review faculty Individual Development Plans. To date, faculty members have achieved on-time promotions.

**Facilities and Other Resources Recommendations**

- Leverage the strength of the applicant pool by increasing the number of entry-level students to 50 students to enhance the budget.

**Comment:** In making this recommendation in its report the review committee stated that, “it is crucial for the Program to capitalize on one of its greatest strengths – its strong students/applicant pool”. The committee made note of: 1) the large pool of qualified applicants; 2) ageing society’s increasing need for more physical therapists; 3) the marginal increase in resources needed to teach 50 compared to 35 students; and 4) the revenue stream of $1 million per year generated by 3 classes of 50 students. The UCSF Graduate Dean is supportive of an increase in student numbers. During the review, faculty expressed their concerns about limitations in educational space. They were informed by the reviewers of existing Programs with higher student numbers and less educational space.

**Action items:** The UCSF Program Director has learned that the Graduate Dean is supportive of an increase in student number and the faculty have begun discussions. As this is a joint program with SFSU, faculty have considered the impact of an increase in student number at this campus and in particular on laboratory-based teaching and limitations in scheduling alternative classroom space. Some faculty have expressed concern about laboratory crowding and discomfort when the lab space must also be a classroom. There are also some concerns about unwritten accreditation requirements for faculty:student ratios, site availability for clinical training, and faculty workloads.
Educational spaces are under development at both universities. Within the Nursing Program at SFSU, clinical skills and simulator training spaces have been developed. At UCSF, library space has been converted into Teaching and Learning and Kanbar Simulation Centers, with flexible group classrooms and simulated patient care rooms. The new PT clinical space and PT Health and Wellness Center at Mission Bay will also be available periodically for education. The faculty members’ concerns will need careful consideration weighed with the national and state needs for physical therapists and access of students to a public education in California. The US Bureau of Labor Statistics has recently estimated a 30% increase in nationwide demand for physical therapists from 2008 to 2018, or 56,200 PT jobs (www.bls.gov/oco/ocos080.htm#empty). At the present time, the UCSF/SFSU Program is the only entry-level DPT program in a California public university.

- Recapture more indirect cost recovery.

Comment: This suggestion is warranted, though implementation is not within the authority of the joint academic Program or Department. The Executive Summary of the UC Commission on the Future notes that among the strategies suggested for enhancing resources is, “improving indirect cost recovery rates on sponsored research, which currently do not cover the University’s actual costs”, and “improving transparency in the management of funds recovered through indirect costs”. Specific recommendations within the document are: 1) “Revise practice and policy on charging indirect cost recovery for non-federally funded research”; and 2) “Improve indirect cost recovery rates with federal agencies”. We are hopeful that action will be taken on these recommendations of the UC Commission on the Future.

- Consider developing between campus shuttle service

Comment: UCSF provides free shuttle service between the Parnassus and Mission Bay campuses. The Mission Bay campus provides easy freeway access for transit to SFSU. It is unlikely that the Program will undertake a shuttle service between UCSF campuses and the SFSU campus in the near future, although nothing is lost in making this request.

- Identify a UCSF champion outside the department to assist with issues such as tuition recovery, indirect cost recovery and tenure-track positions.

Comment: This is an interesting suggestion. In the review report, the suggestion stems from the committee’s concern that professional fee revenue may not remain with the Program to enable Program growth. The committee suggested that high ranking administrators would need to advocate for tuition assignment, indirect cost recovery and FTE support for the Program. The UCSF Program Director feels that the Graduate Dean and the School of Medicine Dean have been very supportive, to date.

Action item: The faculty will discuss this suggestion with a newly constituted Interdisciplinary Advisory Group to be convened this summer. The Program Director will maintain this concern as an agenda item in bimonthly meetings with the School of Medicine Dean.

Respectfully submitted by Kimberly S. Topp, PT, PhD, Professor and Chair of the Department of Physical Therapy and Rehabilitation Science, UCSF