

Attachment 1a

Supplemental Information - New Degree proposal

Master of Science in Physician Assistant Studies (MSPAS) Curriculum Overview/Catalog wording

Overview of the MSPAS Program

Kansas State University physician assistant program leads to a Master of Science in Physician Assistant Studies (MSPAS) degree. The program follows the traditional medical model of training, providing in-depth analysis of disease processes, diagnosis and treatment.

The 27-month physician assistant program will admit 44 students once a year, and is designed to prepare graduates to provide medical care as part of an interprofessional health care team. The curriculum consists of three semesters of classroom training (1st year – didactic), followed by four semesters of clinical rotations (2nd - 3rd years - clinical). All students enter as a single cohort in early January, complete seven continuous full-time semesters, and graduate in May with a Master of Science in Physician Assistant Studies (MSPAS) degree.

Curriculum Requirements

The MSPAS requires 108 graduate credit hours, 62 from didactic, and 46 from the clinical year. The program does not offer advanced placement. No credit is granted for prior work experience in the healthcare field. Furthermore, no transfer credits are accepted. The following list of courses are the core requirements of the program.

Didactic Courses – 62 credits

Course Number	Course Name	Credit Hours
Spring 1 – 1st Year		21
PAS 780	Clinical Medicine I	4
PAS 770	Applied Pathophysiology I	2
PAS 700	Applied Human A&P with Lab	5
PAS 790	Pharmacology I	2
PAS 760	Diagnostics I - Laboratory	2
PAS 740	Clinical Procedures I	2
PAS 750	Physical Diagnosis I	2
PAS 710	PA Profession	1
PAS 720	Evidence Based Medicine	1
Summer 1		20
PAS 781	Clinical Medicine II	7
PAS 771	Applied Pathophysiology II	2
PAS 731	Clinical Pediatrics	2
PAS 791	Pharmacology II	2
PAS 761	Diagnostics II – EKG	2

PAS 741	Clinical Procedures II	2
PAS 751	Physical Diagnosis II	2
PAS 721	Medical Genetics	1
Fall 1		21
PAS 782	Clinical Medicine III	7
PAS 772	Applied Pathophysiology III	2
PAS 732	Psychiatry & Behavioral Medicine	2
PAS 792	Pharmacology III	2
PAS 762	Diagnostics III - Radiology	2
PAS 742	Clinical Procedures III	2
PAS 752	Physical Diagnosis III	2
PAS 722	Clinical Geriatrics	2

Clinical Courses – 46 Credits

Spring 2 – 2nd Year	CLINICAL ROTATIONS	12
PAS 800	Family Medicine I	4
PAS 810	Family Medicine II	4
PAS 820	*Internal Medicine	4
Summer 2		12
PAS 830	*Emergency Medicine	4
PAS 840	*Pediatric Medicine	4
PAS 850	*General Surgery	4
Fall 2		12
PAS 860	*Behavioral Medicine	4
PAS 870	*Women's Health	4
PAS 890	*Geriatric Medicine	4
Spring 3 – 3rd Year		10
PAS 891	*Orthopedics	4
PAS 892	Elective Experience	4
PAS 895	Summative	2

** Course varies, and may occur in any clinical year semester*

Progression Requirements:

The didactic year consists of courses numbered 700-799. For a student to progress to the clinical year, the following requirements must be met:

- Receive a B or better in every 700 level course.
- Provide documentation of immunizations, annual TB screening and influenza vaccination.
- Complete Health Insurance Portability and Accountability Act (HIPAA) training.
- Pass a drug screening and criminal background check.
- Complete all competency skills, e.g., Basic life Support (BLS), and Advanced Cardiac Life Support (ACLS).
- Verify the ability to meet the technical standards required to be a physician assistant.
- Continued enrollment in a health insurance program.

Graduation Requirements

- Complete all 108 graduate credit hours with a cumulative GPA of a minimum of 3.0.
- Settle all financial accounts with the university.
- Demonstrate proficiency in all PA competencies.
- Participate in community outreach projects.
- Obtain professional memberships in AAPA and KSPA.
- Receive PRD committee recommendation to graduate, as well as the recommendation of the Dean of the Graduate School.

Notes:

1. *Students will refer to the Physician Assistant website at ([web address to be added](#)), or the Didactic and Clinical Handbooks for more details on program policies and procedures.*
2. *The ability to meet the academic and technical standards for physician assistant students is required (see website or contact the program for more information).*
3. *Refer to the PA program's website for further information ([web address to be added](#)).*
4. *PA program semesters do not follow the standard KSU schedule.*

Kansas Board of Regents Academic Affairs
PROPOSAL FOR A NEW DEGREE PROGRAM

Please check one: Baccalaureate Program Master's Program Doctoral Program

A. General Information

Proposing Institution: Kansas State University

Proposed Program Title: Physician Assistant

Degree to be Offered: Master of Science in Physician Assistant Studies

Responsible Department or Unit: College of Human Ecology

CIP Code: 51.0912

Proposed Implementation Date: January 2021

Total Number of Semester Credit Hours for the Degree: 108

B. Justification and Program Demand

1. Justification

Physician assistants (PA) are nationally certified and licensed medical professionals who work on health care teams with physicians and other providers. The PA profession has been named by top media outlets, including Forbes and USA Today, as one of the most promising jobs in America. PAs practice medicine, and prescribe medication in 50 states, the District of Columbia, U.S. territories and the uniformed services. PAs exercise considerable autonomy in diagnosing and treating patients, but their experience, patient needs, facility policies, supervising physician and state laws determine their scope of practice. In clinical practice, PAs perform an extensive range of medical services in nearly every medical and surgical specialty and health care setting. With rapidly increasing frequency from coast to coast, PAs offer many of the services traditionally provided by physicians. Kansas State University graduate-level physician assistant program leads to a Master of Science Physician Assistant Studies (MSPAS) degree. The program follows the traditional medical model of training, providing in-depth analyses of disease processes, diagnosis and treatment. Students engage in full-time study for seven semesters, earning their degree in 27 months.

A physician assistant program at Kansas State University will solidify the University's mission to foster excellent teaching, research, and service that develop a highly skilled and educated citizenry necessary to advancing the well-being of Kansas, the nation and the international community.

According to the Kansas Department of Health and Environment, as of March 2018, 89% of all counties in Kansas were designated as Primary Medical Care Health Professional Shortage Areas¹. Graduates of

¹ (Primary Care Shortages, 2018) http://www.kdheks.gov/olrh/download/Primary_Care_HPSA_2018.pdf

the proposed physician assistant program can fill the gaps in primary care shortages, and increase access to healthcare services in the rural and medically underserved areas².

2. Demand

Healthcare workforce shortage problems are prominent for many reasons. These include: an aging workforce, high retirement eligibility, difficulty in the retention of workers, difficulty in the recruitment of workers, lack of educational and training programs, high vacancy rates, high turnover rates, lack of opportunities for advancement, and increased workload³.

The Association of American Medical Colleges estimates that physician demand will grow faster than supply, with a projected need of 42,600 to 121,300 new physicians by 2030 as a result of a growing and aging population, coupled with an aging physician population⁴. In Kansas alone, it is expected that the need for practicing primary care physicians will increase 13% (247 physicians) by 2030. These shortages are expected to be most significant in the rural and under-served populations.

With the passing of the Affordable Care Act in 2010, physician assistants were recognized as one of the three categories of primary care providers, along with physicians and nurse practitioners⁵. Physician assistants play an essential part in addressing the current and projected primary care provider shortages. The proposed PA program will not only improve access to health care in the region, but will produce qualified graduates who will live and work in the communities they serve, contributing significantly to the economic well-being and vitality of Kansas state and region.

Option B - Market Analysis:

Quality students remain interested in PA programs nationwide. In communication with Wichita State University (which currently has the only Physician Assistant program in the state of Kansas) KSU learned WSU receives ~800 qualified applications per admissions cycle, to fill a class of 48.

The Central Application Service for Physician Assistants (CASPA) processed applications from 25,755 applicants for 8,580 seats in participating PA programs in 2015, and in 2016, 26,953 were processed for 8,792 seats⁶. On average applicants apply to 4-6 PA programs per admissions cycle. Since 2013, acceptance rate average has remained at 33%.

Table 1. Submitted Applicants Vs. Matriculants

Category	13-2014	14-2015	15-2016	16-2017
Submitted Applicants	21,730	22,997	25,755	26,953
Matriculants	7,193	7,801	8,580	8,792
Acceptance Rate	33%	34%	33%	33%

² (WWAMI Rural Health Research Center, 2018)

³ (National Rural Health Association, 2012)

⁴ (New Research Reaffirms Physician Shortage, 2018)

⁵ (Forbes.com, 2017)

⁶ (PAEA, 2018)

Table 2. GPA Comparison

Category	15-2016 Matriculant	15-2016 Applicant	16-2017 Matriculant	16-2017 Applicant
Non-Science GPA	3.63	3.47	3.65	3.48
Science GPA	3.48	3.26	3.51	3.27
Overall GPA	3.54	3.36	3.57	3.37

3. Demand: Projected Enrollment for the Initial Three Years of the Program

The 27-month PA program is designed to accommodate 36 students in the first year, 40 in the second year, and 44 students admitted each year thereafter. Initial admission will be in January, 2021 with graduation seven semesters later in May, 2023. Due to the nature of the PA profession and the curricula standards set by the accreditation body, all students must successfully complete the PA program's 27-month course of study to be eligible to sit for the Physician Assistant National Certifying Examination (PANCE). A direct entry or dual degree program is not available. Student attrition rates at PA programs remain relatively low, with a national average graduation rate of 97% noted in 2016⁷. The size of the student body provides a sufficient number of students to assure an academically and financially strong program, while maintaining a low student to faculty ratio.

Table 3. Projected Enrollment

Year	Headcount		Semester Credit Hours	
	Full-Time	Part-Time	Full-Time	Part-Time
Implementation	36	0	62	0
Year 2	76	0	98	0
Year 3	120	0	108	0

4. Demand: Employment

Regionally and nationally, the demand for PAs remain high. The Bureau of Labor Statistics projects PA job growth of 37% between 2016 and 2026, noting a much faster than average increase, compared to a 13% increase for physicians during that period, and 7% for all occupations⁸. This is in part due to a shortage of physicians, the gr do. In addition, the extremely low 0.7% unemployment rate for PAs nationwide has helped gain recognition owing need for primary care providers, and the expansion in the procedures PAs are certified to for the profession which is ranked # 3 by US News and World Report of the 100 best jobs in 2018⁹. In 2016, there were 1093 PAs employed in Kansas, with a 23%

⁷ (PAEA, 2018)

⁸ (Bureau of Labor Statistics, 2018)

⁹ (US News and World Report, 2018)

growth estimated by 2026, according to the Kansas Department of Labor¹⁰. In 2017, the mean wage for PAs was \$104,860 nationally, and \$100,360 in the state of Kansas¹¹.

C. Curriculum

1. Admission Requirements

Application Procedure

Applicants must complete a CASPA application. CASPA application forms may be requested from www.caspaonline.org (Central Application Service for Physician Assistants) or by calling CASPA at (617) 612-2080. An application and fee are also required for KSU graduate study and can be submitted to <https://www.applyweb.com/kstateg/index.fil>.

Selected applicants will be interviewed by the admissions committee. Accepted applicants will be notified within 2 weeks of admissions interview. Applicants receiving an offer of admission, will be expected to pay a \$500 deposit, within 10 business days of receiving the offer. This deposit is applied towards the first semester of tuition, and will **only** be refunded if the PA program does not matriculate in January 2021, or for student requests within the 72-hour period of accepting an admission offer.

Application and Timeline

The following is required:

- Verified CASPA application submitted between 25 April and 1 September, 2020.
- Completed application for graduate study at KSU through College Net.

Letters of Reference

- Submit three letters of recommendation: One (1) of the letters of recommendation must be from a PA, MD, DO, or FNP, with whom the student has worked or shadowed. The remaining letters of recommendation can be from faculty, coaches, employers, patients or healthcare providers.
- **Letters from immediate family members will not be accepted.**

Minimum GPA

- Minimum undergraduate GPA: 3.0
- Minimum prerequisite GPA: 3.0
- Graduate GPA will replace undergraduate GPA for applicants who have earned a graduate degree.

Bachelor's Degree Requirements

- Completion of a baccalaureate degree from a regionally accredited institution.
- Official transcripts from all universities attended must be sent to CASPA for review and verification.
- Applicants educated outside of the U.S. and Canada must have their transcript reviewed by KSU admissions team. The admissions team will also require certification of the degree by a transcript evaluation service.
- Applicants may apply before they have completed the bachelor's degree, but the degree must be earned by September 1 of the year prior to matriculation, and the cumulative undergraduate GPA must reflect the required minimum 3.0 or better.

¹⁰ (Kansas Department of Labor, 2018)

¹¹ (Bureau of Labor Statistics, 2018)

Prerequisite Courses

- Successful completion of the all prerequisite courses with a Grade C or better by the time of application.
- All prerequisite courses must be completed through an accredited institution. All courses must be assigned a letter grade.
- Prerequisites greater than 5 years from the date of graduation will not be accepted, unless the applicant has been employed or has participated in a health care/science position during the last five years.
- Personal interviews will be offered to the most qualified applicants and are required for admission; KSU students who exceed the minimum requirements will be granted an interview, but admission to the PA program is not guaranteed.
- Prerequisite courses:
 - Two Semesters - General Biology (or equivalent)
 - Two Semesters - General Chemistry (or equivalent)
 - Two Semesters - Human Anatomy & Physiology
 - One Semester - Microbiology or Bacteriology
 - One Semester - Psychology
 - One Semester - Genetics (General or Human)
 - One Semester - Medical Terminology
- Recommended additional courses:
 - Biochemistry
 - Organic Chemistry
 - Biostatistics
 - Pathophysiology
 - Pharmacology
 - Cell Biology
 - Immunology
 - Introductory Statistics or Critical Thinking

Direct Patient Care Experience

- Direct patient care experience is not required; however, competitive applicants will have a minimum of 500 hours of hands-on patient care experience.
- Preference will be given to applicants having experience that required a period of training and resulted in direct (hands-on) patient care, such as work as an EMT, nurse, respiratory therapist, ER technician, physical therapy aide, clinical psychologist, corpsman (Navy), medic (Army), medical assistant, certified nurse assistant, occupational therapy assistant, scribe or x-ray technician.

CASPer!

- The CASPer test assesses non-cognitive skills and interpersonal characteristics important for successful students and graduates of the program, and is used to complement the other applicant screening tools. Completion of the CASPer test is required; results are valid for one admissions cycle. Test dates are limited! For Test dates [CLICK HERE](#). Learn more at [CASPer](#).

Physician Assistant Observation/Shadowing

- Completion of a minimum of 40 hours shadowing with a Physician Assistant-Certified (PA-C).

Advanced Placement

- The PA program does not offer advanced placement.
- The PA program does not accept transfer students or provide credit for experiential learning.
- No credit is granted for prior student experience working in the health care field.

Non-native speakers of English:

- KSU’s Graduate School requires each applicant whose native language is not English to demonstrate competence in the English language by achieving a satisfactory score (defined below) on the Test of English as a Foreign Language (TOEFL), the International English Language Testing System (IELTS) and Pearson Test of English (PTE). The TOEFL, IELTS or PTE is required to ensure that the student’s progress toward a degree is not jeopardized by language barriers. The TOEFL (K-State TOEFL school code 6334) is offered several times a year throughout the world by the Educational Testing Service, Princeton, New Jersey. International applicants are advised to take the TOEFL, IELTS, or PTE as early as possible to avoid delays in the processing of their applications. However, the test date should be no older than eighteen months from the application deadline.

An applicant who has received a degree in the last two years from a United States college or university is exempt from this requirement. The PA program may however, require demonstration of English language proficiency during the admissions process.

Table 4. Score requirements – One of the following

Test	Minimum Score
IBT TOEFL (internet based)	79
TOEFL (PBT)	550
IELTS	6.5
Pearson Test of English (PTE)	58

General Information

There is no credit for experiential learning. No Physician Assistant credits from another institution may be transferred into the didactic or clinical years. KSU PA students must complete the **entire** program’s course of study at Kansas State University.

Applicants who received their baccalaureate degrees from colleges and institutions outside of the United States may also be considered for admission. These applicants must have their transcripts verified and translated by an approved organization (e.g. World Education Services), and complete at least one year (30 semester hours) of additional undergraduate or graduate study at an accredited U.S. college or university prior to applying to the program. Applicants should also meet all other admission requirements.

2. Courses

Table 5. Course and Credit Hours

Course Number	Course Name	Credit Hours
Spring 1		21
PAS 780	Clinical Medicine I	4
PAS 770	Applied Pathophysiology I	2
PAS 700	Applied Human A&P with Lab	5
PAS 790	Pharmacology I	2
PAS 760	Diagnostics I - Laboratory	2
PAS 740	Clinical Procedures I	2
PAS 750	Physical Diagnosis I	2
PAS 710	PA Profession	1
PAS 720	Evidence Based Medicine	1

Summer 1		20
PAS 781	Clinical Medicine II	7
PAS 771	Applied Pathophysiology II	2
PAS 731	Clinical Pediatrics	2
PAS 791	Pharmacology II	2
PAS 761	Diagnostics II – EKG	2
PAS 741	Clinical Procedures II	2
PAS 751	Physical Diagnosis II	2
PAS 721	Medical Genetics	1
Fall 1		21
PAS 782	Clinical Medicine III	7
PAS 772	Applied Pathophysiology III	2
PAS 732	Psychiatry & Behavioral Medicine	2
PAS 792	Pharmacology III	2
PAS 762	Diagnostics III - Radiology	2
PAS 742	Clinical Procedures III	2
PAS 752	Physical Diagnosis III	2
PAS 722	Clinical Geriatrics	2
Spring 2	CLINICAL ROTATIONS	12
PAS 800	Family Medicine I	4
PAS 810	Family Medicine II	4
PAS 820	*Internal Medicine	4
Summer 2		12
PAS 830	*Emergency Medicine	4
PAS 840	*Pediatric Medicine	4
PAS 850	*General Surgery	4
Fall 2		12
PAS 860	*Behavioral Medicine	4
PAS 870	*Women’s Health	4
PAS 890	*Geriatric Medicine	4
Spring 3		10
PAS 891	*Orthopedics	4
PAS 892	Elective Experience	4
PAS 895	Summative	2
Total Credit Hours		108

* Course varies, and may occur in any clinical year semester

D. Core Faculty

Table 6. Core Faculty

Faculty Name	Rank	Highest Degree	Tenure Track Y/N	Academic area of Specialization	FTE to proposed program
*Gweneth Ferdinand-Jacob		DHSc.	N	Program Administration	1.0

				Clinical Medicine PA Profession	
Medical Director		MD or DO	N	Medicine	0.2
Clinical Director		Master of Physician Assistant Studies or equivalent	N	PA	1.0
Academic Director		Master of Physician Assistant Studies or equivalent	N	PA	1.0
Principal Faculty A		Master of Physician Assistant Studies or equivalent	N	PA	1.0
Principal Faculty B		Master of Physician Assistant Studies or equivalent	N	PA	1.0
Principal Faculty C		Master of Physician Assistant Studies or equivalent	N	PA or MD	1.0
Adjuncts		Doctorate MD	Contractual	Pharmacy Radiology	1.0 As needed
Principal Faculty D		PhD		Science	1.0

2. No graduate assistantships will be assigned to the program.

E. Expenditures and Revenue

Table 7. Expenditures and Revenue	<i>List Amounts in Dollars</i>		
	FY 18-19	FY 19-20	FY 20-21
I. EXPENDITURES			
Personnel – Reassigned or Existing Positions* <i>(*Provide written explanations as necessary and attach to this document)</i>			
Faculty		\$130,000	\$246,300
Administrators <i>(other than instruction time)</i>		\$168,670	\$190,557

Graduate Assistants			
Support Staff for Administration (e.g., secretarial)		\$55,000	\$176,350
Fringe Benefits (total for all groups)		\$86,253	\$171,849
Other Personnel Costs			
<i>Total Existing Personnel Costs – Reassigned or Existing</i>		\$439,923	\$785,056
Personnel – New Positions* (*Provide written explanations as necessary and attach to this document)			
Faculty	\$65,000	\$115,000	\$430,000
Administrators (other than instruction time)	\$167,000	\$20,000	
Graduate Assistants			
Support Staff for Administration (e.g., secretarial)	\$27,500	\$96,667	
Fringe Benefits (total for all groups)	\$61,356	\$74,355	\$115,918
Other Personnel Costs			
Total New Personnel Costs – New Positions	\$320,856	\$306,022	\$545,918
Start-up Costs – One-Time Expenses* (*Provide written explanations as necessary and attach to this document)			
Library/learning resources			
Equipment/Technology			
Physical Facilities: Construction or Renovation	\$1,250,000	\$1,250,000	
Other			
Total Start-up Costs	\$1,250,000	\$1,250,000	
Operating Costs –Recurring Expenses* (*Provide written explanations as necessary and attach to this document)			
Supplies/Expenses			
Library/learning resources	\$24,124	\$27,620	\$29,553
Equipment/Technology	\$19,876	\$157,380	\$345,447
Travel	\$6,000	\$15,000	\$25,000
Other			
Total Operating Costs	\$50,000	\$200,000	\$400,000
GRAND TOTAL COSTS	\$1,620,856	\$2,195,945	\$1,730,974

II. FUNDING SOURCES* (projected as appropriate) (*Provide written explanations as necessary and attach to this document)	List Amounts in Dollars			
	Current	FY 18-19 (New)	FY 19-20 (New)	FY 20-21 (New)
Tuition/State Funds				\$601,344
Student Fees				\$46,400
Other Sources		\$1,620,856	\$2,195,945	\$1,083,230
GRAND TOTAL FUNDING		\$1,620,856	\$2,195,945	\$1,730,974
Projected Surplus/Deficit (+/-) (Grand Total FUNDING minus Grand Total Costs)		\$ 0	\$ 0	\$ 0

SEE APPENDIX B – Table 7 Explanation

****Other Sources:**

As appropriate for each source, please describe the length of financial commitment and note the expiration date. (Examples could include federal, state, and/or private grants, etc.)

Loans from Kansas State University and the College of Human Ecology. According to our income projections, all loans should be paid off by the end of FY 2026.

Name: Gwen Ferdinand-Jacob, DHSc, MPAS, PA-C

Email: gwenfj@ksu.edu

Date of Proposal Submission: November 1, 2018

Additional Information for New Program Approval

1. Centrality to Mission

This proposal for a new Physician Assistant (PA) program is in direct alignment with the institution's mission stated below, and in recognition of its societal responsibility to foster excellent teaching, research, and service that develop a highly skilled and educated citizenry necessary to advancing the well-being of Kansas, the nation and the international community. It particularly addresses the unique needs of a complex and changing society aligning with the MSPAS program's mission to prepare diverse and highly skilled graduates to provide patient-centered care to our communities. A physician assistant program at Kansas State University will advance a culture of excellence that attracts highly talented, diverse students and produce graduates who will be recognized as leaders of change in their communities.

The mission of Kansas State University is to foster excellent teaching, research, and service as well as to develop a highly skilled and educated citizenry necessary to advancing the well-being of Kansas, the nation, and the international community. The university embraces diversity encourages engagement and is committed to the discovery of knowledge, the education of undergraduate and graduate students, and improvement in the quality of life and standard of living of those we serve. As a comprehensive, research, land-grant institution, Kansas State University dedicates itself to developing human potential, expanding knowledge, enriching cultural expression, and extending its expertise to individuals, businesses, education, and government.

The mission of Kansas State University's College of Human Ecology is to discover, disseminate and apply knowledge to meet basic human needs and improve the human condition. This knowledge advances professions, human services, public policy, business and industry.

The proposed PA program is well positioned in the College of Human Ecology. Other accredited health care programs housed at the College of Human Ecology must each include interprofessional education in their curriculums. Interprofessional education across health care disciplines, prepares students for their future practice of team-based care, which improves patient outcomes¹². The PA program will join other health care programs from Food, Nutrition, Dietetics and Health, to ensure compliance with our respective accrediting agencies.

The mission of the proposed MSPAS in Physician Assistant is to prepare diverse and highly skilled graduates who are committed to providing compassionate and patient-centered care to their communities. The program is dedicated to graduating physician assistants who demonstrate professionalism, are globally minded, and practice within an ethical framework to improve the health of medically underserved populations.

¹² (AAMC, 2016)

Vision

The physician assistant program will provide excellence in medical education, graduating healthcare providers who serve the local communities and beyond with uncompromising commitment and compassion.

Locational and Comparative Advantages

Currently, Wichita State University PA program is the only program in the Kansas Board of Regents System. The table below provides a comparison of Wichita’s program, those in bordering states, and the proposed MSPAS program at Kansas State University.

Table 8. Location and Comparison of PA Programs

University or College	Total Credit Hours	Estimated Total Tuition	Program Length - Months	Class Size	Admission Criteria
Wichita State University	93	Fees included: Kansas Resident \$49,700.26 Non-Resident \$89,5587.03	26	48	<ol style="list-style-type: none"> 1. Minimum GPA: Prerequisite 3.0; Science 3.0 2. GRE not required 3. Receive grades of “C” or higher in prerequisites 4. Shadowing preferred but not required
University of Oklahoma	127	Fees Included: Oklahoma Resident \$45,640.6 Non-Resident \$84,705.60	27	50	<ol style="list-style-type: none"> 1. Minimum GPA: Prerequisite - no minimum; Science 3.0 2. GRE is required 3. Receive grades of “C” or higher in prerequisites 4. Shadowing - not required
University of Missouri Kansas City	130.5	Resident \$71,091 + Fees Non-Resident \$84,496 + Fees	29	20	<ol style="list-style-type: none"> 1. Minimum GPA: Cumulative 3.0 Prerequisite 3.0 2. GRE or MCAT is required 3. Receive grades of “C” or higher in prerequisites 4. Shadowing – minimum of eight hours with a PA

University of Nebraska	123	Fees Included: Nebraska Resident \$38,499 + Fees Non-Resident \$110,000	28	65	<ol style="list-style-type: none"> 1. Minimum GPA: Cumulative 3.0 2. GRE is required 3. Receive grades of “C” or higher in prerequisites 4. Shadowing – minimum of eight hours with a PA
Kansas State University Proposed PA Program	108	Kansas Resident \$46,908.72 + Fees Non-Resident \$105,192 + Fees	27	44	<ol style="list-style-type: none"> 5. Minimum GPA: Prerequisite 3.0 6. GRE or MCAT is not required 7. Receive grades of “C” or higher in prerequisites 8. Shadowing – minimum of 40 hours with a PA

Nationally, many PA programs are facing difficulties in placing students for clinical rotations. Lack of clinical sites are due to increased saturation of PA programs in some states, programs competing to pay preceptors and clinical rotation sites to educate PA students, and the lack of clinical department appropriate staffing and resources. KSU PA program will have an advantage over many programs, because there is only one other program in Kansas.

The program will matriculate the first cohort in January of 2021. The didactic phase of program is 12 months long, and the clinical phase to include the summative will be 15 months. Students will be scheduled to graduate in May of 2023. The proposed program includes all the ARC-PA required clinical rotations, plus orthopedic and geriatric medicine experiences. When compared to the above listed programs, only two provided a clinical rotation in Geriatrics, and none provided an Orthopedics rotation.

A clinical/admissions associate director will be hired in January 2019, to begin the process of locating and identifying clinical sites and recruiting clinical preceptors, to enable a smooth transition to the development of affiliation agreements by the Clinical Director.

5. Student Characteristics

The PA program anticipates students from other health professions who are looking to do more to provide access, and improve the quality of patient’s lives. Pre-health professions students, military veterans, EMT’s and mature adults who are looking for a profession of service. The proposed program strives to select highly qualified candidates who meet the admission requirements and at least two of the following attributes:

- Direct patient care experience characterized as moderate or high level
- Direct patient care experience >500 hours
- Work experience hours >500 hours
- Community service/mission work >250 hours
- Intercollegiate or extracurricular leadership activities ≥1 year
- Graduate degree earned in any discipline
- Military or veteran service

- Graduate from Kansas State University

II. Curriculum of the Proposed Program

1. Description of the more important academic objectives

In an effort to provide a curriculum which prepares students with the relevant skills and knowledge necessary to meet the challenges of Physician Assistants, and to meet the standards set by the accrediting body (ARC-PA), we are proposing a cohort model program encompassing 108 credit hours over a 27-month period. The program will begin in January, with year one (12 months) of didactic coursework followed by year two and three (15 months) of clinical rotations. Each rotation will be 5 weeks in duration. There will be 8 rotations in specialties required by the ARC-PA standards¹³, and an additional elective rotation to provide students the opportunity for depth in their selected area of practice. The curriculum for this program has been carefully planned to align with the program mission, ARC-PA accreditation requirements and the Competencies of the Physician Assistant Profession¹⁴.

2. Range of skills and knowledge future graduates will possess

The student learning outcomes and skills can be found in Appendix A.

3. Required internships and practica

Students will be required to complete 11 clinical rotations, one of which is an elective. The elective may occur as additional experience in a required rotation, medical discipline of interest not encountered in the previous rotations, public health service, administration or health policy. The proposed clinical rotations are four credit hour courses that are completed over a five-week period. Students will follow the same schedule as the preceptor for each rotation. All clinical rotations will be reviewed, evaluated, and approved for educational suitability by the program. Clinical rotations will occur at any location in the state of Kansas or may be completed in the student's hometown. The physicians who precept PA students must be licensed, and specialty board certified in their area of instruction, and if the preceptor is a PA, they must be teamed with a physician who is specialty board certified in their area of instruction.

III. Program Faculty

4. Core and Supporting Faculty

The physician assistant program director was hired in June 2017 to complete the planning and development of the PA program. The program director, Gwen Ferdinand-Jacob, is a certified Physician Assistant with significant experience in Family Medicine, particularly serving veterans and their dependents. She has also held leadership positions in the military, and most recently as the program director of Bethel University PA program in Tennessee, and as a member of the Board of Tennessee Academy of Physician Assistants. Gwen has been in PA education for ten years.

The Academic and Clinical Director positions will be posted in January to commence a national search, with a goal of hiring in May-June 2019. The Medical Director must be board certified and licensed in the state of Kansas. The Medical Director will be identified in the spring of 2019 and hired in the summer of 2019. Three additional PA or MD faculty, one doctoral prepared basic science faculty, and adjunct faculty (position can be filled by 2 or more persons) will be hired in the fall of 2020.

As required by ARC-PA standards for accreditation, all faculty and staff required for the program must be

¹³ (ARC-PA, 2016) <http://www.arc-pa.org/accreditation/standards-of-accreditation/standards-4th-ed-march-2016/>

¹⁴ (AAPA, ARC-PA, PAEA, NCCPA, 2012) <https://www.aapa.org/wp-content/uploads/2017/02/PA-Competencies-updated.pdf>

hired and on board before the start of the program and must be appropriately credentialed. All full-time faculty will be both academically and experientially qualified to instruct at the graduate level and will hold terminal degrees in their field. For the PA, the terminal degree is a Master of Science in Physician Assistant Studies or equivalent. Adjunct faculty will have expertise in their fields and appropriate credentials for their area of assigned teaching.

IV. Academic Support

1. Academic Support Services

Academic advising of students will be completed by principal faculty of the proposed PA program. Students will be assigned an advisor upon matriculation, and in the spirit of continuity, will remain as an advisee to the assigned faculty until graduation.

2. New Academic Support Necessary

The College of Human Ecology is working with the Hale library to provide access to adequate journals and databases related to human medicine. Through the library, students will also have online access to specialty journals pertinent to the MSPAS program. The need for additional electronic journals will be considered on an annual basis and will be discussed with KSU library personnel.

Table 9. Estimated Cost of Additional Library Resources for Physician Assistant Studies Program

Product	Vendor	FY 2021 Cost	FY 2022 Cost	FY 2023	FY 2024
AccessMedicine	McGraw- Hill Education	\$5,777	\$6,182	\$6,614	\$7,077
UpToDate	Wolters Kluwer	\$20,036	\$21,438	\$22,939	\$24,544

3. New Supporting Staff

Staff support for the program will include the clinical/admissions associate director program admin to start in January of 2019, and admissions, didactic and clinical coordinators to be hired in the fall of 2019.

V. Facilities and Equipment

1. Anticipated Facilities Requirement

The proposed program classroom, faculty offices, and laboratories will be housed at Ice Hall Center. Pending approval, Ice Hall will be renovated to the specific program requirements. Ice Hall space has been planned to accommodate annual cohorts of 44 students and the following:

Table 10. Facilities

Classroom/Study	Clinical Skills / Simulation	Personnel Offices	Support Space
48 seat classroom	Clinical Procedure Lab (flexible space)	Program Director’s Office	Student Records
Small Group Study Room	Physical Assessment Lab	Clinical Director’s Office	Conference Room
Large Group Study Room	Simulation Lab and observation deck	Academic Director’s Office	Mechanical
Student Breakroom	Telecom	Faculty Offices (5)	Custodial
Lactation Room	Supply Room	Staff Office	Restrooms

The 48-seat classroom will be equipped with tables, chairs, large screen monitor and connected lectern and projection equipment. Skills and simulation labs will be furnished with appropriate exam tables,

furnishing and recording equipment for simulation review. This program will have an Anatomy lab equipped with Interactive 3D Anatomy Dissection Table (Anatomage). Offices and reception area will be equipped with desks, chairs, file cabinets, computer and phones as appropriate. The building will be equipped with appropriate security systems with electronic key fob entry to allow students 24hr access to the classroom, labs and study areas. The program will also schedule classrooms as needed on campus to accommodate the students returning to campus for assessments every five weeks. Starting in the spring of 2023, the 3rd cohort will be on campus for 3 weeks, to complete the summative course.

2. New Equipment

Table 11. Medical Equipment

Equipment	Cost	Quantity	Total
Cardiac Trainer	\$58,000	1	\$58,000.00
Lung Auscultation Trainer	\$19,900	1	\$19,900.00
Airway Trainer	\$2,400	4	\$9,600.00
PICC Trainer	\$1,700	1	\$1,700.00
LP Trainer	\$2150	2	\$4,300.00
Arterial Puncture Trainer	\$3,200	2	\$6,400.00
IV Start Arms	\$1,200	4	\$4,800.00
Prostate Exam Trainer	\$2,800	2	\$5,600.00
NG OG, PEG Trainer	\$2,380.00	4	\$9,520.00
Female Catheter Trainer	\$1,200	4	\$4,800.00
Male Catheter Trainer	\$1,200	4	\$4,800.00
Breast Exam Trainer	\$525	4	\$2,625.00
Female Vaginal Exam Trainer	\$2,935	4	\$11,740.00
Male Exam Trainer	\$2,489	4	\$12,445.00
Injection Trainer	\$1,100	4	\$4,400.00
Smart STAT Manikin	\$12,000	1	\$12,000.00
Ritter Clinic Exam Beds	\$950	8	\$10,000.00
Exam Stools	\$150	16	\$2,117.64
12 lead EKG Machine	\$3,800	1	\$3,800.00
Bedside Cabinets	\$500	8	\$4,000.00
Wall Mount Diagnostic System	\$1,400	8	\$12,061.00
Anatomage Table		1	\$130,000
Clinical Skills training Sim		2	\$200,000
Various McKesson Supplies			\$10,000
Pulse Oximeters	\$350	3	\$1050.00
Plastic Anatomical Models	\$1,200	4	\$4,800.00
TOTAL			\$550,058.64

V. Program Review, Assessment and Accreditation

Program Review

The program will undergo a systematic evaluation procedure that results in continuous improvement.

Regularly scheduled faculty meetings, Community Advisory Committee meetings, meetings with the Dean of the College of Human Ecology, and student input (end-of-course and end-of-program evaluations) will be utilized to generate feedback and plans for improvement of curriculum and administration of the program. This process includes both internal and external review for a holistic approach to improvement. Areas in which the program will be assessed are sponsorship and resources, didactic and clinical curricula, student affairs, and program outcomes. Graduate and preceptor surveys regarding program effectiveness, student performance and attrition, and graduate employment will also contribute to program evaluation.

Didactic Assessment: Each course and instructor will be evaluated every semester. Students will be required to complete end-of-course evaluations. These evaluations will undergo objective assessment, areas for improvement will be identified, and recommendations for improvement implemented. Instructors and program administrators will also be evaluated as part of the annual review process of the College of Human Ecology.

Clinical Assessment: A monthly review of pass-rates, student evaluation of clinical sites and preceptors, and preceptors' evaluations of students will be conducted. Strengths, weaknesses, opportunities, and threats will be identified, and corrective or preventative measures initiated.

OSCE/PACKRAT: These instruments will be used as evaluation tools of student performance and will be administered several times during the program. Correlation of these results with performance on the Physician Assistant National Certification Examination (PANCE) will be evaluated. Outcomes from this study will be used to initiate programmatic changes as needed.

Committee Meetings: Faculty and staff meetings will be held twice a month to discuss administration of the program, identify potential problems or weaknesses, and develop strategies to counter potential issues in a timely fashion. Community Advisory Committee meetings will be held semi-annually. Admission Committee meetings will be held once a semester. Resource allocation meetings will be held once a year. Program planning meetings will be held once a semester. Ad hoc committee meetings will also be conducted on an as-needed basis. These meetings will evaluate whether the program covers appropriate course content, whether financial and physical resources are adequate, whether admission policies are appropriate, and whether expected outcomes are met. Additionally, bi-annual faculty retreats will be held in the spring and fall to assess the overall program. Areas of deficiencies and/or concerns will be appraised and plans for improvement developed and implemented. The Promotion/Retention/Disciplinary (PRD) committee will meet annually in the spring to assess the student's readiness for graduation, and on an as-needed basis.

Formative evaluation during the didactic phase will be conducted through regularly scheduled examinations consisting of board-type questions, student presentations, clinical skills check-offs, written assignments, and Objective Structured Clinical Examinations (OSCE). Professionalism is evaluated in every course by faculty. Professionalism will also be evaluated during the summative by the standardized patients and the faculty reviewer. PA student's performance in attendance, grooming, and interpersonal interactions with patients, faculty and peers will be considered. In addition, student exam grades will be monitored to ensure that the minimum requirements are met, and to allow early recognition of deficiencies in knowledge and/or skills. At the end of each semester, each student will undergo a comprehensive academic review of grades, student knowledge, skills application, and professionalism. Students will also have one formal advising session with their assigned faculty advisor each semester. For students demonstrating deficiency in knowledge, skills or professionalism, more frequent advising may be scheduled on an as-needed basis. Areas of concern will be addressed, and a remediation plan will be determined and instituted.

per program remediation policy. Each student must satisfy all course requirements in order to progress to the next semester.

During the first semester of study, in the Evidence-Based Medicine course, students will be required to begin a draft proposal for a Critical Appraisal of a topic of their choice. The final project will be due within the last four months at the program and will include a literature review.

Upon successful completion of the PA program, students will be able to sit for the Physician Assistant National Certifying Examination (PANCE), results of which are used to evaluate program curriculum.

Formative evaluation of students during the clinical year will be conducted through direct observation of the student's performance by an assigned preceptor. A formal evaluation tool will be completed for each student and submitted to the program's Clinical Director. Areas of concern will be noted, and an approved remediation plan put in place. In addition, students will be required to perform successfully on an end-of-rotation written examination covering topics related to the rotation specialty. Oral and case presentations will also be evaluated. Student will be required to take the Physician Assistant Clinical Knowledge Rating and Assessment Tool (PACKRAT) examination. PACKRAT is an assessment provided by the Physician Assistant Education Association, which does not count towards the student's grade, but provides feedback on areas of strengths and weaknesses, compares students to the national mean, and allows the faculty to tailor an individualized remediation plan for identified deficiencies. Summative evaluation will consist of a comprehensive examination, an oral board administered by faculty and clinical preceptors from the community, a clinical skills component, and an Objective Structured Clinical Examination (OSCE) utilizing standardized patients; evaluation of professionalism during the clinical year will be completed on each rotation by the preceptor, and by faculty during the return to campus day. The student's performance in attendance, grooming, and interpersonal interactions with patients, faculty and peers is considered. Students must satisfy all progression requirements, and meet with the PRD committee who will determine their readiness to graduate from the program. Policies regarding student dismissal will be available in the Didactic and Clinical Handbooks, and the PA Program's Policy and Procedures manual.

Student Learning Outcomes

1. **MEDICAL KNOWLEDGE:** Demonstrate knowledge of established and evolving biomedical, clinical, and social-behavioral sciences, and the application of this knowledge to patient care across the life span.
2. **PATIENT CARE/CLINICAL SKILLS:** Provide patient-centered care that is effective, compassionate, timely, efficient and equitable for the treatment of health problems and the promotion of wellness.
3. **INTERPERSONAL AND COMMUNICATION SKILLS:** Demonstrate interpersonal and communication skills that result in effective information exchange and collaboration with patients and their families, healthcare professionals, and other health-related agencies.
4. **PROFESSIONALISM:** Demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles, applying the principles of professional practice to patient care, and sustaining the qualities required for lifelong personal and professional growth.
5. **PRACTICE-BASED LEARNING:** Demonstrate the ability to investigate and evaluate one's own practice experiences and engage in critical analysis and assimilation of scientific evidence to improve patient care practices through continuous self-improvement and lifelong learning.
6. **SYSTEM-BASED PRACTICE:** Demonstrate an awareness of and responsiveness to the larger system of health care, as well as the ability to practice cost-effective health care, and allocating

resources that do not compromise the quality of care.

Each of these outcomes is essential in preparing physician assistants for medical practice, with qualities that are consistent with the standards set forth by ARC-PA. Knowledge, skills and professional attitudes are aspects of the Competencies of the PA profession and KSU's graduate student assessment outcomes, and form the framework of the PA program's curriculum and student learning outcomes.

Specialized Accrediting Agency, Institutional Plans for the Accredited Program, and Timeline

Six to twelve months prior to the matriculation of students, the PA program is required to achieve "accreditation – provisional" status through the ARC-PA. The foundation of this accreditation is to "verify an institution's ability to begin a program in compliance with the Standards, and the program's readiness to matriculate students." The KSU PA program has applied for provisional accreditation and is scheduled for a site visit on June 1-2, 2020. The ARC-PA is expected to decide in September 2020, and the first class will matriculate in January 2021.

The program will then undergo a provisional monitoring site visit six months prior to graduation of the first cohort, the purpose of which is to demonstrate that KSU is "delivering the program in compliance with the Standards and the continued ability to do so." The successful completion of this visit allows a program to maintain "accreditation-provisional" status.

The final provisional site visit occurs 18-24 months after the second provisional monitoring visit. "This visit verifies the institution's and program's demonstration of compliance with the Standards including their ability to incorporate and report the findings of a robust self-assessment process as required by the ARC-PA". The institution must demonstrate the ability to provide a clear and effective assessment and continuous improvement plan according to the Accreditation Standards for Physician Assistant Education Programs, promulgated by the Accreditation Review Commission for Physician Assistant Education (ARC-PA) standard C1.01: "The program must implement an ongoing program self-assessment process that is designed to document program effectiveness and foster program improvement."

This assessment plan is multifaceted and will be guided by the mission and goals of the PA program, ARC-PA accreditation standards and the *Competencies for the Physician Assistant Profession* document published by the National Commission on Certification of Physician Assistants, which guides the student learning outcomes/competencies for the program. These learning outcomes are mapped throughout the curriculum. A successful site visit will result in "accreditation - continued" status for the program.

As part of maintaining a strong PA program that delivers quality education to students, and reflects the Standards of ARC-PA, the program will submit a report to ARC-PA each year, and throughout the year as needed. If there are no major concerns during the third site visit, and data analysis is performed annually, the program will be re-evaluated as part of a "validation visit" every 10 years with a formal self-study report submitted 2-3 years prior to the validation visit.

ARC-PA Accreditation Costs

Provisional Application Eligibility Fee	\$2,000
Provisional Application Fee	\$15,000
Annual Accreditation Maintenance Fee	\$15,000
Provisional Monitoring Site Visit Fee	\$7,500
Final Provisional Site Visit Fee	\$7,500

APPENDIX A

ARC-PA Standard		KSU PA Program Learning Competencies and Outcomes
		<u>1. MEDICAL KNOWLEDGE:</u> Students will demonstrate knowledge of established and evolving biomedical, clinical, and social-behavioral sciences, and apply this knowledge to patient-centered care across the life span.
B2.02 A B2.02 B B.2.02 E	MK1	Apply knowledge of human genetics, molecular biology, anatomy and physiology to the clinical evaluation of patients.
B1.02	MK2	Apply established and emerging biophysical scientific principles fundamental to health care for patients and populations.
B2.02C	MK3	Apply knowledge of human pathophysiology to clinical evaluation of patients.
B2.12	MK4	Apply principles of epidemiology to the identification of health problems, risk factors, treatment strategies, resources and disease prevention/health promotion efforts for patients and populations.
B2.08	MK5	Apply principles of social-behavioral sciences to provision of patient care, including assessment of the impact of psychosocial-cultural influences on health, disease, care-seeking, care-compliance and barriers to and attitudes toward care.
		<u>2. PATIENT CARE:</u> Provide patient-centered care that is effective, compassionate, timely, efficient and equitable for the treatment of health problems and the promotion of wellness.
B2.07	PC1	Perform all technical skills and procedures considered essential for entry into PA practice (see list of program-identified core skills and procedures) and become certified in BLS, ACLS and PALS
B1.07 B2.05 B2.06	PC2	Evaluate patients of all ages by gathering essential and accurate information about the condition through history-taking, physical examination and the use of laboratory data, imaging and other tests and develop an appropriate differential diagnosis.

B2.06	PC3	Organize and prioritize care based on presentation as preventive, emergent, acute, chronic, rehabilitative and end of life
B2.05	PC4	Interpret laboratory data, imaging studies and other tests required for the area of practice
B1.07 B2.02d	PC5	Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence and clinical judgment
B2.05 B2.06	PC6	Develop and carry out patient management plans for patients across the life span in multiple practice settings and types
B2.04 B2.09	PC7	Counsel and educate patients and their families to empower them to participate in their care and enable shared decision-making
B2.05	PC8	Provide appropriate referral of patients including ensuring continuity of care throughout transitions between providers or settings
B2.12	PC9	Provide health care services to patients, families and communities aimed at preventing health problems or maintaining health
		<u>3. INTERPERSONAL AND COMMUNICATION SKILLS:</u> Demonstrate interpersonal and communication skills that result in effective information exchange and collaboration with patients and their families, healthcare professionals, and other health-related agencies.
B1.06	ICS1	Communicate effectively with patients, families and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds.
B2.04	ICS2	Communicate effectively through verbal, written, and electronic means with health professionals and health-related agencies, in a manner that supports the maintenance of health and the treatment of disease in individual patients and populations.
B2.04	ICS3	Demonstrate sensitivity, honesty and compassion in difficult conversations. (e.g., about issues such as death, end-of-life issues, adverse events, bad news, disclosure of errors and other sensitive topics)
B2.08	ICS4	Demonstrate insight and understanding about age-specific human responses to illness, injury and/or stress that allow one to develop and manage interpersonal interactions.

		<u>4. PROFESSIONALISM:</u> Demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles, applying the principles of professional practice to patient care, and sustaining the qualities required for lifelong personal and professional growth.
B1.05	P1	Demonstrate respect for patient privacy and autonomy, abiding by the social media and HIPAA policies.
B1.06	P2	Demonstrate sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities and sexual orientation.
C3.02	P3	Demonstrate professional behavior that encompasses the principals of honesty, integrity, empathy and respect, advocacy, self-awareness, personal accountability, teamwork, responsibility for learning, balance and avoidance of conflicts of interest, courtesy and compassion, in a pattern of moral and ethical interactions with others. (KSU program-defined professional expectations)
B1.05	P4	Recognize healthy coping mechanisms to respond to stress.
B1.05	P5	Recognize strategies to manage conflict between personal and professional responsibilities
B2.17	P6	Demonstrate knowledge of the PA profession, its historical development and current trends
B2.14	P7	Demonstrate knowledge of PA licensure, credentialing and laws and regulations regarding professional practice
B1.08	P8	Demonstrate the ability to work collaboratively in interprofessional teams in a manner that optimizes safe, effective patient and population-centered care, while maintaining a climate of mutual respect, dignity, diversity, ethical integrity and trust.
B1.08	P9	Use the knowledge of one's own role and those of other professions to appropriately assess and address the health care needs of the patients and populations served
B1.08	P10	Communicate with other health professionals in a responsive and responsible manner that supports the maintenance of health and the treatment of disease in individual patients and populations

		<u>5. PRACTICE-BASED LEARNING & IMPROVEMENT:</u> Demonstrate the ability to investigate and evaluate one's own practice experiences, and engage in critical analysis and assimilation of scientific evidence to improve patient care practices through continuous self-improvement and lifelong learning.
B1.05	PBL1	Identify strengths, deficiencies and limits in one's knowledge and expertise to set learning and improvement goals.
B2.10	PBL2	Locate, critically appraise and assimilate evidence from scientific studies related to patients' health problems.
B2.10	PBL3	Use information technology to search common medical databases and access medical literature to optimize learning.
B2.10	PBL4	Identify, analyze and implement new knowledge, guidelines, standards, technologies, products or services that have been demonstrated to improve outcomes, and apply to individual patient care.
		<u>6. SYSTEMS-BASED PRACTICE:</u> Demonstrate an awareness of and responsiveness to the larger system of health care, as well as the ability to practice cost-effective health care, and allocating resources that do not compromise the quality of care.
B2.11	SBP1	Work effectively in various health care delivery settings and systems recognizing the impact of health policy on the delivery of care in various health settings
B2.15	SBP2	Demonstrate knowledge of appropriate documentation of care, coding, billing and reimbursement
B2.13	SBP3	Participate in identifying system errors and implementing potential systems solutions

CORE SKILLS AND PROCEDURES

The purpose of this list is to provide information regarding core skills/procedures that the program has defined as those necessary for entry into practice

Vascular Access and General Skills

- a. Venipuncture
- b. Arterial puncture
- c. Peripheral IV catheterization
- d. External Jugular catheterization

- e. Intramuscular, subcutaneous, intradermal injections

Eyes, Ears, Nose and Throat (EENT) Skills

- a. Foreign body removal from skin, eyes, nose, and/or ears
- b. Visual acuity and color vision screening
- c. Eye examination (w/fluorescein staining)
- d. Irrigation of the external auditory canal
- e. Anterior nasal packing

Cardiovascular Skills

- a. Defibrillation and cardioversion
- b. Perform cardiopulmonary resuscitation according to ACLS guidelines
- c. Doppler assessment of peripheral pulses and/or prenatal fetal heart rate

Respiratory Skills

- a. Pharyngeal suctioning
- b. Tracheal and bronchial suctioning
- c. Endotracheal intubation
- d. Laryngeal mask airway (LMA) placement
- e. Chest needle decompression/chest tube insertion

Gastro-intestinal/Genitourinary GI/GU SKILLS

- a. Urinary bladder catheterization
- b. Naso-/oro- gastric intubation and lavage

Orthopedic Skills

- a. Splinting
- b. Arthrocentesis/intra-articular injection of the large joints (knee)

Neurology Skills

- a. Lumbar puncture

Reproductive Health Skills

- a. Collection of urethral, vaginal and/or cervical specimens for STI testing
- b. Collection of vaginal and cervical specimens for cytologic (PAP) examination

Surgical Skills

- a. Aseptic technique
- b. Surgical scrub, gown and glove
- c. Administration of local anesthesia and/or digital nerve blocks
- d. Wound closure with sutures, liquid skin adhesive, steri-strips and/or staples
- e. Superficial wound incision and drainage and packing
- f. Wound care and dressing

- g. Skin punch, excisional and/or shave biopsy procedures

Life Support Skills - Demonstrated through successful certification process

- a. Basic life support (BLS) procedures
- b. Advance cardiac life support (ACLS) procedures
- c. Pediatric cardiac life support (PALS) procedures

APPENDIX B

Explanation of Table 7 – Expenditures and Revenue

II. EXPENDITURES	
Personnel – Reassigned or Existing Positions* <i>(*Provide written explanations as necessary and attach to this document)</i>	There were no reassigned or existing positions for FY18-19.
Faculty	FY 19-20 – Clinical Director; FY 20-21 – Clinical and Academic Directors
Administrators <i>(other than instruction time)</i>	FY 19-20 – existing positions include: Program Director; FY 20-21 – Program Director and Medical Director
Graduate Assistants	None
Support Staff for Administration <i>(e.g., secretarial)</i>	FY 19-20 – Clinical/Admission Associate Director; FY 20-21 – Clinical/Admission Associate Director, and 3 admin support staff
Fringe Benefits <i>(total for all groups)</i>	
Other Personnel Costs	None
<i>Total Existing Personnel Costs – Reassigned or Existing</i>	
Personnel – New Positions* <i>(*Provide written explanations as necessary and attach to this document)</i>	New positions for FY 18-19 include: Program Director, Clinical Director; Academic and Medical Director – Summer 2019; Other faculty - Summer 2020
Faculty	Clinical Director to be hired Spring 2019, Academic Director - Summer 2019; Additional faculty (4), and adjunct faculty - Summer of 2020
Administrators <i>(other than instruction time)</i>	Program Director hired 2018; Medical Director to be hired June-July 2019
Graduate Assistants	None

Support Staff for Administration (e.g., secretarial)	New hire to start in Jan 2019 – Clinical/Admission Associate director; Additional staff – Fall 2019.
Fringe Benefits (total for all groups)	
Other Personnel Costs	None
Total New Personnel Costs – New Positions	Total costs listed by FY
Start-up Costs – One-Time Expenses* (*Provide written explanations as necessary and attach to this document)	
Library/learning resources	
Equipment/Technology	
Physical Facilities: Construction or Renovation	Expenses for renovation of Ice Hall, includes furniture, and some medical equipment
Other	
<i>Total Start-up Costs</i>	
Operating Costs –Recurring Expenses* (*Provide written explanations as necessary and attach to this document)	
Supplies/Expenses	
Library/learning resources	Electronic Medical Resources
Equipment/Technology	Medical equipment/technology and maintenance
Travel	Faculty conferences, clinical site and preceptor recruitment, faculty / staff development workshops
Other	
<i>Total Operating Costs</i>	
GRAND TOTAL COSTS	

II. FUNDING SOURCES* (projected as appropriate) (*Provide written explanations as necessary and attach to this document)	List Amounts in Dollars			
	Current	FY18-19 (New)	FY 19-20 (New)	FY 20-21 (New)
Tuition/State Funds	Tuition for spring (1 st) semester 2021			\$601,344
Student Fees	Student fees for spring semester 2021			\$46,400

Other Sources		\$1,620,856	\$2,195,945	\$1,083,230
GRAND TOTAL FUNDING		\$1,620,856	\$2,195,945	\$1,730,974
Projected Surplus/Deficit (+/-) (Grand Total FUNDING <i>minus</i> Grand Total Costs)		\$ 0	\$ 0	\$ 0

Loans from Kansas State University and the College of Human Ecology. According to our income projections, all loans should be paid off by the end of FY 2026.

Graduate School
Proposed Degree Program or Certificate:
College of Human Ecology
Assessment of Student Learning Plan

A. College, Department, and Date

College: Human Ecology

Department:

Date: 11-16-18

B. Contact Person(s) for the Assessment Plan

Gwen Ferdinand-Jacob, DHSc, MPAS, PA-C

Physician Assistant Program Director

gwenfj@ksu.edu

C. Name of Proposed Degree Program or Certificate

Master of Science in Physician Assistant Studies

D. Assessment of Student Learning Three-Year Plan

According to the Accreditation Standards for Physician Assistant Education Programs, by the Accreditation Review Commission for Physician Assistant Education (ARC- PA) standard C1.01: “The program must implement an ongoing program self-assessment process that is designed to document program effectiveness and foster program improvement.”¹⁵

In 2004, in response to similar efforts being conducted within other health professional education programs and growing demand for accountability and assessment in clinical practice, representatives from the National Commission on Certification of Physician Assistants (NCCPA), the Accreditation review Commission on Education for the Physician Assistant (ARC-PA), the Physician Assistant Education Association (PAEA), and the American Academy of Physician Assistants (AAPA) developed the Competencies for the Physician Assistant Profession. This document¹⁶, last updated in 2012, serves as a foundation from which the KSU PA program has developed its student learning outcomes and objectives.

The mission of the Kansas State University Physician Assistant program is to prepare diverse and highly skilled graduates who are committed to providing compassionate and patient-centered care to their communities. The program is dedicated to graduating physician assistants who demonstrate professionalism, are globally minded, and practice within an ethical framework to improve the health of medically underserved populations.

In order to meet the above mission, the following program goals and student learning outcomes outline the desired expectations for our Physician Assistant (PA) graduates.

¹⁵ (ARC-PA, 2018) <http://www.arc-pa.org/wp-content/uploads/2018/06/Standards-4th-Ed-March-2018.pdf>

¹⁶ (AAPA, NCCPA, ARC-PA, PAEA, 2012) <https://www.aapa.org/wp-content/uploads/2017/02/PA-Competencies-updated.pdf>

1. Select qualified applicants, through a holistic process, who successfully complete the program.
2. Provide a quality educational experience that allows graduates to gain the knowledge, skills and competencies required for entry-level medical practice.
3. Provide a quality educational experience that allows graduates the knowledge, skills and competencies required to provide medical care to diverse patient populations in a wide variety of clinical settings.
4. Encourage civic responsibility with professional and community involvement.
5. Provide a quality educational experience that prepares graduates to meet or exceed the national first-time Physician Assistant National Certifying Exam (PANCE) pass rate.

In order to achieve the above program goals, PA students will be able to demonstrate competence in the following areas.

1. Student Learning Outcomes (SLOs)

a. Students will:

1. **Medical Knowledge:** Demonstrate knowledge of established and evolving biomedical, clinical, and social-behavioral sciences, and apply this knowledge to patient-centered care across the life span.
2. **Patient Care:** Provide patient-centered care that is effective, compassionate, timely, efficient and equitable for the treatment of health problems and the promotion of wellness.
3. **Interpersonal and Communication Skills:** Demonstrate interpersonal and communication skills that result in effective information exchange and collaboration with patients and their families, healthcare professionals, and other health-related agencies.
4. **Professionalism:** Demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles, applying the principles of professional practice to patient care, and sustaining the qualities required for lifelong personal and professional growth.
5. **Practice-Based Learning:** Demonstrate the ability to investigate and evaluate one's own practice experiences, and engage in critical analysis and assimilation of scientific evidence to improve patient care practices through continuous self-improvement and lifelong learning.
6. **Systems-Based Practice:** Demonstrate an awareness of and responsiveness to the larger system of health care, as well as the ability to practice cost-effective health care, and allocating resources that do not compromise the quality of care.

b. All outcomes will be assessed by the first program's mid-cycle review for institutional purposes, and annually for accreditation purposes.

Rationale for selecting these learning outcomes

All outcomes will be assessed by the first mid-cycle review for the following reasons:

- a. The physician assistant program will be required to achieve "accreditation – Provisional" status 6-12 months prior to the matriculation of students. This visit by ARC-PA is to "verify an institution's ability to begin a program in compliance with the Standards, and the program's readiness to matriculate students."
- b. ARC-PA will conduct a provisional monitoring site visit approximately 6 months prior to graduation of the first cohort, the purpose of which is to demonstrate that KSU is "delivering the

program in compliance with the Standards and the continued ability to do so”. The successful completion of this visit allows a program to maintain “accreditation-provisional” status.

- c. The final provisional site visit occurs approximately 18-24 months after the second provisional visit. “This visit verifies the institution’s and program’s demonstration of compliance with the Standards including their ability to incorporate and report the findings of a robust self-assessment process as required by the ARC-PA”.
- d. As part of maintaining a strong PA program that delivers quality education to students, and reflects the Standards of ARC-PA, the program will complete annual data analysis of the above student learning outcomes, with evaluation of students’ achievement of learning outcomes.
- e. ARC-PA Standard

	<p>The program <i>must</i> implement an ongoing program self-assessment process that is designed to document program effectiveness and foster program improvement.</p> <p>ANNOTATION: A well designed self-assessment process reflects the ability of the program in collecting and interpreting evidence of student learning, as well as program administrative functions and outcomes. The process incorporates the study of both quantitative and qualitative performance data collected and critically analyzed by the program. The process provides evidence that the program gives careful thought to data collection, management, and interpretation. It shows that outcome measures are used in concert with thoughtful evaluation about the results, the relevance of the data and the potential for improvement or change.</p>
--	--

Relationship to K-State Graduate Student Outcomes:

Each student learning outcome is essential in the preparation of physician assistants with qualities consistent with the standards set forth by ARC-PA and medical practice. Integrity, cultural sensitivity, communication skills, commitment to lifelong learning and service, engagement, and practical knowledge base are cornerstones within the physician assistant profession and are the framework on which the PA program will be based.

The PA program student learning outcomes are related to KSU Graduate Student Outcomes:

KSU Graduate Student Outcomes		PA Program Student Learning Outcomes
Knowledge	Demonstrate thorough understanding and/or competency in a specific area of emphasis, study, or profession.	Demonstrate knowledge of established and evolving biomedical, clinical, and social-behavioral sciences, and the application of this knowledge to patient care across the life span.

Skills	Demonstrate the ability to apply knowledge through critical thinking, inquiry, analysis, and communication to solve problems and to produce scholarly and creative works including but not limited to design, art, performance, original research in the form of thesis or dissertation.	Patient Care: Provide patient-centered care that is effective, compassionate, timely, efficient and equitable for the treatment of health problems and the promotion of wellness. Interpersonal and Communication Skills: Demonstrate interpersonal and communication skills that result in effective information exchange and collaboration with patients and their families, healthcare professionals, and other health-related agencies.
Attitudes and Professional Conduct	Exhibit an awareness of their responsibilities (professional integrity, ethical behavior, ability to work with diverse groups of peoples, etc.) and engage in professional conduct towards all constituent groups, including students, faculty, public, etc.	Demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles, applying the principles of professional practice to patient care, and sustaining the qualities required for lifelong personal and professional growth.

Assessment Strategies

1. Method of Measurement – Objective-based examinations

SLOs Measured – 1 - 6

Examinations are administered in nearly all courses in the didactic year, and at the end of all supervised clinical practical experiences (SCPEs) except the elective SCPE. Examinations are based on the learning objectives for each course and primarily consist of multiple choice, and short-answer types of questions, or practical exams. Examinations are delivered in both paper and computer-based formats. Course examinations are written by the faculty. The end-of-rotation examinations administered by the Physician Assistant Education Association (PAEA, <http://endofrotation.org>) are issued to the second year PA students to assess their knowledge of family medicine (FM), psychiatry, obstetrics and gynecology (OB-Gyn), pediatrics, general surgery, emergency medicine (EM), and internal medicine (IM). These PAEA examinations evaluate student learning in the domains of medical knowledge, patient care, practice-based learning, and systems-based practice. Specifically, each 100-question PAEA examination incorporates current clinical content following rotation-specific topic lists and blueprints relating to clinical interventions, clinical therapeutics, diagnosis, diagnostic studies, health maintenance, history taking and physical assessment and key scientific concepts.

Level of Performance – Students must pass all courses in the didactic and clinical years with a minimum of 80% in order to maintain their graduate standing.

2. Method of Measurement – Objective Structured Clinical Examination (OSCE)

SLOs Measured – 1 – 4

The OSCE is a performance-based evaluation method that measures student's clinical competence. OSCEs utilize standardized patient evaluation and faculty observed performance of patient care skills, and application of medical knowledge. A checklist of essential tasks and interpersonal communication skills is completed by a faculty member, and feedback is provided to the student regarding his/her performance.

The OSCEs are videotaped so that students can review their patient encounters. OSCEs are scheduled three times in the didactic year and one time in the clinical year, and at the summative assessment.

Level of Performance – Student performance on the OSCEs is evaluated by standardized patients and faculty using checklists specific for the task being performed. Critical tasks are identified and performance of these tasks are required to receive a passing score on the exercise. OSCEs form one component of the end-of-program summative assessment, and a passing score on the OSCE exercise is required for satisfactory completion of the program.

3. Method of Measurement – Oral Boards

SLOs Measured – 1 – 5

Students will each complete 2 oral boards during a return to campus in the clinical year. Summative evaluation will consist of a comprehensive examination, an oral board administered by faculty and clinical preceptors from the community, a clinical skills component, and an OSCE utilizing standardized patients.

Level of Performance – Students are evaluated by MD or PA preceptors from the community, and program faculty, using faculty generated checklists. The student is assessed in the following areas: medical interviewing, physical examination, professionalism, counseling skills, organization and efficiency, oral presentation, clinical judgment, diagnostic studies interpretation, patient management, and overall clinical competence. The boards taken during the clinical year are to assess strengths and weaknesses, and do not count as a grade. However, for the Summative oral boards, students must score a minimum of 80%; students who receive a failing grade will be remediated by a faculty advisor, before retaking the oral board in the following week. 75% is the highest score a student can achieve upon remediating an oral board.

4. Method of Measurement – Clinical Site Visits

SLOs Measured – 1 – 4

During a clinical site visit a faculty member interviews the clinical preceptors and the institution's practice staff to inquire about student performance in meeting the course/SCPE objectives. The student presents a case on a patient that was seen on the day of the site visit, and will also provide written documentation of the encounter to the faculty member. The frequency of the site visits varies, but all students have at least one clinical site visit during the clinical year.

Level of Performance – The student is assessed in the following areas: medical interviewing, physical examination, professionalism, counseling skills, organization and efficiency, oral presentation, clinical judgment, written documentation, and overall clinical competence. Students receive an honors/pass/fail score from the site visit. Students with deficiencies during the site visit will be remediated, and scheduled for another site visit by faculty at a different clinical rotation site.

5. Method of Measurement – Preceptor Evaluation of Student

SLOs Measured – 1 – 6

During the clinical education year, the mid-rotation formative evaluation is used to identify areas needing improvement (non-graded), and the final end-of-rotation preceptor evaluation is used to assess the student's progress in improving the performance of any outcomes identified as deficient or weak in the mid-rotation evaluation, as well as overall performance during the five-week rotation (graded). These evaluations assess a number of clinical and professional skills.

Level of Performance – Preceptor evaluations of students are one component of the student's grade for the clinical rotation. Students are scored on a Likert scale of 1 to 5 (5 is the maximum score equivalent to a “highly competent” rating, and 1 denotes a “not developed” score). Students must achieve at minimum of 4 “competent” rating, and all scores of 3 or below will be addressed with the student and advisor to determine the appropriate remediation. Students must receive a final score of 4 or above to be awarded a passing grade for that part of the course grade.

6. Method of Measurement – Physical Exam Assessments and Problem-Oriented Physical Exams (POPEs)

SLOs Measured – 1 – 4

The Physical Diagnosis series of courses are taught each semester of the didactic year, and coincide with the body system being taught in Clinical Medicine. This course consists of both lecture and hands-on opportunities to practice and refine physical examination skills. Once students have mastered the technical aspects of performing a physical examination of the body systems studied, subsequent evaluations focus on Problem-Oriented Physical Exams (POPEs). These physical exams assess a student's ability to perform an appropriate physical examination based on a presenting chief complaint or medical condition. Students are observed by faculty and assessed on their technical, professional, and communication skills and their ability to apply clinical reasoning skills in order to appropriately assess a given medical problem. Students perform physical exams on classmates for check-offs each semester. In the final semester of the didactic year, students visit nursing homes in the community and conduct complete physical exams on the patients, providing documentation of encounter to the Physical Diagnosis course director.

Level of Performance – In the fall semester of the didactic year, students will perform a POPE on a volunteer patient from the local community. Students are tested on their ability to perform a comprehensive physical examination. A checklist of essential tasks and interpersonal communication skills is completed by a faculty member and scored. Any student who does not satisfactorily perform the physical exam with a minimum score of 80% will be remediated.

As the student advances, a similar checklist of essential tasks and skills is utilized to assess the student's ability to perform a problem-oriented physical examination. Feedback is provided to the student regarding his/her performance.

7. Method of Measurement – Grand Rounds Presentation

SLOs Measured – 1 – 4

Each student is required to develop and present one Grand Rounds presentation during the clinical year. Students present to the program faculty and their peers. The purpose of a Grand Rounds presentation is to educate the audience on a clinically relevant topic through the discussion of a single clinical case in which they were involved. The students must demonstrate the ability to apply the principles of evidence-based medicine (EBM) to clinical practice. The student also gains experience developing and delivering a professional presentation.

Level of Performance – Students are allotted 15 minutes for the PowerPoint formatted presentation. Faculty and peers evaluate the student to assess Student's effectiveness in communicating the patient's medical problem and illustrating the key teaching points; student's effectiveness in communicating and educating the audience on their main teaching points; the quality of the research done in preparation for the presentation, and presentation style. Students receive an overall score of "excellent", "good", "satisfactory", or "redo". Students who receive a "redo" are required to revise their presentation based on faculty feedback and repeat the presentation at a future date.

8. Method of Measurement – Medical Documentation

SLOs Measured – 1 – 4

Throughout the 27-month program, students are required to write >20 clinical notes from patient care visits (includes simulated patients) in which they have been involved. Students are required to submit a variety of notes, including problem-oriented SOAP notes, admission history and physical exams, procedure notes, discharge summaries, surgical notes, and well-child visits.

Level of Performance – Clinical notes are graded by PA faculty and feedback provided. Students are graded on format, content, and the ability to synthesize clinical information into a cohesive clinical document. Students must receive a minimum score of 80% on each note submitted. If the minimum score is not achieved the student must revise his/her note or submit a new one from a new patient.

Assessment Plan success, with timely student feedback and other interventions will be shown by a minimum of the following:

Metric	Fair	Satisfactory	Excellent
Minimum 3.0 GPA at the end of the didactic year	90%	95%	100%
Successful completion of all SCPE rotations	90%	95%	100%
Successful completion of all program administrative requirements			100%
Passing the Physician Assistant National Certifying Examination (PANCE) on the first attempt	95%	98%	100%

2. Results and Review of Student Learning Outcomes and Assessment Strategies

- a. Describe the process the faculty will follow to review the results of assessment data.

The clinical and academic committees will collect and perform analyses of data pertaining to their respective areas. During the biannual program retreat or at a program planning meeting, the results will be disseminated to faculty, to determine the need for curricular modifications, or the need to wait until more comparative information from other sources prior to a consideration of modifications.

Biannual Program Review by Faculty

Fall Retreat	Spring Retreat
Review Handbooks and Compare to the University/CHE Catalog.	Analyze Data from Previous Year's Surveys.
Review Goals and Objectives of the Program.	<u>Comparison Tables:</u> Standards: Objectives Competencies: Objectives PANCE Blueprint: Objectives
Review the Mission Statement.	Review Packrat Data from Previous Didactic Class.
Review Professionalism Policies and Assessment.	Review Data from Preceptor, Clinical Site, Instructor, Course Evaluations and Curricular Outcomes
Review Packrat Data from Previous Clinical Year Class.	Remediation, Attrition, and Deceleration Data Analysis.
Review PANCE Data Report.	PANCE Data Report.
Review Course Syllabi.	Graduate Exit Survey
Review Preceptor Evaluations of Program.	Faculty Evaluation of Curriculum

- b. Describe any other program improvement procedures that will be followed (e.g. formative assessments of delivery method, corporate or employer surveys).

Data retrieval from the four national PA organizations to review trends in PA education and the PA profession. Employer survey of alumni will be completed one year post graduation. Other program improvement procedures may include modification of remediation process,