

**New Program Proposal
 Master of Science in Physician Assistant Studies
 Francis Marion University**

Summary

Francis Marion University requests approval to offer a program leading to the Master of Science in Physician Assistant Studies to be implemented in Fall 2016. The proposed program is to be offered through traditional instruction on campus. This program received a recurring state appropriation of \$357,000 in the FY 2014-15 Appropriations Act. The following chart outlines the stages for approval of the proposal; the Advisory Committee on Academic Programs (ACAP) voted to recommend approval of the proposal. The full program proposal **is attached**.

Stages of Consideration	Date	Comments
Program Planning Summary received and posted for comment	10/15/13	
Program Planning Summary considered by ACAP through electronic review	12/2/13	<p>The ACAP representative from MUSC asked the following questions:</p> <ol style="list-style-type: none"> 1. How will Francis Marion University address this issue for student placement and preceptors while not negatively impacting MUSC's use of Pee Dee AHEC sites? 2. Will placements beyond the Pee Dee AHEC sites be considered? If so, based on what supporting data and criteria will an expansion beyond the Pee Dee area be justified and implemented? 3. Has FMU verified that sufficient clinical sites are available to provide all required experiences necessary to meet accreditation standards? 4. Has FMU considered the potential negative impact created for the state's existing PA program by increased competition for already scarce clinical rotations? 5. What are the collaborative and joint efforts that would best serve and support our two institutions, the students, the population and the State of South Carolina? 6. Considering the shortage of qualified PA faculty due to the proliferation of programs across the country, how will new faculty be recruited?

Stages of Consideration	Date	Comments
		<p>7. What options does FMU have if they are unable to recruit the necessary faculty in time for the initiation of the program?</p> <p>8. Will FMU be requesting additional state funds to support this program?</p> <p>CHE staff requested that the full proposal address the questions posed by MUSC. Staff also asked that the proposal include a discussion of the institution's plans to request a recurring appropriation of \$500,000 to support this program along with an explanation of how the proposed program will be funded if this request is not granted. Staff also requested that the proposal include a description of the scope of practice of Physician Assistants to explain how they will alleviate the healthcare needs of the region. Staff also asked for additional data to show that the state can support and that there is adequate demand for two Physician Assistant programs.</p>
Program Proposal Received	5/15/14	
ACAP Consideration	6/19/14	<p>ACAP members asked how the clinical experience needed for admission would be evaluated. The representative from FMU stated that the letters of reference would be used to evaluate the experience. ACAP members also questioned the enrollment projections and compared the projections to the current enrollment of the program offered by MUSC.</p>
CAAL Consideration	8/7/2014	<p>CAAL members discussed clinical sites, new courses to be developed, programmatic assessment, and accreditation. They also questioned the need for a state appropriation for the program given the figures provided in the cost chart.</p>

Recommendation

The Committee on Academic Affairs and Licensing recommends that the Commission approve the program leading to the Master of Science in Physician Assistant Studies to be implemented in Fall 2016.

Proposing Institution

Francis Marion University

Title of Proposed New Program

Master of Science in Physician Assistant Studies

Submission Date

May 14, 2014



Dr. Luther Fred Carter, President

Francis Marion University

4822 E. Palmetto Street

Florence, South Carolina 29506

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2. Classification

Program Title:	Master of Science in Physician Assistant Studies
Academic Unit:	Graduate Physician Assistant Program
Designation, type and level of degree:	MS
Proposed implementation date:	Fall 2016
CIP code:	510912
Program(s) Identification:	New
Site	Francis Marion University, Florence, SC
Program qualifies for supplemental Palmetto Fellows Scholarship and Life	No
Delivery Mode	Traditional

3. Institutional Approval

3.A. FMU Graduate Council	Date of approval – January 21, 2014
3.B. FMU Faculty Senate	Date of approval – February 4, 2014
3.C. FMU Full Faculty	Date of approval – February 18, 2014
3.D. FMU Provost	Date of approval – February 20, 2014
3.E. FMU President	Date of approval – February 21, 2014
3.F. Board of Trustees	Date of approval – February 28, 2014

4. Purpose

4.A. Statement of Purpose

The Francis Marion University Physician Assistant Program seeks to educate excellent primary care physician assistants by providing outstanding instruction, state-of-the-art facilities and technology, and an atmosphere of collegial academic inquiry. Physician assistants from this program will fill a need in South Carolina for healthcare professionals, particularly in rural and other medically underserved areas with an emphasis on improving access to primary care.

4.B. Objectives

The specific objectives of this program are to:

- 4.B.1. Provide high quality graduate education that is accessible to students in South Carolina aspiring to become physician assistants (PAs); and
- 4.B.2. Increase the number of primary care providers (PCP) in the region and the state.

5. Justification

5.A. Need for the Program

The Association of American Medical Colleges predicts a growing shortage of physicians in the current decade with 45,000 too few primary care physicians by 2020. This shortage will greatly affect the Pee Dee and other rural areas of the state. These areas are already identified as medically underserved by the South Carolina Department of Health and Human Services, which considers the "continuing physician shortage, especially in rural areas," to be a major problem. Physician Assistants (PAs) are needed to address the growing shortage of primary care and family medicine providers.

According to the SC Health Professions Data Book (2014), there are currently 960 PAs practicing in the State of SC. Within the 12 county Pee Dee AHEC region, there are 158 PAs practicing, with 120 in Florence, Horry, and Sumter counties. Other counties are low in PAs and Lee county does not have any.

As documented by the 2009 I-95 Corridor Study, poverty and high unemployment rates contribute to serious health problems in the northeastern section of South Carolina. Diabetes, cancer, heart disease, and stroke occur at rates higher than national averages. As already noted, much of northeastern South Carolina is rural, a circumstance that tends to limit access to health care services. The Pee Dee region includes large numbers of low-income families and minorities who constitute a medically underserved population. The PA Program at Francis Marion University (FMU) will help alleviate the health care needs of this population.

National statistics show an urgent demand for PAs to assist in filling a current 30% shortage of primary-care physicians. To compound the shortage of primary care physicians, fewer than 10% of medical students are choosing to become primary care practitioners (PCPs) upon graduation (NPR, 2009). Former Health and Human Services Department Secretary Donna Shalala spoke of this service dilemma in a 2009 interview with National Public Radio: "The shortage is related to primary care. We have lots of specialists in the country."

Northeastern South Carolina is affected by the shortage of PCPs. Depending on what classifications are used, rural residents make up 20 to 21% of the total U. S. population and are served by only 10% of the country's physicians. According to the U.S. Department of Agriculture Economic Research Service, South Carolina is 24% rural. Of the 4 AHEC regions in South Carolina, the Pee Dee region has the lowest number of primary care physicians (7.8 primary care physicians per 10,000; 9.6 per 10,000 in the entire state) (SC Health Professions Data Book, 2014). Eight of the 12 counties in the Pee Dee region are classified as Health Profession Shortage Areas (HPSAs) for Primary Care by the US Department of Health and Human Services due to unmet healthcare needs. The other 4 counties, Darlington, Florence, Georgetown and Horry, are classified as partial HPSAs due to geographic or population disparities. The high quality, cost-effective care delivered by PAs in partnership with physicians is part of the solution to the PCP dilemma facing the Pee Dee region and other rural areas of the state and the nation.

The Occupational Outlook Handbook published by Bureau of Labor and Statistics forecasts growth of 38% in PA numbers between 2012 and 2022 which compares to 11% for all occupations. This is in part due to shortage of physicians, the growing need for primary care providers and expansion in the procedure PAs are certified to do. PAs are medical professionals who are nationally certified and state-licensed to practice medicine with physician supervision. All PAs are graduates of an accredited PA educational program. PAs obtain medical histories, conduct physical examinations, diagnose and treat illnesses, prescribe medication, order and interpret lab tests, perform procedures, assist in surgery, provide patient education and counseling, and make rounds in hospitals and nursing homes. "In rural and medically underserved areas, physician assistants may be the primary care providers at clinics where a physician is present only 1 or 2 days per week." (BLS)

For additional information on medically-underserved populations and primary care provider shortages in the Pee Dee region and in the state of South Carolina, please see the South Carolina DHEC website:

<http://www.scdhec.gov/Health/FHPF/WaiversforHealthcareProfessionalShortages/shortagemaps/>.

5.B. Congruence with Mission

FMU's mission is to make available excellent education programs for the people of the region and the state. The University offers bachelor's degrees in a wide range of liberal arts disciplines, as well as in the health sciences, education, and business. The University also offers professional degrees at the baccalaureate, master's, and specialist levels. The University

responds to the needs of its region and the state through its academic programs, and for that reason, FMU has developed a Master of Science in Physician Assistant Studies. This master's program addresses the need for advanced education of healthcare providers in the region and the state, and will be an exceedingly worthwhile addition to the University's list of graduate offerings.

Expanding the pool of master's-prepared healthcare providers in the Pee Dee region and the state is congruent not only with the mission of Francis Marion University but also with the purpose of the Pee Dee Health Education Partnership (PDHEP). The PDHEP—a consortium that includes FMU, the University of South Carolina, McLeod Health, and Carolinas Hospital System—was approved by the South Carolina Commission on Higher Education in October 2008. The Pee Dee Health Education Partnership is intended to provide graduate programs in the health care area for the benefit of northeastern South Carolina and the state. In its strategic plan, the PA program is identified as a priority of the PDHEP. This program will increase the number of master's-prepared healthcare providers possessing the advanced knowledge, skills, and abilities needed to provide quality health care in the region and the state.

5.C. Relationship to Other Programs

Francis Marion University already offers a MSN/Family Nurse Practitioner degree and the students in the PA program will share selected classes and resources with the MSN/FNP program. The interaction between PA students and faculty and Family Nurse Practitioner students and faculty is a positive feature of the PA program as it emulates working conditions in the health care profession, which increasingly emphasizes health care teams. Interprofessional education has been supported by the Interprofessional Education Collaborative (IPEC), comprised of 6 professional associations of health education, in a report from an expert panel in 2011. In March 2013 the Institute of Medicine released a report supporting the role of interprofessional education in improving delivery of healthcare.

5.D. List of similar programs in South Carolina

Master of Science in Physician Assistant Studies at MUSC.

5.E. A Description of Similarities and Differences

There are 64 Physician Assistant programs in the Southern Regional Education Board (SREB) region, 4 of which are in Georgia, 8 in North Carolina and currently only 1 program in South Carolina. The FMU program will concentrate on developing primary care practitioners for rural areas and providing opportunities for South Carolina residents to obtain this training in compliance with the university's mission. The MUSC program, although located in an urban area, also prepares PAs for rural practice and there is a need for both entities due to the drastic shortage of primary care providers in the state. The FMU program includes interprofessional training with our Nurse Practitioner program which enhances the integrated team approach to offering primary care. The rural areas of the Pee Dee region have not benefited greatly, to date, from the excellent PA graduates of MUSC. There persists a drastic lack of primary care providers, not only in Florence County which is the most populated county of the Pee Dee, but more certainly in the rural counties such as Williamsburg, Lee, Marlboro, and Dillon, as well as other areas in the state.

FMU's experience in healthcare education supports the fact that educating residents of the Pee Dee for a healthcare profession provides practitioners who are more likely to return home to the Pee Dee to serve. Therefore, both MUSC's and FMU's focus on developing PAs for rural healthcare practice is appropriate and needed. FMU's program will incorporate rural health theory specific to the population of the Pee Dee, and highlight issues such as accessibility, demographics, age distribution, and educational levels. FMU will track their program outcome of developing PAs that reside and work in the Pee Dee region of SC.

The development of the FMU PA program arose from the Pee Dee Health Education Partnership (PDHEP), and was originally envisaged as a joint program with USC with a cohort in Columbia and a cohort in Florence. The proposed joint PA program was disallowed by the Accrediting Review Commission for the Education of Physician Assistants (ARC-PA) who stated that a program must have just one sponsoring institution and one site. Therefore the Florence PA program is an FMU program and its development has been fully discussed with USC School of Medicine. Three programs described in the strategic plan of the PDHEP, i.e. an FMU Nurse Practitioner program, 3rd and 4th year USC School of Medicine students, and the FMU PA program will be housed in one building in downtown Florence.

Support for clinical education for the PA program will come largely from the two regional medical centers (McLeod Health and Carolinas Hospital System) and multiple primary care organizations in the Pee Dee region. The Pee Dee Area Health Education Center (AHEC) is located in Florence and will assist in coordinating placement of students in clinical sites along side students from other programs. There is capacity for FMU PAs and some MUSC PAs to have clinical training in the Pee Dee.

The FMU program will start in August 2016 and students will graduate approximately 27 months later in December 2018. The MUSC program which is approximately the same duration begins in the end of May and student graduate in August each year, thus graduates will be entering the workforce at different times of the year.

6. Admission Criteria

To be considered for admission as a graduate student in the PA program, an applicant must submit the following to the FMU Graduate Office:

1. A graduate application for admission and the nonrefundable application fee;
2. Official transcripts of all undergraduate and graduate work from accredited institutions. Students should have a four-year degree with a minimum GPA of 3.0. The transcripts should detail grades in required prerequisite subjects: four semester hours in each of these course areas: anatomy, physiology, and organic chemistry.
3. Scores from the Graduate Record Examination taken within the last five years. Only the General Test is required. On the original GRE, combined scores above 850 with a minimum of 400 on both the Verbal Reasoning and Quantitative Reasoning sections are recommended. On the revised GRE, combined scores above 290 with a minimum of 140 on each of the Verbal Reasoning and Quantitative Reasoning sections is recommended.
4. Two letters of recommendation from former professors or professional associates/supervisors who can attest to the academic potential of the applicant. Letters from faculty members in academic settings are preferred.
5. A personal statement of 400-750 words explaining the student's reason for applying to the program and describing his/her clinical experience.
6. Some clinical experience is required. Applicants should aim for at least 250 hours of clinical work. The clinical experience can be voluntary work, shadowing experiences provided through employment, or a combination of these. The student should describe these experiences in sufficient detail for the reviewer to comprehend the healthcare environments the student experienced.
7. Preference will be given to residents of South Carolina.

All of the above materials must be submitted in one packet to:
Graduate Office
Francis Marion University
PO Box 100547
Florence, SC 29502-0547

Completed applications are reviewed for merit by the PA Admissions Committee. Determination of merit is based upon consideration of all components of the application packet. In the admissions decision process, the committee considers both the merit of each application received and the number of places available in the program at the time of application. Offers for admission are given to those applicants who show the most promise of success in graduate studies. Top applicants will be invited for an interview before any final decision of acceptance is made.

Applications should be submitted by March 1 of each year for a start in the fall semester of that year. Application materials received after the application deadlines may still be considered for admission contingent upon the availability of positions within the program. It is the applicant's responsibility to gather all materials to complete his/her application. Only completed applications (with all required materials) will be reviewed for possible admission.

7. Enrollment

7. A. Table A – Projected Total Enrollment

PROJECTED TOTAL ENROLLMENT						
YEAR	FALL		SPRING		SUMMER	
	Headcount	Credit Hours	Headcount	Credit Hours	Headcount	Credit Hours
2016-2017	32	512	32	480	32	480
2017-2018	64	992	64	768	64	768
2018-2019	96	1376	64	768	64	768
2019-2020	96	1376	64	768	64	768
2020-2021	96	1376	64	768	64	768

7. B. Process by Which Estimates Were Made

Thirty two students will be accepted into the program each fall. The didactic part of the curriculum is 4 terms. The last three terms (including summer) are clinical rotations. No attrition has been accounted for and students will move through the program as a cohort. Students will be recruited from FMU and from other undergraduate institutions with appropriate degree programs which include certain science electives. In keeping with the mission of FMU preference will be given to SC residents.

7. C. This program will not affect any current graduate program at FMU. It will attract applications from students graduating from a number of our undergraduate programs such as biology and chemistry. We do expect some students to enroll in these undergraduate programs at FMU as freshmen with intentions of moving into the graduate MSPAS after 4 years.

8. Curriculum

The curriculum of the Master of Science degree in PA studies is designed to develop healthcare practitioners with a strong emphasis in primary care and with an advanced level of knowledge, skills and abilities to serve the healthcare needs of the community in various healthcare environments. The design of the curriculum is based on the ARC-PA standards and the Competencies for the Physician Assistant Profession (a guiding document developed and adopted by the four major national PA organizations). The curriculum and design of the proposal was developed in consultation with experienced educators, researchers and PA leaders at Wake Forest School of Medicine within the Department of Physician Assistant Studies. Upon completion of the curriculum, graduates will be fully equipped for the Physician Assistants National Certifying Examination (PANCE) offered by the National Commission on Certification of Physician Assistants (NCCPA) and eligible for licensure as Physician Assistants in South Carolina.

Our curriculum has a distinctive emphasis on preparing students to deliver community-oriented, patient-centered primary care. PAs provide comprehensive health promotion and preventive medicine services to ambulatory clients; evaluate problems at the patient's initial contact with the primary care system; and provide continuing care to clients with acute and stable chronic illnesses. In addition to patient care, the curriculum also engages learners in epidemiological approaches to clinical problems, family and community systems, use of technology, cost effectiveness, collaboration, consultation, referral processes, theoretical frameworks, and evidence-based practice.

Students will complete supervised clinical practice training (or rotations) under the direct supervision of highly qualified, licensed providers with recognized expertise within a given medical specialty. For example, students enrolled in a Family Medicine rotation will preferentially train under the supervision of a family physician board-certified in family medicine and/or PA practicing within this specialty. One rotation course will be an elective, so the student can gain additional exposure and experience in a specialty area or additional emphasis in a prior specialty.

8. A. Sample Curriculum

REQUIREMENTS FOR MASTER OF SCIENCE DEGREE IN PHYSICIAN ASSISTANT STUDIES

To receive a Master of Science Degree in Physician Assistant Studies from FMU, a student must fulfill the following requirements:

Preclinical courses

Semester I 16 hours

PA 501 Anatomy and Physical Assessment Basics
PA 508 Physiology and Pharmacology Basics
PA 510 Fundamentals of Medicine and Role of the PA
PA 513 Interpersonal Communication and History Taking
PA 505/APRN 505 Population Health and Epidemiology

Semester II 15 hours

PA 521 Integrative Pathophysiology and Pharmacotherapeutics I
PA 523 Clinical Assessment, Diagnosis and Application I
PA 525 Clinical Interventions and Diagnostics I
PA 506/APRN 506 Health Systems and Risk Management

Semester III 15 hours
PA 631 Integrative Pathophysiology and Pharmacotherapeutics II
PA 633 Clinical Assessment, Diagnosis and Application II
PA 635 Clinical Interventions and Diagnostics II
PA 603/APRN 503 Advanced Research and Evidence-based Practice

Semester IV 15 hours
PA 641 Integrative Pathophysiology and Pharmacotherapeutics III
PA 643 Clinical Assessment, Diagnosis and Application III
PA 645 Clinical Interventions and Diagnostics III
PA 607/APRN 707 Clinical Decision-Making and Ethics

Clinical Year

Semester V 9 hours
PA *Clinical Rotations (3)

Semester VI 9 hours
PA *Clinical Rotations (3)

Semester VII 12 hours
PA *Clinical Rotations (3)
PA 720 PA Capstone

*Rotations will cover PA 710 Family Medicine, PA 711 Obstetrics and Gynecology, PA 712 Pediatrics, PA 713 Psychiatry, PA 714 Emergency Medicine, PA 715 Internal Medicine - Inpatient, PA 716 Internal Medicine - Outpatient, PA 717 General Surgery, and PA 718 Clinical Elective.

Policies for progression through the program are those of the graduate academic programs in the FMU catalog. In order for a student to successfully progress through the PA program, the student must complete his or her degree within a six-year period; achieve course grades of C or better; and maintain a 3.0 cumulative grade point average.

8.B. List of all New Courses

501 Anatomy and Physical Assessment Basics (4:3-3) F. This course integrates the basic disciplines of human anatomy, developmental biology and embryology, histology, and organ systems. The course emphasizes human structure-function relationships at multiple levels of organization, specifically cell, tissue, organ and system. Introductory clinical correlations to surface landmarks and physical examination basics are provided.

505 Population Health and Epidemiology (3) F. This course focuses on different healthcare needs related to geographic, racial, and cultural differences in society. The learner will review local, national, and global healthcare needs, with emphasis on a needs assessment of a local region.

506 Health Systems and Risk Management (3) S. This course addresses quality assurance methodology and legal responsibilities of advanced practice patient care. Reporting systems, issues that affect advanced practice role, financing, coding, and credentialing criteria will be discussed. Best practice protocols, use of benchmarking, and safe work environments will be emphasized to ensure risk reduction for patients, families, and populations.

508 Physiology and Pharmacology Basics (4:3-3) F. This course provides a comprehensive introduction to the physiologic functions and mechanisms of actions of the

major organ systems within the human body. This foundation in human physiology is paired with introductory content in pharmacology and the correlation between these two sciences. A practical approach to pharmacology concepts will emphasize mechanisms of action, drug-receptor interactions, drug-drug interactions, pharmacokinetic principles, drug development and safety, as well as clinical implications for dosing and administration.

510 Fundamentals of Medicine and Role of the Physician Assistant (3) F. This course provides a strong foundation in the concepts underlying health and disease at both the individual and population levels. The course begins with the essential elements of human structure and function and progresses through body systems. The student will learn to follow best practices for approaching patients with illness or health maintenance goals; reinforce clinical reasoning skills; recognize and use guidelines for preventive care and disease screening; and achieve an understanding of appropriate use of diagnostic and therapeutic interventions for clinical care. As these foundational concepts are introduced, the role of the physician assistant (PA) is explored, including history of the profession, financing and delivery systems, PA and medical professional organizations, professionalism, diversity, health equity, as well as other social, cultural, economic, and political structures in society and in the PA profession.

513 Interpersonal Communication and History Taking (2) F. This course provides an introduction to medical history taking and offers practical strategies for effective, patient-centered interpersonal communication. Special topics emphasize technical skills and attitudes of the learner which optimize interpersonal communication and rapport building with patients. Learners will be instructed in the appropriate formats for documentation of patient history as well as techniques to enhance the effectiveness of both history taking and patient education.

521 Integrative Pathophysiology and Pharmacotherapeutics I (4) S. (Prerequisite: 508) This course builds upon foundational material delivered in PA 508, Physiology and Pharmacology Basics, and builds the learner's capacity to identify pathophysiologic alterations and disease to the appropriate selection of pharmacologic intervention. The course follows an organ-system based sequencing established with concurrent courses 523 and 525, which provides alignment as pathophysiologic mechanisms are further explored and therapeutic drug classes are introduced. Each drug class is explored with attention on mechanisms of action, safety, tolerability, efficacy, selection and dosing, and adjustments for special populations. Organ systems covered in PA 521 are cardiac, pulmonary, gastrointestinal and genitourinary. This is consistent with the systems covered in PA 523 and 525.

523 Clinical Assessment, Diagnosis and Application I (5:3-6) S. (Prerequisites: 501, 508 and 510) This course provides foundational knowledge, introduces practical skills, and develops professional attitudes and behaviors relevant to the clinical assessment of a patient. Students are instructed in physical examination and learn to apply evidence-based history taking and documentation. Instruction in the art of assessment is complemented by topics in evidence-based medicine and clinical problem solving. An emphasis of the course is the integration of physical examination and medical history taking with basic and other clinical sciences. Students must synthesize knowledge to demonstrate a rationale for interpretation of data and selection of interventions. The course will also incorporate common diagnostic, prognostic, therapeutic, and palliative procedures consistent with the practice of medicine by a physician assistant.

525 Clinical Interventions and Diagnostics I (3:2-3) S. (Prerequisite: 510) This course builds upon foundational concepts underlying health and disease at both the individual and population levels. Students advance their abilities to recognize, prevent, and manage common clinical disorders; support the maintenance of optimal health; understand the pathophysiologic alterations underlying common medical illnesses; follow best practices for approaching patients with illness or health maintenance goals; reinforce clinical reasoning skills; recognize and use guidelines for preventive care and disease screening; and achieve a sound understanding of appropriate use of diagnostic and therapeutic interventions for clinical care across a wide spectrum of medical conditions in various settings. Additional emphasis is placed upon

diagnostic interventions and analysis of radiologic and laboratory interventions. System covered will coincide with 521 and 523 including the following; cardiac, pulmonary, gastrointestinal, and genitourinary.

603 Advanced Research and Evidence-based Practice (3) Su. This course explores quantitative and qualitative approaches to research problems in advanced patient care. Theories, methods, designs, measurement, ethical conduct, and skills in critical research appraisal are emphasized along with the use of research to improve practice and client outcomes.

607 Clinical Decision-Making and Ethics (3) F. (Prerequisite: 633 and 635 or permission of the department) This course focuses on care management related to algorithms, protocols, and best-practice. The learner will discuss ethical obligations of a primary provider in caring for patients from a developmental, cultural, and spiritual perspective across the lifespan.

631 Integrative Pathophysiology and Pharmacotherapeutics II (4) Su. (Prerequisite: 521) This course builds upon foundational material delivered in PA 508 and 521, building the learner's capacity from identifying pathophysiologic alterations and disease to choosing appropriate selection of pharmacologic intervention. The course follows an organ-system based sequencing established with concurrent courses PA 633 and 635, which provides alignment as pathophysiologic mechanisms are further explored and therapeutic drug classes are introduced. Each drug class is explored with attention to mechanisms of action, safety, tolerability, efficacy, selection and dosing, and adjustments for special populations Organ systems covered in 631 are hematology, endocrinology, and neurology. Aspect of psychiatry and infectious diseases will also be covered.

633 Clinical Assessment, Diagnosis and Application II (5:3-6) Su. (Prerequisite: 523) This course provides foundational knowledge, introduces practical skills, and develops professional attitudes and behaviors relevant to the clinical assessment of a patient which the student first encountered in PA 523. Students are instructed in physical examination, as well as learn how to apply evidence-based history taking and documentation. Instruction in the art of assessment is complemented by topics in evidence-based medicine and clinical problem solving. The course emphasizes the integration of physical examination and medical history taking with basic and other clinical sciences. Students must synthesize knowledge to demonstrate a rationale for selection of maneuvers and interpretation of findings. The course will also incorporate common diagnostic, prognostic, therapeutic and palliative procedures consistent with the practice of medicine by a physician assistant. PA 633 is the second course in the 523, 633, 643 sequence, all of which cover advancing concepts with different organ systems. PA 633 along with PA 631 and 635 covers hematology, endocrinology, and neurology. Aspect of psychiatry and infectious diseases will also be covered.

635 Clinical Interventions and Diagnostics II (3:2-3) Su. (Prerequisite: 525) This course builds upon foundational concepts underlying health and disease at both the individual and population levels begun in PA 525. Students advance their abilities to recognize, prevent and manage common clinical disorders; support the maintenance of optimal health; understand the pathophysiologic alterations underlying common medical illnesses; follow best practices for approaching patients with illness or health maintenance goals; reinforce clinical reasoning skills; recognize and use guidelines for preventive care and disease screening; and achieve a sound understanding of appropriate use of diagnostic and therapeutic interventions for clinical care across a wide spectrum of medical conditions in various settings. Additional emphasis is placed upon diagnostic interventions and analysis of radiologic and laboratory interventions. System covered will coincide with 521 and 523 including the following; cardiac, pulmonary, gastrointestinal, and genitourinary.

641 Integrative Pathophysiology and Pharmacotherapeutics III (4) F. (Prerequisite: 631) This course builds upon foundational material delivered in PA 521 and PA 631, building the learner's capacity from identifying pathophysiologic alterations and disease to choosing the

appropriate selection of pharmacologic intervention. The course follows an organ-system based sequencing established with concurrent courses 643 and 645, which provides alignment as pathophysiologic mechanisms are further explored and therapeutic drug classes are introduced. Each drug class is explored with attention to mechanisms of action, safety, tolerability, efficacy, selection and dosing, and adjustments for special populations. Organ systems covered in 641 are musculoskeletal, dermatologic, eyes, ears nose and throat (EENT) and obstetrics and gynecology (OB/GYN).

643 Clinical Assessment, Diagnosis and Application III (5:3-6) F. (Prerequisite: 633)

This course provides foundational knowledge, introduces practical skills, and develops professional attitudes and behaviors relevant to the clinical assessment of a patient. Students will apply evidence-based history taking and documentation. Instruction in the art of assessment is complemented by topics in evidence-based medicine and clinical problem solving. The course emphasizes the integration of physical examination and medical history taking with basic and other clinical sciences. Students will synthesize knowledge to demonstrate a rationale for selection of maneuvers and interpretation of findings. The course will also incorporate common diagnostic, prognostic, therapeutic, and palliative procedures consistent with the practice of medicine by a physician assistant. PA 643 is the third course in the 523, 633, 643 sequence, all of which cover similar concepts with different organ systems. PA 643 along with PA 641 and 645 cover musculoskeletal and dermatologic systems; eyes, ears nose and throat (EENT) and obstetrics and gynecology (OB/GYN).

645 Clinical Interventions and Diagnostics III (3:2-3) F. (Prerequisite: 635) This course builds upon foundational concepts underlying health and disease at both the individual and population levels as presented in PA 525 and PA 635. Students will advance their abilities to recognize, prevent, and manage common clinical disorders; support the maintenance of optimal health; understand the pathophysiologic alterations underlying common medical illnesses; follow best practices for approaching patients with illness or health maintenance goals; reinforce clinical reasoning skills; recognize and use guidelines for preventive care and disease screening; and achieve a sound understanding of appropriate diagnostic and therapeutic interventions for clinical care across a wide spectrum of medical conditions in various settings. Additional emphasis is placed upon diagnostic interventions and analysis of radiologic and laboratory interventions. Subjects covered will coincide with 641 and 643 i.e. musculoskeletal, dermatology, eyes, ears, nose and throat (EENT), obstetrics, and gynecology (OB/GYN).

710 Family Medicine Clerkship (3) (135 clinical hours) (Prerequisite: permission of the department) F, S, Su. This clerkship provides students with experience, primarily in the outpatient evaluation of pediatric and adult patients in a community setting, which emphasizes prevention, health maintenance and the management of acute and chronic illnesses, under the supervision of experienced family medicine preceptors.

711 Obstetrics and Gynecology Clerkship (3) (135 clinical hours) (Prerequisite: permission of the department) F, S, Su. This clerkship provides students with experience in managing common gynecologic issues and disorders. Obstetric experience will include labor and delivery plus routine prenatal and postpartum care under the supervision of experienced OB/GYN preceptors.

712 Pediatrics Clerkship (3) (135 clinical hours) (Prerequisite: permission of the department) F, S, Su. This clerkship provides students with extensive clinical exposure to aspects of pediatrics under the supervision of experienced pediatric preceptors.

713 Psychiatry Clerkship (3) (135 clinical hours) (Prerequisite: permission of the department) F, S, Su. This clerkship provides students with extensive clinical exposure to the major aspects of psychiatric care under the supervision of experienced preceptors.

714 Emergency Medicine Clerkship (3) (135 clinical hours) (Prerequisite: permission of the department) F, S, Su. This clerkship provides students with experience in triage, evaluation,

and management of patients in the emergency department under the supervision of experienced preceptors.

715 Internal Medicine – Inpatient Clerkship (3) (135 clinical hours) (Prerequisite: permission of the department) F, S, Su. This clerkship provides students with extensive clinical exposure to the major aspects of inpatient internal medicine care under the supervision of experienced physician and PA preceptors.

716 Internal Medicine – Outpatient Clerkship (3) (135 clinical hours) (Prerequisite: permission of the department) F, S, Su. This clerkship provides students with extensive clinical exposure to the major aspects of internal medicine in an outpatient setting, under the supervision of experienced physician and PA preceptors.

717 General Surgery Clerkship (3) (135 clinical hours) (Prerequisite: permission of the department) F, S, Su. This clerkship provides students with hands-on experience in general surgery through exposure to the operating room, to pre- and post-operative management and to out-patient surgical management and follow-up.

718 Elective Clerkship (3) (135 clinical hours) (Prerequisite: permission of the department) F, S, Su. This clerkship provides students with extensive clinical exposure to the major aspects of an area of medicine selected in consultation with the clinical coordinator, under the supervision of experienced preceptors.

720 PA Capstone (3) (Prerequisite: completion of 6 clerkships) F. This course will emphasize test-taking skills, testing practice, and critical thinking. Emphasis will be placed on prioritization and delegation. Learners will review critical medical concepts and content needed for their success as a professional PA.

9. Assessment

9.A. Assessment of Student Learning Outcomes

Student assessment will be done by both formative and summative evaluation approaches recognized as valuable strategies within the PA education and medical education literature, including multiple assessment approaches with multiple observations by multiple individuals. Core approaches will include objective testing, case study reporting and self reflections, observed standardized clinical evaluations, direct observation by community providers using rubric-based evaluation of clinical and interpersonal skills, and facilitated discussion and debates. The program evaluation plan will include standardized testing for remediation purposes. Students will be evaluated on an ongoing, continuous basis for all critical components of learning and the attainment of learning outcomes which are aligned with national competency benchmarks. Students must demonstrate competency across six core domains established within the Competencies for the PA Profession. Our program has delineated these elements and will measure student performance against benchmarks longitudinally and again summatively prior to program completion. These core domains, which then contain specific learning outcomes tied to assessments, involve medical knowledge, interpersonal and communication skills, patient care, professionalism, practice-based learning and improvement, and systems-based practice. (PA Competencies, 2012 revision)

9.B. Program Assessment

Clear indicators for program assessment have been developed based on terminal student learning and program outcomes. The programs that will be evaluated include: 1) attrition, deceleration and retention ratios of students accepted; 2) The first time and total pass rate on the Physician Assistant National Certifying Exam (PANCE); 3) Employer satisfaction will be collected by survey six-month post graduation; 4) Self-assessment of core competencies at set stages after preclinical and clinical training and after entry into practice; 5) Student cohort performance against national benchmark formative examination; and 6) Alumni satisfaction 6-months post graduation and; 7) Employment location / specialty.

To assess and strengthen terminal student learning in this proposed program, additional outcomes and assessments will be integrated into the curriculum above and beyond the core national PA competencies previously described. These additional outcomes are listed below with the assessment method.

Program Student Learning Outcomes	Evaluation Method
1. Integrate psychosocial and scientific knowledge into the skills and competencies used by Physician Assistants in primary care for rural populations.	A complete clinical portfolio will be assessed after the student's clinical rotations. The assessment of the portfolio will follow a well-developed rubric and be done by two faculty reviewers.
2. Understand the organizational structure and effective leadership of contemporary health care systems.	In courses PA 506 and PA 607 students will discuss and write about health systems and ethical dilemmas and relate them to changes that may enhance patient care in current healthcare systems. PA 607 will require a scholarly paper that addresses leadership and healthcare systems related to a patient diagnosis that produced an ethical dilemma for the healthcare team and/ or family.
3. Develop decisional strategies for providing safe and effective primary medical care.	There are six courses that formatively address clinical decisional strategies, and PA 607 Clinical Decision-Making and Ethics will require a summative evaluation process using a well-developed case study submission.
4. Infuse current research finding and best practice protocols into primary medical care.	A separate course, PA 603, will discuss Evidence Based Practice and students will appraise levels of evidence on a specific healthcare topic.
5. Use informatics to improve patient teaching and state of the art primary medical care.	Informatics will be assessed throughout the clinical rotations by the evaluation of appropriate documentation and resource management.
6. Advocate for healthcare policies that increase population access to primary medical care.	Students will have a course on healthcare policy and the clinical decision-making scholarly paper required for PA 607 will include systems policy that will enhance assessment of care to rural populations.
7. Collaborate with other various healthcare professions to improve patient outcomes on individual and systems levels.	Clinical evaluations will assess appropriate collaboration throughout the clinical rotations. Culmination will be presented in portfolio format.

Program Student Learning Outcomes	Evaluation Method
8. Design care that focuses on health promotion for patients, families, and rural communities.	All clinical evaluations will include a patient teaching component and will be evaluated formatively throughout and summatively by clinical portfolio review. Clinical portfolios will include types and numbers of patients/families seen and diagnosis. Patient encounters will be tracked by an electronic tracking system.
9. Assimilate skills to provide health promotion and disease prevention for patients across the lifespan.	The program is designed to include clinical rotations that are evaluated and assess patient healthcare needs that focus on all organ systems. The evaluation of this will be by portfolio that includes patient assessment, diagnosis, and management across the lifespan.

9.C. Systematic Plan for Evaluation

PA faculty will customize a program evaluation plan following a six step framework established by the Office of Medical Education, Research and Design at Michigan State University College of Medicine. The model will integrate program planning and continuous evaluation, and data collected and analyzed will be evaluated with action plans formulated during defined activities involving all core faculty with input from external constituents to weigh impact and outcomes. A rapid cycle approach to program planning will be critical to ongoing individualization of curriculum planning for two purposes: to ensure community needs are being met and to be adaptive to rapid cycle changes within healthcare delivery. The evaluation plan will make clear the timetable for assessing trends and outcomes on a regular basis. Every course will require a full course report and evaluation that includes: student performance, faculty performance, student perceptions, and utility of resources. Integration of this model, which is most typical during periods of intensive self study, as an ongoing program evaluation model will support optimal performance, foster a culture of continual enrichment, and ensure perpetual readiness for external review and accreditation.

10. Faculty

10.A. Table B – Faculty List

List Staff by Rank (e.g. Professor #1, Professor #2, Associate Professor #1, etc)	Highest Degree Earned	Field of Study	Teaching in Field (Yes/No)
Associate Professor	MD	Medicine	Yes
Associate Professor	MPAS	Physician Assistant Studies	Yes
Assistant Professor	MPAS	Physician Assistant Studies	Yes
Assistant Professor	MPAS	Physician Assistant Studies	Yes
Assistant Professor	MPAS	Physician Assistant Studies	Yes
Assistant Professor	NP	Nurse Practitioner	Yes
Assistant Professor	MPAS or PhD	Physician Assistant Studies or Anatomy and Physiology	No
Instructor	MPAS, PhD, PharmD, or MD	Physician Assistant Studies, Physiology, Pharmacy, or Medicine	No
Instructor	MPAS	Physician Assistant Studies	No

10.A. New Faculty

Three new faculty members will be employed at the start of the program and 2 added in the second year. Two of the first 3 full time faculty will be certified PAs in accordance with accreditation standards. The other 2 faculty may be PAs, MDs, or PhD trained or NPs with the correct experience. Interprofessional training is an integral part of this program and the current NP and the new PA programs will be housed together in a new Medical and Health Science Complex. The part time instructor will be a certified PA who will assist in the practical aspects of the courses. Full time faculty will be sought with teaching experience whilst some of the part time faculty will be local practitioners.

10.B. Necessary Qualifications.

The Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) specify qualifications for the Medical Director (MD). ARC-PA specifies the program Director must be a PA or physician and at least 2 FTE faculty position must be PAs. FMU will principally be employing PAs with masters degrees as faculty although at least one faculty will be a NP and some instructors may be physicians, pharmacists or PhDs.

10.C. Currently Employed Faculty

The Program Director is currently being sought and will be employed by January 2015, more than 18 months before the program starts, to direct the program through the PA accreditation process. The Program Director is, however, included in the table below (Table 10.F) as new to the program as an administrator. The Medical Director is currently employed part time as the director of the Student Health program and will take on the position in the PA program in addition to his current duties.

10.D. Faculty Development

FMU makes funds available to faculty annually for travelling to conferences and other professional development activities. These funds are administered by an elected faculty committee that receives application at specified times through the year and awards are based on merit of the application. Departments also have funds that can be used for professional development. PA faculty will be expected to maintain certification and release time will be provided to allow for sufficient clinical practice.

10.E. Definition of FTE

The fulltime teaching equivalency (FTE) at Francis Marion University is:

1. Teaching load for a tenured and tenure-track faculty member is a 4 course (12 hours)-3 course (9 hours) annual teaching load with four courses in either the Fall or Spring semester and three courses in the other semester.
2. Non-tenure track (term contract) is a 4-4 annual teaching load with four courses each semester.

10.F. Unit Administration, Faculty and Staff Support

Unit Administration, Faculty and Staff Support						
YEAR	NEW		EXISTING		TOTAL	
	Headcount	FTE	Headcount	FTE	Headcount	FTE
Administration						
2016-17	1	1	0	0	1	1
2017-18	0	0	1	1	1	1
2018-19	0	0	1	1	1	1
2019-20	0	0	1	1	1	1
2020-21	0	0	1	1	1	1
Faculty						
2016-17	3	3.0	1	0.2	4	3.2
2017-18	2	2.0	4	3.2	6	5.2
2018-19	1	.25	6	5.2	7	5.45
2019-20	0	0	7	5.45	7	5.45
2020-21	0	0	7	5.45	7	5.45
Staff						
2016-17	2	2.0	0	0	2	2.0
2017-18	0	0	2	2.0	2	2.0
2018-19	0	0	2	2.0	2	2.0
2019-20	0	0	2	2.0	2	2.0
2020-21	0	0	2	2.0	2	2.0

11. Physical Plant

11.A. Existing Plant

The Rogers Library described below will offer services to the PA program.

Academic resources other than the library will be offered in a new building described below proposed to be completed in Spring 2016. Other existing plant available to students include the Smith University Center that contains a gymnasium, racquetball courts, indoor pool and lounge areas for recreational use, an outdoor pool, and a student health center.

11.B. Future Plans

A new academic building has been approved for construction in downtown Florence. The 50,000 sq. ft. Medical and Health Science Complex will house the PA program along with the current FMU Nurse Practitioner program, FMU Clinical Psychology program and the USC 3rd and 4th year medical students. It will have offices for all faculty and administrative staff, 5 classrooms including a 150 seat auditorium, labs for anatomy and diagnostic testing and 2 skills laboratories. There will also be 5 patient examination rooms and a simulation hospital shared with the Nurse Practitioner program. Space will also be provided for lockers for each student and a student lounge. There will be 10 small group seminar rooms shared between the programs in the new facility and 2 computer labs with printing and copying equipment

12. Equipment

The new building in the downtown Florence area will contain a simulation hospital equipped with in-patient and out-patient simulation rooms, task trainers, virtual simulation, and patient conferencing rooms. Separate simulation rooms will be built for trauma, adult health simulations, pediatric simulations, and women's health simulations. All rooms will be equipped with audio/visual capabilities.

Examination equipment will include thermometers, blood pressure cuffs, intravenous pumps, otoscopes, ophthalmoscopes, reflex hammers, bladder scanner, and ultrasound machine. Each bay will accommodate an examination table.

Major laboratory equipment will be microscopes, autoclaves, an incubator, general centrifuges, microhematocrit centrifuge and refrigerator along with models for the anatomy lab.

13. Library Resources

13.A. Built in 1971 and expanded in 1988, the 77,000 square foot James A. Rogers library houses a collection of over 412,000 volumes and over 676 current subscriptions to periodicals, and provides access to 34,000 e-journals, over 150,000 e-books, and 107 electronic databases. Included in this collection, is a print collection of 7,430 volumes of books. Also included are 8,337 e-journal and e-book titles listed under the subject of Medicine and Health Sciences. In 32 of these titles, the subject exactly matches the heading "Physicians and Medical Personnel".

Rogers Library currently has access to the following serial titles:

Journal of Anatomy 1916-present (1 year embargo)

Annals of Anatomy 1995-present

Journal of the American Medical Association (JAMA) 1961-69, 1981-2011

Journal of the American Academy of Physician Assistants (JAAPA) 2005-2013

The Lancet 1991-present

Journal of Physician Assistant Education: the Official Journal of the Physician Assistant Education Association 2006-present

International Journal of Clinical Pharmacy 1997-present

Journal of Pharmacy Practice and Research 2008-present

Journal of Clinical Pharmacy and Therapeutics 1998-present (1 year embargo)

American Journal of Health-System Pharmacy 2002-present
Pharmaceutical Research 1997-present
Pharmacology and Therapeutics 1995-present
Advances in Pharmacology 2011-present
Clinical Pharmacology: Advances and Applications 2009-present
British Journal of Pharmacology 1974-present (1 year embargo)
European Journal of Pharmacology 1995-present
Cancer Chemotherapy and Pharmacology 1997-present

13.B. To support the Physicians Assistant program the institution would need to provide current print subscriptions to the following resources :

Serial Titles:

Journal of American Physicians and Surgeons	\$137
New England Journal of Medicine	\$3520
Journal of the American Academy of Physician Assistants	\$523
Journal of the American Medical Association (JAMA)	\$2223

Databases:

Access Medicine	\$9,238.00
Clinical Pharmacology	\$8,416.00
DynaMed	\$4,410.00
JAMAevidence via McGraw Hill (Full Text)	\$1,978.00
PubMed	\$4,325.00

13.C. Through PASCAL partnerships and individual subscriptions, the library provides access to an extensive collection of electronic resources including MEDLINE, PsycINFO, PsycARTICLES, CINAHL Plus with full text, SciFinder Scholar, STAT!Ref and Science Direct. From the list in section A, the following titles are provided through PASCAL:

Journal of the American Academy of Physician Assistants (JAAPA) 2005-2013
Journal of Physician Assistant Education: the Official Journal of the Physician Assistant Education Association 2006-present
Journal of Pharmacy Practice and Research 2008-present
Journal of Clinical Pharmacy and Therapeutics 1998-present (1 year embargo)
American Journal of Health-System Pharmacy 2002-present
Advances in Pharmacology 2011-present
Clinical Pharmacology: Advances and Applications 2009-present
British Journal of Pharmacology 1974-present (1 year embargo)
European Journal of Pharmacology 1995-present

14. Accreditation, Approval, Licensure, or Certification

14.A. Professional Accreditation

Physician Assistant programs are accredited nationally by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA). FMU has already applied to ARC-PA for provisional accreditation, which is the first stage of the process.

Timeline for accreditation:

March 2015	Feasibility study to ARC-PA
September 2015	ARC-PA Formal Application
October 22-23	Site visit
March 2016	ARC-PA commission meeting to review FMU application

March 2016 was the earliest FMU could get on a commission meeting agenda and this determined the timeline for accreditation.

14.B. Certifications and Licensure

The National Commission on Certification of Physician Assistants (NCCPA) is the organization that administers the Physician Assistant National Certifying Exam (PANCE). Only students graduating from programs accredited by ARC-PA are qualified to sit for PANCE. The curriculum and practice standards set by ARC-PA are in place to provide programs that produce students who are prepared for licensure. Individuals who successfully complete PANCE can use the initials PA-C (Physician Assistant-Certified) after their names.

15. Articulation

15.A. N/A

15.B. N/A

15.C.

A Master of Science in Physician Assistant Studies is a terminal degree.

15.D.

There is no formal collaboration with other state institutions requiring MOUs. Attached at the end are MOUs or agreements with Carolinas Hospital System, a 420 bed hospital in Florence, McLeod Health, a regional healthcare organization which has 851 beds in a number of hospitals in the Pee Dee and HopeHealth, a healthcare provider which includes 9 community health centers in the Pee Dee, for provision of clinical rotation sites for students.

15. E. N/A

15/ F. N/A

16. Estimated Cost

16.A. Table D - Costs to the Institution and Sources of Financing

ESTIMATED COSTS BY YEAR						
CATEGORY	1st	2nd	3rd	4th	5th	TOTALS
Program Administration	154,000	157,080	160,222	163,426	166,695	801,423
Faculty Salaries	381,000	623,220	655,684	668,798	682,174	3,010,876
Graduate Assist.	-	-	-	-	-	-
Clerical/Support Personnel	78,000	79,560	81,151	82,774	84,430	405,915
Supplies and Materials	40,000	60,000	70,000	70,000	70,000	310,000
Library Resources	37,000	38,850	40,793	42,832	44,973	204,448
Equipment	400,000	150,000	0	100,000	0	650,000

Facilities	-	-	-	-	-	-
Other (Identify) Accreditation and Clinical Preceptors	10,000	163,600	240,400	240,400	240,400	894,800
TOTALS	1,100,000	1,272,310	1,248,250	1,368,230	1,288,672	6,277,462
SOURCES OF FINANCING BY YEAR						
Tuition Funding	711,360	1,451,174	1,726,898	1,761,436	1,796,665	7,447,533
Program-Sp Fees	-	-	-	-	-	-
State Funding	357,000	357,000	357,000	357,000	357,000	1,785,000
Reallocation	-	-	-	-	-	-
Federal Funding	-	-	-	-	-	-
Other Funding	-	-	-	-	-	-
TOTALS	1,068,360	1,808,174	2,083,898	2,118,436	2,153,665	9,232,533

16.B. Statement about Assumptions of Table D.

All salaries have been calculated with 34% fringes and 2% increase each year. Tuition is based on \$7,123, the current fulltime instate rate per semester for our MSN/Nurse Practitioner program with an increase of 2% annually.

Personnel Budget:

Along with the Program Director, Medical Director and teaching faculty there will be 2 staff members working as administrative assistants.

Equipment and Materials: New equipment will be required for this program. The 4 largest items are programmable model patients at approximately \$112,000 for SimMan, \$66,000 for SimMom, \$48,314 for SimJunior and \$63,000 for SimBaby to be purchased in year 1 and year 2. Other equipment include microscopes, centrifuges, EKG, ultrasound, incubator, microhematocrit centrifuge, autoclave and lab refrigerator, otoscopes, ophthalmoscopes, and many smaller lab essentials. The anatomy lab will have multiple copies of model human bodies and skeletons. A computer lab will be available to students in the new facility. Funds in the 4th year will be used to update the simulation models and computer labs.

Library: Journal and databases costs increase at 5% per year.

Facilities: FMU has attained approval and secured funding to build a new Medical and Health Sciences Building in downtown Florence close to 2 major hospitals. This building is forecast to be completed in spring 2016 and will also house the FMU Family Nurse Practitioner program, the FMU Clinical Psychology program and the 3rd and 4th year medical students from USC School of Medicine.

Other: This category includes training and compensation for clinical preceptors and continuing accreditation expenses.

16.C. Statement about State Appropriations

Francis Marion appreciates the endorsement and support shown for this program by the South Carolina General Assembly with a recurring appropriation of \$357,000 to defray costs. The General Assembly has recognized that the FMU PA program is an important workforce development initiative with enormous potential benefits for the Pee Dee region and the state of South Carolina. The costs for this program involve, as already noted, the hiring of a PA program director, the hiring of PA faculty members, and other direct and indirect costs before any student tuition is received. The support provided by the General Assembly will help Francis Marion move ahead during the next two years with the implementation of this program and support its continued success.

16.D. Sustainability

Once the program is established tuition will be the principal source of funding along with the recurring appropriation from the state.

17. References

1. Francis Marion University (FMU), *Catalog 2013-2014*. Florence, SC. FMU.
2. *Healthy People 2020*. Accessed at <http://www.healthypeople.gov/2020/default.aspx>.
3. HRSA (U.S. Department of Health and Human Services Health Resource Services Administration Bureau of Health Professions Division of Nursing). *Nurse Practitioner Primary Care Competencies in Specialty Areas: Adult, Family, Gerontological, Pediatric, and Women's Health*. (2002). Washington, DC: Us Department of Health and Human Services.
4. Bureau of Labor Statistics, *Occupational Outlook Handbook, 2014*. Accessed at <http://www.bls.gov/ooh/>
5. South Carolina Health Professions Data Book, 2014, SC Budget and Control Board

A Memorandum of Understanding Between

Francis Marion University and Carolinas Hospital System

The purpose of this agreement is to establish an understanding between Francis Marion University (FMU) and Carolinas Hospital System (CHS) to provide sites for Physician Assistant (PA) students clinical experiences.

FMU responsibilities

FMU will operate the Master of Physician Assistant Studies in accordance with the standards of the ARC-PA, the national accreditation commission for PA programs.

Only students who have successfully completed the didactic part of the MS in Physician Assistant Studies program will be authorized to begin the clinical experiences referred to in this agreement.

FMU and the FMU students will comply with all terms and conditions in the Student Affiliation Agreement.

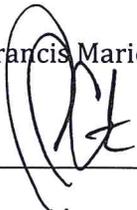
CHS responsibilities

Under this agreement CHS agrees to accept up to 16 FMU Physician Assistant students per year in 4-week clinical rotations beginning in January 2018. The rotations required by ARC-PA include Family Medicine, Obstetrics and Gynecology, Pediatrics, Psychiatry, Emergency Medicine, Internal Medicine – Inpatient, Internal Medicine – Outpatient, General Surgery as well as one elective rotation.

Enactment:

This agreement takes effect upon signature of the parties below and will continue unless cancelled in writing by either party or amended by mutual agreement.

Francis Marion University



4/17/14

Date

Carolinas Hospital System



4/16/14

Date

A Memorandum of Understanding Between
Francis Marion University
and
HopeHealth

The purpose of this agreement is to establish an understanding between Francis Marion University (FMU) and HopeHealth to provide sites for Physician Assistant (PA) students' clinical experiences.

FMU responsibilities

FMU will operate the Master of Physician Assistant Studies program in accordance with the standards of the ARC-PA, the national accreditation commission for PA programs.

Only students who have successfully completed the didactic part of the MS in Physician Assistant Studies program will be authorized to begin the clinical experiences referred to in this agreement.

FMU and the FMU students will comply with all terms and conditions in the Student Affiliation Agreement.

HopeHealth responsibilities

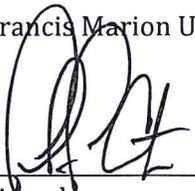
Under this agreement HopeHealth agrees to accept up to 15 FMU Physician Assistant students per year in 4-week clinical rotations beginning in January 2018. The relevant rotations available at HopeHealth and required by ARC-PA include Family Medicine, Pediatrics, Psychiatry, and Internal Medicine – Outpatient.

Enactment:

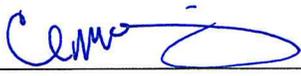
This agreement takes effect upon signature of the parties below and will continue unless cancelled in writing by either party or amended by mutual agreement.

Francis Marion University

HopeHealth



Signed



Signed

Luther F. Carter

Print Name

Carl M. Humphries

Print Name

5/01/2014

Date

05/01/2014

Date

McLeod Health

The Choice for Medical Excellence

May 13, 2014

Dr. Peter King, Associate Provost
Francis Marion University
Post Office Box 100547
Florence, SC 29502

Dear Dr. King:

McLeod Regional Medical Center of the Pee Dee, Inc. and the Pee Dee Area Health Education Center is (“MRMC/Pee Dee AHEC”) pleased to submit this correspondence as part of your efforts to obtain approval from the South Carolina Commission on Higher Education for a Master of Physician Assistant Studies Program at Francis Marion University. MRMC/ Pee Dee AHEC have been involved in the training of health profession students for several decades.

To that end we anticipate being able to provide certain assistance to Francis Marion University following your receipt of the required ARC-PA accreditation. This breadth of this support shall be subject to the availability of resources as well as the execution of certain agreements that will further define the scope of the relationship between the parties. This assistance, which is subject to change, may include the following:

1. As resources may be identified, assist with the placement of Physician Assistant Students (“PA Students”) for clinical experiences. These experiences may include the areas of Family Medicine, Obstetrics and Gynecology, Pediatrics, Psychiatry, Emergency Medicine, Internal Medicine – Inpatient, Internal Medicine – Outpatient, and General Surgery.
2. Subject to the availability of qualified and adequate resources, MRMC/Pee Dee AHEC may be available to assist with the placement of a pre-negotiated number of PA Students throughout the Pee Dee AHEC service area. Pee Dee AHEC shall be notified at least twelve (12) months in advance of the anticipated commencement date of such PA Students. At that time Pee Dee AHEC shall inform Francis Marion University of its ability and level of capacity to provide such assistance.
3. In the event placement cannot be secured through the aforementioned resources, Francis Marion University with the reasonable assistance of Pee Dee AHEC shall coordinate placements through other AHEC Regional Offices.

We are pleased to offer support related to the accreditation of the Francis Marion University Physician Assistant Studies Program in an effort to expand and enhance the provision of quality medical care throughout the Pee Dee Region.

Sincerely,



Robert L. Colones, Chief Executive Officer

555 East Cheves Street • P.O. Box 100551 • Florence, SC 29502-0551 • Phone (843) 777-2000 • www.mcleodhealth.org

*McLeod Regional Medical Center • McLeod Darlington • McLeod Dillon • McLeod Loris • McLeod Seacoast
McLeod Behavioral Health Services • McLeod Physician Associates • McLeod Family Medicine Center*