Agenda Item 2e

Program Proposal
Ph.D. in Health and Rehabilitation Science
With Concentrations in Pathology and Impairment; Functional Limitations; and Health Services
Medical University of South Carolina

Medical University of South Carolina requests approval to offer a program leading to the Ph.D. degree in Health and Rehabilitation Science to be implemented in Fall 2009. The program will be offered at the Medical University's campus in Charleston.

The Board of Trustees approved the proposal on May 15, 2008. It was submitted to the Commission on August 7, 2008 after having been reviewed on July 17, 2008, by the Advisory Committee on Academic Program without substantive comment. In keeping with the Commission's requirements for doctoral programs, this program proposal was reviewed by an expert, external consultant.

According to the proposal, the purpose of the program is to produce researchers in an interdisciplinary program which brings together social sciences, health sciences, and engineering in three areas: pathology and impairment research; functional limitation research; and health services research. Programs of this type elsewhere also sometimes contain another track, i.e., disability research. This program will, however, limit itself to the three tracks first listed here.

The need for the program, according to the institution, is based on increased need for persons with this background owing to the increased numbers of the aging population throughout the country and especially in South Carolina, chronic medical conditions leading to disability, and rising rates of obesity and diabetes in the country.

Employment opportunities for graduates of the program are said to be excellent. The similar program at the University of Pittsburgh, for example, has reported that there are many more requests for graduates each year to staff faculties in the rehabilitation science areas than can be produced. This annual demand has been sustained since the program opened in 1995. Internal demand among students at MUSC who are currently registered in master's-level programs in the rehabilitation sciences, as well as existing staff and faculty at the institution is very high, according to an internal institutional survey which was conducted. Of the total of 893 persons contacted through the survey, 102 (12%) returned the survey; 65 (7.27%) stated that they would consider enrolling full-time in such a

Ph.D. program; and an additional 20 (2.23%) reported that they had "high interest" in this program proposal.

The curriculum consists of a minimum of 90 credit hours. These are divided among a professional development core of 15 credit hours; a research core of 18 semester hours; a concentration core of 30 semester hours; electives of 15 credit hours and dissertation credits of 9-12 credit hours. The number of new courses to be added to the catalog of the institution in the first five years of the program's operation will be 13. Students with undergraduate and master's degree preparation in physical therapy, occupational therapy, speech/language pathology, exercise science, athletic training, nutrition, bioengineering and related programs will be attracted to this program.

No similar programs exist in the state. Although there is a Doctor of Physical Therapy program at both MUSC and USC-Columbia, these degrees are professional practice doctorates, not research-oriented degrees. Only two other programs which are similar exist currently in the Southeastern region. These are found at the University of Kentucky and the University of Florida. Only 12 such programs exist throughout the United States currently.

Enrollments in the proposed program are estimated to begin at six students (8.0 FTE) in the first year and increase to 39 students (48 FTE) by the fifth year of the program. If the enrollment projections are met, the proposed program will meet the Commission's program productivity standards for enrollment and degrees awarded.

Six new faculty members (2.10 FTE) will be necessary to add to the faculty at the institution in the first five years of the program's implementation. By the fifth year of the program the number of faculty members will be 16 (4.0 FTE).

There is no national professional accreditation for a program of this type at the doctoral level.

Costs for new equipment necessary for this program will be $500,000, which will be equally allotted over each of the first five years. The old College of Health Professions building has been retained and converted to laboratory space by the College, even after its faculty and classroom facilities have been moved to two new facilities. The old facility's laboratories have been designated for use by the Center for Rehabilitation Science, a Research Center of Economic Excellence. The external reviewer from the University of Pittsburgh noted that a Ph.D. program in rehabilitation sciences is best placed in an institutional setting in which a center of excellence exists.

Library resources are adequate, in significant measure because of holdings made available electronically through PASCAL. The journals indexed in Medline, the various Brandon-Hill Lists, Web of Science, and CINAHL are chief among these. Document delivery both through PASCAL and the National Network of Libraries of Medicine will get copies of journal articles not owned by the library within a few days.

Categories for estimated new costs for the program in the first five years include program administration ($334,042), faculty salaries ($1,324,748), clerical/support personnel ($318,548), supplies and materials ($63,214), and equipment ($500,000).

New costs are estimated to begin at $456,064 in year one; rising to $503,317 in the second year; then declining to $467,281 in the third year; rising again to $572,217 in the fourth year; and declining to $367,938 in the fifth year. Total new costs in the first five years are estimated at $2,569,816.

Shown below are the estimated Mission Resource Requirement (MRR) costs to the State and new costs not funded by the MRR associated with the implementation of the proposed program for its first five years. Also shown are the estimated revenues projected under the MRR and the Resource Allocation Plan as well as student tuition.

	Estimated Program Costs		**Estimated Program Revenue**				
	(A) MRR Cost	**(B) Other Costs ***	**(C) Actual State Funding**	**(D) Tuition**	**(E) Additional Revenue**	**(F) Total Revenue (C+D+E)**	**(G) Total Revenue -Total Costs (F-(A+B))**
Year 1	$144,056	$0	N/A	$114,662	$0	$114,662	-$29,394
Year 2	$288,112	$0	$42,493	$229,846	$0	$272,339	-$15,773
Year 3	$504,196	$0	$84,062	$401,840	$0	$485,902	-$18,294
Year 4	$756,294	$0	$147,801	$602,760	$0	$750,561	-$5,733
Year 5	$864,336	$0	$221,702	$689,018	$0	$910,720	$46,384

*Includes costs of an extraordinary nature not otherwise included in the MRR cost calculation (e.g., costs for a new building required to support a program).

These data demonstrate that if the Medical University of South Carolina can meet the projected student enrollments and contain costs as they are shown in the proposal, the program will be able to cover new costs with revenues it generates by the fifth year of its implementation.

In summary, the institution has indicated that it will have the resources to cover the program's costs within the first five years of the program's operations. The program will produce research doctorate graduates necessary for the country's burgeoning programs of undergraduate and graduate study in these fields, as well as in pure research in the field. There are no competing programs in South Carolina and only twelve such programs in the United States, since the importance of the field is only gaining attention. There is also significant current internal demand by students, faculty, and staff at the institution to enter such a program when it is approved.

Recommendation

The staff recommends that the Committee on Academic Affairs and Licensing commend favorably to the Commission the program leading to the Ph.D. degree in Health and Rehabilitation Science at the Medical University of South Carolina, to be implemented in Fall 2009, provided that no "unique cost" or other special state funding be required or requested.