CATALOG DESCRIPTION AND CURRICULUM OUTLINE

NEW GRADUATE DEGREE OUTLINE FORM

Use the chart below to indicate your new degree outline. Please list required College and Major Required Courses and if appropriate Concentration Courses. Graduate programs that wish to specialize beyond the Major must have at least two concentrations. Add additional rows as needed for programs with more than two concentrations. Expand coursework in movement science, clinical sciences, professional science, and health systems science, providing students with a comprehensive understanding of physical therapy practice. Students will also complete 32 weeks of full-time clinical education, bridging academic learning with practical application.rows as needed

PROPOSED New Degree	
Degree: Doctor of Physical Therapy Major: Physical Therapy Concentration 1: n/a Concentration 2: n/a	
The Doctor of Physical Therapy (DPT) program at Mississippi State University is designed to prepare students for entry-level practice as skilled, compassionate, and evidence-based healthcare providers. This hybrid program offers a flexible learning model, combining online coursework with in-person intensive lab sessions to meet the needs of diverse learners while delivering a rigorous and comprehensive curriculum. Graduates will be equipped to deliver high-quality patient care across a variety of clinical settings and address complex healthcare challenges through evidence-based decision-making and a strong foundation in movement science. The program requires the completion of a minimum of 106 credit hours. The curriculum encompasses foundational Students will develop competency in all domains of physical therapy practice through dynamic learning opportunities, including interactive online modules, hands-on practical lab sessions, and a strong emphasis on leadership and professional formation. The program also focuses on fostering advanced skills in movement analysis, health systems science, and clinical reasoning to ensure graduates are prepared to excel in the evolving field of physical therapy.	
Concentration: N/A	
Proposed Curriculum Outline	Required Hours
College Required Courses: N/A	N/A
Major Required Courses:	
Movement Science	
PT 5114. Movement Science I	4
PT 5124. Movement Science II	4
PT 5134. Movement Science III	4
PT 5144. Movement Science IV	4
Health Systems Science	
PT 5213. Health Equity and Access	3
PT 5223. Health Systems	3
PT 5232. Health Policy, Advocacy, and Leadership	2
Professional Science	
PT 5313. Professional Formation I	3
PT 5323. Evidence-Based Practice	3

PT 5332. Professional Formation II	2
PT 5343. Professional Formation III	3
PT 5353. Capstone I	3
PT 5362. Capstone II	2
Clinical Science	
PT 5414. Foundations of Patient Management	4
PT 5424. Management of Musculoskeletal Health Conditions I - Upper Quarter	4
PT 5434. Management of Musculoskeletal Health Conditions II - Lower Quarter	4
PT 5443. Management of Musculoskeletal Health Conditions III - Spine	3
PT 5454. Management of Cardiopulmonary Health Conditions	4
PT 5464. Management of Neuromuscular Health Conditions.	4
PT 5474. Management of the Pediatric Patient	4
PT 5484. Management of the Aging Adult	4
PT 5493. Management of Multi-System Conditions	3
Clinical Education	
PT 5518. Clinical Education I	8
PT 5512. Clinical Education II	12
PT 5613. Clinical Education III	12
Concentration 1. Courses: N/A	N/A
Total Hours	106

JUSTIFICATION

Alignment with University Mission:
Mississippi State University's mission is "to provide access and opportunity to students from all sectors of Mississippi's diverse population, as well as other states and countries, and to offer excellent programs of teaching, research, and service."[1] This public research, land-grant university is deeply committed to extending its resources and expertise to serve the citizens of Mississippi and beyond. The proposed Doctor of Physical Therapy (DPT) program at MSU Meridian aligns closely with this mission by addressing the critical shortage of healthcare professionals, particularly physical therapists, in the state. By providing accessible education through a hybrid delivery model, this program will expand opportunities for students from rural and underserved regions, helping meet the healthcare needs of Mississippi's population.

- **MSU's Vision**: Mississippi State's vision is to "redefine the role of a land-grant university" by "providing an innovative, hands-on learning experience, meeting all students where they are and equipping them for a world that needs their talent."[2] The DPT program at MSU Meridian embodies this vision through its hybrid delivery model, which meets students where they are—especially those in remote and underserved areas—by offering online coursework coupled with in-person lab instruction and clinical experiences. This approach not only equips students with the skills necessary to succeed in the healthcare profession but also directly addresses Mississippi's growing need for physical therapists.
- **Strategic Plan – *State of Excellence***: MSU's strategic plan (2023-2028) emphasizes several key pillars, including "serving the whole student," "igniting innovation," and "elevating our community."[3] The DPT program directly supports these pillars by offering a transformative educational experience that blends online learning with hands-on clinical practice, fostering student success in both urban and rural healthcare settings. By incorporating flexible learning options through the hybrid model, the program allows learners in Mississippi and surrounding states to pursue professional education without needing to relocate, thus supporting MSU's goal of providing "access for working and place-bound learners through its on- and off-campus education and research sites."

At MSU Meridian, the mission is "to provide access and opportunity to students from all sectors of the state's diverse population and to offer excellent programs of teaching, research, and service." The DPT program will be a key addition to MSU Meridian's growing health sciences offerings. The program is designed to address regional healthcare needs by preparing healthcare professionals who will contribute to the region's economic development and improve access to rehabilitation services. The hybrid format further supports MSU Meridian's mission to offer "convenient course offerings for working and place-bound adult learners," ensuring that students from a broad geographic area can access this important professional training.[4]

The **hybrid delivery model** is a critical component of the DPT program and aligns with MSU's commitment to innovation in education. By offering a flexible, accessible learning experience, the program will enable students from rural and underserved areas to pursue a career in physical therapy while remaining embedded in their communities. This innovative approach supports MSU's broader goals of fostering community engagement, advancing economic development, and addressing the critical challenges facing Mississippi and beyond.

The DPT program at MSU Meridian will directly contribute to Mississippi's healthcare workforce, improving access to physical therapy services in rural and underserved areas. By preparing students to meet the healthcare needs of their communities, the program will help MSU fulfill its mission of "instilling among its students and alumni ideals of diversity, citizenship, leadership, and service through life-long learning."

COHERERNCE AND RIGOR

Professional Program Preparation
The proposed DPT program is a professional graduate program explicitly designed to prepare students for licensure and entry-level practice as physical therapists. As a licensure-qualifying program, it adheres to the rigorous standards set forth by the Commission on Accreditation in Physical Therapy Education (CAPTE), ensuring that graduates are equipped to meet the demands of contemporary physical therapy practice.

Core Curriculum and Sequence
The curriculum is structured into thematic tracks—Movement System Science, Health Systems Science, Professional Science, Clinical Science, and Clinical Experiences—that build progressively on each other, ensuring a seamless integration of theoretical and practical learning:

A. **Movement System Science**
   - Explores biomechanics, motor control, and neuroscience as they relate to human movement.
   - Courses such as *PTH 5114: Movement Science I* and *PTH 5144: Movement Science IV* enable students to develop advanced skills in movement analysis, motor learning, and evidence-based interventions.

B. **Health Systems Science**
   - Focuses on understanding healthcare delivery, policy, advocacy, and informatics.
   - Courses like *PTH 5213: Health Equity and Access* and *PTH 5223: Health Systems* prepare students to navigate complex healthcare systems and address disparities, emphasizing quality improvement and telehealth.

C. **Professional Science**
   - Develops professional identity, ethics, leadership, and evidence-based practice.
   - Courses such as *PTH 5313: Professional Formation I* and *PTH 5323: Evidence-Based Practice* emphasize cultural humility, clinical decision-making, and preparation for career success.

D. **Clinical Science**
   - Comprehensive training in patient management across diverse populations and conditions.

- From *PTH 5414: Foundations of Patient Management* to condition-specific courses like *PTH 5474: Management of the Pediatric Patient* and *PTH 5484: Management of the Aging Adult,* students gain expertise in examination, diagnosis, and intervention strategies.

E. **Clinical Experiences**
   - Full-time placements in diverse healthcare settings bridge didactic coursework with real-world application.
   - Students complete progressively complex clinical rotations, including *PTH 5518: Clinical Education I* (8 weeks), *PTH 5512: Clinical Education II* (12 weeks), and the capstone *PTH 5612: Clinical Education III* (12 weeks), culminating in entry-level competence.

CAPTE Standards
The CAPTE standards mandate that DPT programs provide a curriculum that ensures competency across the full scope of practice for physical therapists. This includes comprehensive preparation in clinical reasoning, patient management, professional behavior, interprofessional collaboration, and evidence-based practice. MSU's proposed program incorporates these essential elements throughout its carefully sequenced coursework, hybrid delivery model, and clinical experiences.

Evidence of Rigor and Preparedness
The program ensures rigor and coherence through:

- **Competency-Based Assessments:** OSCEs, comprehensive exams, and capstone projects evaluate knowledge and skill integration.
- **Progressive Clinical Exposure:** Increasingly independent roles during clinical placements prepare students for seamless transition into practice.
- **Licensure Alignment:** Course content and assessment strategies align with the NPTE PT Test Content Outline, ensuring licensure readiness.
- **Student Support:** Emphasis on mentorship, faculty guidance, and access to state-of-the-art resources, such as simulation labs and telehealth technology.

By integrating these components, the MSU DPT program will produce graduates who are fully prepared for licensure and equipped to meet the healthcare needs of Mississippi an

STUDENT FEARNING OUTCOMES AND ASSESSMENT

Program-Level Student Learning Outcomes:
Specific program level student outcomes and their formative and summative assessment methodologies will be developed and provided to UCCC for approval as the new faculty develop and submit the finalized curriculum and individual syllabi for UCCC approval. These approvals are required not only by the university but also by CAPTE prior to admission of students to the program.

Assessment Methods: Examples of the types of assessment of outcomes that will be utilized are outcome-linked measurements achieved through:

- **Objective Structured Clinical Examinations (OSCEs):** Evaluate clinical reasoning and practical skills in simulated patient scenarios.
- **Clinical Performance Evaluations:** Conducted during full-time clinical experiences, aligned with APTA's Clinical Performance Instrument (CPI).
- **Comprehensive Exams:** Comprehensive assessments covering key knowledge domains to ensure readiness for licensure.
- **Capstone Project Evaluations:** Measure the ability to synthesize and apply knowledge to a professional-level project.
- **Graduate Surveys:** Assess graduate satisfaction with the program and career plans at graduation.

- **Alumni and Employer Surveys:** Assess long-term program effectiveness in meeting workforce needs.

These outcomes and assessment measures will be documented in the program's Institutional Effectiveness (IE) plan and reported annually to OIRE, ensuring ongoing evaluation and improvement.

SUPPORT LETTERS

No supporting letters are attached. None of the curriculum is dependent on course offerings outside of the program. The support letter required from the program faculty will be provided as the final curriculum is submitted to UCCC for its review.

PROPOSED FOUR LETTER ABBREVIATION

PT

CIP NUMBER

51.2308

COURSE LIST AND DESCRIPTIONS

Prerequisites for all courses include:

- Admission into the DPT program
- Good standing within the DPT program
- Successful completion of all prior courses within the DPT program, or permission from the Program Director

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Movement System Science

This track explores the principles of movement, focusing on biomechanics, motor control, and neuroscience. Students develop the ability to analyze and improve movement through evidence-based techniques.

- **PT 5114. Movement Science I**
  Pre-requisite: Admission to the MSU DPT program. Four hours lecture and lab.
  Introduces movement analysis, applied anatomy, kinesiology, and exercise prescription. Includes gait analysis and foundational skills for understanding human motion.

- **PT 5124. Movement Science II**
  Pre-requisite: Admission to the MSU DPT program. Four hours lecture and lab.
  Explores applied physiology, including normal and abnormal cardiovascular responses to exercise. Focuses on applying biomechanics to clinical scenarios.

- **PT 5134. Movement Science III**
  Pre-requisite: Admission to the MSU DPT program. Four hours lecture and lab.
  Covers applied neuroanatomy, neuroscience, and pain science. Students learn about the role of neurological systems in movement and functional performance.

- **PT 5144. Movement Science IV**
  Pre-requisite: Admission to the MSU DPT program. Four hours lecture and lab.
  Examines motor learning, motor control, and motor development. Focuses on integrating these concepts into clinical practice to optimize patient outcomes.

Health Systems Science

This track provides an understanding of health care delivery systems, including policy, advocacy, informatics, and health equity. Students learn to navigate and influence healthcare systems effectively.

- **PT 5213. Health Equity and Access**
  Pre-requisite: Admission to the MSU DPT program. Three hours lecture.
  Explores health disparities, community health, disability studies, and epigenetics. Encourages critical analysis of barriers to equitable healthcare access.

- **PT 5223. Health Systems**
  Pre-requisite: Admission to the MSU DPT program. Three hours lecture.
  Covers quality improvement, health informatics, and telehealth technologies. Focuses on the integration of these systems into clinical practice.

- **PT 5232. Health Policy, Advocacy, and Leadership**
  Pre-requisite: Admission to the MSU DPT program. Two hours lecture.
  Examines healthcare policy, legislative processes, and advocacy strategies. Students develop skills to influence policy and advocate for change.

Professional Science
This series of courses develops the professional skills and behaviors required of entry-level physical therapists. Students will explore ethics, values, leadership, and practice management while developing professional identities.

- **PT 5313. Professional Formation I**
  Pre-requisite: Admission to the MSU DPT program. Three hours lecture.
  Introduces professional identity, roles of physical therapists, and the APTA Core Values. Focuses on ethics, cultural humility, and effective communication in healthcare settings.

- **PT 5323. Evidence-Based Practice**
  Pre-requisite: Admission to the MSU DPT program. Three hours lecture.
  Develops critical inquiry skills for evidence-based practice. Includes research methods, applied statistics, and clinical decision-making.

- **PT 5332. Professional Formation II**
  Pre-requisite: Admission to the MSU DPT program. Two hours lecture.
  Covers interprofessional practice, team science, and personal leadership development. Focuses on collaboration and communication across healthcare disciplines.

- **PT 5343. Professional Formation III**
  Pre-requisite: Admission to the MSU DPT program. Three hours lecture.
  Explores practice management, including finance, supervision of personnel, leadership, and career readiness.

- **PT 5353. Capstone I**
  Pre-requisite: Admission to the MSU DPT program. Three hours lecture.
  Focuses on initiating mentored scholarly projects. Includes proposal development and application of evidence-based principles.

- **PT 5362. Capstone II**
  Pre-requisite: Admission to the MSU DPT program. Two hours lecture.

Supports the completion of mentored scholarly projects. Emphasizes writing, presentation, and dissemination of findings.

Clinical Science

This series of courses focuses on patient examination, evaluation, diagnosis, and intervention for a wide range of conditions. Students integrate classroom and laboratory learning to develop clinical competence.

- **PT 5414. Foundations of Patient Management**
  Pre-requisite: Admission to the MSU DPT program. Four hours lecture and lab.
  Provides foundational patient management skills, emphasizing the ICF framework. Covers wellness, prevention strategies, behavior science, and motivational interviewing.

- **PT 5424. Management of Musculoskeletal Health Conditions I - Upper Quarter**
  Pre-requisite: Admission to the MSU DPT program. Four hours lecture and lab.
  Focuses on the examination and intervention of upper-quarter musculoskeletal conditions. Includes pathology, pharmacology, surgical management, and rehabilitation strategies.

- **PT 5434. Management of Musculoskeletal Health Conditions II - Lower Quarter**
  Pre-requisite: Admission to the MSU DPT program. Four hours lecture and lab.
  Explores the examination and management of lower-quarter musculoskeletal conditions. Emphasizes functional rehabilitation and case-based clinical reasoning.

- **PT 5443. Management of Musculoskeletal Health Conditions III - Spine**
  Pre-requisite: Admission to the MSU DPT program. Three hours lecture and lab.
  Covers the examination and intervention of spinal conditions, including pathology, pharmacology, and surgical management. Emphasizes clinical decision-making for spine-related care.

- **PT 5454. Management of Cardiopulmonary Health Conditions**
  Pre-requisite: Admission to the MSU DPT program. Four hours lecture and lab.
  Addresses the examination and management of cardiopulmonary conditions, including acute care and ICU settings. Includes case studies for clinical application.

- **PT 5464. Management of Neuromuscular Health Conditions**
  Pre-requisite: Admission to the MSU DPT program. Four hours lecture and lab.
  Covers neurological conditions, including stroke, SCI, TBI, and vestibular rehabilitation. Focuses on clinical decision-making for neurorehabilitation.

- **PT 5474. Management of the Pediatric Patient**
  Pre-requisite: Admission to the MSU DPT program. Four hours lecture and lab.
  Examines the management of pediatric conditions, including developmental milestones

and intervention strategies. Prepares students for clinical practice in pediatric rehabilitation.

- **PT 5484. Management of the Aging Adult**
  Pre-requisite: Admission to the MSU DPT program. Four hours lecture and lab.
  Focuses on the care of aging adults, addressing geriatric syndromes, functional mobility, and fall prevention. Emphasizes patient-centered care for older adults.

- **PT 5493. Management of Multi-System Conditions**
  Pre-requisite: Admission to the MSU DPT program. Three hours lecture and lab.
  Explores the management of patients with complex medical needs, including wound care, lymphedema, and multiple comorbidities. Includes preparation for comprehensive clinical exams.

Clinical Experiences
This series of full-time clinical placements integrates academic learning with clinical practice. Students gain hands-on experience in diverse settings under the guidance of licensed physical therapists.

- **PT 5518. Clinical Education I - 8 Week CEE**
  Pre-requisite: Admission to the MSU DPT program. Eight-week placement.
  An integrated clinical placement designed to bridge didactic coursework and clinical practice. Emphasizes entry-level skills in real-world settings.

- **PT 5512. Clinical Education II - 12 Week CEE**
  Pre-requisite: Admission to the MSU DPT program. Twelve-week placement.
  A full-time clinical placement focused on entry-level practice. Includes exposure to diverse patient populations and care environments.

- **PT 5612. Clinical Education III - 12 Week CEE**
  Pre-requisite: Admission to the MSU DPT program. Twelve-week placement.
  The terminal clinical placement designed to prepare students for independent clinical practice. Focuses on integrating and applying all aspects of clinical education.

Kendra Gagnon, PhD, PT
Educational Consultant
310 Center Street
Lathrop, MO 64465
816.721.9459

December 20, 2024

University Committee on Courses and Curricula (UCCC)
Mississippi State University

Dear Members of the University Committee on Courses and Curricula,

On behalf of the Mississippi State University School of Health Professions and in collaboration with Interim Dean Harold Jones, I enthusiastically submit for your review the proposal to establish a Doctor of Physical Therapy (DPT) program at Mississippi State University's Meridian Campus. This proposal represents a groundbreaking initiative: the creation of a new professional program within the newly formed School of Health Professions. Given the scope of this proposal and the unique requirements of its accrediting body, the Commission on Accreditation in Physical Therapy Education (CAPTE), we aim to provide additional context regarding CAPTE's rigorous pre-accreditation process, the projected timeline for this endeavor, and the important role of the UCCC in the program planning and approval process.

CAPTE Process and Timeline

The development and approval of this program are guided by the standards and processes of CAPTE. CAPTE's pre-accreditation process is highly rigorous and ensures that all new programs are carefully planned and resourced to meet the demands of professional education and prepare graduates for professional licensure. Mississippi State University cannot formally enter CAPTE's pre-accreditation process without obtaining state approval, which makes UCCC's timely approval of this proposal a critical first step.

To help the UCCC better understand CAPTE's process and timeline, we provide the following key milestones for the Mississippi State University DPT program. It is important to note that CAPTE reviews a limited number of new DPT program each year, effectively creating a "queue" of developing programs awaiting review. Should the program successfully move through the institutional and state approval processes in early 2025, the MSU DPT program's current timeline for submission of the Application for Candidacy (AFC) is projected for fall 2030. The milestones below represent minimum requirements and deadlines enforced by CAPTE given the current projected timeline:

- **Notification of Program Director Employment:** By **March 2029**, a qualified program director will be hired to oversee program development.
- **Notification of Director of Clinical Education Employment:** By **December 2029**, this additional key faculty member will also be hired.
- **Reconfirmation of Intent to Submit Application for Candidacy (AFC): September 1, 2030**.
- **AFC Submission: November 1, 2030**, with all required documentation, including finalized course syllabi and evidence of employment of at least 3 core faculty (including the program director). All faculty who will teach within the first two years of the program must be hired or contracted (with a planned hire date) by this time.
- **On-Site Visit: January 16-31, 2031**.

- **CAPTE Decision: April 30, 2031**, enabling program launch in **Fall 2031**.

Given the extended timeline to program launch, it is neither practical nor feasible to hire the full faculty team or finalize all course syllabi at this stage. The hiring of the program director and initial faculty members will begin no later than the 2028-2029 academic year, approximately two years before AFC submission and three years before program launch. This approach allows for meaningful faculty input into the finalization of the curriculum and preparation of the AFC while adhering to CAPTE's standards for faculty qualifications and the hiring timeline.

UCCC's Role in Curriculum Review

Although full syllabi have not yet been developed, the proposed curriculum reflects CAPTE's detailed and rigorous standards for DPT education, ensuring that graduates will be prepared for licensure and entry-level practice. Faculty hired during the program development phase will refine and enhance the curriculum, but significant changes are not anticipated due to CAPTE's standardized criteria for DPT programs.

It is important to note that CAPTE requires university approval of all courses and syllabi as part of the candidacy process. As such, the UCCC will have the opportunity to conduct a thorough review and approval of the final curriculum and syllabi prior to their submission to CAPTE in 2030. This assures alignment with existing faculty governance processes while accommodating the unique requirements of CAPTE's pre-accreditation timeline.

Request for Approval

In summary, we respectfully request the UCCC's approval of this proposal to plan the DPT program, based on the proposed curriculum and accompanying justification. UCCC approval at this stage will enable Mississippi State University to seek state approval and enter CAPTE's pre-accreditation process, setting the program on a path toward candidacy submission in 2030 and a Fall 2031 launch.

Thank you for your thoughtful consideration of this proposal. We welcome the opportunity to provide additional information or clarification as needed and look forward to working with the committee to advance this exciting initiative.

Sincerely,

Kendra Gagnon, PhD, PT
Educational Consultant

Kendra Gagnon, PhD, PT
Educational Consultant

Dr. Kendra Gagnon is an accomplished physical therapist and educator with nearly two decades of experience in higher education. She holds a PhD in Rehabilitation Science and is a licensed physical therapist with extensive clinical and academic expertise. Dr. Gagnon's scholarly work focuses on innovative educational models in physical therapy and health professions, particularly in hybrid and online learning environments.

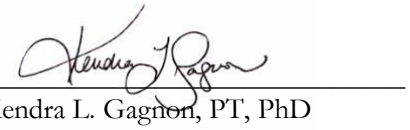
Throughout her career, Dr. Gagnon has been instrumental in the development and implementation of hybrid Doctor of Physical Therapy (DPT) programs, including serving in teaching and leadership roles at institutions that pioneered these models. She has a deep understanding of the Commission on Accreditation in Physical Therapy Education (CAPTE) standards and has successfully guided programs through the accreditation process. As a consultant, she has collaborated with institutions to develop hybrid pathways that successfully achieved CAPTE approval. Her contributions encompass curriculum design, accreditation preparation, faculty development, financial planning and budgeting, operations and logistics, and the integration of technology-enhanced learning strategies.

Dr. Gagnon is a graduate of the American Physical Therapy Association's (APTA) Fellowship in Higher Education Leadership, a prestigious program that prepares academic leaders to excel in advancing health professions education. She is also a co-author of the forthcoming American Council of Academic Physical Therapy (ACAPT) publication, *Blueprint for Excellence: Essentials for a Doctor of Physical Therapy (DPT) Program*. Her expertise is further reflected in her peer-reviewed publications in journals such as the *PTJ: Physical Therapy & Rehabilitation Journal, Journal of Physical Therapy Education,* and *The Journal of Allied Health.* In addition, Dr. Gagnon frequently delivers invited talks at national conferences and academic institutions, sharing her insights on hybrid education and the future of health professions training.

In addition to her scholarly contributions, Dr. Gagnon has served on academic committees, contributed to the development of best practices in health professions education, and mentored faculty and students in research and professional development. Her commitment to advancing access and equity in healthcare education aligns with Mississippi State University's mission to serve diverse populations and address critical workforce needs.

Dr. Gagnon's expertise in hybrid program development, her scholarly achievements, and her leadership in physical therapy education provide a strong foundation for the success of the proposed DPT program at Mississippi State University. Her evidence-based approach and deep understanding of academic rigor ensure the program will meet the highest standards of educational excellence and sustainability.

CURRICULUM VITAE
The Johns Hopkins University School of Medicine



Kendra L. Gagnon, PT, PhD

December 20, 2024

DEMOGRAPHIC AND PERSONAL INFORMATION

Current Appointments

University

2022-present Associate Professor of Clinical Physical Medicine and Rehabilitation and Director of Rehabilitation Science Education, Johns Hopkins University School of Medicine

Hospital None

Personal Data

600 N. Wolfe Street, Phipps 175, Baltimore, MD, 21287
Tel: 816.721.9459
E-mail: kendragagnon@jhmi.edu

Education and Training

Undergraduate/graduate

1996-2001 B.H.S., Pre-professional Physical Therapy & M.P.T., Physical Therapy (concurrent), University of Missouri, Columbia, MO

Doctoral

2005-2009 Ph.D., Rehabilitation Science, University of Kansas Medical Center, Kansas City, KS

Postdoctoral

2019-2020 Fellowship in Higher Education Leadership, American Physical Therapy Association, Alexandria, VA

2024 Academy for Women and Leadership (Executive Certificate), Johns Hopkins University, Baltimore, MD

Professional Experience

2006-2008 Teaching Assistant, Department of Physical Therapy and Rehabilitation Science, University of KS Medical Center, Kansas City, KS

2008-2009 Clinical Instructor, Department of Physical Therapy and Rehabilitation Science, University of KS Medical Center, Kansas City, KS

2009-2014 Clinical Assistant Professor & Associate Director of Clinical Education, Department of Physical Therapy and Rehabilitation Science, University of KS Medical Center, Kansas City, KS

2014-2017 Associate Professor, Department of Physical Therapy Education, Rockhurst University, Kansas City, MO

2016-2018 Adjunct Associate Professor, Doctor of Physical Therapy Program, South College, Knoxville, TN

2017-2020 Clinical Associate Professor & Director of Student Affairs, Doctor of Physical Therapy Program, Baylor University, Waco, TX

2020-2022 Clinical Professor & Chair, Department of Physical Therapy, Baylor University, Waco, TX

2022-present Clinical Lecturer (invited adjunct appointment), Department of Physical Therapy, Baylor University, Waco, TX

2022-present Clinical Associate Professor, Department of Physical Medicine and Rehabilitation, Johns Hopkins University School of Medicine

PUBLICATIONS

Original Research [OR]

1. **Gagnon K,** Cannon S, Weatherstone KB. The Premie-Neuro: opportunities and challenges for standardized neurological assessment of the preterm infant. *Advances in Neonatal Care*. 2012; 12(5), 310-317.
2. Calys M, **Gagnon, K,** Jernigan S. A validation study of the Missouri alliance for home care fall risk assessment tool. *Home Health Care Management & Practice*. 2013; 25(2), 39-44. *Analyzed data, co-wrote manuscript.*
3. **Gagnon K,** Cannon S, Weatherstone KB. Predictive validity of the Premie-Neuro at 3 months adjusted age and 2 years chronological age. *Advances in Neonatal Care*. 2016; 16(2), 151-157.
4. **Gagnon K,** Sabus C, Robertson E, Derrick M. Social media and mobile technology use among physical therapist students: a multi-site descriptive study. *Journal of Physical Therapy Education*. 2016; 30(2), 15-22.

5. Sabus C, Johns B, Schultz N, **Gagnon K**. Exploration of Content and Reach of Physical Therapy-Related Content on Twitter. *Physical Therapy & Rehabilitation Journal.* 2019; 99(8), 1048-1055. *Contributed to study design, analyzed data, co-wrote manuscript.*
6. Schreiber J, **Gagnon K**, Kendall, E, Fiss A, Rapport MJ, & Wynarczuk, KD. Development of a grading rubric to assess the impact of experiential learning in pediatric physical therapy education. *Pediatric Physical Therapy*. 2020; 32(1), 70-79. *Contributed to study design, collected and analyzed data, co-wrote manuscript.*
7. Fiss A, Rapport MJ, **Gagnon K**, Wynarczuk K, Kendall E, Schreiber J. Experiential Learning in Pediatric Physical Therapist Education: Faculty and Student Perceptions. *Pediatric Physical Therapy.* 2021; 33(3), 171-179. *Contributed to study design, collected and analyzed data, co-wrote manuscript.*
8. Shields R, **The Benchmarking Research Advances Value in Education (BRAVE) Group**, Dudley-Javoroski S. Benchmarking in Academic Physical Therapy: A Multicenter Trial using the PT-GQ™ Survey. *Physical Therapy & Rehabilitation Journal.* 2021; 101(12), 1-12. *Contributed to data collection, provided consultation (including review of manuscript before submitting).*
9. Wynarczuk K, **Gagnon K**, Schreiber J, Rapport MJ, Fiss A, Kendall E. Experiential learning in pediatric physical therapist education: Challenges and facilitators. *Pediatric Physical* Therapy. 2022; 34(1), 63-71. *Contributed to study design, analyzed data, co-wrote manuscript.*
10. Wynarczuk K, **Gagnon K**, Fiss A, Kendall E, Schreiber J, Rapport MJ. The how and the why of including children: Experiential learning in teaching physical therapy students. *Pediatric Physical Therapy.* 2022; 34(3), 400-409. *Contributed to study design, analyzed data, co-wrote manuscript.*
11. Reynolds B, Unverzagt C, Koszalinski A, Gatin R, Seale J, **Gagnon K**, Eaton K, Koppenhaver S. Predictors of Success on the National Physical Therapy Exam in the First Two U.S. Accelerated-Hybrid DPT Programs. *Journal of Physical Therapy Education.* 2022; 36(3), 225-231. *Co-wrote manuscript.*
12. Massey BJ, Grandeo J, Favaro L, Bliss R, **Gagnon K**, Young J. Physical therapy students' application of an imaging decision rule for acute knee pain. *Physiotherapy Theory & Practice.* 2023. DOI: 10.1080/09593985.2023.2206482 *Contributed to study design, co-wrote manuscript.*
13. Severin R, **Gagnon, K**. An early snapshot of attitudes toward generative AI in physical therapy education. *Journal of Physical Therapy Education.* Published online ahead of print (2024). *Contributed to study design and data analysis/interpretation; co-wrote manuscript, senior author.*
14. Feda J, Adams K, Wenger L, Young J, Catalino T, Sturdivant R, **Gagnon K**. Exploration of predictive relationships between learning and study strategies and student success in hybrid physical therapist education. *Journal of Allied Health.* In press (2024). *Contributed to study design, provided consultation and review of manuscript prior to submitting, senior author.*
15. **Gagnon K**, Garrigues A, Bachman T. Characteristics, trends, and implications of hybrid Doctor of Physical Therapy programs in the US. *Physical Therapy & Rehabilitation Journal.* In press. (2024).
16. **Gagnon K**, Stewart E, Waddell C, Garrigues A, Austin M. Competencies in context: Adopting the World Health Organization Rehabilitation Competency Framework for entry-level physical therapist practice. *Archives of Physical Medicine and Rehabilitation.* In revision. (2024).
17. Oligbo M, Swails L, **Gagnon K**, Mische Lawson L. Motor skills, adaptive behavior and participation of children with autism spectrum disorder. *Physical & Occupational Therapy in Pediatrics.* Under review (2024).
18. Obaidat S, Oligbo M, **Gagnon K**, Altaim T, Alenazi A, Alsenany S, Abdelaliem S, Neamatallah Z, Phadnis M, Gaowgzeh R, Liu W. Telerehabilitation with coaching may improve adherence to home exercise in adolescents with spastic cerebral palsy: a pilot feasibility study. In preparation (2024). *Contributed to study design, provided consultation and review of manuscript prior to submission.*

Review Articles [RA]

1. **Gagnon K.,** Sabus C. Professionalism in a Digital Age: Opportunities and Considerations for Using Social Media in Health Care. *Physical Therapy.* 2015; 95(3), 406-414.
2. **Gagnon K**, Young B, Bachman T, Longbottom T, Severin R, Walker M. Doctor of Physical Therapy education in a hybrid learning environment: reimagining the possibilities and navigating a "new normal". *Physical Therapy.* 2020; 100(8), 1268-1277.
3. **Gagnon K,** Blackinton M. Imagining an Abundant Future in Physical Therapy Education. *Physical Therapy.* Under review (2024).

Case Reports [CR]

1. **Gagnon K**. Using Twitter in health professional education: a case study. *Journal of Allied Health.* 2015; 44(1), 25-33.
2. **Gagnon K.**, Bachman T., Beuning B., Unverzagt C., Koppenhaver S., Feda J., Gantt C., Young B. Doctor of physical therapy education in a hybrid learning environment: a case report. *Physical Therapy & Rehabilitation Journal.* 2022; 102(8), pzac074.

3. Black K, Reynolds B, Feda J, Cutrone G, **Gagnon K**. Academic coaching in entry-level Doctor of Physical Therapy education. *Journal of Physical Therapy Education.* Published online ahead of print (2024). *Contributed to study design and data analysis/interpretation; co-wrote manuscript, senior author.*
4. Black K, Prokop T, Buss R, **Gagnon K.** Training faculty members to coach Doctor of Physical Therapy students. *Journal of Physical Therapy Education.* Under review. *Contributed to study design and data analysis/interpretation; co-wrote manuscript, senior author.*

Book Chapters, Monographs [BC]

1. **Gagnon K,** Hohenadel S, Sabet A, Tucker J, Galloway J. GoBabyGo! How modified toy ride-on cars support DEC recommended practices by providing accessible, early social mobility for children with or at risk for developmental disabilities. *Division for Early Childhood Recommended Practices Monograph Series No. 2: Environment.* 2016; 137-151.
2. Catalino T, **Gagnon K**, Weaver P, Cecere. *Physical Therapy Practice in Parts C and B of the Individuals with Disabilities Education Act*. The Clinical Practice of Pediatric Physical Therapy. (2024). Jones & Bartlett Learning.
3. **Gagnon K**, Borstad J, Drake S, Kearns R. *Course development, organization, & assessment.*. The Blueprint for Excellence in Physical Therapist Education. In press. (2024). American Council for Academic Physical Therapy.

Books, Textbooks [BK] – none

Guidelines/Protocols, Consensus Statement, Expert Opinion, Consortium Articles [GL]

1. Schulte D & **Gagnon K.** Commentary on "Power Mobility Training Methods for Children: A Systematic Review." *Pediatric Physical Therapy*. 2018; 30(1), 9. *Co-wrote commentary.*
2. Arkansas Division of Elementary and Secondary Education, Office of Special Education. *Guide to School-Based Physical Therapy in Arkansas*. 2023. *Provided consultation, including review of document before publication.*

Media Releases or Interviews [MR]

2015 Interviewed for Kansas City Star on GoBabyGo program launch at Rockhurst University: https://www.kansascity.com/news/local/article12856781.html

2015 Featured in American Physical Therapy Association video, GoBabyGo Build Helps Child to Move: https://youtu.be/JjtnwNyoxns

2015 Interviewed for St. Joseph News-Press, College students help preschooler go mobile: https://www.newspressnow.com/news/local_news/article_dcc475ec-8355-59ba-a0c3-66f66d16c9b2.html?mode=story

2016 Interviewed for Kansas City Star on GoBabyGo harness at LegoLand KC: https://www.kansascity.com/latest-news/article76285612.html

2016 Interviewed for KSHB 41 Kansas City, Rockhurst University's GoBabyGo! Program transforms toys for children with disabilities: https://www.kshb.com/news/local-news/rockhurst-universitys-go-baby-goprogram-transforms-toys-for-children-with-disabilities

2017 Interviewed for Association of Jesuit Colleges and Universities, Rockhurst Community Fuels Childhood Mobility: https://www.ajcunet.edu/january-2017-connections/2017/1/18/rockhurst-thematic

2017 Featured in the Kansas City Star, "The 913," Barstow robotics team transforms toy care into real transportation: https://www.kansascity.com/news/local/community/joco-913/overland-park-leawood/article124473429.html

2019 Interviewed for FOX 4 Kansas City for GoBabyGo build at Barstow High School: https://fox4kc.com/news/barstow-robotics-team-students-build-customized-cars-for-children-with-special-needs/

2019 Featured in BaylorProud, Baylor prof's research could help open a world of mobility for kids with disabilities. https://www2.baylor.edu/baylorproud/2019/12/baylor-profs-research-could-help-open-a-world-of-mobility-for-kids-with-disabilities/

2021 Interviewed for KSHB 41 Kansas City for GoBabyGo Harness Café: https://www.kshb.com/news/local-news/liberty-middle-school-cafe-a-game-changer-for-students-with-disabilities

2021 Interviewed for Baylor, Scott, & White press release on orthopaedic physical therapy residency: https://news.bswhealth.com/en-US/releases/orthopaedic-physical-therapy-residency-now-offered-at-baylor-scott-white-medical-center-hillcrest

Other Media [OM] (Videos, Websites, Blogs, Social Media, etc.)

2015 Interviewed for CafeMom blog – If your Toddler Sits This Way, You Might Need to Take a Closer Look: https://cafemom.com/parenting/181020-w_sitting_effects_autism_problems

2016 Interviewed for the PT Pintcast – Peds PT, GoBabyGo, & Millennials: https://www.ptpintcast.com/2016/12/12/ep-139/

2018 Evidence in Motion blog – Hybrid Education is not Special: https://evidenceinmotion.com/hybrid-education-is-not-special/

2018 Interviewed for Healthcare Education Transformation Podcast – Teaching Hybrid Learning and Innovative Methods of Faculty Development: https://podcasts.apple.com/us/podcast/kendra-gagnon-mark-shepherd-teaching-hybrid-learning/id1244609366?i=1000421191797

2019 Featured in Variety Kansas City Video on the Variety KC/Enliten harness system: https://www.youtube.com/watch?v=E_GiOBA_4Z8&t=2s

2020 Interviewed for Evidence in Motion Clinical Podcast. – How to Transition to Online Education: https://evidenceinmotion.com/clinical-podcast-how-to-transition-to-online-education-kendra-gagnon/

2020 Interviewed for *Pediatric Physical Therapy* podcast, Volume 32, Issue 1, on grading rubric paper: https://podcasts.apple.com/us/podcast/volume-32-issue-1/id274945199?i=1000460378096

2020 Interviewed for Healthcare Education Transformation Podcast – State of Emergency: COVID-19 & Online Education: https://podcasts.apple.com/us/podcast/state-of-emergency-re-covid-19-online-education/id1244609366?i=1000469105242

2022 Interviewed for Baylor Connections, Waco Public Radio KWBU: https://www.kwbu.org/show/baylor-connections/2022-03-04/baylor-connections-kendra-gagnon

2023 Interviewed for the PT Pintcast – The Future of Physical Therapy Education. https://www.ptpintcast.com/2023/06/12/innovations-in-physical-therapy-education/

FUNDING

EXTRAMURAL Funding

Educational Extramural Funding

Previous

2015-2016 GoBabyGo! KC: Development of an interprofessional service project to bring mobility and sociability to children with special needs.
Missouri Campus Compact
$1000
Role: Project lead

Research Extramural Funding

Previous

2019-2020 Gaining insight and understanding of experiential learning in pediatric PT education.
Academy of Pediatric Physical Therapy, American Physical Therapy Association. Research Grant.
Funded. $9765.
Primary investigators: Alyssa Fiss & Mary Jane Rapport
Role: Co-I

Other Extramural Funding, including philanthropy

Previous

2019-2020 Jays on the Go Café. Liberty Educational Foundation Excellence in Education Grant with matching funds from Variety Children's Charity of Greater Kansas City.
$25,000.
Project manager: Sara McGuff
Role: Consultant

INTRAMURAL Funding

Research Intramural Funding

Previous

2016-2017 What is the impact of using a novel body weight support system in an early childhood education center for a child with impaired mobility and cortical visual impairment?
Rockhurst University Presidential Grant
$5000
Role: PI

Educational Intramural Funding

Previous

2019 Funded to attend Liberating Structures (active learning) training in Atlanta, GA
University Teaching Development Grant
Baylor University
$1500

Submitted

2024 Scaling up access to specialized rehabilitation education through micro credentialing and digital innovation: a SMART approach
JHU Digital Education and Learning Technology Acceleration (DELTA) grant
Amount requested: $75,000
Role: PI

CLINICAL ACTIVITIES

Clinical Focus

I practiced as a pediatric physical therapist from 2001 to 2020, serving in school-based and early intervention settings across North Carolina, Kansas, and Missouri. My clinical focus centered on fostering inclusion and social mobility for children and families in their homes, schools, and communities. Through this work, I developed national-level clinical collaborations with GoBabyGo, a groundbreaking project started at the University of Delaware that has been adopted globally. As part of the GoBabyGo national leadership team, I led and co-facilitated workshops for clinicians, families, and community members at local, regional, and national levels. Today, I continue to consult with organizations and healthcare teams throughout the region, supporting local initiatives to enhance mobility and inclusion for children with disabilities and their families.

Certification

Medical, other state/government licensure

2001-2004 North Carolina Physical Therapy License
2001-present Missouri Physical Therapy License
2008-2014 Kansas Physical Therapy License

Boards, other specialty certification

None

Clinical (Service) Responsibilities

2001-2002 Early intervention physical therapist, Amelia Pediatric Therapy, Durham, NC
2002-2004 School-based physical therapist, Granville County Schools, Oxford, NC
2004-2006 Early intervention physical therapist, Northland Early Education Center, Kansas City, MO
2008-2020 School-based physical therapist (independent contractor), Lathrop School District, Lathrop, MO

Clinical Productivity

None

Clinical Draw from outside local/regional area

None

Membership in or examiner for specialty board

None

Clinical Program Building / Leadership

2017-2023 Director, Variety KC GoBabyGo. Developed national-level clinical service collaborations with University of Delaware and Variety Children's Charity to launch and oversee a GoBabyGo program in the Kansas City Region. During my directorship, Variety KC GoBabyGo engaged thousands of local and regional rehabilitation providers, families, and volunteers to adapt toy ride-on cars to provide power mobility for over 200 children with disabilities. We secured funding and provided training for implementation of real-world harness systems in two large school districts.

Clinical Demonstration Activities to external audience, on or off campus

None

Development of nationally/internationally recognized clinical standard of care
None

EDUCATIONAL ACTIVITIES

Educational Focus

I have been a physical therapy educator since 2006, educating over 1,000 clinicians across the U.S. My work as a clinical educator spans both classroom and clinical settings. In addition to teaching entry-level DPT coursework, I have supervised students in the clinic and managed clinical placements as an Associate Director of Clinical Education. My areas of expertise include pediatric practice, professional development, and clinical technologies.

Throughout my academic career, I have consistently pushed the boundaries of educational innovation, integrating cutting-edge technology and instructional strategies into my teaching. My scholarship in experiential learning, instructional technology, and hybrid education has been widely recognized, positioning me as a thought leader in these areas. This work led me to serve as faculty and Chair for one of the first fully hybrid DPT programs in the U.S., and now at Johns Hopkins University School of Medicine, where I lead the development of hybrid and online rehabilitation science education programs.

Beyond university leadership, I actively contribute to national conversations on best practices in physical therapist education through my scholarship and involvement with the American Council for Academic Physical Therapy. I have also completed the prestigious APTA Fellowship in Higher Education Leadership. My expertise, particularly in hybrid teaching and learning, has resulted in numerous invited presentations at national and international levels.

Teaching

Classroom instruction

JHMI/Regional

2006-2014	Pediatric Physical Therapy, Lead instructor, DPT program, University of Kansas Medical Center
2008-2014	Professional Interactions, Lead instructor, DPT program, University of Kansas Medical Center
2008-2014	Control of Human Movement, Co-instructor, DPT program, University of Kansas Medical Center
2009-2014	Clinical Education, Associate Director of Clinical Education, DPT program, University of Kansas Medical Center
2014-2017	Clinical Technologies, Lead instructor, DPT program, Rockhurst University
2014-2017	Management of Pediatric Conditions, DPT program, Rockhurst University
2014-2016	Reflective Practice, Lead instructor, DPT program, Rockhurst University
2015-2017	Research III, Lead instructor, DPT program, Rockhurst University
2015-2016	Pediatric Physical Therapy Elective, Lead instructor, DPT program, Rockhurst University
2018	Mindful Patient Management, Assisting instructor, DPT program, Baylor University
2018-2022	Professional Competencies I, Lead instructor, DPT program, Baylor University
2019-2020	Management of the Pediatric Patient, Primary instructor, DPT program, Baylor University
2019-2022	Professional Competencies II, Lead instructor, DPT program, Baylor University

National

2016-2018	Management of the Pediatric Patient, invited adjunct instructor, DPT program, South College
2018	Physical Therapy Practice Across the Lifespan, invited course developer PTA program, Rasmussen University
2018-2020	Hybrid Learning I-III, Post-professional Hybrid Learning Certification, Evidence in Motion
2022	Professional Competencies II, invited adjunct instructor, DPT program, Baylor University
2021-present	Management of the Pediatric Patient, invited adjunct instructor, Baylor University
2023-present	Management of the Pediatric Patient, invited adjunct instructor, Hawai'i Pacific University

International

None

Clinical instruction –

JHMI/Regional

2004	Clinical instructor for a 3rd-year DPT student, Elon University, 8-week experience

National
None

International
None

CME Instruction
See Workshops/seminars and Invited Talks

Workshops/seminars
JHMI/Regional
2009 A collaborative approach between the classroom and practice for teaching entry-level skills in transdisciplinary teaming, Kansas Department of Exceptional Children's Conference.

2012 Going social in higher education: strategies for using social media to meet the needs of millennial students. Concurrent session. University of Kansas Center for Teaching Excellence. KU Teaching Summit.

2015 GoBabyGo! KC: Development of an interprofessional service learning program at Rockhurst University. Concurrent session. Campus Compact Heartland Conference.

2016 Ready…Set…GoBabyGo! A two-part, hands-on workshop to modify toy ride-on cars for children with mobility challenges. Concurrent session. Missouri Physical Therapy Association Spring Conference.

2017 Harnessing participation – using enriched environments to promote early social mobility for children with disabilities. Concurrent session. Kansas Physical Therapy Association Fall Conference.

2019 GoBabyGo! Using STEM Skills to Change Lives. Concurrent session. International Technology and Engineering Education Association Conference.

National
2012 Engaging students in 140 characters or less: using social media in the physical therapy classroom. Concurrent session. American Physical Therapy Association Education Section. APTA Combined Sections Meeting.

2012 Clinical Reasoning in Pediatrics: Tools for Entry-Level and Residency Education. Concurrent session. APTA Combined Sections Meeting.

2012 Going social in higher education: strategies for using social media to meet the needs of millennial students. Concurrent session. APTA Section on Pediatrics Annual Conference.

2013 Tweet, like, connect: using social media to establish technology competency, promote digital professionalism, and encourage professional networking in physical therapy students. Concurrent session. Educational Leadership Conference.

2014 Teaching and learning in a digital age: using technology to enhance physical therapy education. 1-day preconference. APTA Combined Sections Meeting.

2014 Beyond socializing: the role of social media in establishing technology competencies for physical therapists. Concurrent session. APTA Combined Sections Meeting.

2014 Learning by serving: strategies for integrating community service into the pediatric PT curriculum. Concurrent session. APTA Combined Sections Meeting.

2015 A Systems-Based Approach to Evidence-Based Practice: Reconceptualizing & Reinvigorating an Overworked Topic. Concurrent session. APTA Combined Sections Meeting.

2017 Moving Forward from IV STEP: Application of Key Themes. 2-day preconference. APTA Combined Sections Meeting.

2018 A Harnessed Life: body weight support systems in the real world. 2-part concurrent session. APTA Combined Sections Meeting.

2018 Building a scaffolding for student success in a hybrid learning environment. Concurrent session. Educational Leadership Conference.

2018 Blended Pediatric PT Education: designing innovative online and immersive face-to-face teaching and learning experience. Concurrent session. Academy of Pediatric Physical Therapy Annual Conference.

2019 Creating Engaging, Inclusive, and Active Learning Experiences – a No-PowerPoint Presentation. Concurrent session. Academy of Pediatric Physical Therapy Annual Conference.

2020 Entry-level Wound Management Education in a Hybrid Format – Considering the Possibilities. Concurrent session. APTA Combined Sections Meeting.

2020 Student Success in an Online World: Resiliency during a Pandemic. Concurrent session (virtual). Educational Leadership Conference.

2021 Experiential Learning in Pediatric Physical Therapy Professional Education- Is the Juice Worth the Squeeze? Concurrent Session (virtual). APTA Combined Sections Meeting.

2021	After the Build: The Bigger Picture of GoBabyGo, Mobility Technology Integration, and Establishing Best Practices. Concurrent session (virtual). APTA Combined Sections Meeting.
2021	Education Leadership Talks, Part 1: Emerging Leaders Tackle Hot Topics in Physical Therapy Education. Concurrent session. Educational Leadership Conference.
2022	Creating engaging, inclusive, and active learning experiences: a day without PowerPoint. 1-day pre-conference. APTA Combined Sections Meeting.
2022	Remote work in academic physical therapy: supporting next generation faculty. Concurrent session. Educational Leadership Conference.
2022	Mid-career Faculty: Reframing Leadership to Blaze your Path Forward. Concurrent session. APTA Pediatrics Annual Conference.
2023	Benchmarking the Hybrid Student Experience: Results of a Multi-Institutional Survey. Concurrent session. Educational Leadership Conference.
2024	The Future of Work in Academic Physical Therapy: Strategies for Successful Hybrid Faculty Teams. Concurrent session. APTA Combined Sections Meeting.

International

2023	Hybrid Occupational Therapy Education: Leveraging Digital Innovations and Building a Community of Inquiry. European Network of Occupational Therapy in Higher Education.

Mentoring

Pre-doctoral Advisees /Mentees

None

Doctoral Advisees /Mentees

2018-2021	Sakher Obaidat. Ph.D. student, University of Kansas Medical Center, Kansas City, KS. Dissertation: Feasibility and potential benefits of the tele-rehabilitation HEP, with coaching and without coaching, for adolescents and adults with CP.
2019-2021	Laura Favaro, Jason Grandeo, Benjamin Massey. D.Sc. students, Bellin College, Green Bay, WI. Dissertation: Are students competent to refer patients for imaging directly upon completion of an imaging curriculum in an entry level physical therapy program? Publication: Physical therapy students' application of an imaging decision rule for acute knee pain, *Physiotherapy Theory & Practice,* 2023.
2020	Brendan Stroz. D.Sc. student, US Army Medical Center of Excellence Graduate School, Fort Sam Houston, TX. Dissertation: Opioid Use After Total Knee Arthroplasty Following Optional Preoperative Education
2021-2023	Kayla Black. Ed.D. student, Mary Lou Fulton Teachers College, Arizona State University, Tempe, AZ. Dissertation topic: Academic coaching in DPT education. Publication: Academic coaching in entry-level Doctor of Physical Therapy education, *Journal of Physical Therapy Education,* under review.
2021-2024	Kyle Adams, Jessica Feda, Laura Wanger. D.Sc. students, Bellin College, Green Bay, WI. Dissertation topic: Learning and study strategies among students in a hybrid DPT program.
2022-2024	Teresa Bachman. D.HSc. student, University of Indianapolis, Indianapolis, IN. Dissertation topic: Analysis of the student experience among Doctor of Physical Therapy Students in a hybrid program.
2022-present	Mildred Oligbo. Ph.D. student, University of Kansas Medical Center, Kansas City, KS. Dissertation topic: Motor interventions for children with autism spectrum disorder.

Thesis Committees

None

Educational Program Building / Leadership

2008-2011	Comprehensive Examination Coordinator, University of Kansas Medical Center Department of Physical Therapy and Rehabilitation Science
2011-2014	Admissions Committee, University of Kansas Medical Center Department of Physical Therapy and Rehabilitation Science
2012-2014	Faculty Advisor, DPT Student Technology Advisory Committee, University of Kansas Medical Center Department of Physical Therapy and Rehabilitation Science
2013-2014	TeamSTEPPS planning work group, University of Kansas Medical Center - Center for Interprofessional Education and Simulation
2014-2017	Program Evaluation Committee, Department of Physical Therapy Education, Rockhurst University

2016-2017	Instructional Technology Committee, Rockhurst University
2017-2019	Admissions Committee, Baylor University Doctor of Physical Therapy Program
2017-2020	Chair, Academic Standing and Progression Committee, Baylor University Doctor of Physical Therapy Program
2020-2022	Robbins College Leadership Council, Robbins College of Health and Human Sciences, Baylor University
2022-present	Education Leadership Team, Department of Physical Medicine & Rehabilitation, Johns Hopkins University School of Medicine
2022-present	Strategic Planning Committee, co-sponsor of "Education" pillar, Department of Physical Medicine & Rehabilitation, Johns Hopkins University School of Medicine
2024-present	Graduate Training in Rehabilitation Science Steering Committee, Department of Physical Medicine & Rehabilitation, Johns Hopkins University School of Medicine
2024-present	Graduate Clinical Education Committee, Johns Hopkind University School of Medicine

Educational Demonstration Activities to external audiences

2018	Hybrid DPT program lab experience, observed by Evidence in Motion Occupational Therapy Program faculty; Baylor University, Dallas, TX.
2019	Hybrid DPT program onsite lab experience and accreditation visit preparation; observed by Evidence in Motion Physician's Assistant Program faculty; Baylor University, Dallas, TX.
2019-2020	Hybrid DPT program orientation and lab experiences; observed by Tufts University DPT program faculty (multiple observations); Baylor University, Waco, TX.
2019	Hybrid DPT program teaching strategies (asynchronous and synchronous instruction); demonstrated at the Evidence in Motion Hybrid Learning Summit and observed by Evidence in Motion staff, University Partners, and invitees; San Antonio, TX.
2020	Hybrid DPT program teaching strategies (asynchronous and synchronous instruction); demonstrated at the Evidence in Motion Hybrid Learning Summit and observed by Evidence in Motion staff, University Partners, and invitees; Virtual.
2019-2021	Hybrid DPT program onsite lab experiences, observed by Hawaii Pacific University DPT program faculty (multiple observations); Baylor University, Waco, TX.

RESEARCH ACTIVITIES

Research Focus

My research focuses on pediatric physical therapy practice, pediatric physical therapy education, and innovation in physical therapist education. I have published extensively in peer-reviewed journals such as Physical Therapy & Rehabilitation Journal, Journal of Physical Therapy Education, Pediatric Physical Therapy, Advances in Neonatal Care, Journal of Allied Health, and Physical and Occupational Therapy in Pediatrics. Notably, I led a research team that produced two of the first peer-reviewed manuscripts on hybrid education—both a perspective and a case report—featured in Physical Therapy & Rehabilitation Journal. Additionally, I serve as a member of the Benchmarking Research Advances Value in Education (BRAVE) Group, contributing to the collection and publication of benchmarking data for physical therapist education. I also review for several journals, including Physical Therapy & Rehabilitation and Journal of Physical Therapy Education.

Research Program Building / Leadership – none
Research Demonstration Activities – none
Inventions, Patents, Copyrights – none
Technology Transfer Activities – none

SYSTEM INNOVATION AND QUALITY IMPROVEMENT ACTIVITIES

None

ORGANIZATIONAL ACTIVITIES

Institutional Administrative Appointments

2012-2014	Chair, Faculty Technology Committee, University of Kansas Medical Center Department of Physical Therapy and Rehabilitation Science

2014-2017	Faculty, Alumni, & Community Engagement Committee, Rockhurst University Department of Physical Therapy Education
2015-2017	Faculty Survey Committee, Rockhurst University
2015-2017	Faculty Director, GoBabyGo! KC, Rockhurst University
2016-2017	Instructional Technology Committee, Rockhurst University
2019	Search Committee: Clinical Assistant Professor in the DPT Program, Baylor University
2020	Search Committee: Clinical Assistant Professor in the DPT Program, Baylor University
2020-2022	Robbins College Leadership Council, Robbins College of Health and Human Sciences, Baylor University
2021	Baylor University COACHE Working Group: Decision Making Across All Levels
2021-2022	Robbins College Marketing Committee, Robbins College of Health and Human Sciences, Baylor University
2023-2024	Research HELP Committee, Department of Physical Medicine & Rehabilitation, Johns Hopkins University School of Medicine
2023-present	Promotions Committee, Department of Physical Medicine & Rehabilitation, Johns Hopkins University School of Medicine

Editorial Activities

Editorial Board appointments

2018-present Associate Editor - Digital Media Editor, Pediatric Physical Therapy

Journal peer review activities

2017-2018 Pediatric Physical Therapy
2018 Research in Developmental Disabilities
2018 Disability and Health Journal
2020 Future Review: International Journal of Transition, College, and Career Success
2020-present Physical Therapy & Rehabilitation
2021-present Journal of Physical Therapy Education

Other peer review activities - none

Advisory Committees, Review Groups/Study Sections

2005-2010 Kansas City Pediatric Alliance
- 2007-2009 Secretary

2024 Commission on Accreditation in Physical Therapy Education, DPT Faculty Quality Task Force

Professional Societies

2006-2014 Member, Kansas Physical Therapy Association
- 2006-2012 Chair, Pediatric Special Interest Group
- 2008-2012 Chair, Standards and Practice Committee

2006-present Member, Academy of Pediatric Physical Therapy
- 2006-2001 Kansas State Representative
- 2007-present Early Intervention Special Interest Group
  - 2008-2010 Region II Representative
  - 2010-2012 Secretary
- 2012-2018 Communications Committee
  - 2012-2014 Co-chair, Social Media Subcommittee
  - 2014-2018 Chair

2006-present Member, American Physical Therapy Association
- 2011-2013 Delegate, Kansas Chapter

2008-2009 Member, American Association for the Advancement of Science
2013-present Member, HPA the Catalyst – Health Policy and Administration Section of the APTA
2017-present Member, Academy of Physical Therapy Education
2018-2020 Advocate member, International Technology and Engineering Educators Association
2019-present Individual member and institutional representative, American Council of Academic Physical Therapy
- 2018-2019 Member, Communications Committee
- 2021-present Member, Finance Committee

2022-present Member, Blueprint for Excellence Task Force
2024-present Faculty quality task force, Commission on Accreditation in Physical Therapy Education (CAPTE)

Conference Organizer - none

Session Chair - none

Consultantships
2019-2020 B.E. Smith Family Center, consultant for integration of building-wide integrated harness system to support social mobility for children with mobility impairments.
2019-2020 Liberty School District, consultant for development of the "Jays on the Go" program, including construction of a harnessed coffee shop to provide job and life skills opportunities for middle school students with mobility impairments.
2017-2023 Variety Children's Charity of Greater Kansas City, consultant for multiple community-based inclusion and disability-focused social justice initiatives, including GoBabyGo!, inclusive playground design, and development of a new inclusive family area in the Kansas City Airport.
2023 Third Bridge, consultant on the DPT and OTD university programs space
2024 University of Kansas Medical Center, consultant for development of hybrid pathway for Doctor of Physical Therapy program.
2024-present Mississippi State University, consultant for development of hybrid Doctor of Physical Therapy program

RECOGNITION
Awards, Honors
2007 Emerging Leader Award, American Physical Therapy Association
2009 Research Platform Scientific Inquiry Award (session winner), Kansas Physical Therapy Association
2009 Session winner, University of Kansas Medical Center Student Research Forum
2011 Exemplar Online Course (PTRS 833, Pediatric Physical Therapy), University of Kansas Medical Center Teaching and Learning Technologies
2012 Exemplar Online Course (PTRS 851, Control of Human Movement), University of Kansas Medical Center Teaching and Learning Technologies
2016 Missouri Physical Therapy Association Outstanding Service Award
2019 Recipient of the Baylor University Teaching Development Grant
2022 Jessie Ball Lectureship Award, University of Kansas Medical Center Department of Physical Therapy, Rehabilitation Science, and Athletic Training

Invited Talks
Regional
2006 Prematurity: complications and outcomes. Invited presentation. Kansas City Pediatric Alliance.
2006 Promoting evidence-based practice. Invited 1-day workshop. Shawnee Mission School District.
2009 Enabling participation for children with special needs: a new framework for clinical decision-making. Invited presentation. Kansas City Pediatric Alliance.
2010 Physical therapy in the first year of life. Invited presentation. University of Kansas Health System Physical Therapy Department.
2011 Evidence-based examination, evaluation, and follow-up of the high-risk infant. Invited 1-day workshop. Kansas Physical Therapy Association Spring Conference.
2011 Professional development in 140 characters or less: using social media to network, learn, and collaborate in the classroom and the clinic. Kansas Physical Therapy Association Student Special Interest Group Midwest Student Conclave.
2011 Using social media to increase student engagement. Invited presentation. University of Kansas Medical Center Student Affairs.
2012 Using social media to increase student engagement. Invited presentation. University of Kansas Medical Center School of Health Professions Alumni Board.
2012 Facebook and Twitter and LinkedIn – Oh my! Using social media to market yourself, your practice, and your profession. Invited presentation. Kansas City Area Rehabilitation Managers.
2012 Clinical decision-making for children with chronic conditions and lifelong disabilities. Invited 1-day continuing education workshop. Capper Easter Seals.

2013	Clinical decision-making for children with chronic conditions and lifelong disabilities. Invited 1-day continuing education workshop. Lee's Summit School District.
2013	Working smarter with the iPad: mobile apps for the pediatric therapist. Invited presentation. Kansas City Pediatric Alliance.
2013	Working smarter with the iPad: mobile apps for the pediatric therapist. Invited presentation. Children's Therapeutic Learning Center.
2014	Clinical decision-making for children with chronic conditions and lifelong disabilities. Invited 1-day continuing education workshop. Kansas Physical Therapy Association Fall Conference.
2015	GoBabyGo! A hands-on workshop to modify and adapt toy ride-on cars. Invited 1-day workshop. Special Learning Center.
2015	GoBabyGo! How RockU PT is bringing mobility and sociability to KC. Invited presentation. Ellen Spake Lecture and Alumni Weekend - Rockhurst University Department of Physical Therapy Education.
2016	GoBabyGo! A hands-on workshop to modify and adapt toy ride-on cars. Invited 1-day workshop. University of Missouri Women's and Children's Hospital.
2016-2019	Bringing mobility and sociability to KC: a hands-on workshop to modify and adapt toy ride-on cars. Annual Community Workshop (presented 4 times, once per year). Variety Children's Charity of Kansas City.
2018	A Harnessed Life. Invited presentation. Lee Anne Britain Child Development Center.
2018	Harness school: using the Variety KC Compass to educate, innovate, & transform. Invited presentation. Lee Anne Britain Child Development Center.
2019	Harness café: using the OASUS to educate, innovate, and transform the 'Cooking to Learn' curriculum. Liberty Public Schools.
2021	Harnessing participation: educate, innovate, and transform. Invited 1-day training. North Kansas City School District.

National

2012	Using Web 2.0 technologies in the physical therapy classroom. American Physical Therapy Association, Technopalooza. APTA Combined Sections Meeting. Chicago, IL.
2015	TechnoPalooza: Integration of Technology into Specialty Practice, Part 2. Concurrent session. APTA Combined Sections Meeting. Chicago, IL.
2019	Hybrid Learning Summit, Lead Speaker, Evidence in Motion. San Antonio, TX.
2020	Talk to the experts: best practice for overcoming challenges in online and blended learning environments. Webinar (virtual). American Council of Academic Physical Therapy. Alexandria, VA.
2020	Lessons from the Trenches: The Nuts & Bolts of Implementing a Lab Immersion. Webinar (virtual). American Council of Academic Physical Therapy. Alexandria, VA.
2021	Hybrid physical therapist education: innovating for the future and rethinking student support. Keynote presentation (virtual). Georgia State University Department of Physical Therapy Annual Retreat. Atlanta, GA.
2023	Educational scholarship in hybrid PT education: early learnings & new challenges. Webinar (virtual). University of Southern California Doctor of Physical Therapy Program Education Scholarship and Research Lab. Los Angeles, CA
2024	The future of health professions education: abundance, innovation, and hybrid learning. Physical Therapy Month keynote speaker (virtual). Western University of Health Sciences. Pomona, CA.

International

2021	Hybrid health care education: rethinking student support and innovating for the future. International Association of Medical Science Educators (IAMSE) Fall 2021 Seminar Series (virtual).

Visiting professorships - none

OTHER PROFESSIONAL ACCOMPLISHMENTS

Poster/Platform Presentations [abstracts published]

1. **Gagnon K,** Cannon S, Weatherstone K. The Premie Neuro: A Reliable and Valid Neurological Test for the Preterm Infant. *Pediatric Academic Societies*. 2009; E-PAS2009:3877.422.
2. **Gagnon K,** Graves Tice C, Sykes J. Service Learning in Pediatric Physical Therapy Education: A Case Study. *Pediatric Physical Therapy*. 2014; 27(1), E23. **Received recognition for excellence in Social Justice by HPA the Catalyst.*
3. **Gagnon K,** Craft M, Duren M, Lashbrook B, Prickel A, Thomason M, Schulte D. Harnessing participation: use of a novel body weight support system in an early childhood setting. *Pediatric Physical Therapy*. 2018; 30(1), E25.

4. Wynarczuk KD, Kendall E, Schreiber J, Fiss A, Rapport MJ, **Gagnon K**. Development of a practical examination assessment rubric for pediatric physical therapist education. *Pediatric Physical Therapy.* 2018; 30(4), E22.
5. Schreiber J, **Gagnon K**, Kendall E, Fiss A, Rapport MJ, Wynarczuk KD. Experiential Learning Assessment Tool Analysis: A Pilot Study. *Pediatric Physical Therapy.* 2019; 31(4), E50.
6. **Gagnon K**, Catalino T, Krogmann M, Denninger S. A Collaborative Approach to Teaching Pediatric PT Using Blended Learning Pedagogies. *Pediatric Physical Therapy*. 2020; 32(1), E27.
7. Fiss A, Wynarczuk KG, Rapport MJ, **Gagnon K**, Kendall E, Schreiber J. Experiential learning in pediatric PT education: a faculty survey. *Pediatric Physical Therapy.* 2020; 32(1), E25-26.

Poster/Platform Presentations [abstracts not published]

1. **Gagnon K.** Reliability and validity of the Premie-Neuro: a new clinical test of neurological development for the preterm infant. Platform presentation (session winner). KUMC Student Research Forum. Kansas City, KS. April 2009.
2. **Gagnon K,** Cannon S, & Weatherstone K. The Premie-Neuro: a reliable and valid clinical neurological assessment tool for preterm infants. Kansas Physical Therapy Association. Platform Presentation (session winner). Spring Conference. Wichita, KS. April 2009.
3. **Gagnon K**, Cannon S, Gajewski B, Stehno-Bittel L, Weatherstone K. Predictive validity of the Premie-Neuro at term and 3 months adjusted age. Platform presentation. Kansas Physical Therapy Association. Spring Conference, Wichita, KS. April 2010.
4. **Gagnon K.** A collaborative approach between the classroom and practice for teaching entry-level teaming skills in early intervention. Platform presentation. APTA Section on Pediatrics Annual Conference, Anaheim, CA. September 2011.
5. Siengsukon C, **Gagnon K,** Vidoni E, Jain T, Aldughmi M. "Flipping" for blended learning: a case study on using online and in-person teaching methods in a physical therapy course. Platform presentation. American Physical Therapy Association Combined Sections Meeting, Las Vegas, NV. February 2014.
6. Robertson E**, Gagnon K**, Sabus C, Notebook T, Derrick M. Technological competencies of students in Doctor of Physical Therapy programs. Platform presentation. American Physical Therapy Association Combined Sections Meeting, Las Vegas, NV. February 2014.
7. **Gagnon K,** Fosheim K, Nichol T, St. John M, Woodward M. Using video technology to support more effective and efficient delivery of therapeutic modalities content in a Doctor of Physical Therapy Program. Poster presentation. Missouri Physical Therapy Association Spring Conference. Kansas City, MO. April 2016. *Poster received *Noteworthy* designation by MPTA review panel.
8. **Gagnon K,** Fosheim K, Nichol T, St. John M, Woodward M. Using video technology to support delivery of therapeutic modalities content in a Doctor of Physical Therapy Program. Poster presentation. American Physical Therapy Association Combined Sections Meeting, San Antonio, TX. February 2017
9. **Gagnon K,** Wisdom C, Douglas L, Eichelberger E, Hohenadel S. Gender Differences in Career Expectations, Factors that Influence Career Success, and Perceptions of Leadership in DPT Students. Poster presentation. Missouri Physical Therapy Association Spring Conference. April 2017.
10. Gillard M, **Gagnon K,** Thacker J. Using Selected Software Applications to Support Doctoral Capstone Completion in an Online Educational Environment. Poster presentation. American Occupational Therapy Association Education Summit. Louisville, KY. October 2018.
11. Rapport MJ, **Gagnon K**, Wynarczuk KD, Schreiber J, Fiss A, Kendall E. Assessing student performance in pediatric PT: reliability and feasibility of a new grading rubric. Poster presentation. American Physical Therapy Association NEXT Conference. Chicago, IL. June 2019.
12. Grandeo J, Massey BJ, Favaro L, Bliss R, **Gagnon K,** Young JY. Are entry-level graduate physical therapy students accurate and confident in referral for diagnostic imaging? Poster presentation. American Physical Therapy Association Combined Sections Meeting. San Antonio, TX. February 2022.
13. Young B, **Gagnon K.** Building Hybrid Physical Therapy Degree Programs: Keys to Success. Poster presentation. World Physiotherapy Congress. Dubai, UAE. June 2023.
14. Feda J, Adams K, Wenger L, Young J, Catalino T, Sturdivant R, **Gagnon K**. Investigating the Relationship Between the Learning and Study Strategies Inventory and Academic Performance. Platform presentation. Education Leadership Conference. Philadelphia, PA. October 2023.
15. Bachman T, **Gagnon K**. Factors Influencing Student Selection of Hybrid DPT Programs. Platform presentation. APTA Combined Sections Meeting. Boston, MA. February 2024.
16. Black K, **Gagnon K**. Training and Supporting Faculty Members to Coach Doctor of Physical Therapy Students. Platform presentation. APTA Combined Sections Meeting. Boston, MA. February 2024.
17. Black K Reynolds B, Feda J, Cutrone G, **Gagnon K**. Student Perceptions of Academic Coaching Program Effectiveness in Two Doctor of Physical Therapy Programs. Poster presentation. APTA Combined Sections Meeting. Boston, MA. February 2024.

Community Services

2010-2012	Lathrop Community Outreach, Lathrop, MO
2010-2013	Lathrop United Methodist Church Pastor Parish Committee, Lathrop, MO
2014-2017	Lathrop High School Career Day, Lathrop, MO
2015-2020	Parent Volunteer/Leader, Lathrop Shamrocks 4-H Club, Lathrop, MO
2018-present	Clinton County Senate Bill 40 Board, Lathrop, MO
	President, 2019-2024
	Vice President – 2024-present
2020-present	Chair, Friends of the Lathrop Park, Lathrop, MO
2022-present	President, Park Board, City of Lathrop, MO

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Institution:	Mississippi State University
Date of anticipated implementation:	September 2029
Program title as it will appear on Academic Program Inventory, Diploma, and Transcript:	Doctor of Physical Therapy (DPT)
Name of degree(s) to be awarded:	Doctor of Physical Therapy
Six-digit CIP code:	51.2308
Total credit-hour requirement to earn the degree:	106
Responsible academic unit:	School of Health Professions
Institutional contact:	Harold P. Jones, 858-242-7719, hpj31@msstate.edu
Phone:	
Email:	
SACSCOC Substantive Change:	☒ Program proposed **IS NOT** a substantive change. ☐ Program proposed **IS** a substantive change.
Incremental, five-year cost of implementation:	$19,488,934
Incremental, five-year per student cost of implementation:	$77,956
Potential five-year, new revenue:	$25,827,834
Potential new, five-year revenue per student:	$103,311
Will it attract new students to the university?	☒ Yes ☐ No
List any institutions within the State offering similar programs:	University of Mississippi Medical Center (UMMC) and William Carey University. Both DPT programs are offered using an in-person/residential model of delivery.

Number of students expected to enroll in first 5 years:		Number of students expected to graduate in first 5 years:	
Year 1	50	Year 1	0
Year 2	50	Year 2	0
Year 3	50	Year 3	45
Year 4	50	Year 4	45
Year 5	50	Year 5	45
Total	250	Total	135

Program summary (include second majors completed, if applicable):

The Doctor of Physical Therapy (DPT) program, based at Mississippi State University's Meridian Campus, leverages an innovative hybrid model, allowing students to complete roughly 50% of their coursework through asynchronous and synchronous online instruction. Approximately 20% of the program involves on-campus, short-term lab immersion blocks dedicated to clinical and hands-on skill development, with the remaining 30% comprising in-person clinical experiences in their communities. This structure enhances accessibility for students from diverse geographic and socioeconomic backgrounds while maintaining the rigor required for licensure and practice.

Improving educational and healthcare access to rural and underserved residents is central to MSU's mission. This flexible model provides students from various geographic and economic backgrounds with the opportunity to pursue a professional degree while remaining within their communities, reducing the need for relocation, and increasing accessibility. By educating students within their communities, the program increases the likelihood that graduates will remain and practice in these areas, addressing critical healthcare needs. Currently, there is no hybrid DPT opportunity

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in Mississippi, Alabama, Louisiana, Georgia, or Arkansas, with the nearest programs located in private schools in Texas and Tennessee over 700 miles away.

The MSU DPT program is designed to meet Mississippi's urgent need for physical therapists, particularly in underserved rural areas. Graduates of the program will be prepared to serve in settings such as hospitals, outpatient clinics, rehabilitation facilities, and home health agencies. The DPT curriculum will equip students with essential skills to assess and treat individuals across the lifespan with diverse rehabilitation needs, addressing both preventative and therapeutic healthcare demands within Mississippi and beyond.

According to data from the Health Resources and Services Administration (HRSA), Mississippi's current physical therapist adequacy rate is projected to decline from 78% in 2024 to 65% by 2034, highlighting a growing gap in the availability of physical therapy services across the state. This program responds to this gap by producing licensed physical therapists ready to serve in high-need regions, especially within rural communities where access to rehabilitation services is limited.

This program will utilize MSU's partnerships with healthcare facilities statewide, providing students with hands-on training in diverse clinical environments and ensuring that they are well-prepared to meet Mississippi's unique healthcare challenges. Through rigorous academic preparation and clinical practice, the DPT program will play a pivotal role in strengthening the healthcare workforce, addressing health disparities, and improving the quality of life for Mississippi's residents.

The audit of recently approved academic programs ensures that the program outcomes are congruent with the Board-approved proposal.

Please respond to the questions on the following pages to aid the institution and IHL staff in making recommendations to the IHL Board of Trustees.

_____
Chief Academic Officer Signature – Date

_____
Institutional Executive Officer Signature – Date

NEW ACADEMIC DEGREE PROGRAM PROPOSAL
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New Academic Degree Program Questions:

1	Describe how the degree program will be administered including the name and title of person(s) who will be responsible for curriculum development and ongoing program review.

The Doctor of Physical Therapy (DPT) program at Mississippi State University – Meridian will be administered by the School of Health Professions. The program will be overseen by the Program Director, who will hold a terminal academic degree in physical therapy (DPT or PhD) or a closely related field. This individual will have a minimum of six years of experience in physical therapy education, including at least three years in a full-time faculty role at the rank of Associate Professor or higher. In addition to clinical practice experience, the Program Director will demonstrate administrative leadership and a strong record in curriculum development, program assessment, and alignment with CAPTE accreditation standards.

The Program Director will be responsible for overall curriculum development, coordinating clinical education experiences, and overseeing continuous program review to ensure high-quality student outcomes and CAPTE compliance. The Program Director will work collaboratively with faculty, the Dean of the School of Health Professions, and relevant university committees to ensure that the program meets the educational and workforce needs of the region while adhering to best practices in physical therapy education.

2	Describe the educational objectives of the degree program including the specific objectives of any concentrations, emphases, options, specializations, tracks, etc.

The primary educational objective of the DPT program is to prepare graduates for licensure and practice as entry-level physical therapists who can meet the diverse healthcare needs of Mississippi, especially in rural and underserved areas. The program's specific objectives include:

1. Developing graduates with a strong foundation in physical therapy theory and clinical practice.
2. Equipping students with the skills to assess, diagnose, and implement effective treatment plans for patients with varied physical and functional impairments.
3. Cultivating a commitment to evidence-based practice, ethical decision-making, and continuous professional development.
4. Fostering cultural competence and interprofessional collaboration to enhance patient care outcomes across diverse populations.

The program will not include additional concentrations or specializations but will integrate specific rural healthcare content and community-based experiences to address Mississippi's unique healthcare needs.

3	Describe any special admission requirements for the degree program including any articulation agreements that have been negotiated or planned.

Admission to the DPT program will require a bachelor's degree from an accredited institution, completion of prerequisite coursework (including anatomy, physiology, biology, and other relevant sciences), a minimum undergraduate GPA of 3.0, letters of recommendation, and a demonstrated commitment to the field of physical therapy as evidenced by admissions essays and interviews. No specific articulation agreements have been negotiated, but the program may develop pathways with other MSU undergraduate programs, particularly in health sciences, to streamline the transition to the DPT program.

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4	Describe the professional accreditation that will be sought for this degree program. If a SACSCOC visit for substantive change will be necessary, please note.

The DPT program will seek accreditation from the Commission on Accreditation in Physical Therapy Education (CAPTE), which is the national accrediting body for physical therapy programs. The program will undergo the CAPTE accreditation process, which includes initial candidacy, self-study, site visits, and ongoing compliance with CAPTE standards. The new degree program does not represent a substantive change according to SACSCOC guidelines.

5	Describe the curriculum for this degree program including the recommended course of study (appending course descriptions for all courses) and any special requirements such as clinical, field experience, community service, internships, practicum, a thesis, etc.

The Doctor of Physical Therapy (DPT) program at Mississippi State University is designed to prepare students for entry-level practice as skilled, compassionate, and evidence-based healthcare providers. This innovative hybrid program provides a rigorous and comprehensive education while addressing the unique challenges faced by students in rural and underserved communities.

The program requires the completion of a minimum of 106 credit hours. The curriculum encompasses foundational coursework in movement science, clinical sciences, professional science, and health systems science, providing students with a comprehensive understanding of physical therapy practice. The hybrid model allows students to complete the program in seven semesters, compared to the typical nine semesters required by residential programs in the region. The curriculum integrates approximately 50% of didactic coursework through asynchronous and synchronous online instruction, offering flexibility for students to engage with the material from their homes, without the need for travel to campus. This online instruction is complemented by intensive on-campus laboratory and clinical skill development sessions, which constitute approximately 20% of the curriculum. These in-person sessions are scheduled in short-term blocks, approximately one week at a time once or twice per semester, minimizing disruption for students who live far from campus while maintaining the high standards of physical therapist education.

The remaining 30% of the curriculum focuses on full-time, in-person clinical experiences, conducted in diverse healthcare settings. Where possible, these placements are arranged near the students' home communities to strengthen local healthcare capacity and encourage graduates to remain in these areas after licensure. The clinical education component includes 32 weeks of full-time clinical experiences, where students apply their knowledge and skills in real-world settings under the supervision of licensed physical therapists.

Mississippi's healthcare landscape highlights the urgent need for programs like this. The state has a physical therapist density of just 6.6 per 10,000 residents—31% below the national average—with no counties reaching the national benchmark. This shortage is especially severe in rural areas. More than 50% of practicing physical therapists in Mississippi are located within six counties (Rankin, Desoto, Lee, Harrison, Jackson, and Forrest). Lauderdale County has the next largest concentration, with 50-60 physical therapists, largely due to rehabilitation services offered through its two Meridian Hospitals. Surrounding counties have fewer than two physical therapists per 10,000 residents.

This program aims to address these workforce shortages by producing qualified, licensed physical therapists who are committed to serving Mississippi and the neighboring regions. As the only hybrid program in the region, this program hopes to attract and train students within rural communities, increasing the likelihood that graduates will remain in these underserved areas and directly addressing the state's healthcare needs.

A detailed curriculum plan is outlined below.

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Proposed Curriculum Outline	Required Hours
College Required Courses: N/A	N/A
Major Required Courses:	
Movement Science	
PT 5114. Movement Science I	4
PT 5124. Movement Science II	4
PT 5134. Movement Science III	4
PT 5144. Movement Science IV	4
Health Systems Science	
PT 5213. Health Equity and Access	3
PT 5223. Health Systems	3
PT 5232. Health Policy, Advocacy, and Leadership	2
Professional Science	
PT 5313. Professional Formation I	3
PT 5323. Evidence-Based Practice	3
PT 5332. Professional Formation II	2
PT 5343. Professional Formation III	3
PT 5353. Capstone I	3
PT 5362. Capstone II	2
Clinical Science	
PT 5414. Foundations of Patient Management	4
PT 5424. Management of Musculoskeletal Health Conditions I - Upper Quarter	4
PT 5434. Management of Musculoskeletal Health Conditions II - Lower Quarter	4
PT 5443. Management of Musculoskeletal Health Conditions III - Spine	3
PT 5454. Management of Cardiopulmonary Health Conditions	4
PT 5464. Management of Neuromuscular Health Conditions.	4
PT 5474. Management of the Pediatric Patient	4
PT 5484. Management of the Aging Adult	4
PT 5493. Management of Multi-System Conditions	3
Clinical Education	
PT 5518. Clinical Education I	8
PT 5512. Clinical Education II	12
PT 5613. Clinical Education III	12
Concentration 1. Courses: N/A	N/A
Total Hours	106

6 Describe the faculty who will deliver this degree program including the members' names, ranks, disciplines, current workloads, and specific courses they will teach within the program. If it will be necessary to add faculty in order to begin the program, give the desired qualifications of the persons to be added.

The Doctor of Physical Therapy (DPT) program at Mississippi State University – Meridian will be delivered by a team of highly qualified faculty members who meet the rigorous standards established by the Commission on Accreditation in Physical Therapy Education (CAPTE). Faculty members will be responsible for both didactic and clinical instruction, ensuring that the curriculum is comprehensive, evidence-based, and aligned with professional standards.

The program plans to hire 10 core faculty, including the Program Director, at full implementation, all meeting CAPTE's qualifications. Faculty expertise will cover essential areas such as musculoskeletal, neurological, cardiopulmonary, pediatrics, geriatrics, and other specialized areas of physical therapy practice. Faculty ranks will range from Assistant Professor to Professor, depending on experience and qualifications.

Faculty Qualifications and Responsibilities:

Program Director: The DPT Program Director will meet all CAPTE requirements for this role. Qualifications include the following: Is a physical therapist who holds an active, unencumbered PT license in any United States jurisdiction and complies with the state practice act in Mississippi. Has earned an academic doctoral degree or previous CAPTE-granted exemption. Holds the rank of associate professor, professor, clinical associate professor, or clinical professor. Has a minimum of six years of full-time higher education experience, with a minimum of three years of full-time experience as a core faculty member in a CAPTE-accredited entry-level physical therapist education program.

Core Faculty: All core faculty members will have doctoral preparation. At least 50% of the core faculty will hold a terminal academic doctoral degree (e.g., PhD, EdD) in a relevant field, as required by CAPTE. The remaining core faculty may hold a clinical doctorate (DPT) along with significant clinical expertise. Core faculty who are physical therapists will hold active, unencumbered PT licenses in the United States and comply with the state practice act in Mississippi. Faculty will have contemporary expertise in their assigned teaching areas, demonstrated through ongoing clinical practice, research, or professional development. Faculty will demonstrate effectiveness in teaching and in evaluating student learning, employing evidence-based instructional strategies and assessment methods.

Associated Faculty: Associated faculty members (adjunct instructors and lab faculty) will possess qualifications appropriate to their teaching responsibilities, including contemporary expertise and demonstrated teaching effectiveness.

Faculty workloads will be designed to balance teaching, scholarship, service, and clinical practice as appropriate. Specific course assignments will align with each faculty member's area of expertise and qualifications. Faculty-to-student ratios, especially in laboratory and clinical settings, will comply with CAPTE standards to ensure effective instruction and student learning.

Commitment to CAPTE Standards:

The program is committed to continuous faculty development to maintain compliance with CAPTE standards. Faculty members will engage in ongoing professional development, scholarship, and clinical practice to stay current in their fields. Regular evaluations will assess faculty effectiveness in teaching and contributions to the program's mission. By adhering to CAPTE's rigorous faculty requirements, the DPT program at Mississippi State University – Meridian will provide students with a high-quality education delivered by a team of dedicated and qualified professionals. This commitment ensures that graduates are well-prepared to meet the healthcare needs of Mississippi with excellence and integrity.

7 Describe the library holdings relevant to the proposed program, noting strengths and weaknesses. If there are guidelines for the discipline, do current holdings meet or exceed standards?

Commented [KG1]: All of this except the last paragraph is lifted from the BHSA degree proposal. The library should be able to help us revise this.

The Phil Hardin Foundation Libraries provide sufficient resources and access to quality scholarly materials to support course work for the proposed Doctor of Physical Therapy degree. The full web site to which the library can be accessed at https://www.library.msstate.edu/#gsc.tab=0ibrary.msstate.edu MSU Meridian students, faculty and staff have access to such excellent resources and services as:

• 600+ electronic databases, 67 supporting for research in business/business-economics, 48 on medicine / health care, and 11 on law
(for example: Business Source Complete; Wall Street Journal online, IBIS World, WestLaw Campus Research,

PubMed, Case Files Collection)
• Over 2.3 million volumes (MSU Library's online catalog); Over 11,000 print volumes in the local collections at MSU Meridian
• 200,000 electronic journals in an extraordinary range of business and healthcare subjects and full-text content
• eBooks on healthcare management or health care administration of healthcare leadership
• EDS (EBSCO Discovery Service)
• Evidence-based learning resources already provided to students in the physician assistant program at MSU Meridian
(Access Medicine, Cochrane Reviews, Up-To-Date, Dynamed Plus, LWW Health Library, JAMA Evidence)
• Streaming video services (Kanopy, Swank)
• AMA (online), APA manuals and support for using these resources effectively
• Access to electronic journals sufficient to meet the needs of baccalaureate business studies.
• Discipline-based research guides covering resources in business, business-economics, accountancy, marketing, quantitative analysis, and business law, industry, marketing, and company analysis, scholarly communication and more
• Course reserves for faculty-selected electronic and print resources
• Access to virtual training opportunities through the library's MaxxSouth Digital Media Center (DMC) (ex.: Excel, Adobe InDesign and other technology) online.
• ILL and document delivery services for obtaining materials not owned by MSU Libraries.

The MSU Library has a robust collection of physical therapy and healthcare-related resources, including access to major databases such as PubMed, CINAHL, and ProQuest Health and Medical Complete. Current holdings meet the basic needs for foundational courses, but additional resources, such as access to specialized physical therapy journals (e.g., Physical Therapy Journal, Journal of Orthopaedic & Sports Physical Therapy), will enhance the program's support materials. The library is prepared to acquire any additional resources required to meet CAPTE standards and will work closely with program faculty to update resources regularly.

8 Describe the procedures for evaluation of the program and its effectiveness in the first five years of the program, including admission and retention rates, program outcome assessments, placement of graduates, changes in job market need/demand, ex-student/graduate surveys, or other procedures.

The DPT program's effectiveness will be evaluated through several key metrics: admission and retention rates, student performance on the National Physical Therapy Examination (NPTE), clinical performance assessments, graduate employment rates, and feedback from alumni and employers. Annual reviews will benchmark program metrics against CAPTE and ACAPT data benchmarks, and periodic surveys of graduates and employers will provide feedback on program quality and relevance. Faculty will review data annually to make curriculum adjustments, and the program will conduct a comprehensive self-study at initial accreditation, 5 years after initial accreditation, and every 10 years thereafter as part of the CAPTE accreditation process.

9 What is the specific basis for determining the number of graduates expected in the first five years?

The projected number of graduates over the first five years is based on an initial cohort size of 50 students. This enrollment plan is grounded in a comprehensive analysis of the following factors:

State and Regional Workforce Needs: The needs assessment identified a significant shortage of physical therapists in Mississippi, particularly in rural and underserved regions. Mississippi's projected growth in demand for physical therapists aligns with national trends, with healthcare providers across the state reporting challenges in recruiting qualified professionals. To address this workforce gap, we determined an initial enrollment that would supply an adequate number of graduates to meet regional needs without exceeding demand.

Retention and Attrition Rates: A projected 10% attrition rate was applied to each cohort size, based on national

averages and MSU's experience with other health profession programs. This rate informs the number of students likely to graduate from each cohort, providing a realistic expectation of program outcomes.

Program Length: Given the DPT program's 2.5-year length, the first cohort is expected to graduate in year 3. This timeline allows us to estimate that 45 students will graduate in the third year and each year thereafter.

Enrollment Trends and Capacity: The program's hybrid format supports scalable enrollment, allowing the initial cohort size to increase within the first three years within limits set forth by CAPTE. This approach is intended to meet both student interest and healthcare demand, with capacity adjustments informed by ongoing program assessments and faculty resources.

Based on these factors, the program anticipates graduating at least 135 students over the first five years, contributing directly to the state's healthcare workforce needs. This enrollment and graduation plan has been structured to align with both job market demand and CAPTE accreditation standards.

10 Using expected enrollment, provide the total anticipated budget for the program including implementation and 4 subsequent years (total of 5 years) of operation; any anticipated direct, indirect, and incremental costs necessary to start the program; anticipated, incremental annual revenue based on student enrollment; and other sources of funding.

Please explain what has been included in the costs and revenues.

Start-Up Costs: one-time costs associated with offering this program

Direct, Incremental Costs: additional annual costs to the university as a result of offering this program

Incremental Revenue: additional annual revenue assuming that this program will bring in new students paying full tuition

Non-Tuition Revenue: external funds, grants, contracts or other revenues attributable to the addition of this program

Differential: all revenues minus all costs

Year	Incoming Students	Total Enrollment	Start-Up Costs	A Additional Annual Costs	B Additional Annual Revenue	C Non-Tuition Revenue	(B+C)-A Differential
2023-24	50	50	$3,459,667	$3,459,042	$2,576,340	0	-$882,702
2024-25	50	95	0	$3,713,230	$4,982,652	0	$1,269,422
2025-26	50	140	0	$3,953,140	$5,912,013	0	$1,958,873
2026-27	50	140	0	$4,124,945	$6,084,374	0	$1,959,429
2027-28	50	140	0	$4,238,578	$6,272,055	0	$2,033,477
TOTAL	250	565	$3,459,667	$19,488,935	$25,827,434	0	$6,338,499

Revenue projections are based upon tuition and fees for a class size of fifty students per year with a 10% attrition rate between year 1 and year 2 of the program. Tuition and fees were estimated using the current in-state and out-of-state overall program costs of the UMMC program and incrementing tuition and fee increases of 3% per annum. This results in an overall cost for the seven-semester program of $104,527 for in-state students and $150,249 for out-of-state students in the first cohort. The budget model reflects an expectation of a 60%/40% split of in-state/out-of-state students. The entry class size of fifty students is similar to the average size of physical therapy programs across the nation (46) but smaller than the average class sizes of newer hybrid programs that enroll on average 60-70 students per class. One of the advantages of hybrid programs is that they lend themselves to scalability in response to student demand. Fifty students in the first cohort is a conservative estimate based on the excess student demand to available slots in physical therapy programs both locally and nationally and should be attainable considering the large pool of potential applicants from MSU's kinesiology major.

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Most program costs are associated with the salary and benefits for the program director, faculty, and staff. In the year prior to accreditation review, (2029-30), the required staffing is the program director, two additional faculty, and one staff member. In preparation for the acceptance of students in the fall of 2031, there will be the need to add faculty to have adequate personnel in place to support the initial cohort of students. As a result, the FY31 (2030-31) budget reflects an overall staffing with a program director, six additional core faculty members, and 4.5 staff positions. In preparation for the second cohort of students, three additional core faculty members are added in FY32 (2031-32) resulting in full staffing for the program with a program director, nine core faculty members, and 4.5 staff. This represents a 16/1 student to faculty ratio. Throughout these budget years, faculty and staff salaries and benefits are 60-70% of the ongoing costs.

One-time capital costs of $250,000 are needed in 2030-31 for the initial equipping of the training laboratory. Other ongoing costs include, but are not limited to, faculty development, office and laboratory supplies, course development costs, faculty travel, library resources, accreditation fees, and research needs.
By the second year of student enrollment, revenues begin to exceed costs and by year 3 revenues begin to outpace expenses by almost $2 million/year with initial startup costs recovered by the end of the fourth year of the program. While start-up costs would be fully recovered by program revenue within four years, it is anticipated that a significant portion of these expenses will be supported by philanthropic grants.

11 Program Demand: Select one or both of the following to address student demand:

☐ Survey of Student Interest

Number of surveys administered: Click or tap here to enter text.
Number of completed surveys returned: Click or tap here to enter text.
Percentage of students interested in program: Click or tap here to enter text.

Include a brief statement that provides additional information to explain the survey.
Click or tap here to enter text.

☒ Market Analysis or Evidence of Labor Market Need

The Mississippi State University (MSU) Doctor of Physical Therapy (DPT) program has been developed in response to a critical and growing demand for physical therapists within the state of Mississippi, particularly in rural and underserved areas. According to data from the Health Resources and Services Administration (HRSA), Mississippi currently has a physical therapist adequacy rate of 78%, which is projected to decline to 65% by 2034 if additional workforce resources are not developed. This shortage indicates a substantial gap between the demand for physical therapy services and the supply of licensed practitioners, with significant consequences for the health and well-being of Mississippi's population, especially in regions where access to rehabilitation and physical therapy services is limited.

The need for physical therapists in Mississippi is aligned with national trends, as the Bureau of Labor Statistics (BLS) projects a 14% increase in demand for physical therapists across the United States between 2023 and 2033, outpacing the average growth rate for all occupations. This growth is fueled by factors such as an aging population, increased rates of chronic conditions requiring rehabilitation, and a focus on non-invasive treatment options for injury and mobility impairments. The lack of sufficient physical therapists in Mississippi not only strains existing healthcare systems but also limits patient access to essential care, especially for vulnerable populations in rural areas.

MSU's proposed DPT program is uniquely positioned to address these challenges through its innovative hybrid format. Unlike existing residential DPT programs at UMMC and William Carey University, MSU's hybrid format eliminates geographic and financial barriers for students across Mississippi and the region. Currently, there are no hybrid DPT programs available in Mississippi, Alabama, Louisiana, Georgia, or Arkansas. The closest hybrid programs are located at private institutions in Texas and Tennessee, more than 700 miles away. This geographic exclusivity makes MSU's DPT program an attractive option for students across the region, particularly those from rural areas who may not have the

resources to relocate for a traditional residential program.

The hybrid model also aligns with national trends in professional education, where demand for flexible, technology-driven learning models is rapidly growing. This approach reduces geographic and financial barriers, enabling MSU to attract a diverse student population, including non-traditional students and those from underserved communities.

By offering an innovative, accessible hybrid education model, the MSU DPT program addresses critical healthcare workforce shortages while enhancing educational equity and accessibility. Graduates will be uniquely prepared to serve Mississippi and neighboring regions, directly improving healthcare outcomes. The program's market analysis underscores a critical and unmet demand for physical therapy professionals in Mississippi, making this program essential for the future health of the state's population.

12 Employment Opportunities for Graduates (state, region, nation):

Graduates of the MSU Doctor of Physical Therapy (DPT) program will enter a robust job market with extensive opportunities at the state, regional, and national levels. Mississippi's healthcare workforce analysis indicates a strong need for physical therapists across a variety of settings, including hospitals, outpatient clinics, rehabilitation centers, long-term care facilities, and home health agencies. The high demand for physical therapists in Mississippi is driven by the state's aging population, a high prevalence of chronic health conditions, and the limited availability of rehabilitation services in rural communities.

At the state level, projections from the MSU needs assessment and HRSA data reveal a steady demand for physical therapy professionals, with job openings expected to grow as current practitioners retire or transition to other roles. This creates a sustained need for newly trained physical therapists, particularly in regions with limited healthcare access. Graduates from MSU's DPT program will be well-positioned to fill these roles and address Mississippi's pressing healthcare needs.

Regionally, the southeastern United States also shows strong growth in employment opportunities for physical therapists. States bordering Mississippi face similar challenges related to healthcare access, chronic disease rates, and rural healthcare shortages, leading to a heightened demand for qualified physical therapists in this region. MSU DPT graduates, trained with an understanding of the unique needs of rural and underserved communities, will be competitive candidates for employment throughout the southeastern U.S., expanding their impact beyond Mississippi.

Nationally, the Bureau of Labor Statistics projects a 14% increase in employment for physical therapists from 2023 to 2033, a rate much higher than the national average for all occupations. Physical therapy continues to be a high-demand field due to the aging population, increased awareness of the benefits of physical therapy in managing chronic health conditions, and growing acceptance of physical therapy as a non-invasive treatment alternative. With an expected average annual salary of $95,620 for physical therapists in Mississippi, this career offers financial stability and growth potential, making it an attractive and viable profession for MSU graduates.

Graduates of the MSU DPT program will find strong employment prospects at the state, regional, and national levels, enabling them to address critical healthcare needs and improve access to essential rehabilitation services across Mississippi and beyond.

January 5, 2025

To: University Committee on Courses and Curriculum

From: Harold P. Jones, Ph.D.
Interim Dean, School of Health Profession

Harold Jones

Re: New Program Proposal – Physical Therapy

The School of Health Professions is seeking the approval of the University Course and Curriculum Committee (UCCC) to move forward with the creation of an entry-level, professional doctorate program in Physical Therapy (DPT) which will be housed on the Riley Campus in Meridian. The attached information including a completed IHL Appendix 8 is being provided to the Committee as a basis for the preliminary approval needed to move with the planning of this program which requires IHL approval.

The current proposal being submitted is similar to the Proposals to Plan that were approved previously by UCCC in establishing the MS in Physician Assistant Studies and MSN in Nursing. These pre- approvals were necessary to meet IHL requirements. At the time of the establishment of the physician assistant program, IHL required a Proposal to Plan for all new degree programs. In the case of Nursing. all new nursing programs require a three-step approval process with the first step being the equivalent of a permission to plan.

Because these IHL approvals were required before development of the new programs, program faculty were not hired until this IHL approval was received, As a result, these proposals were developed with the assistance of well-respected national discipline experts in these fields. As a result, the curriculum and course descriptions submitted to UCCC were indicative of best curriculum practices for similar programs nationally and that aligned with national accreditation standards.

As a result, certain elements of the full UCCC cover sheet materials were not present at the time of those proposals. In the absence of a significant faculty presence, course syllabi had not been developed , specific learning outcomes with assessments mapped to the details of the curriculum were absent, and a support letter from the faculty was unavailable. It was understood that as faculty were added that the finalized curriculum, the course syllabi, the learning outcomes and mapped assessments, and a letter of faculty support would return to UCCC for review and approval before the initiation of the program. We are requesting a similar review and process for the proposed physical therapy program.

While IHL has dropped its IHL Proposal to Plan requirement, it is a requirement of the physical therapy accrediting body (CAPTE) that the University receive approval by the state governing board (IHL) prior to gaining a spot in the queue for permission to apply for initial candidacy. Based on current waiting times in the queue, if we gain IHL approval in early Spring of 2025, then we would be in line to submit our application for candidacy in 2030 and, if approved, admit our first class in fall. 2031 Our spot in the growing queue cannot be assigned until this proposal is submitted to IHL. For

this reason, we are asking for UCCC approval of this new program proposal with an understanding that the missing elements of this early stage proposal will be sent to UCCC for review and approval before the implementation of the program. In fact, university review and approval of the curriculum is required by the accrediting prior to submitting the application for candidacy.

Attached is a more detailed description of the accreditation process and timelines for initiating physical therapy programs and the standards and process that have been used to create the proposed curriculum. This was prepared by our educational consultant , Dr. Kendra Gagnon. Her bio and CV are also attached.

Thank you in advance for your consideration in this manner, and please reach out to us if we can provide you with any further information.