



ACADEMIC PROGRAM PROPOSAL FORM

DIRECTIONS: Use this form when proposing a new major or primary field of study, new emphasis, new degree program, or new certificate of achievement.

DATE SUBMITTED: 2/1/2016

Date of AAC Approval:
March 2, 2016

INSTITUTION: University of Nevada School of Medicine

REQUEST TYPE: New Degree
 New Major or Primary Field of Study
 New Emphasis
 New Certificate of Achievement (AAC approval only)

Date of Board Approval:

DEGREE (i.e. Bachelor of Science): Master of Physician Assistant Studies

MAJOR (i.e. Animal Science): Physician Assistant Studies

EMPHASIS (i.e. Equine Studies):

CREDITS TO DEGREE: N/A

CERTIFICATE OF ACHIEVEMENT: N/A

PROPOSED SEMESTER OF IMPLEMENTATION: Summer, 2017

Action requested:

The University of Nevada School of Medicine seeks approval of a new Master of Physician Assistant Studies degree program.

A. Brief description and purpose of proposed program

A Master of Physician Assistant Studies program is a terminal professional practice degree. This program will prepare students for a career as a physician assistant in order to increase access to health care in Nevada. The curriculum length will be 27 months, which will include 15 months of didactic instruction followed by 12 months of preceptor-supervised clinical training. The purpose of this program is to increase the number of providers in the Nevada primary care workforce who are trained specifically to satisfy health care shortages and to function effectively in health care teams.

B. Statement of degree or program objectives

The mission of the UNSOM Master of Physician Assistant Studies Program is to train flexible and committed generalist clinicians dedicated to strengthening health care in their communities. The vision of the program is to expand and enhance access to health care for all Nevadans through physician assistant workforce development and advocacy for the profession. Based on these mission

and vision statements, the objectives of the proposed program are to train the next generation of physician assistants in Nevada. The goals of the program include:

- Prepare clinically skilled physician assistants by providing an educational environment that fosters learning and prepares students for a career in primary care.
- Assist in meeting the health care needs of Nevadans by training physician assistants to serve as essential components of care teams and augment the primary care workforce.
- Develop and promote an interdisciplinary and collaborative orientation to health care delivery.
- Provide educational and training opportunities for non-traditional students, particularly those from rural and underserved Nevada communities, and those who have served in military medical settings.
- Prepare physician assistants to be critical thinkers and lifelong learners.
- Train diverse and culturally competent health care providers.

Program candidates will be drawn from across the state of Nevada, particularly those with extensive experience in healthcare, including military veterans, emergency medical technicians and paramedics. The program plans to collaborate with NSHE institutions statewide to assist program candidates in meeting academic prerequisites. Nevada ranks below 45 other states in primary care health care workforce, mental health services, specialty and sub-specialty care. Recruitment of health care professionals to Nevada has not kept pace with population expansion, and both rural and urban disadvantaged communities are losing ground. To meet the needs of Nevadans in the future, it is imperative that the available physician manpower be augmented by the development of care teams. Physician assistants are essential components of these teams. Nevada has only one PA program currently training approximately 50 graduates annually in Las Vegas (in a private school), but no programs housed in an NSHE institution.

The UNSOM Master of Physician Assistant Studies Program curriculum will be structured to promote primary care practice with special emphasis on serving rural and urban underserved communities in the state. One particular focus will be attracting and training qualified candidates from rural and urban underserved communities in Nevada where they may return to practice; ultimately increasing access to health care services in these isolated communities. Graduates will be prepared to enter practice immediately upon program completion.

UNSOM faculty and staff have extensive experience in working with and within rural Nevada communities. The School has maintained a focus on rural and urban underserved health care since its inception. For example, fourth year medical students are required to participate in a four-week rural rotation, sending students to rural communities across the state.

This program will be housed within the School of Medicine with academic faculty hired through the Department of Family and Community Medicine - Reno, and administrative oversight through the Office of Statewide Initiatives, which includes the Office of Rural Health, the Area Health Education Centers, and Nevada Health Services Corps, each with offices statewide.

Specific program objectives are taken from the required competencies of the Accreditation Review Commission on Education for the Physician Assistant, Inc. Six overarching themes make up the competencies, and include: medical knowledge, interpersonal and communication skills, patient care, professionalism, practice-based learning and improvement, and systems-based practice. Within the six themes, physician assistants are expected to:

Medical Knowledge

- Describe etiologies, risk factors, underlying pathologic process, and epidemiology for medical conditions
- Identify signs and symptoms of medical conditions
- Select and interpret appropriate diagnostic or lab studies
- Manage general medical and surgical conditions to include understanding the indications, contraindications, side effects, interactions and adverse reactions of pharmacologic agents and other relevant treatment modalities
- Identify the appropriate site of care for presenting conditions, including identifying emergent cases and those requiring referral or admission
- Identify appropriate interventions for prevention of conditions
- Identify the appropriate methods to detect conditions in an asymptomatic individual
- Differentiate between the normal and the abnormal in anatomic, physiological, laboratory findings and other diagnostic data
- Appropriately use history and physical findings and diagnostic studies to formulate a differential diagnosis
- Provide appropriate care to patients with chronic conditions

Interpersonal Skills

- Create and sustain a therapeutic and ethically sound relationship with patients
- Use effective listening, nonverbal, explanatory, questioning, and writing skills to elicit and provide information
- Appropriately adapt communication style and messages to the context of the individual patient interaction
- Work effectively with physicians and other health care professionals as a member or leader of a health care team or other professional group
- Apply an understanding of human behavior
- Demonstrate emotional resilience and stability, adaptability, flexibility and tolerance of ambiguity and anxiety
- Accurately and adequately document and record information regarding the care process for medical, legal, quality and financial purposes

Patient Care

- Work effectively with physicians and other health care professionals to provide patient-centered care
- Demonstrate caring and respectful behaviors when interacting with patients and their families
- Gather essential and accurate information about their patients
- Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment
- Develop and carry out patient management plans
- Counsel and educate patients and their families
- Competently perform medical and surgical procedures considered essential in the area of practice
- Provide health care services and education aimed at preventing health problems or maintaining health

Professionalism

- Understand legal and regulatory requirements, as well as the appropriate role of the Physician Assistant
- Develop professional relationships with physician supervisors and other health care providers
- Demonstrate respect, compassion, and integrity
- Be responsive to the needs of patients and society

- Demonstrate accountability to patients, society, and the profession
- Develop a commitment to excellence and on-going professional development
- Demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices
- Be sensitive and responsive to patients' culture, age, gender, and disabilities
- Demonstrate self-reflection, critical curiosity and initiative

Practice-Based Learning and Improvement

- Analyze practice experience and perform practice-based improvement activities using a systematic methodology in concert with other members of the health care delivery team
- Locate, appraise, and integrate evidence from scientific studies related to their patients' health problems
- Obtain and apply information about their own population of patients and the larger population from which their patients are drawn
- Apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness
- Apply information technology to manage information, access on-line medical information, and support their own education
- Facilitate the learning of students and/or other health care professionals
- Recognize and appropriately address gender, cultural, cognitive, emotional and other biases; gaps in medical knowledge; and physical limitations in themselves and others

Systems-Based Practice

- Use information technology to support patient care decisions and patient education
- Effectively interact with different types of medical practice and delivery systems
- Understand the funding sources and payment systems that provide coverage for patient care
- Practice cost-effective health care and resource allocation that does not compromise quality of care
- Advocate for quality patient care and assist patients in dealing with system complexities
- Partner with supervising physicians, health care managers and other health care providers to assess, coordinate, and improve the delivery of health care and patient outcomes
- Accept responsibility for promoting a safe environment for patient care and recognizing and correcting systems-based factors that negatively impact patient care
- Apply medical information and clinical data systems to provide more effective, efficient patient care
- Utilize the systems responsible for the appropriate payment of services

C. Plan for assessment of degree or program objectives

Patterns of enrollment, program inquiries, and applications will be analyzed for quality of applicants and demand for the program. These figures will be examined annually to determine if changes should be made in the recruitment and/or admissions processes.

Students will complete an anonymous exit program evaluation regarding program goals, faculty, administration, and their preparedness to take the national certifying exam and to enter the field. Students will also be asked about additions/deletions and other changes to the program content.

Students' success in attaining employment as Physician Assistants will be analyzed in detail, specifically area of specialization and geographic location (are they practicing in Nevada, rural Nevada, and in area of interest?) Exit surveys and student workforce impact will be conducted by the Health Workforce Research and Policy Program in the Office of Statewide Initiatives.

Composite scores on the Physician Assistant National Certification Exam (PANCE) will be analyzed, as will their scores on comprehensive final written and clinical competency exams, to determine strengths and weaknesses of the program.

Program feedback from clinical preceptors will be received annually. This feedback will be utilized to measure students' progression and mastery of program objectives.

D. Plan for assessment of student learning outcomes and the use of this data for program improvement

Student progress will be monitored throughout the curriculum by the Student Progress Committee, which will meet quarterly at a minimum. The Student Progress Committee will review mid-term and final examination scores and student evaluations from clinical preceptors.

Students' performance will be assessed utilizing national assessment tools such as the Physician Assistant Clinical Knowledge Rating Assessment Tool (PACKRAT) exam (completed at the end of the didactic year and half-way through the clinical year), the PAEA end-of-rotation exams, and the National Commission on Certification of Physician Assistants (NCCPA) Physician Assistant National Certification Exam (PANCE).

Students' performance on the program's final summative examinations will be assessed (given toward the end of the clinical year). These exams will consist of both didactic and clinical components.

Faculty and community preceptors will provide regular input regarding continuous student improvement.

E. Contribution and relationship of program objectives to

i. NSHE Master Plan

The Master of Physician Assistant Studies program at UNSOM will enhance achievement of the NSHE master plan by addressing the following goals:

Reputation for Excellence

The Physician Assistant Program will continue the longstanding tradition of excellence in the School of Medicine. This new program will be the first of its kind in NSHE, and will demonstrate NSHE's commitment to providing educational programs for all levels and types of healthcare professionals.

Opportunity for All

This program plans to enroll students from a wide range of ethnic, geographic, and socioeconomic backgrounds, with the expectation that these students will return to their home communities to practice. Educating physician assistants with the goal of returning to serve their own communities, whether they are rural, urban, underserved or minority communities, increases access to health care services for all, while expanding educational opportunities for all Nevadans.

A Prosperous Economy

This program aims to improve access to healthcare in all communities statewide. Increasing the provision of healthcare services also serves to fuel a stronger economic base for the state. Health workforce development – including support for new health care education training programs like this one – must be considered a key component of state and regional economic development strategies. In particular, state policymakers and educators must ensure that the health workforce in Nevada is educated and trained alongside those investments that health sector business

establishments make in the facilities, technology, and capital infrastructure needed to deliver quality health care to all Nevadans. All of the available evidence indicates that health professionals educated and trained in Nevada are more likely to begin and continue to practice in Nevada than those educated and trained in other states.

Quality Education

The physician assistant profession is expanding dramatically as the healthcare system works to provide care for more and more Americans. This program will model successful PA programs across the country and will draw on the expertise of UNSOM clinical and basic science faculty, along with experienced community clinical preceptors, to provide a high-quality PA training program.

Quality of Life

This program will increase the number of practicing physician assistants in Nevada. By increasing the number of primary care providers it will eventually improve access to health care, which significantly enriches the lives of all Nevadans.

ii. Institutional mission

The Mission of the University of Nevada, Reno is to prepare graduates to compete in a global environment through teaching and learning in high-quality professional degree programs in sciences and health care among others. Further, it seeks to improve economic and social development by engaging citizens, communities and governments and seeks to reflect the gender, ethnic, cultural, and ability/disability diversity of the citizens of Nevada in its academic and support programs, and in the composition of its faculty, administration, staff, and student body.

The mission of the University of Nevada School of Medicine is to improve the health and well-being of all Nevadans and their communities through:

- Excellence in medical student education and postgraduate training that produces national leaders in medicine,
- Excellence in clinical care of the highest quality, safety and innovation,
- Excellence in biomedical and behavioral research with local, national and global impact and
- Demonstrated commitment to an institutional culture of respect, compassion and diversity.

The Master of Physician Assistant Studies aligns seamlessly with both the UNR and UNSOM mission statements, in that the program will prepare a diverse group of highly-qualified Physician Assistants to contribute to their communities and to the delivery of healthcare statewide. The program will focus on preparing PAs to serve in primary care roles in rural and underserved urban areas of the state.

iii. Campus strategic plan and/or academic master plan

Goal 5 of the University of Nevada Strategic Plan commits the University to "improve the physical and mental health of Nevadans." Nevada lags behind nearly all states in the number of health professionals per 100,000 population, and among several specific health care occupations, Nevada ranks last. According to the Nevada Rural and Frontier Health Data Book (2015), 33.7% of Nevada residents, and 50.6% of rural Nevada residents live in primary medical care health professional shortage areas (HPSAs). An additional 31.8% of Nevada's urban residents also live in areas considered primary care HPSAs. Further, 100% of residents in all counties except Clark live in mental health-designated HPSAs, along with 35.6% of Clark County residents. Nevada desperately needs both primary care and mental health providers. Physician Assistants are uniquely positioned to care for both physical and mental health conditions, which is essential in a

state extremely lacking in both mental health and primary care providers. PAs can help to fill this gap in necessary services statewide.

This new program to train and expand the health care workforce of Nevada increases current NSHE offerings, which include medicine, nursing, public health, social work, clinical psychology, dental medicine, social work, substance abuse, and other allied professions.

A substantial portion of the Nevada population occupies categories which are historically underserved including rural, Native American, seniors, recent immigrants from Central America, Southeast Asia, and the Pacific Islands. Graduates of this PA program, many of whom will be drawn from under-represented communities, will be more likely to return to care for Nevadans in those communities.

iv. Department and college plan

The University of Nevada School of Medicine is committed to improving the health of all Nevadans and their communities. With campuses in Reno and Las Vegas and training sites in several rural communities, School of Medicine programs reach the entire state. With the development of this new training program, UNSOM recognizes that the provision of excellent health care services requires a multidisciplinary group of professionals with a variety of skill sets, life experiences and goals.

v. Other programs in the institution

The Master of Physician Assistant Studies will be the first of its kind at UNSOM or UNR.

vi. Other related programs in the System

The UNSOM PA Program will be the first of its kind within NSHE.

F. Evaluation of need for the program

i. Intrinsic academic value of program within the discipline

The Master of Physician Assistant Studies is nationally recognized as an important contributor to the provision of health care services nationwide. This program prepares students directly for employment as physician assistants in just over two years. PAs practice medicine in collaboration with physicians and other healthcare professionals. PAs are licensed medical providers who can diagnose and treat medical conditions, write prescriptions, order labs and other tests, assist in surgery, and can serve in primary care or specialty settings. An expansion of the PA workforce in Nevada will increase access to high-quality healthcare services in communities throughout the state. Within the UNR Division of Health Sciences, this program complements other health care offerings including social workers, nurses, public health professionals, speech pathologists, psychologists, and physicians.

ii. Evidence of existing or projected local, state, regional, national and/or international need for program

The vast majority (82%, or 14/17) of Nevada counties are considered primary care Health Professional Shortage Areas (HPSAs). Nevada ranks 46th in the nation in primary care physicians per 100,000 population and 37th in the nation for PAs per 100,000 (20.6 compared to the national average of 26.8 [JAAPA, 2014]). In recognition of the need for Physician Assistants, PA Programs are on the rise nationally. As of 2013, 181 PA programs were accredited nationwide, graduating an average of 40.9 students yearly, and 60 planned programs are currently in the queue for accreditation. It is estimated that the Physician Assistant workforce will grow from current national figures of 75,000 to 127,000 by 2025, a recognition that PAs play a critical role in healthcare in the U.S. By 2020, PAs and nurse practitioners (NPs) will increase the proportion of primary care service from 23% to 28% (In Nevada, 32.9% of PAs practice in primary care). Forbes magazine ranked the Masters Degree for PA Studies as the

number one degree for jobs in 2014. In 2012-2013, 78% of PA applicants nationwide had more than one job offer. Nevada does not currently offer a public physician assistant training program in any of the NSHE institutions.

iii. If this or a similar program already exists within the System, what is the justification for this addition

The only similar program offered within NSHE is the Doctor of Nursing Practice, often called Nurse Practitioner (NP). While similar fields, a great deal of difference exists between the two. First, the backgrounds and training for these professionals are distinct. The NP is trained in the nursing model, while the PA is trained in the medical model and works in collaboration with a physician. The proposed PA program is an avenue toward expanding the primary care workforce in Nevada, providing students from a variety of backgrounds with an opportunity to serve in the health care field. One primary difference between the PA and NP degrees are the background and program prerequisites. NPs generally have a Registered Nurse (RN) education and then undergo additional training to become a nurse practitioner (NP). PA students come from a range of medical backgrounds, including emergency medical technicians, military veterans with medical experience, nurses, dietitians, radiology technicians, and many others. This variety provides opportunities for a diversified applicant pool. PA licensure requires a supervising physician, while NPs were recently granted the right to work independently in the state of Nevada (and many other states).

iv. Evidence of employment opportunities for graduates (state and national)

In 2012-2013, 78.1% of recent PA position applicants had more than one job offer, and as noted above, Forbes magazine placed the PA profession in the top position for jobs in 2014.

v. Student clientele to be served (Explain how the student clientele is identified)

The UNSOM PA Program will enroll 24 students per year at the outset, with expansion possible in the future, based on demand and availability of program resources. The program anticipates great demand, as it will be the only public PA program in the state (and anecdotally, inquiries have been increasing as word spreads about the program). Nationally, PA programs are nearly as competitive as MD programs, accepting about 10% of applicants. Student recruitment plans include drawing students from diverse communities across the state, with a primary aim to enroll students from rural and underserved areas with the goal of improving access to healthcare services in those same communities.

The UNSOM PA Program will provide an opportunity for non-traditional, mature adult students to further their career in health care by providing an opportunity to provide clinical primary care services to the communities in which they live. The traditional PA model recruits students who have extensive background in direct patient care, and with this additional training, will be able to provide access to primary care. This educational model provides an opportunity for non-traditional students to provide primary health care services to their communities. These students will possess appropriate academic background, have achieved prior expertise in the health care system, and demonstrate a commitment to community service.

G. Detailed curriculum proposal

i. Representative course of study by year (options, courses to be used with/without modification; new courses to be developed)

The UNSOM PA Program curriculum has been modeled after several successful programs, and will consist of six total semesters, two of which are strictly clinical rotations. The program will be completed in 27 months and will require full-time enrollment and participation. Students must enroll in every course in the specific progression as they are presented here. The program will

utilize the UNSOM medical school model featuring courses with no attached credit, since the program is a completely prescribed unit with no electives.

SUMMER I

PAS 600 Anatomy & Physiology

PAS 605 Advanced Anatomy & Physiology

PAS 620 Basic Science in Clinical Medicine

PAS 641 PA Role Development I

FALL I

PAS 655 Pathophysiology

PAS 680 Clinical Skills

PAS 661 Behavioral Medicine I

PAS 630 Human Development

PAS 642 PA Role Development II

PAS 611 Technical Skills I

SPRING I

PAS 671 Adult Medicine

PAS 615 Emergency Medicine

PAS 625 Pharmacology

PAS 662 Behavioral Medicine II

PAS 643 PA Role Development III

PAS 612 Technical Skills II

SUMMER II

PAS 672 Maternal-Child Health

PAS 663 Advanced Behavioral Medicine

PAS 613 Technical Skills III

PAS 644 PA Role Development IV

PAS 617 Investigative Skills

PAS 694 Professional Paper

FALL II

PAS 700-760 Clerkships (Clinical Rotations)

SPRING II

PAS 700-760 Clerkships (Clinical Rotations)

SUMMER III

PAS 700-760 Clerkships (Clinical Rotations)

Clinical rotations will consist of one four-month preceptorship in family medicine, and six one-month clerkships in: behavioral medicine, emergency medicine, general surgery, inpatient internal medicine, one rotation in a medically-underserved setting, and one elective (potentially orthopedics, cardiology, pulmonary, rheumatology, hospice, trauma surgery or others.)

ii. Program entrance requirements

Entrance requirements for the PA Program will mimic national criteria and adhere to accreditation standards. Completion of a Bachelor's Degree and the following prerequisites are required:

Clinical experience prerequisite overview:

In addition to the academic requirements, all applicants must meet a minimum 2,000-hour paid, direct, hands-on clinical patient care prerequisite. This requirement can come from a range of health care professions including nursing, emergency medical technician/paramedic, medical assistant, dietitian, or other related fields. Competitive candidates have far more than the minimum 2,000 hours of paid clinical experience.

Academic prerequisite overview:

- PA Program prerequisites must be completed with a B- or better (per course) prior to the October 1st application deadline to qualify.
- It is strongly recommended that the prerequisite courses be completed within the last five (5) years.
- Courses must be taken at any regionally accredited community college or university for a letter grade or grade on a 4.0 scale.
- Overall minimum GPA of 2.75 or higher, though 3.0 is recommended.
- The student must provide verification that they have completed the requirements for a bachelors degree by the application deadline.

Required Courses:

Two (2) Human Anatomy & Physiology courses – 6 semester credits

- Courses can be combined A&P courses or individual human anatomy and human physiology. Lab recommended.
- One (1) General Biology course – 3 semester credits. Lab recommended.
- One (1) General Chemistry course – 3 semester credits. Lab recommended.
- One (1) Statistics course - 3 semester credits.

Recommended Courses:

- Biochemistry
- Microbiology
- Genetics
- Social Sciences (Sociology, Psychology, Anthropology)

iii. Program completion requirements (credit hours, grade point average; subject matter distribution, preprogram requirements)

Program completion requirements will adhere to national accreditation standards set by the ARC-PA. Successful completion of the program will require grades of 80% or higher in all didactic courses and clinical rotations, as well as successful completion of the professional paper—also at an 80% score.

iv. Accreditation consideration (organization (if any) which accredits program, requirements for accreditation, plan for attaining accreditation - include costs and time frame)

Physician Assistant training programs are accredited by the Accreditation Review Commission on Education for the Physician Assistant, Inc. (ARC-PA). The UNSOM PA Program Development Committee has scheduled a site visit with the ARC-PA for October 24-25, 2016, the report of which will be the final determinant in program accreditation and subsequent program approval based on the March 2017 ARC-PA Commission Review. The ARC-PA accreditation costs \$10,000, and Physician Assistant Education Association (PAEA) Membership is required (\$2500) to participate in the mandatory Central Application Service for Physician Assistants (CASPA).

v. Evidence of approval by appropriate committees of the institution

Dr. Thomas L. Schwenk, Vice President of Health Sciences and Dean of UNSOM has given his full support to the development of the physician assistant training program, which will be housed under UNSOM (see letter of support attached). UNR Provost Kevin Carman approved the Academic Pre-Proposal for this program in June, 2014. The University Courses and Curricula Committee approved the full proposal on February 1, 2016.

H. Readiness to begin program

i. Faculty strengths (specializations, teaching, research, and creative accomplishments)

UNSOM has a large number of basic science and clinical faculty to support the PA Program. The Offices of Medical Education and Student Services at UNSOM have a number of faculty who will support this program in administrative roles, including curriculum development, student services, admissions, financial aid, and clinical rotation placement personnel (at UNSOM and through the Area Health Education Center [AHEC]). Clinical faculty in Reno-based family medicine and internal medicine departments are available to serve as instructional faculty. Basic Science chairs include Iain Buxton, PhD, Pharm D, Pharmacology; Jeffrey Harper, PhD, Biochemistry and Molecular Biology; David AuCoin, PhD, Microbiology and Immunology; Marcus Erhling, PhD, Pathology and Lab Medicine; and Kenton Sanders, PhD, Physiology and Cell Biology.

Existing rural and urban faculty preceptors, clinical-based faculty who have precepted PA's for the MEDEX PA program, will serve as preceptors for the UNSOM PA Program.

Core faculty, including a Program Director, Medical Director, Clinical Coordinator, and three key instructional PA faculty will be hired to lead the PA Program.

ii. Contribution of new program to department's existing programs (both graduate and undergraduate) and contribution to existing programs throughout the college or university

The PA Program at UNSOM will increase the breadth of health professions programs offered within NSHE. This unique program will complement the existing MD degree offered at UNSOM and will significantly contribute to the health care workforce in Nevada. This program will provide new interprofessional training opportunities with students in medicine and nursing programs, and potentially with other health science programs as well. The development of the PA program will strengthen the portfolio of health science programs at UNSOM, UNR, and within NSHE.

iii. Completed prior planning for the development of the program (recent hires, plans for future hires, securing of space, curricular changes, and reallocation of faculty lines)

Ideal classroom space has been secured and is being held for the PA Program at UNR's Redfield Campus at the south end of Reno. The classroom space consists of 3,380 total square feet, which includes one large classroom area, several small group workspaces, a kitchen/eating area, and student storage. Space needs for this program are unique, in that the program will operate full days, Monday through Friday, which requires such student amenities as storage and food preparation. Additionally, an important component of the curriculum includes small group work, which requires appropriate space for these activities.

The Program Director (1.0 FTE) has been hired and joined the UNSOM on November 1, 2015. Plans are underway for the hiring of an Academic Coordinator (.80 FTE), a Clinical Coordinator (.80 FTE), a part-time Medical Director (.40 FTE), two additional Principal Faculty (one at .80 FTE and one at .60 FTE, allowing them to have partial FTE clinical practice time, which is important for clinical faculty.) Additional faculty include an Accreditation Consultant (.10

FTE), staff support from the UNSOM Office of Admissions and Student Affairs (.50 FTE), and a pool of lecturers to supplement the teaching faculty (.80 FTE total.) Projected total professional faculty, in year one, is 5.8 FTE.

Four Administrative Assistants will be hired as well, totaling 4.0 FTE, and will include: (1) AAI – Assistant to the Program Director (1.0 FTE); (2) AAII – Academic Support (1.0 FTE); (3) AAIII – Clinical Support (1.0 FTE); and (4) AA – IT/Database (1.0 FTE). The Program Director will lead the recruitment of program faculty and staff, and will finalize curriculum, initiate the admissions process, and participate in the accreditation site visit scheduled for October 24-25, 2016. Classroom space has been approved by the UNR President and active remodeling of the space will be completed before the October site visit.

iv. Recommendations from prior program review and/or accreditation review teams

N/A

v. Organizational arrangements that must be made within the institution to accommodate the program

Master of Physician Assistant Studies program faculty will be hired as academic faculty in the Department of Family and Community Medicine at the Reno UNSOM campus, and the program will be managed by the Office of Statewide Initiatives. Arrangements to accommodate these faculty positions within the Department of Family Medicine and the partnership between Family Medicine and Statewide Initiatives must be further developed, though Dr. Dan Spogen, Family Medicine Chair, has expressed his interest in, and support for, the PA program faculty residing in Family Medicine.

I. Resource Analysis

i. Proposed source of funds (enrollment-generated state funds, reallocation of existing funds, grants, other state funds)

This program will be primarily self-supporting through enrollment tuition and fees, after initial startup costs supported through the University of Nevada School of Medicine discretionary funds, the Office of Statewide Initiatives, and strategic partner in the development of the program, Renown Health. The physician assistant program will reside within the University of Nevada School of Medicine.

ii. Each new program approved must be reviewed for adequate full-time equivalent (FTE) to support the program in the fifth year. Indicate if enrollments represent 1) students formally admitted to the program, 2) declared majors in the program, or 3) course enrollments in the program.

a. (1) Full-time equivalent (FTE) enrollment in the Fall semester of the first, third, and fifth year.

1st Fall semester 24

3rd Fall semester 48

5th Fall semester 48

(2) Explain the methodology/assumptions used in determining projected FTE figures.

Figures are based on class size built based on physical plant and availability of clinical training sites. The PA Program consultant advised the development team that 24 is a

good number to start with for educational practice. The program will have flexibility to increase class size as possible in the future. All figures represent students formally admitted into the program.

b. (1) Unduplicated headcount in the Fall semester of the first, third, and fifth year.

1st Fall semester 24

3rd Fall semester 48

5th Fall semester 48

(2) Explain the methodology/assumptions used in determining projected headcount figures.

Headcount represents the number of students enrolled in the Master of Physician Assistant Studies (MPAS) program for each year.

iii. Budget Projections – Complete and attach the Five-Year Budget Projection Table.

Attached

J. Facilities and equipment required

i. Existing facilities: type of space required, number of assignable square feet, space utilization assumptions, special requirements, modifications, effect on present programs

Classroom space has been reserved for the PA Program at the Redfield Campus. This reserved space consists of approximately 3,380 square feet of classroom space, including one large classroom, student storage space, a kitchen area, and several small group work/study spaces. This space will accommodate the planned 24 students and can accommodate modest expansions to the program planned for subsequent years. Due to space constraints across UNR, the space requires modifications to appropriately house the PA Program in its entirety. Renovations will be made to accommodate both the teaching and administrative functions of the program, and will include full furnishing of all spaces. The reserved space is being vacated by a TMCC program, and the use of this space by the PA Program has been approved by the Redfield Campus and President Johnson of UNR, and has been endorsed by the Redfield Governing Council. The Redfield Campus will be an ideal location for the PA Program, with its focus on health professions programs and existing resources already there. The Program is in the process of developing an agreement with Orvis School of Nursing to make use of the existing nursing simulation space for practicing clinical encounters and conducting clinical exams.

ii. Additional facilities required: number of assignable square feet, description of space required, special requirements, time sequence assumed for securing required space

The space described above has been reserved for the program with occupation projected for early fall 2016. Additional facility needs include administrative office space for the five key faculty (Program Director, Academic Coordinator, Clinical Coordinator, and two key teaching faculty), four administrative assistants, conference/meeting room, shared office for part-time lecturers, and reception space including space for record storage and copy machine. Due to extreme space constraints across UNR the space is being renovated to accommodate both the teaching and administrative functions of the program.

iii. Existing and additional equipment required

A new podium system for the classroom will be purchased to facilitate fully integrated functionality for teaching. This is projected for FY16 and 17 during the renovation phase, to be completed prior to student matriculation in summer 2017.

WebCampus and One45 software programs will be utilized in this program, however, they are already in operation at UNR and UNSOM. For clinical practice and exams, patient model simulators and task trainers will be utilized, as will the B-line video recording system and exam room unit. All of these resources are already existing (simulation equipment exists at both the Redfield Campus, where the Orvis School of Nursing practices clinical experiences, and inside the Pennington Health Sciences building on the UNSOM campus, where UNSOM coordinates clinical experiences). As a program of UNSOM, the PA program will have access to the UNSOM facility, and the Orvis School of Nursing has agreed to share their clinical space at the Redfield Campus. With shared space comes the potential for interprofessional clinical experiences with both medical and nursing students.

K. Student services required – Plans to provide student services, including advisement, to accommodate the program, including its implications for services to the rest of the student body

Student Services for Physician Assistant Program

The UNSOM Office of Admissions and Student Affairs will provide student services to the PA program. These services are detailed below and will include recruitment, admissions support, financial planning assistance, academic recordkeeping, learning assessments, career advising, oversight of student conduct and performance. The UNSOM Associate Dean of Admissions and Student Affairs will oversee these activities in collaboration with the PA Program Director.

Recruitment – The UNSOM Office of Outreach and Recruitment, which is supported by Admissions and Student Affairs, will also work with the UNSOM PA program to disseminate information about the program at scheduled events in an effort to direct a pipeline of students to the program.

Admissions Support – The UNSOM Admissions Coordinators will work with the PA Program Director and staff to ensure that admissions processes and procedures adhere to the adopted requirements and those of the University of Nevada, Reno. Staff will also assist in conducting and assessing applicant interviews, as well as providing information regarding background checks, immunizations, health insurance, liability insurance and other requirements necessary for matriculation to the program.

Financial Planning Assistance – The UNSOM Assistant Director of Financial Aid works directly with the University of Nevada, Reno's Office of Financial Aid & Scholarships and will be available to assist PA students with acquiring financial aid and developing a debt management plan. The Assistant Director will also work the PA program staff to review qualifications for any available scholarship opportunities.

Academic Recording Keeping – The UNSOM Registrar maintains selected academic records for all students and graduates and will facilitate PA program enrollment and compliance training necessary to fulfill requirements set forth by clinical affiliates. These records are confidential and maintained in accordance with the appropriate laws and policies and procedures developed by UNSOM and the PA program.

Learning Assessment – The UNSOM Learning and Wellness Center provides resources for test-taking strategies, study skills and time management. The Center is staffed by learning specialists

certified to assess adult learning disabilities and coordinates assessments and counseling services with the University of Nevada, Reno's Disability Resource Center and Student Counseling Center.

Career Advising – Student affairs staff will work with the PA Program Director to train career advisors, develop career advising workshops for students and assist in job placement activities for graduates of the program.

Student Conduct and Performance – UNSOM Student Affairs will provide support establishing, monitoring and overseeing PA student conduct and performance. This support will ensure that all students are meeting the academic requirements and professionalism expectations set forth by the PA program and that any students not meeting these requirements are subjected to the appropriate disciplinary policies and procedures. UNSOM Student Affairs will further be available to direct students to available resources. The Associate Dean of Admissions and Student Affairs will also be available to provide referrals to counseling or learning assessment services.

L. Consultant Reports – If a consultant was hired to assist in the development of the program, please complete subsections A through C. A copy of the consultant's final report must be on record at the requesting institution.

i. Names, qualifications and affiliations of consultant(s) used

Ruth Ballweg, PA-C, University of Washington MEDEX Program

ii. Consultant's summary comments and recommendations

Please see attached report: Nevada PA Program Development Consultant's Report #1 and #2.

iii. Summary of proposer's response to consultants

The Consultant's report describes planning to date, including several in-person planning meetings with Ruth Ballweg, PA-C. The PA Program Development Team continues to work with Ms. Ballweg in developing all aspects of the PA Program, including personnel, budget, space requirements, and didactic and clinical program curriculum. As stated in the consultant's report, we will continue to look to Ms. Ballweg for guidance and support in the next phases of program development, including faculty recruitment, preparing a student admissions process, developing clinical training sites, meeting accreditation requirements, and preparation for the ARC-PA site visit in Fall 2016.

M. Articulation Agreements

i. Articulation agreements were successfully completed with the following NSHE institutions. (Attach copies of agreements)

N/A

ii. Articulation agreements have not yet been established with the following NSHE institutions. (Indicate status)

N/A

iii. Articulation agreements are not applicable for the following institutions. (Indicate reasons)

N/A

N. Summary Statement

The proposed Master of Physician Assistant Studies is a terminal degree, preparing graduates to enter the health care workforce as fully trained providers upon program completion (and subsequent

passage of the Physician Assistant National Certification Examination [PANCE]). There is great demand for enrollment in physician assistant programs nationwide, and local demand is not nearly met by the sole Nevada program (Touro University in Las Vegas) or via programs in neighboring states. This proposed program is strongly supported by leaders in the UNSOM, UNR Division of Health Sciences, UNR, and the Nevada System of Higher Education. External support has been demonstrated by health care institutions in Reno and rural Nevada, as well as philanthropic foundations.

This program will use designated space at the UNR Redfield Campus and will formalize the sharing of space and clinical simulation resources with Orvis School of Nursing and UNSOM by Memoranda of Understanding. New academic faculty will be hired to meet the requirements of the accrediting body and will be members of the UNSOM Department of Family and Community Medicine. Other key faculty will be drawn from current Basic Science and Clinical departments and from community faculty. Ultimately, this program aims to increase the number of primary care providers in Nevada, and most specifically in rural areas where needs are greatest.

Master of Physician Assistant Studies, MPAS

I. Contact Information

Brian S. Lauf, MPAS, PA-C, Founding Program Director
(775) 682-7991

blauf@medicine.nevada.edu
medicine.nevada.edu/pa

Mailing Address:

University of Nevada School of Medicine
University of Nevada, Reno
1664 N. Virginia Street/PMB 0346
Reno, NV 89557-0346

II. Brief Introduction

A Master of Physician Assistant Studies program is a terminal professional practice degree. This program will prepare students for a career as a physician assistant in order to increase access to health care in Nevada. The curriculum length will be 27 months, which will include 15 months of didactic instruction followed by 12 months of preceptor-supervised clinical training. The purpose of this program is to increase the number of providers in the Nevada primary care workforce who are trained specifically to satisfy health care shortages and to function effectively in health care teams.

III. Program Objectives/Student Learning Outcomes

- Prepare clinically skilled physician assistants by providing an educational environment that fosters learning and prepares students for a career in primary care.
- Assist in meeting the health care needs of Nevadans by training physician assistants to serve as essential components of care teams and augment the primary care workforce.
- Develop and promote an interdisciplinary and collaborative orientation to health care delivery.
- Provide educational and training opportunities for non-traditional students, particularly those from rural and underserved Nevada communities, and those who have served in military medical settings.
- Prepare physician assistants to be critical thinkers and lifelong learners.
- Train diverse and culturally competent health care providers.

IV. Admission Requirements

All applications are submitted through the [Central Application System for Physician Assistants \(CASPA\)](#).

Admission requirements for PA program of study include:

- All prerequisites must be completed by the application deadline to be considered a complete application. All prerequisites must be completed from a regionally accredited institution of higher learning in the United States
- Bachelor's degree from a regionally accredited institution
- A minimum overall undergraduate GPA of 2.75 AND a "B-" or better in each prerequisite course

V. Program Requirements

The UNSOM PA Program curriculum has been modeled after several successful programs, and will consist of six total semesters, two of which are strictly clinical rotations. The program will be completed in 27 months and will require full-time enrollment and participation. Students must enroll in every course and maintain satisfactory academic advancement in the specific progression as they are presented here.

SUMMER I

- PAS 600 Anatomy & Physiology
- PAS 605 Advanced Anatomy & Physiology
- PAS 620 Basic Science in Clinical Medicine
- PAS 641 PA Role Development I

FALL I

- PAS 655 Pathophysiology
- PAS 680 Clinical Skills
- PAS 661 Behavioral Medicine I
- PAS 630 Human Development
- PAS 642 PA Role Development II
- PAS 611 Technical Skills I

SPRING I

- PAS 671 Adult Medicine
- PAS 615 Emergency Medicine
- PAS 625 Pharmacology
- PAS 662 Behavioral Medicine II
- PAS 643 PA Role Development III
- PAS 612 Technical Skills II

SUMMER II

- PAS 672 Maternal-Child Health
- PAS 663 Advanced Behavioral Medicine
- PAS 613 Technical Skills III
- PAS 644 PA Role Development IV
- PAS 617 Investigative Skills
- PAS 694 Professional Paper

FALL II

- PAS 700-760 Clerkships (Clinical Rotations)

SPRING II

- PAS 700-760 Clerkships (Clinical Rotations)

SUMMER III

- PAS 700-760 Clerkships (Clinical Rotations)

Clinical rotations will consist of one four-month preceptorship in PAS 700 Family Medicine, and six one-month clerkships in: PAS 710 Behavioral Medicine; PAS 720 Emergency Medicine; PAS 730 General Surgery; PAS 740 Inpatient Internal Medicine/Hospitalist/Geriatrics; PAS 750 Medically Underserved Populations; PAS 760 Elective (potentially orthopedics, cardiology, pulmonary, rheumatology, hospice, trauma surgery, or others.)

VI. Total Units

The program will utilize the UNSOM medical school model featuring courses with no attached credit; the program is a completely prescribed unit with no electives. Students must enroll in every course and maintain satisfactory academic advancement in the specific progression outlined in the curriculum to satisfy the requirements for graduation.

VII. Undergraduate Prerequisites

- 2000-hour minimum paid, direct hands-on clinical patient care. All forms of clinical patient care experience are considered. Student practicum or shadowing experience is not accepted
- Anatomy and Physiology, 2 semesters; Lab preferred
- General Biology, 1 semester; Microbiology with lab strongly recommended
- General Chemistry, 1 semester; Biochemistry recommended
- General Statistics, 1 semester

Students must earn a B- or better in each prerequisite course, and the University of Nevada School of Medicine Physician Assistant Studies Program strongly recommends that prerequisite courses be taken within the last 5-7 years. Courses must be taken at any regionally accredited community college or university for a letter grade or grade on a 4.0 scale.

Recommended additional coursework for academic preparation: Pharmacology, Genetics, Medical Terminology, Spanish, Abnormal Psychology, Developmental Psychology, Aging and Disabilities, Public Health, Technical Writing, Communications.

Note(s):

Accreditation Information

The Physician Assistant (PA) Studies Program - University of Nevada School of Medicine has applied for Accreditation - Provisional from the Accreditation Review Commission on Education for the Physician Assistant, Inc. (ARC-PA). The Physician Assistant Program - University of Nevada School of Medicine anticipates matriculating its first class in June of 2017, pending receipt of Accreditation - Provisional by the ARC-PA commission meeting scheduled for March of 2017. Accreditation-Provisional is an accreditation status for a new PA program that has not yet enrolled students, but at the time of its initial accreditation review, has demonstrated its preparedness to initiate a program in accordance with the accreditation standards. The program will not commence in the event that this provisional accreditation is not received.

UNSON PA Program Course Outline
2017-2019 dates

YEAR 1

SUMMER I: May31-August 25, 13 weeks	
PAS 600 Anatomy & Physiology Review (completed during the first 6 weeks of the session, June)	
PAS 605 Advanced Anatomy & Physiology	
PAS 620 Basic Science in Clinical Medicine	
PAS 641 PA Role Development I	

August 28-September 1 Break

FALL I: September 4-December 22, 16 weeks (with 1 week fall break)	
PAS 655 Pathophysiology	
PAS 680 Clinical Skills	
PAS 661 Behavioral Medicine I	
PAS 630 Human Development	
PAS 642 PA Role Development II	
PAS 611 Technical Skills I	

December 25-January 5 Winter Break

SPRING I: January 8-April 27, 16 weeks (with 1 week spring break)	
PAS 671 Adult Medicine	
PAS 615 Emergency Medicine	
PAS 625 Pharmacology	
PAS 612 Technical Skills II	
PAS 662 Behavioral Medicine II	
PAS 643 PA Role Development III	

April 30-May 4 Break

SUMMER II: May 7-June 15, 6 weeks	
PAS 672 Maternal-Child Medicine	
PAS 663 Advanced Behavioral Medicine	
PAS 613 Technical Skills III	
PAS 617 Investigative Skills	
PAS 644 PA Role Development IV	

SUMMER II cont.: June 18-July 13, 4 weeks Master's project work	
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PAS 694 Professional Paper

July 16-27 Two-week break

YEAR 2

FALL II: August-December Clerkships

PAS 700-799 Clerkships (Clinical Rotations)

SPRING II: January-May Clerkships

PAS 700-799 Clerkships (Clinical Rotations)

SUMMER III: June-July Clerkships

PAS 700-799 Clerkships (Clinical Rotations)

Graduation: Fall 2019

UNSOM PA Program Course Outline and Course Descriptions

SUMMER I	
PAS 600 Anatomy & Physiology	This course is an anatomy and physiology review course, completed during the first 6 weeks of the session. The course will include an overview of the anatomy and physiology of all major organs and organ systems to prepare students for advanced anatomy and physiology.
PAS 605 Advanced Anatomy & Physiology	This course covers the anatomy and physiology of all major organ systems, including: endocrine, immune, respiratory, cardiovascular, gastrointestinal, genitourinary, gynecological, integumentary, musculoskeletal and neurological. This course will focus on clinical aspects of anatomic and physiologic principles encountered in the clinical setting.
PAS 620 Basic Science in Clinical Medicine	Students are provided an overview of four clinically-relevant basic science subjects, including genetics, immunology, cell biology, and microbiology. A research paper is required.
PAS 641 PA Role Development I	This course offers students the opportunity to thoroughly examine the unique role of the practicing PA in the scope of the health care system and to investigate primary care issues in both urban and rural communities. A key component during the didactic year, this course is designed to help students transition into their new role as PAs. Primary course requirements include personal analysis and self-reflection. The focus of this course will be an introduction to the principles of evidence-based medicine, including formulating and researching clinical questions and developing the skills for evaluating the literature and applying it to individual patient encounters.

FALL I	
PAS 655 Pathophysiology	Pathophysiology and pathology will be studied for each major organ system, focusing on processes of diseases commonly seen in primary care practice.
PAS 680 Clinical Skills	The purpose of this course is to develop students' ability to conduct a screening history and physical exam, as well as branching exams for all major organ systems. This course includes experiences with medical record-keeping and oral presentation skills.
PAS 661 Behavioral Medicine I	This course prepares students for the interpersonal aspects of clinical practice through process skill development including clinical interviewing, and responding to patients' emotions. Students will learn how to assess emotional and mental health problems in their patients.
PAS 630 Human Development	The Human Development course series is designed to provide PA students with the knowledge and perspective about human growth and development across the lifespan from infancy to old age. This course will utilize a combination of didactic coursework and clinical experiences and will build on the previous experience that students have working with elders in the clinical skills course earlier in the semester. This course will meet the ARC-PA accreditation standard

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	B2.06 which requires the program curriculum to “include instruction in the social and behavioral sciences as well as normal and abnormal development across the lifespan.” Course content will focus on development and assessment of infants and children, generational differences, lifespan development and end-of-life issues, and will include practical observation time in preschools, clinics, and newborn nurseries.
PAS 642 PA Role Development II	This course offers students the opportunity to thoroughly examine the unique role of the practicing PA in the scope of the health care system and to investigate primary care issues in both urban and rural communities. A key component during the entire didactic year, this course is designed to help students transition into their new role as a PA. Primary course requirements include personal analysis and self-reflection. This course provides an orientation to public health and the health care system, along with a focus on issues pertaining to medically underserved populations in both urban and rural settings. Students will develop their skills in working with diverse populations.
PAS 611 Technical Skills I	This is a hands-on, clinical preparation course in which students will practice clinical reasoning through case discussion and will be exposed to a variety of technical demonstrations such as fundoscopy, cardiac rhythms, and will work with patient simulators.

SPRING I	
PAS 671 Adult Medicine	This course introduces students to the diagnosis and management of adult conditions commonly seen in primary care practice in all major organ systems. This course will utilize a case-based approach to discussion of disease management.
PAS 615 Emergency Medicine	In this course, students will learn management of emergency conditions commonly seen in primary care practice, including initial trauma and multiple trauma evaluation and shock treatment and assessment. Cardiac, respiratory, head and dental emergencies, psychiatric, orthopedic, reproductive (including sexual assault), and toxicology emergencies will be covered.
PAS 625 Pharmacology	Pharmacological management of conditions commonly seen in primary care. Utilizing a systems-based approach, this course will parallel PAS 671 Adult Medicine, providing pertinent drug therapy guidelines for conditions being addressed.
PAS 662 Behavioral Medicine II	This course will provide a more in-depth approach to behavioral aspects of patient care, examining such topics as homelessness, chronic mental illness, chronic pain, PTSD, anxiety and depression, HIV, sleep medicine, and sexuality-related issues. Ethical management of these topics will be addressed.
PAS 643 PA Role Development III	This course offers students the opportunity to thoroughly examine the unique role of the practicing PA in the scope of the health care system and to investigate primary care issues in both urban and rural communities. A key component during the didactic year, this course is

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	designed to help students transition into their new role as a PA. Primary course requirements include personal analysis and self-reflection. Spring course focus will be on health care disparities and the health care needs of disparate groups.
PAS 612 Technical Skills II	This is a hands-on, clinical preparation course in which students will practice clinical reasoning through case discussion and will be exposed to a variety of technical demonstrations such as ECG, radiographs, and patient simulators. Students will demonstrate patient assessment skills and participate in gynecological and genitourinary exams and other clinical skills.

SUMMER II	
PAS 672 Maternal-Child Health	This course provides a systems-based approach to the diagnosis and treatment of commonly seen conditions in pediatrics and obstetrics in primary care. Specific childhood examinations including newborn, infant, well-child, adolescent and sports exams will be covered, along with pregnancy, delivery, and postpartum care and managing chronic diseases in these populations.
PAS 663 Advanced Behavioral Medicine	This course provides skill development in the management of complex emotional problems, substance abuse and alcoholism, intimate partner violence, and sexuality through the lifespan.
PAS 644 PA Role Development IV	This course offers students the opportunity to thoroughly examine the unique role of the practicing PA in the scope of the health care system and to investigate primary care issues in both urban and rural communities. A key component during the didactic year, this course is designed to help students transition into their new role as a PA. Primary course requirements include personal analysis and self-reflection. Summer II focus of this course will be on working in hospitals and an overview of the health care system, working with interpreters, and health policy.
PAS 613 Technical Skills III	This is a hands-on, clinical preparation course in which students will practice clinical reasoning through case discussion and will be exposed to a variety of clinically-relevant topics such as laboratory medicine, radiology, and electrocardiography, and will participate in advanced heart sounds simulations.
PAS 615 Investigative Skills	The purpose of this course is to ensure students have the skills needed to evaluate public health and biomedical research in order to apply the most current information to their practice. The course provides an overview of basic concepts in biostatistics and epidemiology through small group discussions and online projects.
PAS 694 Professional Paper	Students will complete a professional research paper as part of the requirements to fulfill the MPAS degree. This paper will demonstrate students' capacity for rigorous study and independent thought appropriate to clinical master's level work. Students will work on this paper throughout their clerkship year on a clinical topic of their choice.

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FALL II, SPRING II, & SUMMER III	
PAS Clerkships and Preceptorships (Clinical Rotations)	Students will rotate through seven clinical experiences during this year, including one four-month family medicine preceptorship and six one-month clerkships.
PAS 700 Family Medicine Clerkship	Family Medicine (16 weeks) Preceptorship Primary care and family medicine are a significant focus of the UNSOM PA program. Because of this, we devote a sizable portion of time to this rotation. This preceptorship stresses ambulatory primary care with an emphasis on common problems, biopsychosocial issues, preventive care, and introduction to the role of the primary care medical provider. Students may be placed in community clinics, large systems, stand-alone individual provider offices, and small multi-caregiver practices. During their time in this rotation, students will acquire the skills needed to diagnose and treat patients using office, hospital, home, or community resources.
PAS 710 Behavioral Medicine Clerkship	Behavioral Medicine (4 weeks) The behavioral medicine experience offers active and observational involvement in either outpatient clinic settings or inpatient treatment facilities. Placement sites include, but are not limited to, state and federal correctional institutions, substance abuse treatment facilities, and large multi-disciplinary medical centers. The clinical student can expect to see an assortment of psychiatric conditions and complaints (e.g., depression, generalized anxiety disorder, post-traumatic stress disorder, dementia, schizophrenia) and can anticipate being a part of patient evaluation and treatment, which will incorporate counseling (inpatient, outpatient, group, family, couple), medical management, assessment, and provider consultation.
PAS 720 Emergency Medicine Clerkship	Emergency Medicine (4 weeks) During the emergency medicine rotation the clinical student will be exposed to a wide range of patients; those who present with common outpatient problems (e.g., back pain, headache, minor trauma, upper respiratory tract infections, urinary tract infections) along with potentially critical, life-threatening disease or injury requiring quick therapeutic decisions. Upon completing this experience, the student will have the knowledge, experience, and self-confidence necessary to effectively diagnose and manage patients with the wide range of acute and serious illnesses often encountered in their continued training and future practice.
PAS 730 General Surgery Clerkship	General Surgery (4 weeks) The objective of this rotation is to permit clinical students to

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	<p>develop their knowledge of surgical disease and to enhance their ability to comprehensively manage the problems encountered in surgical patients. Diagnosis, preoperative care and postoperative care will be stressed. The management of surgical emergencies and outpatient follow-up of discharged patients will be included. The student will be involved in operative procedures and will participate in rounds and teaching conferences. This rotation will provide an opportunity for students to further develop their clinical skills in dealing with medical as well as surgical problems and will permit them to consider every aspect of the surgical patient, including differential diagnosis and decision-making, and the basic principles of surgical management.</p>
<p>PAS 740 Inpatient Internal Medicine/Hospitalist/Geriatrics Clerkship</p>	<p>Inpatient Internal Medicine/Hospitalist/Geriatrics (4 weeks) During this rotation the student will gain the clinical skills required to manage high-acuity medical and surgical patients. They will participate in hospital-based care, refining their history-taking and physical examination skills, diagnostic test interpretation, and treatment protocol comprehension, all while caring for the acutely ill. All students can also expect to participate in daily rounds and training sessions. Other experiences during the inpatient rotation include transport team management, communication with referral physicians, and interaction with a multi-disciplinary team.</p>
<p>PAS 750 Medically Underserved Populations Clerkship</p>	<p>Medically Underserved Populations (4 weeks) The underserved rotation is a key focus of the UNSOM PA program. The goal of this clerkship is to help prepare our future medical providers to care for the vulnerable and underserved populations among us. Students can expect to receive real-world experience while treating patients with a higher risk for poor health outcomes due to an inability to access the necessary resources for optimal health and improved quality of life. They can expect a challenging and rewarding exposure in either a rural or urban underserved system. The clerkship includes all aspects of patient care, from examination to treatment, with the added benefit of understanding how such care is delivered in the underserved healthcare environment.</p>
<p>PAS 760 Elective Clerkship</p>	<p>Elective (4 weeks) Clinical students are given the opportunity to choose a one-month medical experience. While it is necessary for the rotation to be medically and physician assistant focused, what this exposure might be is limited only by a student's vision and desire. The decision is commonly influenced by future employment or career goals. However, it is not unusual for</p>

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	the student to seek continued exposure in a previously completed core clerkship. Examples of commonly requested electives include orthopedics, cardiology, pulmonary, rheumatology, hospice, and trauma surgery.
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University of Nevada
School of Medicine

Thomas L. Schwenk, M.D.
Professor of Family Medicine
Dean, School of Medicine
Vice President, Division of Health Sciences

July 1, 2015

UNR Division of Health Sciences
Courses and Curriculum Committee

To Whom It May Concern:

I am pleased to provide the strongest possible letter of support for the University of Nevada School of Medicine Master of Physician Assistant Studies program. Launching this program is long overdue and in great need by the state's healthcare workforce. Our state is severely deficient in health care providers in all areas, but most acutely in the primary care workforce. While the number of medical school slots is expanding, the number of graduates who ultimately practice in Nevada is not sufficient to meet the demand. High-quality mid-level health professional programs are much needed to supplement the physician workforce.

The creation of a Physician Assistant program at the School of Medicine will be of enormous benefit to the people of Nevada, especially those in rural and underserved communities. We anticipate the active recruitment of students from these areas, who will be more likely to return to practice in their home communities. A natural consequence of this will be the training of clinicians who are diverse in background and culturally sensitive to their patients. The School of Medicine is committed to supporting these students with pre-enrollment programs to help ensure success, and is aggressively working on the creation of pipeline programs to expand the pool of qualified candidates in the future.

I am convinced that we have a strong team committed to developing this program and that the School of Medicine has the infrastructure to support the creation and growth of the University of Nevada Physician Assistant Program and assure its success. This program has my full support. I look forward to matriculating our inaugural class in June, 2017.

Best regards,

Thomas L. Schwenk, M.D.
Professor of Family Medicine
Dean, University of Nevada School of Medicine
Vice President, Division of Health Sciences

**New Academic Program Proposal
Five-Year Program Cost Estimate
(Revised December 2015)**

Institution: UNR Program: Physician Assistant Studies Semester of Implementation: Summer 2017

DIRECTIONS: Complete the Student FTE and following cost estimates for the first, third, and fifth for the proposed new program in Section A. Any "new" costs in year one must be noted by source in Section B.

STUDENT FTE: Year 1: 24 Year 3: 48 Year 5: 48

Section A.	Year 1/Start-up				Year 3		Year 5	
	Existing ¹	New ²	Total	FTE	Total	FTE	Total	FTE
PERSONNEL								
Faculty (<i>salaries/benefits</i>) ³	892,391	0	892,391	5.8	1,026,223	5.7	1,120,661	5.7
Graduate Assistants	0	0	0	0.0	0	0.0	0	0.0
Support Staff	324,935	0	324,935	4.0	365,000	4.0	410,442	4.0
Personnel Total	\$1,217,326	\$0	\$1,217,326	9.8	\$1,391,223	9.7	\$1,531,103	9.7
OTHER EXPENSES								
Library Materials (<i>printed</i>)	0	0	0		0		10,500	
Library Materials (<i>electronic</i>)	31,800	0	31,800		35,730		40,147	
Supplies/Operating Expenses	61,825	0	61,825		65,955		79,955	
Equipment	0	0	0		0		0	
Other Expenses	20,000	500,000	520,000		25,000		25,000	
Other Expenses Total	\$113,625	\$500,000	\$613,625		\$126,685		\$155,602	
TOTAL	\$1,330,951	\$500,000	\$1,830,951		\$1,517,908		\$1,686,705	

Section B.

EXPLANATION OF "NEW" SOURCES²

	Amount	%
Tuition/Registration Fees	0	0.0%
Federal Grants/Contracts	0	
State Grants/Contracts	0	0.0%
Private Grants/Contracts	0	0.0%
Private Gifts	500,000	100.0%
Other (<i>please specify</i>)	0	0.0%
TOTAL	\$500,000	100.0%

¹Resources allocated from existing programs to the proposed program in Year 1 should be noted in the "Existing" column.

²Any "New" resource utilized to fund a new program must include the source to be provided in the "Explanation of New Sources" section. Total "New" sources for the first year must equal the total under "Explanation of New Sources."

³Budget estimates for faculty salaries and benefits must include estimated merit and COLA increases in Year 3 and Year 5.

EXPLANATION (Please provide any additional information pertinent to the budget projection, including for example, explain for any new funding sources that are not guaranteed receipt by the institutions how the program will make-up for the potential loss in expected new funding.):

Faculty Salaries: Program Director (1.0 FTE), Academic Coordinator (.80 FTE), Clinical Coordinator (.80 FTE), part-time Medical Director (.40 FTE), two additional Principal Faculty (one at .80 FTE and one at .60 FTE), Accreditation Consultant (.10 FTE), staff support from the UNSOM Office of Admissions and Student Affairs (.50 FTE), and a pool of lecturers to supplement the teaching faculty (.80 FTE total.)

New Funding: start-up funding from Renown; majority will be expended in FY16 and FY17 for start-up costs; remainder will be allocated in FY18 forward for program costs;

Support Staff includes four full-time Administrative Assistants and Standardized Patients (which do not have associated FTE).

Printed library materials initially purchased in FY17; projected for replacement in FY 22

Other Expenses is comprised of start-up costs and standard operating costs. Start-up costs include, but are not necessarily limited to, facility renovation to accommodate classroom teaching space, faculty office space, and program administration, teaching podium/AV system for classroom, cadavers and storage tanks for anatomy lab course, computers and printers for program faculty and staff, furnishings for program facility, accreditation fees and accreditation site visit fees, required student application system fees and organizational membership, and funds to support recruitment of founding faculty. Ongoing operating costs include, but are not necessarily limited to, office operational expenses such as telephones, copy charges and office supplies, professional organization memberships, faculty development funds to support continuing education of program faculty, replacement fluids for cadaver storage tanks, personal protective equipment for students and faculty for lab courses, funds to support the annual admissions process including interview days and selection conferences, annual renewal fees for student application system, didactic year student exams, clinical year exams, ACLS certification for students, PACKRAT exam, funds to support student recruitment events, misc. classroom supplies such as white board markers, etc., ongoing accreditation fees, and equipment replacement as necessary.

In addition, this program will have a significant in-state travel budget to accommodate the development and maintenance of clinical rotations outside the immediate Reno/Sparks metro area. Travel is required of program faculty to set up clinical sites, establish effective preceptor and teaching relationships, develop affiliation agreements, and perform routine visits to each site during the time a student is on site.

A modest out-of-state travel budget is projected to support program faculty participation in professional meetings and conferences.

Nevada PA Program Development 2013
Consultant's Report
Ruth Ballweg MPA, PA-C

Introduction:

In 2013, the Dean of the University of Nevada School of Medicine Thomas L. Schwenk, M.D., appointed a committee to review and consider the development of a PA Program within the School. Chaired by Dr. Melissa P Piasecki, Senior Associate Dean for Academic Affairs and coordinated by Gerald Ackerman the Statewide Director of the Nevada AHEC, the committee held its first meeting in late February. Ruth Ballweg, Director of the MEDEX Program at the University of Washington was asked to serve as the initial consultant for the project with additional input from Janet R Wheble, who has served in a leadership role for PA practice in Nevada. In a 2-day site visit on June 3 and 4th, 2013, the Committee and the site visitors reviewed a number of developmental issues and considered a timeline for the project. This report is a summary of those discussions.

History:

The University of Nevada School of Medicine originally considered the development of a physician assistant program in 1989. Led by Caroline Ford in her role as Director of the Nevada State Office of Rural Health, the PA initiative included a visit by Lawrence M. Detmer, Secretary of the Accreditation Review Committee on Educational Programs for Physician Assistants (ARC-PA), Dr. John Ogle, Program Director at the University of Colorado, and Ruth Ballweg, Program Director at the University of Washington's MEDEX PA Program. While ultimately the decision was made not to proceed with a full-scale program at that time, the consultation identified the potential for PAs in Nevada, particularly in meeting the needs of rural and remote communities.

Subsequently the University of Nevada entered into an agreement with the University of Washington to train a minimum of 3 Nevada residents per year for employment in Nevada's rural communities. The partnership included in-state activities to develop a Nevada PA applicant pool, and implementation of an admissions and selection process that included representatives from the Nevada health care community, the University of Nevada School of Medicine and MEDEX faculty. Nevada PA students spent the first year of their PA training in Washington State at MEDEX didactic training sites (Seattle, Yakima, and Spokane) and then returned to Nevada for clinical placements in their second year. In addition, the MEDEX Program provided technical assistance to employers throughout Nevada on the utilization of Physician Assistants to meet the needs of Nevada's underserved populations and communities. The University of Nevada School of Medicine components of the program—including recruitment and clinical placements—were primarily managed through the Nevada AHEC with the assistance of the School of

Medicine's clinical placement office. Ultimately 57 Nevada residents were trained through the University of Nevada/MEDEX partnership. All but one of those PAs has remained in Nevada.

In addition to the partnership between the University of Nevada and the MEDEX PA Program, two other PA programs have served Nevada. One, Touro University in Las Vegas, remains. Western University of Health Sciences of Pomona California, opened a branch campus in Las Vegas from 1999-2001; however it did not continue due to other priorities within the parent institution.

Why Now?

Currently over 200 PAs are licensed to practice in Nevada. There are, however, projected needs for additional PAs in the state due to the rapid growth of the population, the unique issues of caring for residents in rural and remote communities, and the expanding need for primary care clinicians to serve the larger numbers of patients newly eligible for health care due to health reform laws and regulations.

Feasibility Study:

The Nevada Area Health Education Center (AHEC) regularly collects data on health access and the health workforce in Nevada. This AHEC data, combined with information on new PA licenses, and information obtained from employers on PA job development will be brought together to formulate the detailed feasibility study required by the Accreditation Review Committee on Physician Assistants (ARC-PA) as the first step in the accreditation process.

The Accreditation Process:

Currently there are delays in the accreditation process which is administered by the Accreditation Review Commission on Education for the Physician Assistant. Over 50 new PA programs are "in the pipeline" for accreditation. This "backlog" of programs could result in a delay of up to 4 years (2017) to complete the provisional accreditation process. Recent information from the ARC-PA may indicate that they may be working to expedite this process. On June 25, 2013, as a follow-up to the June meeting, the University of Nevada School of Medicine submitted initial application forms to begin the process. There is a projected 2-week turn-around for the ARC-PA to review eligibility and provide further information on a projected timeline.

Mission Statement:

The Committee considered a mission statement for the University of Nevada PA Program in the context of competition—for students and clinical sites—with other PA programs in the area. Given the proposed location within a public institution—and the past history of working with MEDEX to improve health care access in Nevada—especially for geographically underserved communities and for vulnerable populations--the group felt that the Mission of the program should reflect these goals and values. This type of focused Mission would be in contrast to a more

generic mission statement that would simply talk about “training competent graduates to get jobs.” The group also recognized the value of having experienced and mature candidates with prior health care experience. This choice of students will also assist with clinical training placements since physicians and health care administrators will be more interested in providing training for students who are “recruitable” immediately after graduation.

Degree:

The ARC-PA will require that a Masters Degree be available to all PA students entering programs by 2021 and is therefore now requiring that all programs in the Provisional Accreditation Process be designed and implemented at the Masters Degree level. The committee’s discussion addressed the necessary requirements and approvals that will be required from the University of Nevada Graduate School. These processes will be built into the timeline for the program and managed by the School of Medicine Administration.

Applicant Pool Development and Linkages:

The program will recruit experienced health care workers with a focus on “grow your own” methodology for rural communities and specific populations. Active applicant pool development activities--utilized in the early days of the MEDEX partnership--will once again be used to publicize the program, provide community based information sessions, and encourage the completion of bachelors degrees for students who have clinical experience but less academic background. While the requirement for a bachelor’s degree can have a negative impact on the applicant pool by creating barriers for applicants from military or rural backgrounds, the committee felt that this degree requirement can also create opportunities to develop formal linkages with Great Basin College (Elko), Nevada State College (Las Vegas) and Western Nevada College (Carson City). The group also recognized that PA applicants from these backgrounds would benefit from additional formal academic counseling in support to assure that their time and resources are well spent in completing prerequisite requirements. In a future meeting the group will work on the development of “bridging programs” with these three colleges.

Admissions Process:

The Admissions Process will include interviewers from the faculty, the community, and from health care leadership. University of Nevada observers will travel to Seattle in the coming year to observe the MEDEX selection process—which has been previously used to select Nevada students.

Size/Location/Geographic Distribution of Training:

A major goal of the new PA program will be to effectively serve the entire state of Nevada. The plan is for the initial start up of the program to take place with 20 students in Reno. When the program is well established, an additional site—also with 20 students—could be developed in Las Vegas. If a second site is added, both sites would fall within a single accreditation and would offer an educationally

equivalent didactic curriculum followed by clinical placements throughout the Nevada.

Physical Plant:

The group toured teaching facilities at the Reno campus of the University of Nevada School of Medicine and also University of Nevada's Redfield Campus in Reno. Using a combination of these two facilities, there is sufficient and appropriate space to house the initial program in Reno.

Didactic and Clinical Curriculum:

As required by the ARC-PA, the Nevada PA program will offer a generalist curriculum designed to train Nevada residents for the full range of PA roles with an emphasis on primary care. The clinical rotations will also emphasize primary care and will include a 4 month primary care preceptorship and rotations in emergency medicine, general surgery, behavioral medicine, inpatient internal medicine, an "underserved populations" experience and at least one elective.

Faculty and Staff:

The faculty will include a Physician Assistant as Program Director, 3 full-time faculty at each site, and an overarching Medical Director and Clinical Coordinator. A minimum of at least 1.5 full time staff members will serve each site. Faculty will have faculty appointments at the Assistant Professor level—at a minimum-- and be eligible for promotion. The program's "home" for faculty appointments had not been yet been determined at the time of the site visit.

Start-up Costs/Budget:

The fiscal office of the School of Medicine will prepare a start-up budget that includes the above staffing as well as other costs. One important feature of this budget will be travel costs for program development and implementation.

Internal Approvals:

The Committee and Administrative Staff will develop a timeline for completing the required internal approvals for the implementation of the program.

Next Steps:

Follow-up phone calls and meetings will be planned upon receipt of the next level of correspondence from the ARC-PA.

Nevada PA Program Development
Consultant's Report #2
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Ruth Ballweg MPA, PA-C

Introduction/History/Context:

The Physician Assistant Program at the University of Nevada School of Medicine (UNSOM) has been in active development since early 2013. Earlier UNSOM PA training activities, in collaboration with the University of Washington's MEDEX Program, began in 1989 and were described in detail in my first Consultant's Report. The original relationship involved a formal contract for recruitment and MEDEX Seattle-based didactic training for Nevada residents committed to working with geographically or economically underserved populations. In addition, the UNSOM arranged Nevada clinical training placements to allow students to return to their home state for the second half of their PA education. The program was highly successful in placing PAs in these designated areas, however over time the UNSOM/MEDEX relationship became more informal. As the leader of the MEDEX Program during that time period, I was asked to serve as a consultant to the project. In addition, the Nevada PA program developers, led by Dr. Evan Klass, visited the MEDEX Program on June 2nd and 3rd, (2014) to meet with program leaders and faculty to learn more about the implementation of PA education.

Follow -Up Visits:

I returned to Reno for meetings on August 11 and 12, 2014 to work on the feasibility study for the program and on continued detailed planning.

I came back to Reno on May 19, 20 and 21, 2015 to participate in a community meeting with Nevada PAs and other stakeholders, to continue to develop program details, and to meet with leaders of the School of Medicine including Dean Tom Schwenk; Jean Regan, Senior Associate Dean of Finance; Dr.'s Jaren Blake and Dan Spogen from the Department of Family Medicine; Richelle O'Driscoll and Kevin Murphy from Marketing and Web Development; Amy McFarland, Director of Community Based Medical Education; Dr.'s Maria Valencik and Jeff Harper, Basic Sciences; Dr. Brad Graves, Internal Medicine; Dr. Cherie Singer, Student Services; Leonard Walker, Financial Aid, and Mary Shultz, Director of Savitt Library.

Throughout this period I have worked by email as well as by individual and conference calls to move ahead with a number of issues including curriculum, budget, staffing plans, and the ARC-PA accreditation process.

I have been asked to join the group again, in Reno, for our next detailed two-day work session on August 17-19, 2015.

ARC-PA

Dr. Klass attended the required ARC-PA information sessions for developing programs in July 2014. (There are a number of concerns among PA educators about the “tone” and types of information that are provided to new programs in these sessions). One issue that was discussed was recruitment of a program director and other faculty members. Because of the shortage of individuals with perceived qualifications and interest in these roles, there was discussion about projected salaries, and roles, which was inconsistent with the experience in public institutions—and especially in medical schools. Dr. Klass and I discussed this issue in detail (see further discussion under “recruitment” below).

Since that meeting the ARC-PA has made several changes in their required development process, one of which is to discontinue the requirement for a feasibility study. This change is based on their assumption that a developing program should have already completed a feasibility study and process prior to even beginning their ARC-PA application process. The issue of feasibility studies was also probably more significant in states with a large number of developing PA programs in competition with each other. While we had already moved quite far along in our formal feasibility study, we are pleased to redirect our energy to other aspects of program development, and to restructure a “feasibility study committee” into a “program advisory committee.”

Physical Plant

Plans have been finalized for the program to be located at the University of Nevada’s Redfield Campus. The available space there, and the co-location with nursing education activities, provides sufficient and flexible space. I have worked with the group on issues of configuration, adaptable classroom furniture, student-specific space, technology planning, and access to Nursing’s physical examination rooms which already exist at that facility. We have also discussed the range of experiences available in medical school facilities for lab and cadaver access, simulation experiences, and library facilities.

Didactic and Clinical Curriculum

The curriculum will be based on the MEDEX curriculum and will emphasize strong primary care values and skill sets. MEDEX had previously provided information and access to course outlines and schedules as part of the June 2014 visit. Jennifer Bennett, Julie Redding and I worked together to develop a scheduling calendar (based on the University of Nevada’s semester system) as a foundation for our planning and have now completed a process to distribute the coursework across the projected time frame. I am currently working with Jennifer Bennett on a more detailed version of the curriculum, which will show week-by-week scheduling of course content and experiences. I expect to have that completed by our August meeting.

Community Meeting

We were all very pleased with the “community meeting” held when I was there last, on May 19, 2015, to present plans for the program to practicing PAs and other interested stakeholders. The meeting was held on the Redfield campus, which also

provided an opportunity to review our plans for teaching space. The eight PAs who attended were extremely positive about the program and their support of its creation. They offered many helpful suggestions, and were impressed with the classroom plans. The PAs wanted to be sure that there was sufficient “non-classroom space” for studying, eating, and small group project work. They also promised to help with clinical site development. One of their concerns was the need for increased visibility and employment opportunities for physician assistants within the School of Medicine’s clinical enterprise.

In discussing the meeting the following day, the team’s reaction was that some of these PAs could be “recruitable” as program leaders and faculty members as well as adjunct lecturers and clinical preceptors. We all felt that they were an impressive group.

Budget:

Julie Redding and Jennifer Bennett have continued to work on a detailed budget for the program. I have provided information and advice on staffing patterns including projected FTE for a medical director, the number of PAs and staff members, and a timeline for hiring. I have also provided broader budget information on issues such as need for standardized patients, teaching technology, and classroom equipment. The Program Director of Elon University (North Carolina) offered to share her program’s developmental budget and the MEDEX fiscal office has provided specific information on supplies and other costs for one of their comparable training sites.

Program Director/Faculty Recruitment

After the community meeting, the group revisited plans for recruitment of PA faculty members. One concern expressed was the difficulty of finding a leader—and faculty members—who are familiar with the Nevada practice environment. There was also discussion of the excessive cost of a national recruitment with a potentially low yield. I offered to mentor local PAs into leadership and faculty positions and recommended that the recruitment be focused specifically on individuals currently practicing in Nevada. We all agreed that there were several participants in the community meeting who would be appropriate for roles within the PA program—with the understanding that appropriate and compliant searches would still need to be carried out for these positions.

Infrastructure/Other Faculty Support

Our May meetings also provided an opportunity for us to meet with Dean Schwenk, Dr. Daniel Spogen, Chair of Family Medicine, representatives of administrative offices (admissions, student services, library) and basic science faculty members. Dean Schwenk expressed his continued enthusiastic support for the program. We reviewed our discussions and a recommendation that the PA program be housed in the Department of Family Medicine. This idea was positively received by the Dean and by Dr. Spogen. We learned more about the structure of Family Medicine from Dr. Spogen.

The discussions with Admissions included a review of the CASPA process and consideration of the interface/overlap between recruitment and admissions processes. There appeared to be many opportunities for collaboration. The library discussion focused on materials that could be available on the Redfield campus, reviewing the need for additional “PA specific” tests and publications within the library’s collection, and student access to information technology.

A discussion with basic science faculty was a bit more problematic. There is still core education to be done with them about the integrated curriculum style of PA education and the fact that they may be called upon to provide teaching for individual lectures or specific modules; however, the PA program is not requesting access to complete basic sciences courses or course administration. At the end of our meeting, it was unclear that this was yet fully understood.

Applicant Pool Development

We have continued to review applicant development and feel that there is already a great interest in the program from potential students. Membership in CASPA will be a key feature of the admissions process. We will continue to discuss this as an ongoing topic.

Internal Approvals Timelines

Since the May meeting, the group has continued to work on scheduling appropriate internal meetings and reviews. I have provided input as needed and will continue to do so. Specific timelines are available from the group.

Next Steps

My schedule and work plan will continue to be developed as we move along. My future task list can include:

- Assistance with recruitment, selection, and mentoring for the Program Director and other faculty members.
- Continued involvement with the planning group including providing advice and content for the internal review process.
- Assistance and review of ARC-PA accreditation application documentation
- Assistance/coaching for ARC-PA site visit in the Fall of 2016.
- Support for design of the admissions process based on other programs’ experiences and processes. Participation in admissions process/interviews.
- Development of clinical sites including the consideration of a shared affiliation agreement with the School of Medicine.
- Other as yet un-specified assistance as the program moves forward.