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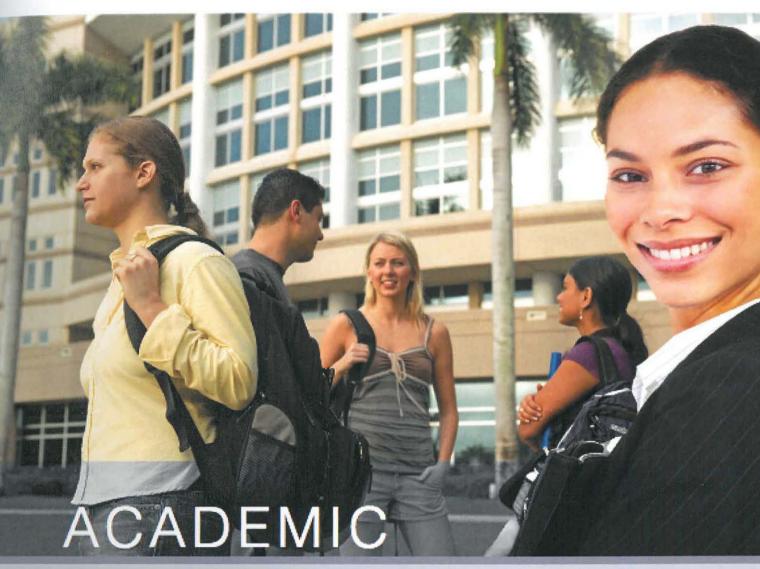
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NOVA SOUTHEASTERN UNIVERSITY



REVIEW

Academic Review Reports, Health Science, D.H.Sc. 2007-2008



Memorandum

TO:

Ray Ferraro, Jr.

President

FROM:

Richard E. Davis, PA-C, Ed.D.

Dean, College of Allied Health and Nursing

RE:

Action Plan For: Health Science, DHSc

Date:

February 26, 2009

CC:

Frank De Piano, University Provost/Vice President for Academic Affairs

Joe Grohman, Academic Review Committee Chairperson

Meline Kevorkian, Executive Director of Academic Review

The following is an action plan addressing the points of emphasis raised by the President in his letter requesting this action plan and selected ARC recommendations. The President's Points of Emphasis are highlighted in bold. At the appropriate location(s), this plan includes ARC activities, time lines, and resource allocations that will serve to illustrate how these recommendations and points of emphasis will be actualized.

Introduction:

This project is the culmination of a formal process of the Review of the Major for the Doctor of Health Science Program (DHSc). Starting in 2006, the DHSc program director and faculty actively participated in the Assessment of Student Learning Outcomes Project, the Internal Review Committee analysis and report, an External Consultant visit, analysis and report, and a final report by the Academic Review Committee. These activities culminated in a meeting between the Dean of the College of Allied Health and Nursing and the President of the University. This action plan is the result of the communications occurring at that meeting, the official reports from the various committees referenced above, and the request for an Action Plan with Presidential Points of Emphasis initiated by President Ferraro in January, 2009. The faculty and administration of the DHSc wish to take this opportunity to thank the University through its various committees and processes for facilitating our participation in this formative and summative process which brought substantial, welcomed opportunities for reflection, progress, and growth.

that appropriate levels of achievement were specified for undergraduate, graduate, and doctoral level graduate students. The curriculum changes were codified over time and resulted in new learning objectives, which were finalized in 2006 for the doctoral program, and were first presented to the University for review as part of the ASLO process conducted in 2006-2008.

Faculty were integrally involved in revising learning outcomes for individual courses and designing virtual "classroom" assessment techniques or rubrics that would ensure that students successfully completing the courses had met these learning outcomes. Learning outcomes for each class were then related to the set of programmatic learning objectives that will be presented here.

Results of current review in tabular format:

Graduate Competencies

Five Domains of DHSc Graduate Competence

- 1. Specific Core Professional Knowledge
- 2. Advanced Written, Oral, and Non-Verbal Communication Skills
- 3. Quality Improvement, Teaching, and Applied Research
- 4. Knowledge of and Productive Interaction with health care delivery systems
- 5. Professionalism

SPECIFIC CORE PROFESSIONAL KNOWLEDGE

COMPETENC	COURSES WHERE	SPECIFIC	HOW COMPETENCY
Y	COMPETENCY	ASSIGNMENTS	IS DIRECTLY
OBJECTIVE	ACHIEVED	WHICH	MEASURED AND
		DEMONSTRATE	DOCUMENTED
		COMPETENCY	
a. Students	 All online and 	1. All courses, the	1. Transcript
will	mixed modality	on-line	evidence of
demonstrate	courses (entire	orientation and all	course
the ability to	curriculum)	assignments	completion.
sustain	2. On-line	involve the	Pass=80%
involvement	orientation	utilization of	
and progress in	3. Professionalism	distance	2. Administrative
their	and Healthcare	educational	verification of
core	Ethics OR The	resources.	the completion

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COMPETENC	COURSES WHEI	RE SPECIFIC	HOW COMPETENCY
Y	COMPETENCY	ASSIGNMENTS	IS DIRECTLY
OBJECTIVE	ACHIEVED	WHICH	MEASURED AND
		DEMONSTRATE	DOCUMENTED
		COMPETENCY	
a. Students	 All online 	and 1. All courses, the	1. Transcript
will	mixed mod	dality on-line	evidence of
demonstrate	courses (er	ntire orientation and al	l course
the ability to	curriculum	assignments	completion.
sustain	2. On-line	involve the	Pass=80%
involvement	orientation	utilization of	
and progress in	Profession	alism distance	2. Administrative
their	and Health	care educational	verification of
core	Ethics OR	The resources.	the completion

d th fa w m	rofessional isciplines arough close amiliarity with the new modalities of
lee de co	fe-long earning and emonstrate ontinuing evalidation, e-certification, nd continuing rofessional ompetence in neir core iscipline.

Influence of
Ethics and
Culture on
Global Health
(one of these two
courses is
required for Core
Block I)

- 2. On-going exposure to the identification and appropriate evaluation of "just in time" learning resources enhances life-long learning and maintenance of professional competence.
- 3. "Professionalism and Healthcare Ethics" (DHS 8040) identifies and emphasizes this as an appropriate professional duty, as does the Influence of Ethics and Culture on Global Health (8045).
- of the on-line orientation documents competency in on-line information retrieval and library data bank based knowledge acquisition.
- 3. A professional and personal review, conducted as a part of the doctoral analysis and maintained in the program database. records the maintenance and progression of professional competence and documents continuous professional development by the listing of measurable outcomes and achievements related to professional growth.
- 4. Outcomes and achievements are directly measured by means of a rubric to derive

b. Students	Evidence based modical practice	1. Major Paper, Evidence Based	a calculation denoting individual progress and to enable the Program Director to quantify the mean progress of the cohort of program completers on a 4 point scale. 1. Transcript Evidence of
will demonstrate the ability to critically evaluate new developments in their specific professional fields	medical practice 2. Internship, Practicum, and Independent Study Courses	Medical Practice, and submission for publication. This is an evidence-based systematic review of a clinical question applicable to the student's core professional discipline. 2. Review of the Literature for Internship and Practicum 3. Documentation Papers for Independent Study A and B	Course Completion at 80% 2. Recording of Measurable Achievements of Evidence Based Medical Practice, Internship, Practicum and Independent Study Courses in the student- authored Doctoral Analysis, which is retained in the program Data Base. These are directly assessed by means of a rubric to derive a calculation denoting individual progress and to enable the Program Director to

c. Students will exhibit the ability to integrate health promotion, disease prevention, and community, environmental, and occupational health activities as	 Community Health Promotion and Disease Prevention (8030). Community, Environmental and Occupational Health(8110) (One of the Above Courses is required in Core Block One) 	Completion of Final project in either 8030 or 8110, which emphasizes application of health science and public health principles to the community or occupational environment.	quantify the individual and mean progress of the cohort of program completers on a 4 point scale. Transcript documentation of course completion Pass=80%. Final grades in these two courses are directly measured through the use of a rubric applied to the major course
environmental, and occupational health	Courses is required	environment.	measured through the use of a rubric applied to the
core professional disciplines and their specific practice populations.			*

ADVANCED WRITTEN, ORAL, AND NON-VERBAL COMMUNICATION SKILLS

a. Students will demonstrate the ability to work	 Conflict Resolution (8080) Leadership (8170) 	Classroom exercises Major	Instructor Mediated Classroom
together collaboratively in a learning community, resolving conflict,	Both courses are required and include a 20 hour intense residential component.	Course Assignmen t	Assessment Techniques 2. Instructor Evaluation of Major Course
conducting interpersonal and group	component.		Assignment at 80%. Major course

78.78	Ţ		
negotiations, and			assignments are
demonstrating			directly measured
advanced	1		through a rubric
leadership skills			mechanism
b. Students will	Required:	Major Course	1. Instructor
demonstrate the	o Practicum (8140)	deliverable for	Evaluation and
ability to produce	 Doctoral Analysis 	8140, 8120, 8130;	course completion
detailed,	(8120)	Major Course	at the 80% level.
sophisticated	o Internship (8130),	Deliverable and	2. Major course
research,	Statistics	weekly	assignments for
evaluative, and	 Research Methods 	assignments for	these courses are
descriptive	(8010)	8010	directly measured
reports of various	Electives		through the use of
types.	 Independent Study 		a rubric.
1360 F9.	A and B		
	(8200/8250),		
	 Medical Writing 		
	(8180),		
	 Grant Writing 		
	(8300)		
c. Students will	 Medical Writing 	Major Course	1. Transcript
submit an original	(8180),	Deliverable for	completion of
work for	o Evidence-Based	either of these two	8180 or 9006
consideration of	Medical Practice	courses, where	AND/OR
publication in a	(9006)	submission is	2. documentation of
peer-reviewed	(2333)	required, or a	paper submission
journal or		submission of a	with required
equivalent		major course	supporting
medium.		deliverable for	documentation in
mediani.		another required	8120.
		or elective course	0120.
d. Students will	o Diverse and	Completion of	1. Transcript
be capable of	Special Special	Major Course	Completion of
identifying	Populations (8000),	Assignment in one	course at the level
gender, cultural,	o Global Health	of the designated	of Pass/80%).
ethical, or other	Issues (8400),	courses.	2. Major course
differences in	Global	courses.	
our diverse			assignment is
- Service Control of the Service Control	Epidemiology		directly measured
society and	(8810),		by use of a rubric.
adapting their	o Global Health		
practice	Policy (8095),		
environment,	o The Influence of		
professional	Ethics and Culture		
actions and	on Global Health		
communications	(8045),		
style to best meet	o Professionalism		

the healthcare	and Healthcare	
needs of these	Ethics (8040).	
groups.		

QUALITY IMPROVEMENT, TEACHING, AND APPLIED RESEARCH

(Students will accomplish at least four sub-objectives from the following table)

a.	Perform quality	o Patient Safety	Completion of Major	1. Transcript
com and	audit and patient	(8750)	Course Deliverable	Evidence of
	safety activities		in 8750	Completion of
	(root cause analysis) using			Objective 3 can be
	appropriate			documented by
	methodologies,		N	successful
	identify system			completion at the
	based factors			80% level of two
The second	leading to			core block II courses,
	medical error,			and Statistics and
The same	implement			Research Methods.
18 1 11	quality control	je 11		
	systems that automatically			2. Major course
	reduce potential			deliverables are
	for harm			directly assessed
14 2				through the use of a
				standardized rubric to
		2		ensure that the
1.				student has met at
				least four sub-
				objectives.
b.	Identify and	o Evidence Based	Completion of Major	1. Transcript
	utilize the best	Medical Practice	course deliverable in	Documentation of
	scientific and clinical evidence	(9006)	9006 or 8010	Successful
	in the delivery of	Statistics and		Completion at the
	professional	A 12 occies de cici il a		80% level of
	services	Research Methods		successful
		(8010)		completion of 8010
				and/or 9006.
				2. Major course
				deliverables are

				directly assessed by the application of a standardized rubric.
C.	Recognize and utilize within the context of their professional practice appropriate clinical, cultural and demographic information about their own population of patients or clients and the larger community, including those populations that utilize alternative or complementary approaches to medical care.	 Diverse and Special Populations (8000) Global Epidemiology (8810) Alternative and Complementary Medicine (8100) The Influence of Ethics and Culture on Global Health (8045) Community, Environmental and Occupational Health (8110) 	Completion of major course deliverables in 8000, 8810, 8100, 8045, or 8110	1. Transcript Evidence of completion of 3c will be documented by successful transcript completion of any of the listed courses at the 80% level. 2. Major course deliverables are directly assessed through the use of a standardized rubric.
d.	Apply sophisticated knowledge of research design, biostatistics, and epidemiology to the literature of their core discipline	 Global Epidemiology (8810), Statistics and Research Methods (8010) Evidence Based Medical Practice (9006) 	Completion of Major Course Deliverables of 8810, 8010, and/or 9006	1. Transcript Documentation of Completion of one of at least one of the following at the 80% level: 8810, 8010 (required course) or 9006. 2. Major course deliverables are directly assessed by the application of a standardized rubric.
e.	Appropriately	o Medical	Completion of Major	1. Transcript

choose and utilize information technology to support patient care decisions, medical information management, and the delivery of clinical services	Informatics (8800) O Patient Safety (8750)	course Deliverables for 8800/8750	Documentation of Successful course completion at the 80% level of DHS 8800/8750. 2. Major course deliverables are directly assessed through the application of a standardized rubric.
f. Effectively train and educate new health professionals, patients, and consumers using a variety of appropriate educational methodologies and knowledge of learning styles and differences.	 ○ Health Care Education (8190) AND/OR ○ Internship (8130) as a TA. 	Successful Completion of major course deliverable of 8190 Successful completion of 8130 as a teaching assistant in a Department of Health Science Course or an external course reviewed by the Internship Instructor.	1. Transcript Documentation of Successful Completion at the 80% level of 8190. 2. Successful acceptance of a proposal and a major course deliverable as documented in the WebCT archive for a teaching experience of at least 80 hours in duration during DHS 8130. These deliverables are directly assessed through the application of a standardized rubric.
g. Knowledge sufficient to effectively precept and mentor student health professionals in the clinical	o Health Care Education (8190)	Successful completion of all major course deliverables for 8190.	1. Transcript documentation of successful completion of DHS 8190 at the 80% level.

environment	2. Major course
1	deliverables for 8190
	are directly assessed
	through the use of
	standardized rubrics.

KNOWLEDGE OF AND PRODUCTIVE INTERACTION WITH HEALTHCARE DELIVERY SYSTEMS

a. Identify the essential characteristics, advantages, and disadvantages of the current funding and payment systems for both the international and US healthcare.	 Health Policy, Global Health Issues, Global Health Policy, Comparative nternational Health Systems 	Completion of major course deliverable at the 80% level of four out of the seven courses listed in this section.	1. Meeting these objectives can be demonstrated by transcript documentation of successful completion at the 80% level of four of the seven courses listed in this section, including at least one health policy course, one global health course, one health ethics course, and either Evidence-based Medical Practice or Global Health Issues or Global Epidemiology. 2. Major course deliverables are directly assessed through the use of standardized rubrics.
b. Be familiar with the concepts of cost- effective, evidence- based health care and just	 Global health Issues, Evidence-based medical practice, Global Health Policy, 	See above	See above

resource allocation	 Health Policy, Global Epidemiology, Professionalism and Healthcare Ethics, The Impact of Ethics and Culture on Global Health Care 		
c. Assist in the evolution of health care delivery systems that optimally address individual and population health issues while accommodating for financial constraints and resource allocation issues.	 Global Health Issues, Evidence-based medical practice, Global Health Policy, Health Policy, Global Epidemiology, Professionalism and Healthcare Ethics, 	See above	See above
	 The Impact of Ethics and Culture on Global Healthcare 		

PROFESSIONALISM

a. Students will	o Health	Completion of major	1. Transcript
demonstrate a broad	Policy;	course deliverables	Documentation of
understanding of	o Global		Completion of one
health care law and	Health Policy,		health policy course,
governmental	0		one health ethics
regulatory bodies as	Professionalism and		course, at the 80%
they pertain to the	Health Care Ethics;		level.
practice of health	o The Impact of	<	2. Major course

professions.	Ethics and Culture on Global Healthcare; O Health Care Law (one health policy and one health ethics course is required).		deliverables are directly assessed by standardized rubrics.
b. Students will demonstrate in-depth knowledge and understanding of health-care ethics, including beneficence, nonmalificence, patient autonomy, futile care, informed consent, confidentiality, truthtelling, and ethical business practice.	 Professionalism and Healthcare Ethics, The Impact of Ethics and Culture on Global Healthcare 	Major course deliverables in either 8040 or 8045.	1. Transcript Documentation of Successful Completion at the 80% level of either 8040 or 8045. 2. Major course deliverables, including content of discussion board postings, are directly assessed through the application of standardized rubrics.
c. Students will demonstrate and model professional behavior in the online and residential learning situation, in their employment situation, and in the context of internships or independent learning experiences.	 Summer Institute, All On-line courses Internship, Independent Study A & B 	Classroom and Advisor Assessment Techniques; mentor evaluation in the internship, instructor evaluation during Independent Study A and B.	1. Transcript Documentation of Successful Completion of Internship and Summer Institutes at the 80% level. 2. Professional behaviors will be directly measured by instructors through the use of a standardized rubric embedded within the Conflict Resolution and Leadership courses. 3. Evidence of good professional character as evidenced by either no remedial encounters with academic progress

	committee, academic
	honesty committee, or
	successful
	remediation of
	academic or
	professional
-	probation.

Future plans for direct assessment and measurement:

As discussed, the competencies have already been evaluated. Differing modalities of direct assessment have been created and applied over the past 12-18 months to validate the reliability and utility of measurements. Differing rubrics applied to major course deliverables are either currently being utilized, under revision, or under development.

Plans for Dissemination of programs's competencies and mission:

- a. Web site
 - The public website of the program (nova.edu/dhs) will be revised to include the mission of the program and the anticipated graduate competencies. It is theorized that the results of direct measurement rubrics would not really be interpretable by prospective students. Therefore, direct measurements of anticipated outcomes (alumni profiles with achievements and lists of alumni publications) will be included on the web site.
- b. Faculty handbook
 - Currently, evaluation of course and syllabus objectives for adherence to anticipated graduate competencies is retrospective, i.e., after the faculty has authored the syllabus. A faculty handbook specifying graduate competencies and giving examples of rubrics for the direct measurement of competencies within major course deliverables is under development.
- c. Publications: The official brochure and HPD catalog will be revised to contain the graduate competencies and mission.
- d. Notification of Other Stakeholders
 - The competencies and mission will be disseminated to students through the NSU Intranet WEBCT Student Center. Alumni will be notified through the group functions of SHARKLINK. The Alumni Association is in the process of setting up a website under this umbrella. Prior to the initiation of this new site, the listsery of alumni will be utilized for dissemination as well.

Timeline:

The development and revision of rubrics for faculty to directly measure achievement of graduate competencies during various courses, through analysis of major course deliverables, and through the analysis of capstone projects at the end of the program by the program director, is an ongoing project and part of faculty scholarly activity and continuous program improvement. Web site revision, revised official publications, and the faculty handbook will be available at the end of 2009 or early 2010, depending on the schedule of the Publications Office.

Resources needed and their allocations:

- a. Resource Allocation
- b. Internal (college)
- c. External (university)

Since this project has been ongoing for some time, no new physical, personnel or financial resource needs are anticipated. The College works closely with a web site developer, the HPD Office of Admissions (responsible for official publications) and OIT. Regular publication of these platforms with annual revision is an already budgeted expense.

2. Faculty Growth.

President's Point of Emphasis

Describe the actions you will take to ensure the highest quality faculty growth sufficient for the future growth of this program. Include a plan to increase the number of faculty with doctoral degrees and who have demonstrated research experience.

Action to be Taken:

Directly anticipated action includes the recruitment of two new residential PhD faculty, one this year (FY 2010), one next year, (FY 2011). Approval for the first new faculty member has already been obtained. Achievement of this goal is highly linked to the development of the new PhD program, which will necessitate additional PhD faculty with demonstrated research experience. It is noted that all DHSc faculty already have doctoral degrees, although many of these faculty have professional doctorates (DHSc, DPM, MD, JD) and the faculty who have research oriented degrees with dissertations have primarily achieved Ed.D degrees that are roughly comparable in terms of dissertation rigor to Ph.Ds. It also should be noted that many faculty with professional doctorates also have research degrees at the master's level (MPH, MSc, MHS) or higher (Ed.S), or are in the process of obtaining PhDs in addition to their professional doctoral degrees. Several faculty have two professional doctoral degrees (MD/JD, etc.)

When the PhD program in health science receives final SACS approval, the Department of Health Science and its graduate students, including students in the DHSc, will obtain access to courses and faculty offered by the interdisciplinary Ph.D program housed within the Health Professions Division and their research expertise. This will cross-pollinate departmental faculty and substantially enhance student exposure to research and faculty devoted to research. Since the DHSc is a post-professional doctoral degree, however, it is anticipated that student research will be primarily applied and related to their core professional designation and employment characteristics and primarily conducted at a distance from NSU.

Timeline:

Two new PhD faculty will be recruited, one in FY 2010 (July 2009) and one in FY 2011 (July 2010). It is anticipated that the PhD in Health Science Program could receive approval as early as July 2009 from SACS, which would increase student access to faculty already in residence within the Health Professions Division at NSU.

Resource Allocation: The addition of two PhD faculty members is anticipated to add approximately \$200,000 in direct costs to the Department of Health Science.

Internal (college). This cost will largely be offset by increased tuition revenues gained over the next several years by the PhD program (see 3, infra)

External (university): during the initial set up and recruitment phase for the PhD program, the cost for additional PhD faculty might well result in reduced positive excess revenues generated by the Department that would normally revert and be reflected as a contribution to the University as a whole.

3. PhD Plan:

President's Point of Emphasis:

Provide a plan that includes faculty input, to explore benefits and need to offer a PhD program in Health Sciences. Identify resources, requirements, and expenditures necessary for such a program.

Action to be Taken: Submit, obtain approval for, and implement a Ph.D Program in Health Science as soon as possible.

Review of Progress to Date:

This has been recognized as a need by the Department for the past decade, since the initial approval process for the doctor of health science degree. A number of DHSc students work in traditional academic institutions that either require or favor the Ph.D or an equivalent research degree as a terminal benchmark for promotion and tenure. Although our graduates have been very successful in the publication of clinical review literature and applied research, further contributions and funding in basic research generally require the acquisition of skills and credibility within the framework of a Ph.D. NSU Health Science graduates with Ph.Ds would increase the research contributions of the department and the University as a whole.

Over the course of the past seven years, various stakeholders within the Department and the University have been engaged in the on-going process of initiating and revising drafts and submissions of proposal for a PhD in Health Science (see attached document). This proposal was indeed formally approved by the New Program Review Process at NSU in 2003. Indeed, prior to 2004, it was thought that this proposal had actually gained SACS approval, since under the procedure at the time, the proposal had been submitted to SACS and had not been rejected. However, when the University sought to institute the program in July of 2005, it was determined that the proposal had fallen by the wayside at the regional accrediting body and had not actually received formal approval as a substantive change. At that point in time, the proposal was retrieved and intense internal review and scrutiny was directed to a planning process for additional faculty needed to ensure the academic rigor of the program, particularly the integrity of the dissertation process. Internal reviews conducted by Dr. Cheneil's office and other university stakeholders have guided the department towards the final draft of the attached proposal for a PhD program (Appendix I)which includes physical resources (88-98) and expenditures (p. 99) necessary for such a program.

Faculty development has been substantially leveraged by the institution of an interdisciplinary PhD tract within the Health Professions Division and the College of Allied Health and Nursing. Within the College, and over the past five years, faculty were retained to support the PhD programs in Nursing, Occupational Therapy, and Physical Therapy. Within the health professions division, Ph.D and other research-oriented faculty have been recruited to the Colleges of Medicine, Dentistry, Optometry, and Pharmacy. Interest in an interdisciplinary track of Ph.D courses existed within all of those departments, and an HPD-wide consortium of faculty and administrators brought these core courses into being within the past three years. The existence of these interdisciplinary courses, Ph.D level faculty, students were all necessary to support the existence of a sufficient faculty base to support Ph.D level study in Health Science for our students. (See Appendix I, Faculty Roster, pp. 27-87)

Timeline:

The most recent proposal iteration and faculty roster have been tentatively approved by Dr. Chenail's office for submission to the appropriate SACS personnel. It is anticipated that the program could start as early as July 2009; however, a more likely initiation date would be January, 2010. Since we already have a relatively large cohort of students who have completed the Health Science (DHSc) core and who have expressed interest in a more research oriented degree, it is likely that the initial cadre of Ph.D students would support the program during its growth phase, especially since the research core interdisciplinary Ph.D level courses already exist.

Resource Allocation

Internal (college): Since we already have a relatively large cohort of students who have completed the Health Science (DHSc) core and who have expressed interest in a more research oriented degree, it is likely that the initial cadre of Ph.D students could provide immediate and sufficient tuition support for additional faculty personal and resources.

External (university): External support has already been extended by Dr. Chenail's office and other university stakeholders involved in the New Program Review process. The attached proposal (Appendix I), discusses in detail on pages 27 through 99 personnel, physical resource, and financial projections for this degree.

- 4. Additional Plans for analysis, review, or implementation of suggestions by the external consultant, internal review committee, and Academic Review Committee NOT specifically addressed by a President's Point of Emphasis:
 - a. Maintenance and dissemination of alumni profiles and accomplishments,

This is a project initiated in 2008 by the Program Director and college web site master that is ongoing. Synopses of alumni profiles and accomplished are now listed on our public program webpage and are updated as necessary. An alumni data base consisting of external email addresses is now maintained by the Alumni Association's Secretary, Dr. Maureen O'Hara, who is also an adjunct faculty member, which facilitates data collection and analysis. Alumni accomplishments are also disseminated to the College through the College of Allied Health and Nursing listserve, and the University as a whole through the report to the Board of Trustees. A Department newsletter is utilized to disseminate these accomplishments to alumni and other stakeholders.

b. rubric implementation for doctoral analysis review by program director

This has been an ongoing project since 2007. A new section was required for the doctoral analysis, entitled "Measurable Accomplishments" and documentation for each accomplishment is required to be appended to the document, which is archived in our student center. A comprehensive rubric with a point total system is currently under development, which will enable the quantitative analysis and direct measurement of certain data sets by program administration.

c. rubric implementation for formal curriculum review by alumni.

This was a suggestion of the Internal Review Committee which is being forwarded to the Department Curriculum Committee for review and possible implementation. If and when a rubric is developed, it will be administered to alumni using the data set discussed under item a (supra).

d. list of alumni, student and faculty publications

There is a list of publications in the student center, but it is only visible to current students. Therefore, in late 2007, we began to utilize the faculty listserve to disseminate alumni, student and faculty publications, as well as a department newsletter. Ongoing reports are also made within the quarterly reports to the Board of Trustees.

e. publication of mission, vision, and core values

The DHSc Program has a mission statement that was devised by students at the 2003 Summer Institute with key faculty and administration stakeholder representation. It is currently disseminated to students on the NSU webCT Student Center intranet. It will be published on the public NSU website in the near future.

The vision and core value statements will be reviewed by student and alumni stakeholders during the 2009 Summer Institute in Orlando and during the Department of Health Science faculty retreat in August, 2009. Results will then be disseminated through the CAHN listsery, the Department Newsletter, the public web site, and the NSU intranet.

f. student participation in specific scholarship/original research with direct faculty mentoring

This is closely linked to the recruitment and retention of more Ph.D faculty inherent in the development of the Ph.D Program in Health Sciences. However, in addition, students working in two key DHSc courses, Medical Writing and Evidence-Based Medical Practice, work closely with faculty to produce a document, usually a clinical review, a clinical critically-assessed topic, or a clinical review meta-analysis, for submission for publication.

In addition, all doctoral students in the College of Allied Health and Nursing have been entered into the Student/Faculty Research Center within WebCT, so students can electronically collaborate with colleagues and faculty.

Specifically for the DHSc, a new non-credit no-cost course was initiated in 2008 and enrolls students every semester on a voluntary basis. The faculty member in charge, Dr. Maureen O'Hara, designed this course as a mentoring opportunity to assist students to develop ideas and a framework for their internship and practicum experiences, a portion of the capstone experience for the DHSc. Students get to work closely with Dr. O'Hara over the course of one or more semesters on developing research questions, completing the IRB process, acquiring research or internship mentors, and assembling or organizing internship experiences that will prepare them to achieve their goals and objectives concerning future scholarship, publication, or professional progression. Dr. O'Hara also meets individually in person with students annually at Summer Institute to review their progress.

g. additional curriculum focused on health care finance, economics and the business aspects of health care practices

This suggestion of the external consultant is under review by the curriculum committee. In the near future, after appropriate faculty discussion and administrative approval, it is anticipated that enrollment in the DHSc will be opened to non-clinicians involved in upper-level health care administration and management. Appropriate courses for these courses will need to be developed and faculty identified and recruited. Admissions requirements are also under development. Respected benchmark institutions offering doctoral degrees to this cohort have been identified (Central Michigan University and Medical University of South Carolina), and active exploration of a track in health care administration/management is under consideration at this time. Decision and implementation of admissions for this track are scheduled for Spring/Summer, 2009, with new upper level, core block II course development scheduled for Summer/Fall/ 2009 and Winter 2010.

h. implementation of a comprehensive examination

This has been extensively discussed with faculty, administration and program stakeholders. A preliminary decision was made to concentrate on more direct measurements and assessments of achievement within the currently capstone process, comprising the Practicum, Internship, and Doctoral Analysis courses. However, a comprehensive examination has been proposed and will be developed for the PhD Program, including many of the graduate competencies (but adding research competencies) described herein. Further study is warranted and scheduled.

Timelines: All of the above are ongoing.

Resource Allocation: All of the above are funded by current internal college resources.

Again, thank you for the opportunity to participate in this review process.

Appendix I

Proposal for a Doctor of Philosophy in Health Science

NOVA SOUTHEASTERN UNIVERSITY
HEALTH PROFESSIONS DIVISION

COLLEGE OF ALLIED HEALTH AND NURSING

3200 South University Drive, Fort Lauderdale, Florida 33328-2018

A Revised proposal for the implementation of the previously approved

DOCTOR OF PHILOSOPHY IN HEALTH SCIENCE

SUBMITTED TO:

Southern Association of Colleges and Schools Research and Planning NSU

New Program Review Committee for Update Purposes

SUBMITTED DATE

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ABSTRACT

Nova Southeastern University's College of Allied Health and Nursing has an opportunity to build on the Doctor of Health Science (D.H.Sc.) program and provide additional opportunities. Currently, the Doctor of Health Science (D.H.Sc.) is a very successful program within the College of Allied Health and Nursing and shows no sign of student reduction. In fact, admissions continue at a rate of 20 to 30 students per semester. In addition, the D.H.Sc. has graduated over 150 students since 2002. This proposal will describe the need to add a research arm to the D.H.Sc. in the form of a Doctor of Philosophy in Health Science. The opportunity before us is to offer another avenue for students requiring or desiring a doctoral degree in the health sciences field with an emphasis in research, while maintaining integrity of the D.H.Sc. degree.

Section A: BACKGROUND INFORMATION

This proposal describes the need to add a new degree program to the Department of Health Science, building upon the existing D.H.Sc., in the form of a Doctor of Philosophy in Health Science. The opportunity before us is to offer another avenue for students requiring or desiring a doctoral degree in the health sciences field with an emphasis in research.

This new degree supports the mission of Nova Southeastern University. The University's mission statement is stated as such:

Nova Southeastern University, a private, not-for-profit institution, offers a diverse array of innovative academic programs at the undergraduate, graduate and professional levels, complementing on-campus educational opportunities and resources with accessible distance learning programs, and fostering intellectual inquiry, leadership, and commitment to community thorough engagement of students and faculty in a dynamic, life-long learning environment.

Mirroring NSU's mission, the Ph.D. in Health Science will foster inquiry, research, and creative professional activity.

The proposed Ph.D. in Health Science fulfills the tenets of NSU's Vision of providing students with educational opportunities tailored to their needs, not bound by space or time, and putting a strong emphasis on an interdisciplinary approach to solve health care problems. The original research component of the Ph.D. exemplifies NSU's Vision of increasing knowledge and contributing to the community.

The Ph.D. was approved by the New Program Review Committee at NSU and will be submitted to SACS for review. There is currently no similar program offered at NSU, either on campus or through distance based technologies.

The proposed Ph.D. would be delivered at a distance through the web-based course management system WebCT and would include three face-to-face institutes, each one week in length. In

addition students will have an online student center, enabling them to regularly communicate with fellow students and dissertation advisers.

The proposed start date of the Ph.D. in Health Science is October 2009.

Section B: ASSESSMENT OF NEED AND PROGRAM PLANNING / APPROVAL

Student Demand

In an informal poll of the D.H.Sc. students currently in the program, 18 of 80 responding students stated that they would complete the Ph.D. requirements after the D.H.Sc. if given the opportunity, while several incoming students have stated that they were entering the D.H.Sc. program with the hopes that the Ph.D. would become a reality.

The addition of the Ph.D. has been requested by students to improve their grasp of biostatistics, grant development and independent research. Because many universities still require the Ph.D. for tenure or certain research activities, and due to the "name recognition of the Ph.D.," it is generally felt that 15% to 20% of the students entering the Department of Health Science will choose the Ph.D. track over the D.H.Sc., or a dual degree.

Brief History and Impact

The Doctor of Health Science (D.H.Sc.) started its first semester in April of 2002 with 20 students. Six years later the program has increased to approximately 250 students. The makeup of the student population is approximately 100 physician assistants, 75 nurses, and to a lesser extent, respiratory therapists, dental hygienists, social workers and public health professionals. Over the past 5 years, an interest on the part of the student body and faculty has focused on the Doctor of Philosophy (Ph.D.) with a strong research-based component to assist those with the desire or requirement to enter into academic or medical research. In fact, the D.H.Sc. is beginning to lose students to Ph.D. programs in Occupational Therapy, Physical Therapy, and Nursing.

Students began requesting that a Ph.D. be added to the department approximately 4 years ago. The proposal was approved by the NSU New Program Review Committee but was awaiting further faculty additions. With the upcoming planned addition of two Ph.D. faculty members in July 2009, the use of our interdisciplinary Ph.D. faculty in the college, and the use of the core Ph.D. courses and faculty from the NSU Health Professions Division, the initial program faculty expansion is sufficient to support this new program.

Academic Degree Descriptions

There are several descriptions of degree classifications in the education market today. These descriptions can create confusion and incorrect expectations resulting in less than optimal career

decisions. The following are descriptions of a few common degrees and relevant issues. This discussion is necessary as students and faculty members are broadening their definitions of goals and careers, and trying to understand the role of graduate education in preparation for:

- Research
- Scholarship
- Faculty positions
- Industrial positions
- Professional practice
- Other positions
- Life (see La Pidus, JB. Doctoral Education: Preparing for the Future. Washington DC: Council of Graduate Schools. September 1997.)

Doctor of Science, Doctor of Health Science, and Ph.D.

The Doctor of Science degree is a well-recognized degree in Europe and to a lesser degree in the United States (Boston University was one of the first institutions to award the D.Sc.). The D.Sc. is designed for professional specialty areas such as Dentistry, Pharmacology, and Physical Therapy. The D.Sc. degree's primary focus is on the practice of the profession. It tends to have depth and focus in the professional area such as physical therapy, but not the breadth one might see in a Ph.D. It is distinctive from and Ed.D. or Psy.D. in that it builds on the entry level education of a professional and the subsequent post entry level clinical experience. The D.H.Sc. at NSU was designed to specifically target master's level health professionals with the desire to achieve a doctoral degree without compromising their employment. The main impetus is to increase employability in a competitive job market. Most D.Sc. degrees are at or over 60 credits in length as is the NSU D.H.Sc.. Most have some significant terminal project such as a doctoral project or dissertation but less research (inquiry) credits than a Ph.D. or Ed.D. The D.H.Sc. at NSU uses an internship, practicum and a capstone called the Doctoral Analysis.

Depending on the focus of the institution (research vs. teaching), the D.Sc. or D.H.Sc. degree may or may not be accepted as equivalent to the Ph.D. or Ed.D.

Doctor of Philosophy (Ph.D.)

The Doctor of Philosophy degree is considered in many traditional circles to be the pinnacle of academic degrees. The purpose of the Ph.D. is to educate students to "create and analyze new knowledge" and to become scholars. The Ph.D. often has a residency requirement that requires a student to engage in full-time studies on campus for a portion of their program. Non-traditional institutions (such as technology based programs) often do not require this residency requirement. The NSU program requires a mix of residency, independent study and off-campus original research.

The emphasis of the Ph.D. is on designing, performing, analyzing, and writing original research. This degree is accepted at all academic institutions as the quintessential academic degree. The expectation is that the individual will generate original, funded research.

Current and Proposed

The D.H.Sc. is a post-professional online doctoral program designed for master's prepared health care professionals. The program was developed by health care educators and practitioners to provide advanced knowledge in health arts and sciences, and health care delivery systems. The Ph.D. will have a similar set of responsibilities and goals, but with the added aspect of a rigorous research core curriculum shared throughout the Health Professions Division, as well as a program specific research core which will further meet the needs of students and employers. One of the major reasons for adding the Ph.D. to the Department of Health Science is to meet the needs of a new set of employers and professionals in the health and research fields.

Faculty and the Involvement of Other Stakeholders

The Ph.D. in Health Science is truly an interdepartmental and interdisciplinary program, combining the efforts and resources of the whole Health Profession Division faculty and administration. The research core of the Ph.D. has been designed, developed and taught by HPD faculty and each of the courses in the DHS component of the degree were reviewed and approved by the department of health science curriculum review committee. This committee is composed of, and chaired by, faculty members who review and assess each new proposed course, syllabi course objectives, outcomes and overall design and delivery method. The curriculum of the proposed Ph.D., the role of the current faculty and planned implementation were discussed at length at the Health Science faculty retreat held on august 22 and 23, 2008.

Review of current Ph.D. offerings in Health Science

In a comprehensive search of the internet and colleges across the country, it was found that few programs exist in the United States which resembles the proposed Ph.D. in Health Science. The 3 programs that bear some similarities to the proposed program are Touro University, The University of Medicine and Dentistry of New Jersey, and University of Wisconsin-Milwaukee. Other programs similar in subject area include the University of Phoenix and Walden.

A brief overview of each program is given below, followed by a comparison with the proposed Ph.D. in Health Science.

Touro University International

Touro University International is an institution with a philosophy of learner supervised education. The learner develops the curriculum and direction with the assistance of a committee. Seminars are offered for the students to attend and to meet their requirements. It is our

understanding that the program has been sold and its future is unknown. Be this as it may, the program is described below.

From the Touro Web Site

The Doctor of Philosophy in Health Sciences prepares professionals from health and health related fields as leaders, educators, researchers and scholars. Students select either the educator/researcher or practitioner option in the International Health or Health Care Administration option. All students will develop scholarly abilities and research activities directed toward the creation of new knowledge, original application and/or transmission of existing knowledge, demonstrated by a Ph.D. dissertation.

Students who earn this degree are qualified to enter top level academic health care executive positions.

The Doctor of Philosophy in Health Sciences degree consists of 44 semester course credits. Following the completion of the course work students must register for the DHS700 series (eight credits) every session until the dissertation is completed. The time needed to complete the dissertation depends on the individual student.

The curriculum has three components:

- 1. Core Courses: Students from various health professions come together to pursue knowledge and research skills that underpin all doctoral study.
- 2. Option Courses: Either educator/researcher for current or future college professors or practitioner for health care practitioners in the various health disciplines, or Health Administration for future health executives.
- 3. Dissertation: Students demonstrate a synthesis of their doctoral study, knowledge and scholarship toward the resolution of an actual problem or need within their selected discipline.

The coursework in the doctoral program may be completed in six sessions. This is when students take a full load of eight credits (two courses) each session. All courses are valued at four semester credits. The final courses that are taken are DHS652 - Research Seminar and DEL 699 - Dissertation Seminar.

University of Medicine Dentistry of New Jersey

The UMDNJ School of Health Related Professions PhD in Health Science is a 60 hour program designed to prepare "practicing health care professionals to assume leadership roles in the research, academic and/or clinical settings."

The program puts a strong emphasis on independent studies and directed research, only 1/3 of the required credits are required courses. The rest of the credits are tailored to the individual student under faculty advisement. They offer several options to earn credits, such as portfolio assessments, credit by examination or transfers from other universities.

Most of the courses are offered online and the dissertation research can be conducted off campus. The only required residency is a 2 day on campus seminar (including a scholarly presentation from the student) and the dissertation defense. The main admission requirements are a master's degree with an overall GPA of 3.0 or above, having taken the GREs and a copy of license or professional certification as a health professional if applicable.

There is no competency exam prior to entering the dissertation phase.

University of Wisconsin- Milwaukee

From the program website

"The Ph.D. program requires 72 credits beyond the Bachelor's degree, including no more than 36 credits from a related master's degree and/or other post-baccalaureate coursework. A student must complete a minimum of 36 credits at UWM including dissertation credits. Precise numbers of credits and actual course requirements will be determined after review of the applicant's previous coursework. The student plans an individual program of study in consultation with the Major Professor and Doctoral Committee that will include a set of core courses, an area of concentration, cross-disciplinary courses, electives, and the dissertation."

There are 16 credits of core courses (Philosophical Foundations of Health Research, Multivariate Analysis in the Health Sciences, Advanced Graduate Seminar, Teaching, Learning & Educational Leadership in the Health Sciences, and a statistical analysis, qualitative analysis, or research methods course approved by the student's Major Professor). The area of concentration comprises 9 credits. There are 6 credits of interdisciplinary courses and another 6 of electives. The dissertation is worth 12 credits.

Doctoral Preliminary exams are required after completion of the coursework and prior to being allowed to continue with the dissertation.

At least half of all coursework must be done in a residential manner. No information is available on the website as to what the other options may be.

University of Phoenix

The University of Phoenix offers a Ph.D. in Health Administration. It is not the focus of the proposed Ph.D. in Health Science program at NSU. The Ph.D. at NSU will focus on the

practitioner and researcher with the desire to master the skills necessary to conduct research for the development of new knowledge in their fields.

Walden University

The Ph.D. in Public Health Services program focuses on seeking solutions to significant public health problems, and applying and integrating new knowledge into public health research and practice settings. The curriculum is focused on community health, including medical, social, political, ethical and economic factors that contribute to an overall well-being of a public health.

Institution	Program	credits	focus	Delivery method
Touro	Ph.D.	44	Health Science	online
UMDNJ	Ph.D.	60	Health Sciences with specializations including Nutrition Clinical Laboratory Sciences Interdisciplinary studies	2 days are mandatory
University of Wisconsin	Ph.D	72	Health Science	½ residential
University of Phoenix	Ph.D.	62	Health Administration	online
Walden	Ph.D.	134	Public Health Services Community Health	20 days residency
NSU	Ph.D.	71	Health Science	Online with three residential institutes

Analysis

As mentioned above, the degrees offered by the University of Phoenix and Walden University have a different focus than the proposed Ph.D. in Health Science.

The UMDNJ, the UW-Milwaukee and the NSU Ph.D.s have the same basic requirements for admission. However, the curricula, residency and evaluation processes differ substantially.

The UMDNJ program is 60 credits, while the proposed Ph.D. is 71 credits (above a master's degree). In addition, many of the UMDNJ credits can be from transfer credits or independent study. The NSU Ph.D. appears more rigorous with a defined curriculum and set of core and elective courses that will allow for a strong set of student outcomes in specific and standardized content areas. UMDNJ requires very minimal face to face contact; the NSU program will include three one-week on campus institutes. In addition the NSU program would require a comprehensive exam prior to entering the dissertation phase.

The UW- Milwaukee program follows closely the traditional model for Ph.Ds., and the residency requirements are more stringent. However even this traditional Ph.D. seems to allow for alternate modes of delivery stating that at least half of the credits need to be done in residence.

The proposed Ph.D. in Health Science distinguishes itself in that it provides the students with the best of both worlds; a sound curriculum, strong academic content, significant face to face contact (three one week institutes) and the flexibility of distance delivery.

Section C: DESCRIPTION OF CHANGE

The 71 credit, post master's curriculum for the Ph.D. in Health Science will include courses from the D.H.Sc. as well as courses specific to the Ph.D. The curriculum of the Ph.D. is differentiated by the research curriculum, comprehensive exam, dissertation, and oral defense, the additional institute on-campus, and a research practicum. Furthermore, all students must complete the required D.H.Sc. courses before starting the Ph.D. portion of the curriculum.

Graduates of the D.H.Sc. program who wish to obtain the Ph.D would have that opportunity. As graduates of the D.H.Sc., they would have completed the D.H.Sc. core courses included in the Ph.D. curriculum, one practicum and two summer institutes. In order to obtain the Ph.D. the student must complete an additional institute (winter institute), the HPD core research courses, an additional research practicum, the comprehensive exam, dissertation, and oral defense.

Ph.D. and D.H.Sc. Delineation

Traditionally, the training model for doctoral degrees has focused on the graduate student as scientist first and practitioner second. However, with the growing need in the health care field for doctoral level practitioners with critical thinking and assessment skills, many elected to return to higher education for a doctoral degree that was based on clinical practice. This was and is the purpose of the D.H.Sc.

Consequently, the D.H.Sc. was started in 2002 in response to practitioners requesting a degree that was clinically oriented. With the success of the D.H.Sc., the program has come full circle with requests that a Ph.D. be developed with a research orientation while maintaining the D.H.Sc. healthcare core, goals and objectives.

With this task at hand, the focus of the doctor of philosophy in health science is to educate and graduate research practitioners with the skills and knowledge to conduct research in a complex society and environment while focusing globally within the framework of health policy.

The Doctor of Philosophy in Health Science (Ph.D.) is designed to:

- Provide a means of Ph.D. completion for working health care professionals currently at the Masters Level.
- Increase opportunities for health practitioners to earn a terminal degree in the field of health science with a core focus in research.
- Prepare graduates to function both independently and interdependently within the clinical and non-clinical research environment.
- Prepare graduates for advanced development of new knowledge in their fields of expertise.

The learning outcomes for this degree program are specific to the individual course sections and are noted below.

Core Outcomes

At the completion of the healthcare core the student will:

1. Specific Core Professional Knowledge:

- Students will demonstrate the ability to critically evaluate new developments in their specific professional fields.
- Students will exhibit the ability to integrate health promotion, disease prevention, and community, environmental, and occupational health activities as appropriate in their core professional disciplines and their specific practice populations.

2. Advanced Written, Oral, and Non-Verbal Communication Skills:

- Students will demonstrate the ability to work together collaboratively in a learning community, resolving conflict, conducting interpersonal and group negotiations, and demonstrating advanced leadership skills.
- Students will demonstrate the ability to produce detailed, sophisticated research, evaluative, and descriptive reports of various types.
- Students will be capable of identifying gender, cultural, ethical, or other differences in our diverse society and adapting their practice environment, professional actions and communications to best meet the healthcare needs of these groups.

3. Quality Improvement, Teaching, and Applied Research

- Identify and utilize the best scientific and clinical evidence in the delivery of professional services.
- O Apply sophisticated knowledge of research design, biostatistics, and epidemiology to the literature of their core discipline.

4. Knowledge of and Productive Interaction with health care delivery systems

 Identify the essential characteristics, advantages, and disadvantages of the current funding and payment systems for both the international and US healthcare and assist in the evolution of healthcare delivery systems.

5. Professionalism and Ethics

- Students will demonstrate a broad understanding of health care law and governmental regulatory bodies as they pertain to the practice of health professions.
- Students will demonstrate in-depth knowledge and understanding of health-care ethics, including beneficence, nonmalificence, patient autonomy, futile care, informed consent, confidentiality, truth-telling, and ethical business practice.

6. Research Outcomes

- The student will master research and the concepts of critical appraisal and systematic review
- The student will develop clinical research models regarding disease and the spread of disease
- o The student will initiate the design and follow-up mechanisms for research in health care
- The student will demonstrate working knowledge of biostatistics, statistical models, theory construction, qualitative and quantitative analysis.
- o The student will describe the process of grant development and funding.
- The student will articulate the needs of global populations in terms of health, disease prevention and wellness.
- The student will analyze and make recommendations for global health policy initiatives and programs.

Learning Outcomes Matrix

Learning Outcome	Direct Assessment	Assessment Method
Students will demonstrate the ability to critically evaluate new developments in their specific professional fields	Comprehensive exam	A rubric will assess the students' ability to evaluate new developments in their specific fields. Inter rater reliability will further validate results as several faculty members will grade the comp exam.
Students will exhibit the ability to integrate health promotion, disease prevention, and community, environmental, and occupational health activities as appropriate in their core professional disciplines and their specific practice populations.	Comprehensive exam	A rubric will evaluate the students' ability to integrate health promotion, disease prevention, and community, environmental, and occupational health activities as appropriate in their core professional disciplines and their specific practice populations. Inter rater reliability will further validate results as several faculty members will grade the comp exam.
Students will demonstrate the ability to work together collaboratively in a learning community, resolving conflict, conducting interpersonal and group negotiations, and demonstrating advanced leadership skills.	Summer institute activities	A rubric will evaluate the level of participation and engagement of the student during the institute

Students will demonstrate the ability to produce detailed, sophisticated research, evaluative and descriptive reports of various types.	Dissertation Report and defense	Rubrics will evaluate the level of detail and sophistication of student's dissertation research. This will be measured in the final dissertation report and during the oral defense.
Students will be capable of identifying gender, cultural, ethical or other differences in our diverse society and adapting their practice environment professional actions and communications to best meet the healthcare needs of these groups.	Comprehensive Exam	A rubric will be designed to evaluate the student's ability to identify gender, cultural, or ethical differences in our diverse society and to evaluate their ability to adapt their practice and communications to meet the needs of these groups. Inter rater reliability will
		further validate results as several faculty members will grade the comp exam.
Students will identify and utilize the best scientific and clinical evidence in the delivery of professional services.	Dissertation Report and defense	A rubric will be designed to evaluate the student's ability to identify and utilize scientific and clinical evidence in the delivery of professional services. This will be measured in the final dissertation report and during the oral defense.
Apply sophisticated knowledge of research design, biostatistics, and epidemiology to the literature of their core discipline.	Dissertation report and defense	A rubric will be designed to evaluate the student's ability to apply knowledge of research design, biostatistics and epidemiology to the literature of their core discipline in the dissertation report and during the oral

		defense.
Identify the essential characteristics, advantages, and disadvantages of the current funding and payment systems for both the international and US healthcare and assist in the evolution of healthcare delivery systems.	Comprehensive exam	A rubric will evaluate the student's mastery of the characteristics, advantages and disadvantages of the current funding and payment systems for the international and national healthcare. It will evaluate the student's ability to assist in the evolution of healthcare delivery systems. Inter rater reliability will further validate results as several faculty members will grade the comp exam.
Students will demonstrate a broad understanding of healthcare law and governmental regulatory bodies as they pertain to the practice of health professions.	Comprehensive exam	A rubric will evaluate the student's understanding of healthcare law and governmental regulatory body as they pertain to the practice of health professions. Inter rater reliability will further validate results as several faculty members will grade the comp exam.
Students will demonstrate in depth knowledge and understanding of healthcare ethics including beneficence, non maleficence, patient autonomy, futile care, informed consent, confidentiality, truth telling and ethical business practice.	Comprehensive exam	A rubric will evaluate the student's knowledge of healthcare ethics and key ethical principles as they pertain to the practice of health professions. Inter rater reliability will further validate results as several faculty members will grade the comp exam.
Students will master research	Dissertation report and	A rubric will evaluate the

and the concepts of critical appraisal and systematic review	defense	student's mastery of research and of the concepts of critical appraisal and systematic review in the students dissertation report, and during the oral defense of the dissertation.
Students will develop clinical research models regarding disease and the spread of disease	Comprehensive exam	A rubric will evaluate the student's ability to develop clinical research models regarding disease and the spread of disease. Inter rater reliability will further validate results as several faculty members will grade the comp exam.
Students will initiate the design and follow up mechanisms for research in health care.	Dissertation report and defense	A rubric will evaluate the student's ability to design healthcare research and follow up mechanisms. This will be measured in the final dissertation report and during the oral defense.
Students will demonstrate working knowledge of biostatistics, statistical models, theory construction, qualitative and quantitative analysis.	Dissertation report and defense	A rubric will evaluate the student's ability to develop clinical research models regarding disease and the spread of disease. This will be measured in the final dissertation report and during the oral defense.
Students will describe the process of grant development and funding	Comprehensive exam	A rubric will evaluate the students' ability to describe the process of grant development and funding. Inter rater reliability will

		further validate results as several faculty members will grade the comp exam.
Students will articulate the needs of global populations in terms of health, disease prevention and wellness	Comprehensive exam	A rubric will evaluate the students' ability to articulate the needs of global populations in terms of health, disease prevention and wellness. Inter rater reliability will further validate results as several faculty members will grade the comp exam.
Students will analyze and make recommendations for global health policy initiatives and programs.	Comprehensive exam	A rubric will evaluate the students' ability to analyze and make recommendations for global health policy initiative and programs. Inter rater reliability will further validate results as several faculty members will grade the comp exam.

Admissions

The Ph.D. Program will admit health care professionals with diverse graduate education, professional level health care work history, and life experiences, who have demonstrated capacity to pursue a rigorous course of graduate study and increasingly responsible positions in health care. Prospective Ph.D. students are selected by considering the overall qualities of the applicant through application content, academic record, prior health care experience, letters of evaluation, and personal motivation.

In special circumstances, a personal interview may be required. All applicants must hold a master's degree from a regionally accredited college or university prior to matriculation in to the program.

Applicants must have a cumulative masters GPA of 3.0 or better on a 4.0 scale.

Prior health care or health research experience is required for admission. Applicants must submit verifiable documentation regarding this experience to the Office of Admissions. Applicants must also be licensed, certified or registered in a healthcare field.

Transfer credits:

Students matriculated in the Ph.D. program may petition for transfer of credits to the program. Up to and not to exceed eight credit hours may be considered for transfer from a regionally accredited doctoral program of study and only if the transferred courses meet the goals and objectives of the course in question.

Graduation Requirements

The requirements for graduation are as follows:

- 1. Successful completion of all core and research courses as well as required electives.
- 2. Must complete a minimum of 71 semester hours of prescribed course work in the program.
- 3. Must successfully pass the comprehensive exam after completion of all courses
- 4. Must successfully complete the research practicum
- 5. Successful completion of a dissertation based on original research in an area of the student's expertise or concentration as approved by the program chair, and dissertation committee.
- 6. Successful dissertation defense as determined by the dissertation committee.

Statements of Expected Outcomes

- It is expected that 70% of retained students will complete the doctoral program within 6 years of matriculation
- It is furthermore expected the 30% of retained students will complete the program within 4 years of matriculation
- Attrition is expected to be at 10% to 20% of matriculating students based on the history of the D.H.Sc. It is likely that most have dropped based on and unrealistic expectations of the ease of an online program. Most students leaving the D.H.Sc., which is comparable in rigor to the proposed Ph.D., find that the course work is more time consuming than they expected of an online degree. It has been found that those who enter the Doctor of Health Science with appropriate expectations of the work load have excelled in the program.
- It is expected that at least 80% of those completing the degree will find advancement in their fields given the fact that several in the D.H.Sc. have been promoted within the military, academia and others in their current professions.
- It is anticipated that personal satisfaction will be measurable, with at least 50% becoming more involved in the education of future health care professionals or finding more advanced roles in clinical and classroom practitioner education.

General Core Courses (24 Semester Hours) (Shared between D.H.Sc. and Ph.D.)

Core Block One- Four of the following are required; either DHS 8090 or DHS 8095 will fulfill the Health Policy requirement.

DHS 8000 Professional Competencies in the Clinical Care of Diverse and Special

Populations (4 credits)

DHS 8030 Community Health Promotion and Disease Prevention (4 credits)

DHS 8090 Health Policy, Planning and Management (4 credits)

Or

DHS 8095 Global Health Policy (4 credits)

DHS 8110 Community, Environmental and Occupational Health (4 credits)

Core Block Two: Two of the following courses are required

DHS 8800 Health Care Informatics (4 credits)

DHS 8810 Global Epidemiology (4 credits)

DHS 8400 Global Health Issues (4 credits)

DHS 8750 Patient Safety (4 credits)

Institute Courses (12 Credits) (A total of 60 hours of classroom instruction and 36 weeks online. 2 Courses shared between D.H.Sc. and Ph.D. 3 Institutes Required for Ph.D. Students)

DHS 8080 Conflict Resolution in Healthcare (4 credits)

DHS 8170 Leadership in Healthcare (4 credits)

HSP 9006 Evidence-Based Medical Practice (4 credits)

HPD Research Core (18 Credits)

HPH 7200 Ethics (3 credits)

HPH 7300 Biostatistics I (3 credits)

HPH 7310 Biostatistics II (3 credits)

HPH 7400 Research Design (3 credits)

HPH 7410 Qualitative Research Design (3 credits)

HPH 7600 Grant Writing (3 credits)

Or

HPH 7700 Philosophy of Science (3 credits)

Health Science Research Core (5 Credits)

HSP 9007 Research Practicum (5 credits)

<u>Comprehensive Exam</u> (no credits. Required for promotion to the Dissertation phase)

The comprehensive exam will be administered during the on-campus institutes, only after students have completed all courses, and before they start the dissertation process. It will assess the students' integrative and analytical skills with regard to the core doctoral curriculum courses.

A panel of four faculty members (chosen among the faculty listed on the faculty roster in this proposal) will be assigned to review and grade the exams.

Dissertation (12 credits)

Dissertation Preparation Seminar, Proposal, Dissertation and Oral Defense (12 credits). The oral defense can be done at the summer or winter institute, or on the main campus. This must be arranged at least 45 days in advance.

Course Descriptions

DHS 8000 Professional Competencies in the Clinical Care of Diverse and Special Populations

This course includes a discussion and analysis of the impact of ethnic and cultural issues on healthcare delivery systems. An in depth analysis of the barriers faced by healthcare providers when presented with a diverse ethnic population is presented. Critical analysis of the different cultural perceptions of disease and treatment is given, and the need for developing a cultural sensitivity is explored. The student is expected to gain knowledge of cultural differences and the need to respect the background of the patient when formulating treatment plans. The student will

be required to research a chosen topic on a diverse population and their impact on the healthcare system. Chat sessions and discussion boards are a required portion of this course.

DHS 8030 Community Health Promotion and Disease Prevention

This course develops the knowledge and skills needed to work with communities to improve health status of the community. Major topics will include health promotion and disease prevention. Special emphasis will be placed on the "Healthy People 2010" initiatives. Students will be required to complete a paper of at least 20 pages based on an intervention strategy from "Healthy People 2010". The paper will include an introduction, review of the literature, discussion, and conclusion in chapter form. Discussion boards are a required part of this course.

DHS 8090 Health Policy, Planning, and Management

This course critically examines the dynamics of healthcare in the U.S. The student is expected to analyze the healthcare industry and contrast non-profit and for-profit healthcare delivery systems. A critical exploration of the ramifications of healthcare reform and the impact on institutions and individuals will be undertaken. The concepts of cost containment, and long-term care will be analyzed. The student will be expected to write a paper on healthcare reform and managed care that is at least 10 pages in length and provides an informed opinion on future directions of health care reform. The paper should address the question as to what new directions managed care may go in and what the future of health care reform is.

DHS 8095 Global Health Policy

Globalization affects all sectors including health care and understanding the key policy issues is essential in the study of global health. This course examines the health policy issues confronting international health organizations, financial institutions, governments and specific populations. It reviews the processes that influence the development and implementation of policies, and examines specific topics related to HIV/AIDS, conflict, infectious disease, smoking, and concerns of food distribution, reproductive health/safety and other global major health concerns. On a weekly basis, the student will evaluate information that is available through a variety of internet sites and reference materials to develop a short 3-5 page paper that demonstrates an understanding of the topic. Each student will also complete two health policy analysis papers (8-10 pages each) and participate in weekly discussions based on current policy issues.

DHS 8110 Community Environmental and Occupational Health

Issues such as air and water quality and waste management will be examined. OSHA will be examined and analyzed for its impact on health and health care. Trends in environmental and occupational health legislation will be examined for their impact potential. Students will participate by contacting one of their senators or House of Representatives member for an environmental statement, and then write a critical analysis.

DHS 8400 Global Health Issues

Global healthcare is an emerging priority for health professional education programs and clinical

practice. It is essential for all healthcare professionals to understand the impact of global health issues on health care and international economic stability. This course explores the many facets of global health to expose the student to the complexity of the concepts that impact healthcare in developing and developed countries. On a weekly basis, the student will evaluate information that is available through a variety of internet sites and develop a short 3-5 page paper that demonstrates an understanding of the topic. Each student will complete a course paper (20-25 pages) on an international health topic of their choice that includes an analysis of related policy, relevant statistical data, summary of programs and a thorough discussion of issues.

DHS 8750 Patient Safety

Leadership plays a key role in adopting practices to promote patient safety, and leaders should have the skills necessary to be effective in the implementation of these practices. This course will focus on patient safety through a study of safety- oriented leadership, organizational culture, human factors, decision-making science, communication, and a systems approach to health care delivery. Current best practice models and the latest professional literature emphasizing patient safety will be featured.

HSP 9006 Evidence Based Medical Practice

This course provides a working knowledge of evidence-based medicine. Cases will be used as the backbone of this course to assist the student in analyzing data to justify the treatments used in clinical practice. Students will also learn to critically appraise the literature, evaluate diagnostic test performance, design clinical pathways and standard of care, and implement evidenced based medicine findings in their own clinical or administrative setting.

DHS 8800 Healthcare Informatics

The application of computers and technology in health care has become increasingly critical to patient care over the past two decades. There is no area of health care that does not rely on this discipline to some extent. This course explores the field of informatics and technology in health care. Emphasis will be placed on applications that directly impact health care delivery. Through assigned readings, a research paper, a special demonstration project, discussion board postings and group chat sessions; the learner will be expected to demonstrate a broad knowledge of health care informatics and technology applications and educational needs, as well as present their own experiences. Participants will use knowledge gained to evaluate technology and create business case analyses to propose to their organization.

DHS 8810 Global Epidemiology

This course emphasizes the underlying concepts of the epidemiologic approach as it relates to pertinent global health issues. The student will be introduced to principles and methods of epidemiologic research. These include study designs, measures of frequency. Association,

impact and sources of error. Application to global health and public health strategies for disease prevention, surveillance and control are discussed.

DHS 8080 Conflict Resolution in Healthcare

This course examines and analyzes the nature and dynamics of human conflict within civil societies. Emphasis is placed upon conflicts within and among governments and public sector agencies and between the health provider, patients and medical institutions. Students will be expected to take an active role in the course and develop their own strategies for dealing with conflict. A paper will be required that details and analyzes a conflict situation in the student's work or other environment and how the conflict was resolved.

DHS 8170 Leadership in Healthcare

This course explores the various methods of leadership and management, both in and out of healthcare, and their impact on productivity, profitability and employee satisfaction. Critical analysis of the different types of leadership and management theories is given and the need for developing a leadership plan is explored. The student is expected to gain knowledge of the various types of leaders and systems and will be required to research and develop a paper on a specific leadership theory.

HPH 7200 Ethics (3 credit hours)

Health care professionals are required to act morally and ethically. This course is designed to expand the student's basic understanding of ethics to promote ethical awareness and enable students to derive better health care decisions that reduce risk of potential ethical consequence. By exposing students to bioethics and controversial ethical issues typically encountered in current health care practice, students practice making difficult decisions. Students will synthesize and implement strategies for applying morals, values and ethics systematically in the various settings in which health care is delivered. Considering the perspectives of all stakeholders and the role of the healthcare provider, patient advocate, professional and consumer of medical care, students will gain workable knowledge of contemporary ethical issues and appreciate that ethics permeate the majority of decisions made in health care.

HPH 7300 Biostatistics I

The application of quantitative techniques has expanded rapidly in medical decision-making. The emphasis on evidence based healthcare means that health care workers must be able to evaluate the results from published health care research studies. This course is the first of two courses designed to provide students with the knowledge of quantitative techniques. The course will cover descriptive statistics, parametric group comparison statistics, basic non-parametric statistics, and provide an introduction to linear modeling.

HPH 7310 Biostatistics II

The aim of this course is to enable students to appreciate the richness of statistical science and to invite them to the concept of probabilistic thinking. Statistics is the science of the future. Any technique that they are going to learn will help them to understand the unknown better, and in turn it will increase their success in other courses and in future professional careers.

Principles of statistical inference build upon the course Fundamentals of Biostatistics. As such, a prerequisite for enrolling in this course is satisfactory completion of Fundamentals of Biostatistics. The goals of this course are threefold: (1) introduce the basic concepts of probability as well as methods for calculating the probability of an event, (2) assist students in developing an understanding of probability theory and sampling distributions, and (3) familiarize students about inferences involving one or two populations, ANOVA, regression analysis, and chi-square tests.

HPH 7400 Research Design

The course will provide students with a basic understanding of the basic methods and approaches used in health care research. A major emphasis of the course will be on the conceptualization and design of research studies. The course will cover ethics, formulation of research questions, study design, reliability, validity, sampling, measurement, and interpretation of research findings. It will prepare students to critically evaluate published literature, and to design sound research studies. The course will be both theoretical and applied. Students will be challenged to apply the theoretical concepts presented in the classroom and in the readings to design a study to address a health related issue of their choice.

HPH 7410 Qualitative Research Design

This course will focus primarily on the knowledge and skill competencies needed to conduct qualitative research successfully. In this pursuit students will immerse themselves in the epistemological, theoretical, ethical, methodological, and procedural understanding of qualitative research, apply this knowledge to the conceptualization and conduct of qualitative research, report the findings of the research in the form of a research article, and appraise the quality of such qualitative research products. Upon completion of the course students will demonstrate that they have mastered the basic competencies needed to create, plan, and complete a qualitative research dissertation.

HPH 7600 Grant Writing and Publication

This course enables the students to gain an in-depth understanding of the essential components of a well-written research proposal which addressees an identified scientific problem and the process for submitting the proposal to an agency/organization requesting funding support to study the problem. Students will become familiar with a number of funding sources, including federal and state government and private foundations and corporations that support vision or dental research projects and learn to use a variety of resources to target potential funding sources.

Also, they will become familiar with various grant-related terminology, as well as guidelines and rules and regulations of awarding agencies, with particular focus on the National Institutes of Health (NIH) organization.

HPH 7700 Philosophy of Science

This course covers schools of thoughts in philosophy of science. To address the need of laying the foundation for the generation and expansion of new professional knowledge that will guide evidence-based practice for the health professions, this course also covers topics on the acceptance of theories in the scientific community and epistemology of applied scientific inquiry. This course is designed to allow PhD students in the health professions to gain appreciation for the philosophical underpinnings of unity in science, to be able to apply philosophical frameworks and epistemological paradigms in their future research, and to eventually become a creative researcher in his or her area of practice

HSP 9007 Research Practicum

Research Practicum 1 requires students to conduct a research activity under faculty member supervision. Objectives include ability to critically review literature, to abstract salient points from literature and present them cogently, to summarize conceptual and methodological issues in the literature, to formulate a research problem derived from the literature, to derive research hypotheses from research questions, to develop a research methodology, to test stated hypotheses, to implement research methodology, to analyze and interpret data, and to write research in APA style.

Guidelines for Dissertation

PH.D. Dissertation Seminar (included in the overall 12 credits for dissertation, completed within the first month of dissertation registration, delivery is web-based).

The content of the dissertation seminar focuses on formulating research questions and writing the concept paper and later on the proposal. The committee chair and member roles are discussed as well as the IRB process.

<u>Chairperson</u> - With input from the program director, the student must select a dissertation committee chairperson with approval from the Department Chair for Health Science prior to initiating the dissertation proposal process. This occurs following successful completion of the Comprehensive Exam, a non-credit measurement of the student's preparedness for undertaking the project. The dissertation committee chairperson shall hold an earned doctorate of philosophy (Ph.D.) in health science or a related discipline, and a faculty appointment at NSU. This individual possesses expertise in the student's area of interest. The chairperson will act as the student's primary advisor and advocate throughout the dissertation process. All communications with the committee should be directed through the committee chair unless otherwise specified by the committee chair.

<u>Dissertation Committee</u> - The dissertation committee will consist of three members, including the chairperson. All members must hold earned doctoral degrees, culminating in the completion of a formal dissertation and have expertise in the student's area of interest. Two committee members must be faculty from NSU. The list of committee members must be filed with the Department of Health Science at NSU.

Proposal Hearing - Upon completion of proposal for dissertation, the candidate will defend his/her proposal before the dissertation committee and department chair via teleconference or via Chat Room technology. The candidate must receive written approval of the proposal from the dissertation committee chair and the NSU Institutional Review Board before undertaking the research phase of the dissertation. Upon written approval, the candidate may progress in to the research and dissertation phase. The candidate will continue to register for Dissertation Advisement until the dissertation document has been fully approved and accepted by the Dissertation Committee and the document has been successfully defended in the open dissertation defense. The successfully completed dissertation is a 12 credit award.

<u>Dissertation Defense</u> - The candidate must submit to all committee members a completed dissertation four weeks prior to the scheduled oral defense of the dissertation. Students must submit the request for Dissertation Defense along with their dissertation document. University notification of the author, title, date and location of the defense will be made to College of Allied Health and Nursing faculty, students, and staff 2 weeks prior to the defense date. A dissertation will not be considered approved until all members of the committee are satisfied that all portions of the dissertation have been accomplished in accordance with the requirements for dissertation content as well as acknowledging a successful defense. Upon approval by the committee, the Chair for the Department of Health Science will review and approve the dissertation. Candidates must adhere to all dissertation guidelines as specified by the Department of Health Science Dissertation Guide.

The 12 credits for dissertation will be awarded upon completion of all dissertation requirements including successful defense. There will be no partial credit awarded for completion of the preparation seminar, concept paper or proposal.

Typical 3-4 year Curriculum- with student taking one or two courses per term.

	Winter	Spring	Summer	Fall
Year 1	DHS 8000	DHS 8030	DHS 8080 (SI)	DHS 8090
	DHS 8810	DHS 8110		DHS 8800
Year 2	HPH 7200	HSP 9007	HPH 7400	HPH 7300
			DHS 8170 (SI)	HPH 7600 or HPH 7700
Year 3	HPH 7310 HSP 9006 (WI)	HPH 7410	Comp exam	Dissertation process starts
Year 4	Dissertation	Dissertation	Dissertation	Dissertation

Planned Course Assignments

DHS 8000 Professional Competencies in the Clinical Care of Diverse and Special Populations	Dr Peter Holub
DHS 8030 Community Health Promotion and Disease Prevention	Dr Jodi Clark
DHS 8090 Health Policy, Planning and Management	Dr Christine Legler
DHS 8095 Global Health Policy	Dr Christine Legler
DHS 8110 Community, Environmental and Occupational Health	Dr Randy Danielsen

DHS 8800 Health Care Informatics	Dr Matthias Goldstein
DHS 8810 Global Epidemiology	Dr Jodi Clark
DHS 8400 Global Health Issues	Dr Christine Legler
DHS 8750 Patient Safety	Dr Caroline Chevalier
DHS 8080 Conflict Resolution in Healthcare	Dr Brianna Kent
DHS 8170 Leadership in Healthcare	Dr Matt Baker
HSP 9006 Evidence-Based Medical Practice	Dr Patricia Kelly
HPH 7400 Research Design	Dr Warren Jacob
HPH 7300 Biostatistics I	Dr Sarah Ransdell/ Dr Patrick Hardigan
HPH 7310 Biostatistics II	Dr Patrick Hardigan/ Dr Sarah Ransdell
HPH 7200 Ethics	Dr Leah Nof
HPH 7600 Grant Writing	TBD

HPH 7410 Qualitative Research Design	Dr Ron Chenail
HPH 7700 Philosophy of Science	TBD
HSP 9007 Research Practicum (5 credits)	Dr Guy Nehrenz
Comprehensive Exam	Panel of four faculty from above list
Dissertation	Dissertation advisor as assigned to student

Section D: FACULTY

Ph.D. in Health Science Faculty Roster Form

Qualifications of Full-Time and Part-Time Faculty

Note: The faculty for the Ph.D. will be the same as those for the D.H.Sc. with the exception of the HPD Research Core. This is possible because many of the courses will be shared by students from both programs. All Ed.D.s and Ph.Ds. were earned in research-based programs. Since the Ph.D. in health science is interdisciplinary in nature, and the faculty presented below represents a wide variety of health professions, the dissertation committee members and chairs will be assigned according to the student's research interest. The Chair of all dissertation committees will hold a Ph.D. in an area closely related to the student's topic of interest.

In addition, two full time faculty positions were created and at least one will be filled in 2009 for the start of the Ph.D. in Health Science. The qualifications for these two positions include holding a Ph.D., significant research experience, peer reviewed publications, experience with supervising student research and a background in healthcare.

Due again to the interdisciplinary nature of the degree, the faculty below is not exclusively assigned to the Ph.D. in health science, and will also teach in other programs such as the Doctor of Health Science, Ph.D. in occupational therapy, or Ph.D. in physical therapy. The full time (FT) notation denotes a faculty employed full time in the College of Allied Health and Nursing. The part time notation (PT) denotes an adjunct faculty.

1	2	3	4
Name	Courses Taught/ to be taught	Relevant Academic Degrees and Course Credits Earned	Other Qualifications
Baker Matt (PT)	Courses taught DHS 8170 Leadership in Health Care Courses to be taught DHS 8170 Leadership in Healthcare	Doctor of Health Science, 2007 Nova Southeastern University Master of Science, Gerontology, 1998 St Joseph University	Dean, School of Science and Health, Philadelphia University 20 years of military service and currently serves part-time as a lieutenant colonel in the Air National Guard. Has taught extensively in Physician Assistant Education Association's faculty development seminars including the Basic Faculty Skills Workshop, Enhanced Faculty Skills

			Workshop, and the Leadership
			Training Program for Program Directors.
			Served as a site visitor for the Accreditation Review Commission on Education for the Physician Assistant.
	,	X =	Completed the post doctoral leadership program: "Institute for Management and Leadership in Education" at Harvard University.
Chenail, Ron	Course to be taught	Ph.D., Family Therapy, 1989	Research, grant and contract experience:
	HPH 7410 Qualitative Research Design	Nova University, Ft. Lauderdale, FL	experience:
		M.Ed., Educational Psychology-Counseling, 1984 University of Houston, Houston, TX	2008 – Present: A Mixed-Methods Study Investigating How Returning Veterans Experience a Holistic Therapeutic Program NSU/CCB Quality of Life Faculty Community-Based Applied Research Grant 2008-2009; Proposal funded for \$10,000; Co-Principal Investigator / Project Director

2004 : U.S. Department of Human Services Administ Children and Families Office of Community Services FY 2004 Compassion Cap Targeted Capacity Building Review Chairperson Compassion Capital Target Review	ration for vices vital Fund ng Grant n for the
2004: Open Society Initiat Grant for Open Access Jon Proposal funded for \$2,25 Investigator/Project Direct	urnals 0; Principal
2003-2004: Broward County County Commissioners Vision Broward Facilitation Industry Analysis Proposal funded for \$100, Principal Investigator/Proposal	on and Targeted

	2000 Present a Arrest II IDM (Primint
	2000-Present eArmyU, IBM (Principle Contractor, previously
5	PriceWaterhouseCoopers); Contract
	funded for \$521,186 to date;
	Project Director
3	
А.	Editorial Responsibilites:
	1990-Present Editor, The Qualitative
	Report (http://www.nova.edu/ssss/QR/)
	2008-Present Editor, The Weekly
	Qualitative Report
	(http://www.nova.edu/ssss/QR/WQR)
	2005-Present Editor, Journal of Marital
	and Family Therapy
	Sample peer reviewed publications

	Chenail, R. J. (2008). Categorization. In L. M. Given (Ed.), <i>The SAGE</i> encyclopedia of qualitative research methods (Vol. 1, pp. 72-73). Thousand Oaks, CA: Sage.
	Chenail, R. J. (2008). Constructing children and children constructing: A review of researching children's experiences. <i>The Weekly Qualitative Report</i> , 1(12), 79-82. Retrieved from http://www.nova.edu/ssss/QR/WQR/freeman.pdf
	Chenail, R. J. (2008). Indigenous and emergent methodologies: A review of <i>Qualitative Urban Analysis: An International Perspective. The Weekly Qualitative Report</i> , 1(10), 67-70. Retrieved from http://www.nova.edu/ssss/QR/WQR/maginn1.pdf

_		Chenail, R. J. (2008). Institutional research. In L. M. Given (Ed.), <i>The SAGE encyclopedia of qualitative research methods</i> (Vol. 1, pp. 436-439). Thousand Oaks, CA: Sage.
		Chenail, R. J. (2008). Learning to appraise the quality of qualitative research articles: A contextualized learning object for constructing knowledge. <i>The Weekly Qualitative Report</i> , 1(9), 49-61. Retrieved from http://www.nova.edu/ssss/QR/WQR/appraising.pdf
	9	Chenail, R. J. (2008). Peer review. In L. M. Given (Ed.), <i>The SAGE</i> encyclopedia of qualitative research methods (Vol. 2, pp. 604-606). Thousand Oaks, CA: Sage.
	Sec. 1	Chenail, R. J. (2008). Qualitative researchers in the blogosphere: Using blogs as diaries and data. The Weekly Qualitative Report,

		I(11), 72-77. Retrieved from http://www.nova.edu/ssss/QR/WQR/blog.pdf
N N N N N N N N N N N N N N N N N N N		Chenail, R. J. (2008). The value of community in creating quality: A review of <i>The SAGE Encyclopedia</i> of Qualitative Research Methods. The Weekly Qualitative Report, 1(1), 2-6. Retrieved from http://www.nova.edu/ssss/QR/WQR/given.pdf
		Chenail, R. J. (2008). "To thine own context be true, but be careful": A review of H. L. Goodall, Jr.'s Writing Qualitative Inquiry: Self, Stories, and Academic Life. The Weekly Qualitative Report, 1(3), 14-18. Retrieved from http://www.nova.edu/ssss/QR/WQR/goodall.pdf
		Chenail, R. J. (2008). YouTube as a qualitative research asset:

	Reviewing user generated videos as learning resources. <i>The Weekly Qualitative Report</i> , 1(4), 18-24. Retrieved from http://www.nova.edu/ssss/QR/WQR/youtube.pdf
	Chenail, R. J., & Cronin, K. (2008). Editor's annual report. <i>Journal of Marital and Family Therapy</i> , 34(4), 515-518.
	Duffy, M., & Chenail, R. (2008). Values in qualitative and quantitative research. <i>Counseling and Values</i> , 53(3), 22-38.
	Chenail, R. J., St. George, S., & Wulff, D. (2008). The Qualitative Report. In L. M. Given (Ed.), The SAGE encyclopedia of qualitative research methods (Vol. 2, pp. 704-705). Thousand Oaks, CA: Sage.

	Chenail, J., & Chenail, R. (2008). Communicating qualitative analytical results following Grice's conversational maxims. Manuscript submitted for publication.
	Chenail, R., & Duffy, M. (2008). Utilizing Microsoft Office to produce and present recursive frame analysis findings. Manuscript submitted for publication.
	Chenail, R. J. (2009). Bringing method to the madness: Sandelowski and Barroso's <i>Handbook for Synthesizing Qualitative Research</i> . <i>The Weekly Qualitative Report</i> , 2(2), 8-12. Retrieved from http://www.nova.edu/ssss/QR/WQR/sandelowski.pdf
-	Chenail, R. J. (2009). Interviewing the investigator: Strategies for addressing instrumentation and researcher bias concerns in qualitative research. <i>The Weekly</i>

#	5	:	Qualitative Report, 2(3), 14-21. Retrieved from http://www.nova.edu/ssss/QR/WQ R/interviewing.pdf
			Chenail, R. (in press). Learning marriage and family therapy in the time of competencies. <i>Journal of Systemic Therapies</i> .
			Chenail, R. J. (in press). Preface: Becoming competent with competencies or what I have learned about learning. In D. Gehart, Mastering competencies in family therapy: Putting theory into practice using case conceptualization, clinical assessment, treatment planning, and case documentation. Florence, KY: Cengage: Brooks/Cole.
	5 Ve.		Chenail, R. J. (in press). Ten steps for conducting a clinical research study. In L. Metcalf (Ed.), A

practical approach to learning family therapy. Melbourne, Australia: Thomson Publishers.
Chenail, R. J., Somers, C. V., & Benjamin, J. D. (in press). A recursive frame qualitative analysis of MFT progress note tipping points. Contemporary Family Therapy.
Chenail, R. J., St. George, S., Wulff, D., Duffy, M., & Charlés, L. L. (in preparation). The Qualitative Report's guide to writing publishable qualitative research articles.
Qualitative research presentations
Allen, J., Chenail, R. J., & Ruckdeschel, R. (2009, February). Journal editors' perspectives on publishing qualitative research. Panel

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		presented at the Seventh St. Louis Qualitative Research Conference (QuaRC), St. Louis, MO.
		Weiss, A. D., & Chenail, R. J. (2008, October). Managing methodological choices in qualitative research metasynthesis. Paper presented at the 9th Advances in Qualitative Methods Conference 2008, Banff, Alberta, Canada.
		Chenail, R. J. (2008, October). Interviewing the investigator: Strategies for addressing instrumentation and researcher bias concerns in qualitative research. Paper presented at the 9th Advances in Qualitative Methods Conference 2008, Banff, Alberta, Canada.
A		Chenail, R. J. (2008, October). Constructing clients in clinical

texts: Qualitative investigations of marital and family therapy intakes and progress notes. Symposium chaired at the 14th Qualitative Health Research Conference, Banff, Alberta, Canada. Chenail, R. J., Somers, C. V., & Benjamin, J. D. (2008, October). Noting progress in the discursive therapies: A recursive frame analysis. Paper presented at the 14th Qualitative Health Research Conference, Banff, Alberta, Canada. Chenail, R. J., & Weiss, A. D. (2007, December). Utilizing qualitative metasynthesis to conduct systematic reviews of primary healthcare research. Workshop presented at the 21st Annual Primary Care Research Methods & Statistics Conference, San Antonio, TX.

Cheng Samuel (FT)		Doctor of Science in	Research Interests
	Currently teaches the following	Applied Kinesiology/Movement and	Surface EMG application on Muscle
	courses in the PHD in physical	Rehabilitation Science	Fatigue and Activity Monitoring
	therapy program	(2005), Boston University, Boston, Massachusetts.	Soft-tissue property and its physiological change under exercise
	PHT 7225 Research Methods and Design	Master of Science in Orthopedic Physical	Motor Control
	and Design	Therapy (1999), MGH Institute of Health	Kinematic and kinetic analysis
	PHT 7113 Advanced Research Methods and Design	Professions, Boston, Massachusetts.	Research Experience
	PHT 7800 Dissertation		• Research Assistant (NIDDR Grant), NeuroMuscular Research Center, Boston University, Boston, MA, 9/1/2002-8/15/2004.
	Courses to be taught in the Ph.D. in Health Science		- Design and conduct human subject studies using surface EMG and accelerometry to identify functional motor activities in patients with stroke
	Dissertation Committee		- Recruit and screen research subjects
	Member Dissertation Chair		-Process and analyze data using artificial intelligent algorithm
	Dissolution Chun		- Prepare materials for grant

application and summary reports
• Research Consultant, DelSys Inc., Boston, MA, 9/21/1999-5/31/2000; 9/25/2000-5/31/2000; 10/1/2001-12/31/2001; 11/1/2002-8/31/2003; 7/1/2004-8/15/2004.
- Recruit and screen research subjects
- Conduct human subject researches to test the performance of newly developed EMG system for extreme conditions such as sweat or impact
- Design and conduct human subject researches to test the effects of ergonomic chair designs on the uses of spinal muscles
Grant Activities;
 Project "Automated Recognition of Dyskinesia and Motor Fluctuations in Patients with Parkinson's Disease Using Surface Electromyography". 2005-2006 NSU President's Faculty Research and Development Grants. Primary Investigator. Awarded amount: \$9,900.

. ' ' '		A STATE OF THE STA	Student Research Advisement:
			Chair of PhD Dissertation Committee
ä			 Linnette Clark; Dissertation Title "Effects of Transverse Abdomin with Pelvic Floor Exercises vers Pelvic Floor Exercises Alone on Stress Urinary Incontinence" (Completed in November 2008)
			Emily Slaven; Dissertation Title "Prediction of functional outcon at six months following total hip arthroplasty" (In Process)
			Ann Lucado; Dissertation Title: "Characteristics of the upper extremity in female recreational tennis players with and without lateral epicondylalgia" (In Proce
			Lee Riley; Dissertation Title: "Influence of exercise training frequency and predictors of clin outcome associated with lumbar extensor strengthening exercises patients with chronic low back pain" (In Process)
			 Jerry Latimar; Dissertation Title To be Finalized. (In Process)
	*		Member of PhD Dissertation Committee
			Morey Kolber; Dissertation Title

	"Shoulder Joint and Muscle Characteristics in the Recreational Weight Training Population" (Completed in April 2007)
	Jean Weaver; Dissertation Title "A Cost Effective Comparison of Corticosteroid Injections to Physical Therapy in the Treatment of Work-Related Lateral Epicondylitis" (In process)
	Ashraf Abdelhamid; Dissertation Title "The Long Term Effects of Cervical Spine Grade V Joint Mobilization vs Thoracic Spine Grade V Joint Mobilization in Chronic Neck Pain: A Randomized Clinical Trial" (In Process)
	Emilio "Louie" Puentedura; Dissertation Title "Development of a Clinical Prediction Rule to Identify Patients with Neck Pain Likely to Benefit from Cervical Spine Manipulation" (In Process)
	Advising Proposal Writing in Transitional Doctor of Physical Therapy Research course (23 students)
	Advising Capstone research projects in Entry Level Doctor of Physical Therapy Program (13 students)

	Publication in Peer-Reviewed Journals:
	Roy SH, Cheng MS, Chang SS, Moore J, De Luca J, Nawab SH, De Luca CJ. A Combined sEMG and Accelerometer System for Monitoring Functional Activities in Stroke IEEE Transactions on Neural Systems & Rehabilitation Engineering (Submitted)
	Kolber MJ, Saltzman S, Beekhuizen K, <u>Cheng MS</u> . The reliability and minimal detectable change of inclinometric shoulder mobility measurements. <i>Physiother Theory Pract</i> . In Press.
	 Kolber MJ, Beekhuizen KS, Cheng MS, Hellman MA. Shoulder Joint and Muscle Characteristics in the Recreational Weight Training Population. J Strength Cond Res. 2009; 23(1):148-57.
	 Roy SH, De Luca G, Cheng MS, Johansson A, Gilmore LD, and De Luca CJ. Electro-Mechanical Stability Of Surface EMG Sensors. Med Biol Eng Comput. 2007;45:447-57. Epub 2007 Feb 16.
	Kolber MJ, Beekhuizen K, <u>Cheng</u> <u>MS</u> , Fiebert IM. The reliability of hand-held dynamometry in

ø			measuring isometric strength of the shoulder internal and external rotator musculature using a stabilization device. <i>Physiother Theory Pract</i> . 2007;23:119-24. • Cheng MS, Amick BC, Watkins MP, Rhea C. Employer, Physical Therapist and Employee Outcomes in the Management of Work-Related Upper Extremity
			Disorders. <i>J Occup Rehabil</i> . 2002 Dec;12(4):257-67.
			 Bonato P, <u>Cheng MS</u>, Gonzalez- Cueto J, et al. EMG-based Measures of Fatigue during a Repetitive Squat Exercise. <i>IEEE</i> Eng Med Biol Mag. 2001; 20:133- 43.
Chevalier Caroline (PT)	Courses taught DHS - 8750 Patient Safety Medical Error	Doctor of Health Science Health Science Nova Southeastern University 2007	Director of Quality Services. Next Wave, Inc., Albany, New York. Consultant specializing in patient safety and quality. Provides technical, project management, and analytical expertise
	Courses to be taught DHS - 8750	Master of Public Health Public Health University of Massachusetts	and support at the facility, organizational, state, and national levels. Assists with setting reporting and payment policies. Areas of expertise includes: developing, implementing and supporting process
	Patient Safety Medical Error	Amherst	and performance improvement

	Master of Science Educational Psychology/Special Education 1980	strategies/projects; methodological work on national and regional quality/safety report cards; forecasting trends and analyzing their impacts (i.e. value based purchasing and other medical error and quality reporting initiatives), accreditation/regulatory affairs consulting; needs' assessment and problem solving; policy analysis.
	.1	Member and Advisor of the PULSE of NY (Persons United Limiting Substandards and Errors in Health Care) Network Council with Ilene Corina, a leading national figure in working towards reducing medical errors and educating consumers.
	,	Member Policy Committee American Public Health Association
		Member Schenectady County Medical Reserve Corp (Emergency Preparedness/Disaster Management) Member American Society for Quality
		Member "Sorry Works" Member Academy Health

			Swarthmores's Who's Who 2008
Clark, Jodi (FT)	Courses Taught DHS - 8810 Epidemiology and Global Health DHS 8030 Community Health Promotion and Disease Prevention Courses to be taught in the Ph.D.	Doctor of Medicine Medicine, University of Miami 1995 Master of Public Health Public Health, Florida International University 2003	Research Experience Department of Health/Project Quest-South Beach AIDS Project Evaluation Impact Cross-Sectional Survey- March 2001 University of Miami/ Florida Internationa University Hepatitis C Study- May 2001
	DHS - 8810 Epidemiology and Global Health DHS 8030 Community Health Promotion and Disease Prevention Dissertation Committee Member Comprehensive Exam: part of the reviewing committee	Masters Concentrations, Epidemiology and Health Promotion	Florida International University Dept of Public Health Cardiovascular Research Associate - January 2001- 2003 Florida International University/ South Florida Syphilis Health Promotion Program Impact Evaluation Study- 2004 Student research Supervision Barry University

	Supervised PA and DO students research projects
	Presentations and Publications:
	Chizan-Pluta, A, Clark, J, Averhart, C, Cardenas, G, Jennings, T, La Greca, A, Devieux, J, and Malow, R, 2002, Adolescent Life Stress and Sexual Risk Taking: Implications for HIV Prevention, National Institute of Mental Health Role of Families in Preventing and Adapting to HIV/AIDS, July 24-26, Miami, Florida.
	Clark, J., Chizan-Pluta, A, Averhart, C, Jean-Gilles, M, La Greca, A, Devieux, J, and Malow, R, 2002, Haitian Adolescents and HIV Risk Taking: Data From a Community Sample in Miami, Florida, National Institute of Mental Health Role of Families in Preventing and Adapting to HIV/ AIDS, July 24-26, Miami, Florida.
	Clark, J, Martinez, L, Lucenko, B, Devieux, J, and Malow, R, 2002, Gender

Differences In Condom Skills and
Condom Attitudes Among Mentally III
Adults at Risk for HIV, 130th American
Public Health Association Annual
Meeting, November 9-13, Philadelphia,
Pennsylvania.

Darrow W, Bierstaker S, Geiss E, Chevalier K, Clark J, Marrero Y, Obiaja K, Mills V. 'Hooking up' on the Internet, 'club drug' use, and risks for acquiring syphilis among men who have sex with men in an international resort area. Presented at the 13th IUSTI Asia Pacific Conference, on Wednesday, July 7, 2004, item O19

Darrow W, Bierstaker S, Geiss E, Chevalier K, Clark J, Marrero Y, Obiaja K, Mills V. Risky sexual behaviors associated with recreational drug use among men who have sex with men in an international resort area: challenges and opportunities. Presented at the first NIDA/DAARC International Conference focusing on HIV/AIDS hosted by the

	University of Miami, Friday, August 27, 2004
	Darrow W, Bierstaker S, Chevalier K, Clark J, Marrero Y, Mills V, Geiss E and Obiaja K. Risky sexual behaviors associated with recreational drug use among men who have sex with men in an international resort area: Challenges and opportunities. Accepted for publication in the Journal of Urban Health.
	Health Education/Promotion Experience:
	Florida International University/ Public Health Graduate Teaching Assistant 2001- 2003
	Barry University/ Graduate Medical Sciences- Adjunct Clinical Professor for Master of Public Health Program, Physician Assistant Program and Podiatric Medicine Program 2003-present
	Miami Rescue Mission-Broward Outreach Center/ Volunteer Health Education and Wellness Coordinator for WARRM

			(Women At Risk Reintegration Program)
			American Heart Association/ Broward Heart Walk College of Allied Health and Nursing Team Captain- 2008
			Volunteer Researcher- Empower U- Minority, Peer-Based and Managed, Organization For People Living with HIV/AIDS
	Courses taught	PH.D Higher Education	30 years experience in medicine and
Danielsen, Randy (PT)	DHS – 8180 Medical Writing	The Union Institute	education
	DHS 8110 Community Environmental/Occupational Health	Master's Degree	Project Director and Grant Writing, Community Partnership Grant, (\$460K) to provide healthcare to underserved populations to include minorities, elderly and rural.
	Courses to be taught	Physician Assistant University of Nebraska Medical Center	Grants and Research:
	DHS – 8180 Medical Writing	1997	Reviewer: Clinician Reviews Journal

		Perspectives on Physician Assistant Education
	DHS 8110 Community Environmental/Occupational	Education
	Health	Principal Investigator: \$1,090,000;
	Dissertation Committee	Department of Health and Human Services,
	Member Dissertation Chair	Bureau of Health Professions, Training
		Grants, 1997-2003
	Comprehensive Exam:	Sample Publications
	Part of the reviewing committee	Danielsen, R; Resisting Rape: Risk and Effectiveness, <i>Physician Assistant</i> ,
		November 1995, Pgs 104-108.
		Danielsen, RD. (1996, may). Karate
		Injuries: Origins and Prevention, <i>Clinician Reviews</i> , 95-113.
		Danielsen, R.D., Condit, D., Potenza, A. (1997, May). The Physician Assistant as
		Expert Witness. Journal of the American
		Academy of Physician Assistants, 87-100.
B	#C	Danielson, R. D. (1998, May). Adolescent Violence in America: What's behind the
		current epidemic? Clinician Reviews, 167-

183.	
Danielsen, R.D., Croll, J., a J.D. (2003). Educating Ame Physician Assistants studen interactive video: A two ye Perspectives on Physician A Education, 14 (3), 168-173	erican Indian ats via ar experience. Assistant
	90
Danielsen, R.D. (2008). An Trusted Source. Clinician F	
Sample Book Chapters:	
Danielsen, R. (2001). Beha in children and adolescents R.L. <i>Primary care of Physi</i> <i>Assistants: Clinical Practic</i> (2 nd Ed.). New York:Mc Gr	, in Moser, cian ce Guidelines
Danielsen, R. (2002). Blood measurement, in Dehn, R.V. P. Clinical Procedures for Assistants. (2 nd . Ed.). WB S. Company.	V. & Aspey, D. <i>Physician</i>
Student Research Superv	ision

			Experience
			From 1995-2004, as PA faculty, was assigned each year to six students to assist them with their capstone paper. Over the past 4 years, has also served on three dissertation committees of peers who were seeking their PhD.
Davis, Richard (FT)	Courses Taught:	Doctor of Education	Certified Physician Assistant
	DHS - 8140 Practicum	Adult Education Nova Southeastern University	Dean, College of Allied Health and Nursing
	Courses to be taught	2001	Commissioner with the Accreditation Review Commission on Education for the
	Dissertation Committee	Master of Science	Physician Assistant.
	Member	Adult Education Troy University	Member of The American Academy of Physician Assistants, Veterans Caucus-
	Comprehensive Exam:	1984	American Academy of Physician Assistants (president, 1998), Association
	Part of the reviewing committee		of Physician Assistant Programs, Florida Academy of Physician Assistants, and
			Arizona State Association of Physician Assistants (president, 1994, 1998).
		-	Student Research Supervision Experience
			Has supervised numerous student

			practicum projects in the DHS program
Ewing, Helen (PT)	Courses taught	Doctor of Health Science	Registered Nurse
	DHS - 8700 Comparative International Health	Nova Southeastern University 2004	Research Experience 2007
	Courses to be taught		Principal Investigator Research Project: Evaluation of a website
	Dissertation Committee	Master of Nursing University of Calgary June, 1995	for electronic mentorship in newly graduated practicing registered nurses
	Member	Calgary, Alberta	Athabasca University
		Bachelor of Nursing University of Calgary June, 1990	2004 - 2006
		Calgary, Alberta Diploma in Nursing Wascana Institute June, 1982	Co-Investigator
			Research project: A spirituality teaching programme for depression: A randomized controlled trial
		Regina, Saskatchewan	Canadian Institute of Natural and Integrative Medicine
			Graduate Student Supervision
		*	- Co-Project Supervisor for: Elizabeth M., Master of Nursing student, Athabasca University (2007). Project title: Homeless children's need for enhanced child health and development intervention.
			- Final Project Committee for: Carole L.,

			Master of Nursing student, Athabasca University (2007). Project title: A gender- based analysis of ten HIV/AIDS
3			Post-graduate Student Supervision
			Summative Committee Member for:
			- Pat M., Doctorate of Health Science student, Nova Southeastern University
			(2006). Project title: Proposed topics and guidelines to enhance the teaching assistant internship.
			Karen W., Doctorate of Health Science student, Nova Southeastern University (2007). Project title: <i>Management of</i>
			dysautonomia in severely brain injured patients. Gaining cultural understanding of presenting to Cambodia nurses
Goldstein Matthias (PT)	Courses taught	Doctor of Health Science	Director of the Health and Wellness
	DHS 8800	Nova Southeastern University	Center, Health Enhancement, and Cardiovascular Services at Good
	Health Care Informatics	2005	Samaritan Hospital in Baltimore, Md, and Assistant Clinical Professor in the PA
			program at George Washington
	Courses to be taught	Master of Physician Assistant	University, Washington, DC.
	DHS 8800	Studies	Chair: Clinical Informatics Steering Commi

 Health Care Informatics	University of Nebraska	2003-present
	1998	
		Academic positions
		1997-2002 EMT-B Instructor
		University of Maryland Fire Rescue Institut
	1.	Aberdeen, MD
		1000 museumt ACLS Coordinator
		1998-present ACLS Coordinator
		Good Samaritan Hospital, Baltimore, MD
		1999-present Assistant Clinical Professor
		PA Program
		The George Washington University,
		Washington, DC
*		2000-present Clinical Adjunct Faculty /PA
	*	Program
		Essex Community College/ Towson State

		University, Baltimore, MD
		2000-present ACLS Regional Faculty
		American Heart Association, Dallas, Tx
		2001-present Clinical Instructor /
	Λ κ	PA Program
		Anne Arundel Community College,
		Arnold, MD
		2001-present Director Division of
		Cardiopulmonary Resuscitation Research
		Good Samaritan Hospital, Baltimore, MD
		2002-present EMT-B Instructor
		Baltimore County Fire Rescue Academy, Baltimore, MD
W1		Dattimore, MD
11175		

	2002 2002
	2005-2006 National Faculty
	The Heart Advocacy Network
	☐ Chair: Clinical Informatics Steering
	Committee
	2003-present
	Community Service
	1986- 2003 Health Services Instructor
	American Red Cross, Baltimore, MD
	1993-present Emergency Medical Technic
	Paramedic
	Pikesville Volunteer Fire Department, Pikes
	MD
*	1994-present Program Coordinator
	Project Ezra Baltimore, MD
	Instant Response Program
	PAD/AED Program

			Developed and implemented the largest pub access AED program in Baltimore City
			2006-present Medical Advisor Hatzalah of Baltimore, Emergency Medical Services, Baltimore, MD
			8
Hardigan Patrick	Courses taught HPH 7300 Biostatistics I HPH 7310 Biostatistics II	Doctor of Philosophy Educational and Psychological Measurement University of Wyoming, 1996	Currently Executive Director for Health Professions Research and Assessment Peer reviewed Publications
	Course to be taught in the Ph.D. in health science HPH 7300 Biostatistics I HPH 7310 Biostatistics II	MBA University of Wyoming, 1991	Wells, K.H., Wagner, H., & Hardigan, P.C. (2009). Military Readiness: An Exploration of the Relationship Between Marksmanship and Visual Acuity. Military Medicine (In Press).
	*		Kilinc, E., Antonson, S.A, Antonson, D.E., & Hardigan, P.C. (2009). Thermal

	41		Safety of Er:YAG and Er,Cr:YSGG
			Lasers in Hard Tissue Removal.
			Photomedicine and Laser Surgery (In
			Press).
			Hardigan, P.C. & Carvajal, M.J. (2008).
			An application of the Rasch Rating Scale
		Ä	Model to the analysis of job satisfaction
			among practicing pharmacists. Journal of
			2000601 600-2000
			the American Pharmaceutical Association
			48(4), 522-529.
			Antonson, S.A, Antonson, D.E., &
			Hardigan, P.C. (2008). Should my new
		B.	curing
			lighthe and LED Counting Desired
			light be an LED. Operative Dentistry. 33(4), 400-407.
			33(1), 100-107.
			Zelikow, R., Cozzarelli-Moldauer, G.,
			Kelner, S., Hardigan, P.C. (2008). A
8	+-		method
			to minimize complications in endodontic
		<u> </u>	to imminize complications in chaodolitic

	access cavity preparation. Today's FDA
	20(6), 17-20.
	Carvajal, M.J. & Hardigan, P.C. (2008). Pharmacists' Inter-Gender Differences in
-	Behavior and Opinions: Is Work Input as Important Mediator? Internet Journal of
	Allied Health Science and Practice. 6(1).
	Wagner, H., Pizzimenti, J., Daniel, K., Pandya, N., & Hardigan, P.C. (2008). A
	multidisciplinary patient education intervention. Diabetes Educator. 34(1), 889.
	Handison D.C. & Commist M.I. (2007)
	Hardigan, P.C. & Carvajal, M.J. (2007). The use of demographic variables in the
	analysis of job satisfaction among practicing pharmacists: A Rasch approa
	Internet Journal of Allied Health Science and Practice. 5(4).

		The state of the s
		Carvajal, M.J. & Hardigan, P.C. (2007).
		Gender Differences in the Labor Supply
		T CITIC DI
		Function of U.S. Pharmacists The
		Journal of Pharmaceutical Finance,
		E
		Economics & Policy. 16(2), 87-110.
		DeCarlo, A.A., Grenett, H., Park, J.,
		Balton, W., Cohen, J., Hardigan, P.
		(2007).
		(2007).
		Association of gene polymorphisms for
1		plasminogen activators with alveolar
		•
		bone loss. Journal of Periodontal
		Research. 42(4), 305-310.
		Basada, E. & Hardigan, P. (2006). Laser
		scanning confocal opthalmoscopy and
		scanning confocal optilalinoscopy and
		polarimetry of human immunodeficiency
		virus patients without retinopathy under
	ä	, and particular transfer and
	#	retroviral therapy. Optometry and Vision
		Science, 84(3), 189-196.
		10 10 10 10 10 10 10 10 10 10 10 10 10 1

	Funded Grants
	Hardigan PC (2008). \$20,000. Nationally Historical Black Colleges and Universities for Health Services Research Grant Writing Workshop.
	Hardigan, P.C. (2005). \$75,000. An empirical model to measure the effect of distance learning on student outcomes. (Pfizer).
	Akintade, D., Hardigan, P.C., DeCarlo, A.A., Kaplan, H. (2003). \$10,000. DNA Abasic sites and superoxide dismutase activity in diabetes: Association with
WEST SECTION AND ADMINISTRATION	complications. NSU competitive grant award. Sandhouse, M., Patterson, M., & Hardigan, P.C. (2003). \$165,000. Effect of cranial osteopathic treatment on visual

		function. Osteopathic Heritage
		Foundation.
	×	
		Hardigan, P.C (2002). \$30,000, Effect of a pharmaceutical care on patients with
		diabetes. Merck outcomes research grant.
		Hardigan, P.C. & Madpak, A.M. (2000). \$33,500. Amira phase four clinical trial
		study., Amira.
		Hardigan, P.C. (2000). \$5,000. Faculty development grant to investigate the
		selection process and personality type of practicing pharmacists., Nova
		Southeastern University Faculty Development Grant.
	· *	Hardigan, P.C. & Evans, C. (1999). \$6,000. The effect of a physical assessment
4		course on the practice of pharmacy. Searle

	Competitive Research Grant.
	Hardigan, P.C. (1998). \$600. University of Wyoming's Alumni Association
	Competitive Travel Grant.
	Hardigan, P.C. & Ranelli, P.L. (1998).
	\$21,200. The establishment of a
	professional development and research center. National Association of Chain
	DrugStores Education Foundation
	H-1' P.C. (1006) #5 000 F-1
	Hardigan, P.C. (1996). \$5,000. Faculty development grant to investigate the
	selection process and personality type of
	students applying to pharmacy schools.
	University of Wyoming, College of
195	Pharmacy.
-	Student research supervision
	experience
	Nova Southeastern University, 2000-

	present.
	Statistical advisor for all postgraduate dental research projects. This typically involves 21 students a year.
	Succar, J. [MS] (2008). Response rates and response rate patterns of online versus paper surveys for Practicing Dentists: A randomized trial. Nova Southeastern University.
	Patterson, J. [Ph.D.] (2006). The Influence of Class Schedule Format on Student Achievement for Students of English as a Second Language at Utah Valley State College University of Wyoming.
	Urs Businger [MS] (2005). , Contact Lens Induced Dry Eye and the Use of

	Homeopathic Eye Drops, Nova
	Southeastern University.
u u	Cushion, N. [MS] (2005). Analysis of coral reef monitoring techniques in relation
	to marine reserve management objective case study: Port Honduras Reserve.
	Nova Southeastern University.
	Simmons, D. [Ph.D.] (2004). Valued occupations, community integration, and
	quality of life of the brain injury survivo A path analysis. Nova Southeastern
	University.
	Vince Miner, [Ph.D.] (2002). The Non- Environmental Aspects of Motivation o
	Adult Learners Seeking an Advanced Degree. University of Wyoming,

	Randall Lambert, [MS] (1999). A feasibility study for taking a medical equipment
	company into Argentina. University of Wyoming,
	Hsu Jane, [MS] (1997). The current use of high-dose aminoglycosides in
	hospitals throughout the United States. Nova Southeastern University.
	Susan Casas de Betancourt, [MS] (1996). Impact of computer technology on drug information centers in the U.S., Canada. Nova Southeastern University.
	Adjunct Appointments
	Professor, College of Pharmacy, Nova Southeastern University, Ft. Lauderdale,
	FL, 1999 to present. Professor, College of Dental Medicine,

			Nova Southeastern University, Ft. Lauderdale, FL, 2000 to present. Professor, College of Optometry, Nova Southeastern University, Ft. Lauderdale, FL, 2002 to present.
Hill Cheryl (FT)	Currently teaches in the PHD in Physical Therapy program PHT - 7800 Dissertation	Doctor of Philosophy Computing Technology in Education Nova Southeastern University 2001	Dissertation title: "Development of Computer Skills in Physical Therapist Students"
	Courses to be taught Dissertation Committee Member Dissertation Chair	Master of Science Gerontology Nova Southeastern University 1979	Peer Reviewed Publications: Mayrovitz, H., Sims, N., Hill, C., Hernandez, T. Greenshner, A. & Diep, H. (2006). Hand volume estimates based on a geometric algorithm in comparison to water displacement. <i>Lymphology</i> 39, 95- 103

	cutting edge - A successful distance PhD
	degree program: A case study. The
	Internet Journal of Allied Health Sciences
,	and Practice. Volume 3 Number 2.
	Published an extraction to APTA's
i,	Hooked on Evidence Database (June 13,
	2005): Nonoperative treatment of
	herniated lumbar intervertebral disc with
	radiculopathy: an outcome study. Spine,
	1989, vol. 27, n. 1.
	Snow, B., Shamus, E., and Hill, C. (2001).
	Physical Therapy As Primary Health Care: Public Perceptions. <i>Journal of Allied</i>
	Health, 30 (1), 35-39.
	11eaun, 30 (1), 33-39.
	Peer Reviewed Scientific and
	Professional Presentations (those not
	previously cited above under abstracts):
	Rone, S., & Hill, C. Student Perceptions
	of Certified Clinical Instructors. Accepted
	for poster presentation at APTA's Annual

Conference, San Antonio, TX, June 2008.
Hill, C., Nof, L. Hellman, M. (2007) Learning style, learning strategy, & locus of control: A description of students in a distance PhD program. Accepted for platform presentation at APTA's Combined Sections Meeting, Nashville, TN, Feburary 8, 2008.
Hill, C. (2007) Creativity in the classroom: Using Jeopardy to review manual muscle testing. Platform presentation at the World Confederation for Physical Therapy, Vancouver, Canada, June, 2007.
Hill, C., Nof, L. Hellman, M. (2007) Learning style, learning strategy, & locus of control: A description of students in a distance PhD program. Platform presentation at the World Confederation for Physical Therapy, Vancouver, Canada, June, 2007.

Hill, C., Bumgardner, J., Bustos, M., Hellman, M. (2006). Prevalence of workrelated musculoskeletal injuries in physical therapists practicing in Florida. Platform presentation at the World Confederation for Physical Therapy, Vancouver, BC, June 2007. Mayrovitz, H., Sims, N., Hill, C., Hernandez, T., Greenshner, Diep, H. (2005). A method for estimating hand volume based on metric measurements. Poster presentation at the World Confederation for Physical Therapy, Vancouver, BC, June 2007. Hill, C. (January 14, 2007). Creativity in the classroom: Using Jeopardy to review manual muscle testing. Presented at the Health Professions Educational Research Symposium, Ft. Lauderdale, FL. Hill, C., Nof, L., Hellman, M. (January 13, 2007). Learning style, learning

strategy, & locus of control: A description of students in a distance PhD program. Presented at the Health Professions Educational Research Symposium, Ft. Lauderdale, FL. Mayrovitz, H., Sims, N., Hill, C., Hernandez, T., Greenshner, A., Diep, H. A Method to Estimate Hand Volume Based on Metric Measurements. Poster presentation at Spring Conference, March 2005. Presented at National Lymphedema Network in October, 2005. Hill, C. (June 9, 2003). Development of Computer Skills in Physical Therapist Students. Presented at World Confederation of Physical Therapy, Barcelona, Spain. Hill, C., Hellman, M. (June 9, 2003) Using WebCT3 to Teach Evidence-Based Practice. Presented at World Confederation of Physical Therapy, Barcelona, Spain.

		Hill, C. (August, 2003). Computer Literacy of Physical Therapists. Presented at the Fall Conference, Florida Physical Therapy Association.
		Hill, C. (January 30, 1998). A Comparison of Treatment Settings. First Multi-Institutional Conference on Interdisciplinary Rehabilitation, RELAN, San Juan, Puerto Rico
		Hill, C. (June 1995). A Comparison of Treatment Settings. Presented at World Confederation for Physical Therapy, Washington, D.C. June, 1995
	j.	Funded/In Review Grant Activity:
5		Cheng, M., Hill, C. (2005) Automated Recognition of Dyskinesia and Motor Fluctuations in Patients with

			Parkinson's Disease Using Surface Electromyography. Received President's Faculty Research and Development Grant of \$9,900. Hill, C., Nof, L., and Hellman, M. (2005) Predictors of Success in a Distance PhD PT Program. Received internal grant of \$1,895. Student Research Supervision Experience Has supervised numerous student dissertations in the Physical Therapy Program at Nova Southeastern university
Holub, Peter (FT)	Courses taught DHS - 8000 Prof Competencies in the clinical care of Health Care to Diverse and Special Populations Courses to be taught in the Ph.D. program	Doctor of Podiatric Medicine Podiatry , Calif Coll of Podiatric Med 1984 Master of Science Kinesiology Pennsylvania , State Univ Park	Certification in college teaching, center for excellence in learning and teaching. Pennsylvania state university 21 years experience in healthcare as a physician and surgeon. Member, Bioethics and Health Law Consortium of Florida Technical writer, Quest publishing company

	DHS - 8000	2002	Ethics Editor, Internet Journal of Allied
	Prof Competencies in the		Health Sciences and Practice
	clinical care of Health Care to		
	Diverse and Special		Papers/ Publications/Presentations
	Populations		
	Comprehensive Exam Part of the reviewing committee		2008 Cheating or collaborative Learning? IJAHSP, 6(3) http://ijahsp.nova.edu/articles/vol6num3/holub6_3.htm
	committee		*
			2008 The Need to Model Ethical
			Behavior in an Online Class. IJAHSP, 6
			(2).
			http://ijahsp.nova.edu/articles/vol6num2/t
			ocV6N2.htm
			2008 Academic Versus Corporate
			Research Labs. IJAHSP, 6(1).
			http://www.ijahsp.nova.edu/articles/vol6n
			umm2/tocV6N2.htm
	0 Tech		2007 Make the right choice. IJAHSP, 5 (4). http://www.ijahsp.nova.edu/articles/vol5n
10.			um4/tocV6N2.htm

	2007 A Commentary. IJAHSP, 5 (3). http://ijahsp.nova.edu/articles/vol6num3/t ocV6N2.htm
	2007 One for all, All for one! IJAHSP, 5(2). http://ijahsp.nova.edu/articles/vol5num2/t ocV6N2.htm
	2007 Ethics in Health Education. IJAHSP, 5(1). http://ijahsp.nova.edu/articles/vol5.num1/t ocV6N2.htm. 2007 Ethics: Opening thoughts. IJAHSP, 4(4). http://ijahsp.nova.edu/articles/vol4num4/t ocV6N2.htm
	2007 Online Health Science Education: Development and Implementation. Book review published in <i>The Internet and</i> <i>Higher Education</i> 10(2), 151-155.
	2007 Modeling Professionalism in the Online Environment. Co Presenter with Dr Judith parker . HPD Faculty Research Development Committee, Nova Southeastern University.

			2006 Ethical Practices in Medical Advertising. Bioethics and Health Consortium of South Florida, Nova Southeastern University.
Kelly, Patricia (FT)	Courses taught DHS - 8120 Doctoral Objective Analysis	Doctor of Education Health Care Education, Nova Southeastern University 2000	Postdoctoral: Academic Visitor: School of Medicine, Health Policy and Practice, University of East Anglia, Norwich, UK, 2002
	DHS - 8130 Internship	Master of Science Primary Healthcare, University of California, Davis 1982	Ed.D Dissertation: Determining the Influence of Preadmission Health Care Experience on Measures of Entry-Level Clinical Competence
	DHS - 8190 Health Care Education	Physician Assistant Certificate, 1980	In a Cohort of Physician Assistant Graduates
	DHS - 8250 Independent Study B	Stanford ,CA	MHS Thesis: Comparison of Rates of Performance of Preventive Health Interventions by two Cohorts of Family Practice and Internal Medicine Residents In an Academic Medical
	DHS - 8140		Center

	Practicum	
,	HSP 9006 Evidence based Practice	Student Research Supervision Experience: Dissertation Committee Member, Central Michigan University, College of Graduate Studies
	Courses to be taught in the Ph.D. Dissertation Committee Member	Research Experience Standing Peer Reviewer, original Health Services
	Comprehensive Exam: part of the reviewing committee	and Clinical Research, Journal of the American Academy of Physician Assistants, 1999-present
	HSP 9006 Evidence based Practice	Review Board: Internet Journal of Allied Health Science and Practice
		Reviewer, APAP/NCCPA Research Gran Cycle, 2002-2004
		Reviewer, Bureau of Health Professions,

Department of Health and Human Services, April-May 1997 Principal Investigator, DHHS/Bureau of Health Professions Training Grants, \$1,100,000, 1998-2004 Peer reviewed publications: Kelly, PE. Clinical Breast Examination, Clinical Procedures, R. Dehn and D. Asprey, eds., 2006, 2nd edition, peer reviewed text Kelly PE. Across the Pond Journal of the American Academy of Physician Assistants, Vol 17, No. 3 March, 2004 (in press) Kelly, PE. Physician Assistant Training in Residentially Based Geriatric Primary Care at Central Michigan University, Perspectives in PA Education, Spring 2003 Kelly, PE. Clinical Breast Examination, Clinical Procedures, R. Dehn and D. Asprey, eds., 2001, peer reviewed text Kelly, PE. Brain Tumors, Primary Care

for Physician Assistants, 2 nd edition R.
Moser, Editor, McGraw-Hill, NY, Spring
2001; peer reviewed text
Kelly, PE. Breast Cancer (revised)
Colon Cancer (revised)
Testicular Cancer (revised)
Lung Cancer (revised)
Hodgkin's Disease (revised)
Multiple Myeloma (revised)
Pancreatic Cancer (revised)
Thyroid Cancer (revised)
Primary Care for Physician Assistants, 2
edition R. Moser, Editor, McGraw-Hill,
NY, 2001; peer reviewed text
Kelly, PE. A Theory of Practice: PAs,
specialists in team medicine Journal of
 the American Academy of Physician
Assistants, September, 1999, Vol. 12 No
9 (peer reviewed)
Kelly, PE. PAs and their shadows
[Workplace Question and Answer]
Advance For Physician Assistants,

February, 1999 Kelly, PE. Contributor, Oncology Chapters, Moser's Primary Care for Physician Assistants Companion Handbook, Dehn R, Editor, McGraw-Hill, 1998 Kelly, PE. Contributor Oncology Multiple Choice Questions Physician Assistant Pretest R. Moser, Editor, McGraw-Hill, NY, 1998 Kelly, PE. Breast Cancer Colon Cancer Testicular Cancer Lung Cancer Hodgkin's Disease Multiple Myeloma Pancreatic Cancer Thyroid Cancer [eight chapters of text] Primary Care for Physician Assistants R. Moser, Editor, McGraw-Hill, NY, 1998

			(peer reviewed text)
			(peer reviewed text)
			Kelly, PE. What's In a Title [Workplace Question and Answer] Advance For Physician Assistants, July, 1998
		×	Kelly, PE. A Most Unusual Case The Clinical Advisor, February, 1998
			Kelly, PE. <i>Mammograms and Managed Care</i> [Workplace Question and Answer] Advance for Physician Assistants, September, 1997
		£	Kelly, PE. <i>Overinvolved?</i> [A Clinician's View] Clinician Reviews; 1996; 6[5]: 201-202
	¥-		Kelly, PE. HIV for the Primary Care Physician Assistant Medical Board of California PA Newsletter, 1990
3			

			Ashley, L, Kelly, PE. Restraint of Trade Issues for Non-Physician Providers: A Case Study Nurse Practitioner, December, 1987
			Kelly, PE. <i>Dyspareunia and Chronic Pelvic Pain</i> Manual of Outpatient Gynecology, Havens, CS., Sullivan, N., Tilton, P. Little Brown and Company, 2 nd ed., 1991
			Kelly, PE <i>Dyspareunia and Chronic Pelvic Pain</i> Manual of Outpatient Gynecology, Havens, CS., Sullivan, N., Tilton, P. Little Brown and Company, 1 st ed., 1986
Kent Brianna (FT)	Courses taught DHS 8080 Conflict Resolution In Health Care	Doctor of Philosophy Conflict Analysis & Resolution, Nova Southeastern University	Bachelor of Science in Nursing Registered Nurse Master thesis research: The Efficacy of

	2006	Stress Management among Post
ses to be taught in the	2006	Stress Management among Post- Myocardial Infarction Patients.
8080 Conflict Resolution	Master of Science Educational Psychology, University of Texas Houston 1984	Dissertation research: The Process of Healing for Adult Male Survivors of Sexual Abuse by Catholic Priests.
rtation Committee ber		Research Papers/Publications/Presentations
rtation Chair		Kent, B. B., & Sweedler, M. (Submitted to <i>Conflict Resolution Quarterly</i> , Spring, 2008). A developmental model of healing
orehensive Exam: part of eviewing committee		for adult male survivors of childhood sexual abuse by Catholic priests.
		Kent, B. B., & Dare, T. A. (in preparation). <i>Human needs: The vital but missing link in resolving the Roman</i>
	- E	Catholic Church sexual abuse crisis.
*		Kent, B.B. (2006). The Process of Healing for Adult Male Survivors of Sexual Abuse by Catholic Priests. Unpublished doctoral
	8080 Conflict Resolution alth Care rtation Committee ber rtation Chair orehensive Exam: part of	Master of Science Educational Psychology, University of Texas Houston 1984 rtation Committee ber rtation Chair

	University.
	Georgakopoulus, A., Wilkin, L. & Kent, B. B. Workplace bullying is a complex problem that should be addressed by contemporary organizations.
	Sweedler, M. & Kent, B. B. (in preparation). Human needs mediation: A model for mediation based on Maslow's human needs hierarchy.
	Black, B. F. (1984). The efficacy of stress management among post-myocardial infarction patients. Unpublished master's thesis, University of Houston.
	Managing Cultural Communication Conflicts in Health Care. (2008, April 10- 12). The Florida Summit on Health Sciences Education, Valencia Community College, Orlando, FL, April 10-12, 2008).

Crisis in the Catholic Church: The experience of adult male survivors of child sexual abuse by Catholic priests. (2007, October 24-27). Association for Conflict Resolution Annual Conference, Phoenix, Arizona. Themes of Reconciliation and Forgiveness in the movie, Remember the Titans (2007, September 21). Nova Southeastern University International Day of Peace. Managing risk in organizations. (2006, February 10). Nova Southeastern University School of Humanities and Social Sciences Winter Residential Institute. Your dissertation: Tips from start to finish. (2006, February 10). Nova Southeastern University School of Humanities and Social Sciences Winter Residential Institute.

			Culture, conflict, and human factors in litigation and the practice of law. (2004 to 2007). Presented in Interviewing, Counseling, & Negotiation at NSU Shepard Broad Law Center.
			Student Research Supervision Dissertation Committee Member NSU, PHD in conflict resolution program, currently committee member for two student dissertation projects: - "Decision making process regarding advanced directives", a qualitative approach of grounded theory - Other advisee currently
Kolber Morey (FT)	Courses to be taught	Ph.D., P.T.	developing her research project. Research and Grants
Robert Morey (1-1)	Dissertation Committee	Nova Southeastern University, 2007 Dissertation Research: "Shoulder Joint and Muscle	HPD-All02030503 EXPED 2/9/05 Reliability of the Microfet2 Hand-Held Dynamometer in measuring Isometric

AL AVAILABLE OF THE STATE OF TH	Member Dissertation Chair	Characteristics in the	Strength of the Internal Rotator and
		Recreational Weight	External Rotator Musculature in the
		Training Population"	Dominant Shoulder of asymptomatic
			Adults.
		University of Miami School	Project completed.
		of Medicine, Division of	Role: Primary Investigator
		Physical Therapy, 1995	
		M.S.P.T.	HPD-ALL11170608Exp. 12/11/06
			Shoulder Joint and Muscle
		University of Miami	Characteristics in the Recreational
	12	Coral Gables, Florida	Weight Training Population. Project
		B.H.S. conferred May	completed stage 1 (n =90) and have
		1994.	extended (n=180).
			Role: Primary Investigator
			IIDD Coole Dool on the
	_		HPD Faculty Development Research Grant. 12/11/06
1			Seedulin Person Option Statemen and Seedulin (CO)
			Awarded \$2,500.00 for project titled "Shoulder Joint and Muscle
	_		Characteristics in the Recreational
			Weight Training Population."
			weight Training Population.
	*		HPD -ALL03130706 3/17/07
			Reliability and Construct Validity of
			Measurements used to Quantify
	-		Posterior Shoulder Tightness.
			Project completed.
	**		Role: Primary Investigator
Legler Christine (PT)	Courses taught	Doctor of Health Science	Professional experience in Health Policy

DHS - 8090 Health Policy, Plng & Mgmt DHS - 8095 Global Health Policy DHS 8400 Global Health Issues Courses to be taught DHS - 8090 Health Policy, Plng & Mgmt DHS - 8095 Global Health Policy DHS 8400 Global Health Issues	Health Science Nova Southeastern University 2004 Masters Health Administration/ Public Health Health Education Univ Pittsburgh at Pittsburgh 2000 Bachelor of Science, Health Science - Physician Assistant program, Hahnemann College of Medicine, Philadelphia 1987 Physician Assistant Legislation - Pennsylvania, Michigan, Wisconsin, California, Oregon. Women's Health Issues - Family plant abortion rights in California Federal Health Issues - Medicaid, Medicare, PA reimbursement, women health Quality Management - Medicaid Serv Delivery, Out-patient Clinic Managen Director of Health Services for a Med Managed Care Project in California Director of Clinical Services for Plant Parenthood in California Consultant - development of a Free Clin Oregon including grants and health policy for the uninsured
--	--

			Established clinical rotations for physician assistant students in Ecuador, Haiti, Honduras, China, Brazil, Bahamas, Ghana and Costa Rica with presentations on the role of the Physician Assistant profession and non-physician healthcare providers in each of these countries (1999-2005).
			Clinical experience in Honduras, Ecuador and China. Active participant at International Health Medical Education Consortium (IHMEC) annual conferences in Honduras (2001), Cuba (2002), New York (2003), Guatemala (2004), San Francisco (2005).
Litwin, Bini (FT)	Courses taught DHS 8080 Conflict Resolution in Healthcare PHT – 7800 Dissertation	Doctor of Philosophy Conflict Analysis & Resolution Nova Southeastern University 2005	Dissertation title "Playing on the Boy's Team: The Success Narratives of Executive Women in Healthcare"
	Courses to be taught	Master of Business Admin Business Administration Barry University	Selected Publications Including Original Research:

D:	Luna	1
Dissertation Committee Member Dissertation Chair	1990	Litwin, B. Title: A Conceptual Framework for a Multi-Factor, Multi-Level Analysis of the Origins of Workplace. Journal of
DHS 8080 Conflict Resolution in Healthcare		International and Comparative Law, Vol. 8, #3: Summer, 2002.
,		Fried, E., Litwin, B. The Effects of Team Building on Pre-Professional Stereotypes Between Physical Therapy and Occupational Therapy Students. Journal of Interprofessional Care: Vol. 15, #1, 2001
		Roach, K., Ally, D., Finnerty, B., Watkins, D., B., Litwin, B., Janz-Hoover, B., Watson, T., Curtis, K.A. Title: The Relationship Between Duration of Physical Therapy Services in the Acute Care Setting and Change in Functional Status in Patients With Lower-Extremity Orthopedic Problems Physical Therapy Vol. 78 #1: January 1998
		Litwin, B. Title: Clinical Consideration in Treating the Minority Patient. Physical Therapy Clinical Management: Fall 1982

Selected Grants Awarded Grant funded by Health Professions Division for \$2500 titled: "Magnatherm Treatment of Lymphedema," 2001-2002, Nova Southeastern University. Litwin, B., Mayrovitz, H. Brown-Cross, D. Sims, N. Grant funded by Medical Sciences Program for \$26,571 titled: "Factors Predicting Functional Outcomes in Acute Care Physical Therapy. University of Miami, Parkway Regional Medical Center. Roach, K., Curtis, K., Applegate, B., Litwin, B., Janz-Hoover, B., Watson, T. Student Research Advisement Ph.D. Program Dissertation Chair: Determinants of

Physical Therapists Geographic Career
Decisions (Research proposal in process)
Dissertation Chair: Factors of Clinical Decision Making in Radiographic Interpretation by Physical Therapy Clinicians (Idea paper in process)
Dissertation Chair: The Use of an Interdisciplinary Team Approach in the Development, Implementation and Assessment of a Self Management Education Program for Patients with Diabetes: Measuring Risk Factor Modification, Compliance and Quality of Life (Research in Process)
Dissertation Committee Member: Development, Implementation, and Evaluation of a Continuing Professional Development Module on Physical Therapists Use of Standardized Balance Measures: A Knowledge Translation Study (Defense 2/2008).

	Dissertation Committee Member: Expectations of Physical Therapy Employer and Faculty Regarding Physical Therapy Entry-level Knowledge, Skills, and Behavior. (Research proposal in process)
	DPT Program Capstone Research Advisor:
	 Literature Review: Effectiveness of Physical Activity and Diet on Bone Formation and Strength in Very Low Birth Weight Infants Between the Birth Weight of 800 to 1600 grams and Gestational Age of 23-32 weeks (2008). Literature Review: Hippotherapy and Therapeutic Horseback Riding; Efficacy of Intervention for Children with Cerebral Palsy. (2008). Literature Review: Physical Therapy Intervention in Preventing Ulnar Collateral Ligament Injury in Elite

			 Baseball Pitchers. (2008). Literature Review: The Effect of Physical Therapy Intervention in Patients with Post Polio (2007). Case Report: An Endurance Training Program and Its Effect on Fatigue, Endurance and Quality of Life in Two Subjects with Multiple Sclerosis (2007). Research Proposal: The Validity of the 6 Minute Walk Test for Measuring Aerobic Capacity and Functional Activity Level for People with Multiple Sclerosis (2007). Literature Review: The Effect of Inspiratory Muscle Training on Pulmonary Function of Patients with Spinal Cord Injury (2006) Case Report: The Effect of an Endurance Training Program on a Patient with Parkinson Disease: A Case Report (2006)
Nehrenz, Guy (FT)	Courses Taught DHS 8140 Practicum Courses to be taught	Doctor of Education Nova Southeastern University 1995	Dissertation (MARP) title: "Development of a computer-based training program in mechanical ventilation management for medical students and residents." Registered Respiratory Therapist
		Master of Arts, Organizational	

HSP 9007 Research Practicum Dissertation Committee	Management University of Phoenix 1992	ECMO (Perfusion) Specialist Extensive research background as a methodologist and research director /
Member Committee		administrator
Comprehensive Exam: part of the reviewing committee	Bachelor of Science, Health Arts College of St. Francis	Past member of the NSU Institutional Review Board and IRBs in Phoenix for over 10 years.
	1989	Elected member of the Sigma Xi Scientific Research Society.
	Respiratory Therapist Biosystems Institute, 1984	Managing Editor and publisher, Internet Journal of Allied Health Sciences and Practice
	Respiratory Technician	Research Reviewer and Approval, Clinical Trials, NSU CAHN.
	Biosystems Institute, 1977	Panel Chair, President Faculty and Research Development Grants
	į.	Panel Reviewer, Quality of Life Council Faculty Community Based Applied Research Grants.
		Past Director of Samaritan Research Institute, Phoenix, Arizona

	Past Director special procedures lab, Veterans administration medical center. Conducted anesthetic and special procedures research. Student Research Supervision Experience As director of research at Samaritan, monitored and directed all research within a major health system to include the research done by physicians, residents, medical students, nurses, etc. At any given time, was responsible for a least 300 active research projects and the Institutional Review Board. Peer Reviewed Publications
	National Standard Curriculum, Instructors/ Students Manual. Department of Transportation – Samaritan AirEvac, Nine Stresses of Flight – Journal of Emergency Nursing, 1987 Jul- Aug;13(4):232-4.

T			Courses Towns for M. P. 1 Cr. 1
			Success Types for Medical Students: A
			Program for Improving, Academic
			Performance – An Invited Review
			Motion Interpretation – The Internet
			Journal of Aeromedical Transportation –
			2000 V1N1
			2000 VIIVI
			Altitude and Oxygenation – The Internet
			Journal of Aeromedical Transportation –
			2000 V1 N1
			Publisher and associate editor of the
			longest running peer reviewed online open
			access allied health journal in the world.
Nof, Leah (FT) <u>Courses to</u>	aught	Doctor of Philosophy	Dissertation title:
HPH 720	0 Pd !	Foundations of Education	(F) (2) (1) (1) (1) (1)
HPH 720	0 Etnics	Florida State University	"Effect of Professional Socialization on
PHT - 78	00	1004	Physical Therapists' Ethical Conduct."
Dissertati	ion	1994	
PHT - 78		Master of Science	Peer Reviewed Publications
Dissertati	ion	Cognitive Behavior Disab	S Rone-Adam, L Nof, D. Hart, A Pilot
		Univ Wisc Madison	Study Investigating Physiotherapy and
		Only wise Madison	Occupational Therapy Students' Outcome
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1978	Effectiveness. Accepted to the
			International Journal of Therapy and

Courses to be taught	Rehabilitation (IJTR)
Dissertation Committee	and the second s
Member Dissertation Chair	
Member Dissertation Chair	I Piec I Echternock I N. C.C.
	J. Ries, J. Echternach, L. Nof, S. Gagnon, Test-retest reliability and minimal
	detectable change scores in selected
HPH 7200 Ethics	clinical tests in persons with Alzheimer's
	disease was submitted for publication to
	the Journal of Physical Therapy
	the Journal of Physical Therapy
	8
	CE-II IE I
	G Fulk; J Echternach, L. Nof; S
	O'Sullivan, Clinometric Properties of the 6
	Minutes Walk Test in Individuals
	Undergoing Rehabilitation Post Stroke.
	Journal of Physiotherapy Theory and
	Practice,24(3):195-204, 2008
	Contributed a chapter on Neuromuscular
	Screen of patients after Stroke/Brain
	Injury in the book Neuromuscular Screen
	(edited by Stern and Wilson), F.A. Davis.
	Expected Publication date: 2008
a a	
	L Nof, S. Rone-Adams, D. Hart. Relation
	Between Payer Source and Functional

	Outcomes, Visits and Treatment Duration in US Patients with Lumbar Dysfunction,
	IJAHSP, Vol 5 No 2 2007
	E M Godwin, C R Spero, L Nof, R Rosenthal, J L. Echternach, The Effect of
	Single Event Multilevel Orthopedic
	Surgery on the Functional Classification
	of Children with Cerebral Palsy: A Five
	Year Follow-upsubmitted for publication
	in the Journal Developmental Medicine
	and Child Neurology.
	L. Nof, C. Hill, On the Cutting Edge – A
	Successful Distance PhD Degree Program
	A Case Study. IJAHSP, Vol. 3, (2),2005
	L. Nof and R. Rosenthal, The Predictive
	Value of Gross Motor Development,
	Posture and Upper Quadrant Stability on
	TMD in Children and Young Adults.
	IJAHSP, Jan 2005
	G. Fulk, J. Echternach, L. Nof, A. Levey,

R. Long, S. O'Sullivan, Measurement Properties of the 6-Minute Walk Test in Individuals Undergoing Post-Stroke Rehabilitation. Journal of Neurological Physical Therapy February 2005
L. Saladin, L. Nof, Gender Differences is the Utilization of Inpatient Rehabilitation Facilities Post Stroke, Submitted to Journal of Gender-Specific Medicine
H. Hettrick, L.Nof, S.Ward, J.Echternac. Incidence and Prevalence of Lymphedemea in Patients Following Bu Injury: A Five Year Retrospective and Three Month Prospective Study, Lymphatic Research and Biology, Vol2 (2004, p.11-24)
L. Nof, Principles of Neurological Treatment, Functional Analysis & Management of Movement, Publication a chapter in the <u>Proceedings of The 2nd</u> International Symposium on Hyperbaric Oxygenation in Cerebral Palsy and the

		T	Th. 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1
KIND OF THE STATE OF			Brain-Injured Child. Book published by
			Best Publishing Company. 2002
			J. Salamy, L. Nof, Physical Therapist's
			Role in Urinary Incontinence Intervention
			Journal of the Section on Women's Health
			(JSOWH), APTA, Vol. 23, No.2, 1999
_			Research Activities: Currently conducting the following
			studies:
			studies.
			Physical Therapy Student's
			Appropriateness of Tests and Measures
			Selection During Initial Examination of
			Patients with Neuromuscular Diseases
			Physical Therapy Students' Outcome
			Effectiveness, S.Rone-Adams, L.Nof, D.
			Hart
			Externally funded grants:
1			In Progress:
			in riogicss.
	VC.		Miami Lakes Educational Center Diabetes
			Screening - Interdisciplinary, College of
			Allied Health and Nursing. Health

Foundation of South Florida three years grant. Participant 2005-2007 NSU Presidential Grant: D. Stern, L. Nof, J. Pizzimenti, Relationship Between Fitness Levels and Eye Health in Individuals with Type 2 Diabetes. Principal Investigator 2002-Present Research committee chair for Ph.D. PT students. Completed dissertation topics and dissertation in progress: Physical Activity and Dietary Behaviors as Essential Components of Successful Weight Loss, Maintenance of Weight Loss and quality of Life after Roux-en-Y Gastric Bypass Surgery (in progress) • Expectations of Physical Therapy Employer and Faculty Regarding Physical Therapist Entry-level Knowledge, Skills, and Behavior (in progress) · Predictive Validity of the Functional Independence Measure Versus the Stroke Impact Scale for Stroke Patients (in progress)

	 Test-Retest Reliability of Selected Clinical Tests Used with Individuals with Alzheimer's Disease
	 Concurrent and Predictive Validity of the Six Minute Walk Test in Individuals who have Experienced a Stroke
	 Using the OASIS to Predict Risk of Falls in Older Adults
	• The Long Term Effects of Single Event Multiple Level Orthopedic
	Surgery on the Functional Classification of Children with Cerebral Palsy
	Effects of Ankle Position, Muscle Contraction, and Muscle Elongation on Anterior Translation of the Tibiofemoral Joint.
	Racial Disparities in the Utilization of and Access to Inpatient
	Rehabilitation Facilities post Stroke • The Effect of Exercise Intervention
	on Chronic Low Back Pain Incidence and Prevalence of I worked arms in Patients Following
·	Lymphedema in Patients Following Burn Injury • Clinician and Organizational Factor
	Associated with Outcomes Effectiveness in the Treatment of
-	Patients with Low Back Pain • An Analysis of Selected Physical
	Therapy Clinical Performances and Success on the National Licensing

			Examination
			Student Supervision Experience 2001-Present Direct and advise research and dissertation of Ph.D. students at the Physical Therapy program.
1			2004-Present Dissertation committee member of a doctoral student at the Huizenga School of Business and Enterpreneurship
			1994-2000; 2004-2005 Directed and advised research and thesis of Master's students at the MPT program.
			2006-present Directed and advised research and thesis of DPT students at the DPT program
Ransdell, Sarah (FT)	Courses taught	Doctor of Philosophy	Review Board Member IJAHSP
	7777 0010 0	Psychology	
	DHS 8010 Statistics and	University of Florida	Student Research Supervision
	Research Methods	1007	Experience Dr. Ransdell has supervised
		1987	student research at the BS, MS, and PhD
			level for over 15 years. She has served on
	Course to be taught		and chaired degree candidate committees
	HPH 7300 Biostatistics I		for approximately 10-15 students a year
		Master of Science	during that period at three major
	HPH 7310 Biostatistics II	Psychology	universities. Her specialties in
			supervision include quantitative research

Dissertation Committee Member Dissertation Chair Comprehensive Exam: part of the reviewing committee	University of Florida 1985	methods and biostatistics, especially as they relate to predicting and explaining human performance on cognitive and behavioral tasks. Current Experience Since coming to NSU in January of 2006, Ransdell has supervised the research training of RN to BSN, MOT, MPT, MMS, MHS, DHSc, and PhD students across the College of Allied Health and Nursing.
		Multiple research grants and publications in peer reviewed journals. Sample funded grants: Ransdell, S. E. & Seepersaud, D. (2007, June). Nova Southeastern University President Faculty Research and Development Grant, total award of \$10,000. Ransdell, S. E. (2005, January). North Atlantic Treaty Organization Research Fund, travel award of \$3,000.

Ransdell, S. E. (2004, July). FAU Writing Across the Curriculum Grant, total award of \$2,500. Over 25 hours of graduate credit in statistics and research Sample Publications: Ransdell, S. E. & Gaillard-Kenney, S. (in press). Blended learning environments, active participation, and student success, the Internet Journal of Allied Health Sciences and Practice. Ransdell, S., Gaillard-Kenney, S., & Weiss, S. (2007). Getting the right blend: A case study of how teaching can change in blended learning environments, eJournal of Learning and Teaching, 2:2, retrieved from http://bejlt.brookes.ac.uk/ Ransdell, S. & Barbier, M. L. (2006). Metacognitions about language skill and

	working memory among monolingual and bilingual college students: When does multilingualism matter?, International Journal of Bilingual Education and Bilingualism 9:6, 728-741.
	Ransdell, S. (2006). The care and feeding of monolingual and bilingualuniversity students: Implications for teaching, <u>The Beacon</u> .
	Ransdell, S., Baker, N., Sealy, G., & Moore, C. (2006). Bilingual literacy and a modern digital divide, chapter 16, pp. 239-252, Writing and Digital Media, In Luuk van Waes, Mariëlle Leijten & Chris Neuwirth (Eds.) Amsterdam: Elsevier.
	Ransdell, S. & Wengelin, Å (2005). Phonological translation in bilingual and monolingual adults, <u>International Journal of Bilingualism</u> , vol 9, issue 4.
	Ransdell, S., & Wengelin, Å (2003). Socioeconomic and sociolinguistic predictors

of children's L2 and L1 writing quality.
<u>Arob@se</u> , 1-2, 22-29
http://www.arobase.to/somm.html
Ransdell, S. and Hecht, S. A. (2003).
Time and resource limits on working
memory:
Cross-age consistency in counting span
performance. Journal of Experimental
Child Psychology, 86, 303-313.
Ransdell, S. (2003). The care and feeding
of monolingual and bilingual university
students in South Florida: implications for
assessment and training,
Psychology, Learning and Teaching, 3(2).
Ransdell, S., Levy, C. M., and Kellogg, R.
(2002). The structure of writing processes
as revealed by secondary task demands.
L1 Educational Studies in Language,
2,144-163.
Ransdell, S. Teaching psychology as a
laboratory science in the age of the

		Internet,
		(2002). Behavior Research Methods,
		Instruments, and Computers, 34, 145-150.
		Ransdell, S. and Lavelle, B. (2002
		Writing quality measurement: comparison of two methods of assessmen
		Current Psychology Letters: Brai
		Behavior, and Cognition, 8, 85-95.
		Ransdell, S. and Barbier, M. L. (2002) New Directions for Research in I
		Writing, Kluwer Academic Publisher
		The Netherlands.
		Instructional Software Publications
		anstructional Soleware Lubinearions
		Ransdell, S. E. (2008). Statistics ancillar
		software to accompany Basic Statistics f
		Nursing and Health Professions. PA: Lippincott Williams and Wilkins.
	-	
V.	-1-00000000000000000000000000000000000	

			Ransdell, S. E. (2007). <u>Demo Cognition</u> , Software to accompany Cognition, by Kellogg, R., second edition, NY: Sage Publications.
			Levy, C. M., and Ransdell, S. E. (1999). <u>Laboratory in Cognition and Perception, Third Edition, Gainesville, FL: Psychology Software, Inc.</u>
			Levy, C. M., and Ransdell, S. E. (1999). Psychology 2000, Gainesville, FL: Psychology Software, Inc.
			Ransdell, S. E. (1992). PSYCHABILITIES: Simulations and demonstrations for introductory psychology, Boston, MA: Houghton Mifflin Company.
		1	Levy, C. M., and Ransdell, S. E. (1989). <u>Laboratory in Cognition and Perception,</u> <u>Second Edition</u> , Iowa City, IO: Conduit.
Robins, Sherry (PT)	Courses taught DHS - 8030	Doctor of Health Science Health Science	Preceptor: Serving as a preceptor for a variety of

	Community Health Promotion Courses to be taught	Nova Southeastern University 2007	nursing students, nurse practitioners students, physician assistant students, and medical residents and other graduate students.
	DHS - 8030 Community Health Promotion	Master of Science Nursing University Michigan Ann Arbor	Academic Appointments:
		1992	University of Michigan – School of Nursing Graduate School Students,
			Saginaw Valley State University, School of Nursing, BSN and Graduate School Students
			Andrews University – School of Nursing Graduate Students
Xii	40		MidMichigan Regional Medical Center – Family Practice Residency Program
			Delta College - School of Nursing

<u></u>			
			Great Lakes College – School of Nursing Central Michigan University
			Publications: Robins, S. A. (1992). The association of urinary incontinence symptoms associated with parity and pelvic muscle strength. Unpublished Master's Thesis, University of Michigan.
Warren, Jacob (PT)	Courses taught HPH 7400 Research design Courses to be taught	Doctorate of Philosophy in Epidemiology, 2006 The University of Miami School of Medicine in the Department of Epidemiology and Public Health	Research Experience 1/04 to 4/07 Survival of Cutaneous T-Cell Lymphoma Patients in Florida Diagnosed between 1980 and 2000
(a)	HPH 7400 Research design	Dissertation: Creation of a Markov Chain Model of	

National Center for Health Statistics 2002 Mortality Data: Examining Life Expectancies, Hypothetical Cure Scenarios, and Mortality Disparities	Served as biostatistician for retrospective cohort study of all cases of cutaneous t-cell lymphoma in Florida between 1980 and 2000 using data from the Florida Cancer Data System (FCDS), the state-wide population based tumor registry for the state of Florida. Responsible for data cleaning, recoding, transformation, and analysis (descriptives and survival analysis), as well as writing of appropriate sections for the manuscript. Results under review for publication. Principal Investigator: Sogol Saghari, M.D.
	Funded Research R01 – NR010464
	M. Isabel Fernández, Ph.D. (PI) 9/29/07 to 6/30/11
#1	National Institute of Nursing Research
	Young Hispanic Men Entre Culturas:

Navigating Culture, Identity, and HIV Risk

The goal of this study is to develop and pilot test a culturally and developmentally tailored Motivational Enhancement Intervention for risky sex designed to be delivered via the internet using a real-time implementation approach.

Role: Co-Investigator

U-01 HD40533 Gary W. Harper, Ph.D. (PI)Dates Pending

National Institutes of Health through the Adolescent Medicine Trials Network

ATN 070: Psychosocial Needs of HIV+ Young Men Who Have Sex with Men (YMSM)

The goal of ATN 070 is to gain an understanding of the psychosocial/developmental needs of YMSM by focusing on two critical developmental issues—identity

development and future life goals. Role: Protocol Team Member / Protocol Statistician U-01 HD40533 Maria Isabel Fernández, Ph.D. (PI) 8/1/07 -12/31/2008 Dates Pending National Institutes of Health through the Adolescent Medicine Trials Network ATN 065: Validation of the HIV Treatment Readiness Measure The goal of this 15-site study is to test the reliability and examine the factor structure of the HIV Treatment Readiness Measure. The HTRM is designed to determine an individual's readiness to initiate highly-active antiretroviral therapy (HAART) in order to determine if intervention is needed before initiating therapy. Role: Protocol Vice Chair / Co-

	Investigator / Protocol Statistician UR6 PS000433 María Isabel Fernández, Ph.D. (PI) 9/30/06 to 9/29/09 Centers for Disease Control and Prevention Proyecto SOL: A Risk Reduction Intervention for Hispanic MSM The goal of this grant is to test a culturally based, group level intervention to reduce risk of HIV acquisition and transmission among HMSM as part of a six-site study of the role of culture in HIV prevention interventions. Role: Co-Investigator/Project Director
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Section E: LIBRARY AND: LEARNING RESOURCES

General Description of Library and Learning Resources

Purpose and Scope of the Nova Southeastern University (NSU) Libraries

The library resources provided by the NSU Libraries to NSU's students in the Ph.D. in Health Science support the needs of these students both in terms of quality, relevance, accessibility, and availability and in terms of the delivery of resources and services. Students have access to a broad range of learning resources that support NSU's educational goals. The NSU Libraries provide remote access to print and online resources as well as document delivery, references and library instructional services. Also, because of emerging new technologies and changing user expectations, the NSU Libraries put increasing emphasis on providing all NSU students with remote access to more than 280+ online databases and a variety of full-text resources.

Library Support

Nova Southeastern University Libraries provide NSU students with services from a variety of sources including:

- Alvin Sherman Library, Research, and Information Technology Center,
- Health Professions Division Library,
- · Law Library and Technology Center,
- William S. Richardson Ocean Sciences Library,
- NSU Libraries' collection of electronic resources, and
- Interlibrary loan.

Specific Description of Resources Related to the Program

In total, all four of the NSU Libraries had over 1.5 million items as of January 2008. Librarians, teaching faculty, and researchers at NSU share in the development of collections, and NSU has policies that define their involvement. The Health Professions Division Library has designed, developed, and implemented a library with an up-to-date collection to support the research needs for students graduate-level programs in the area of health science in general and a variety of health-related subject areas in particular. In areas related to the health sciences, the NSU Libraries has a total of 50,200+ print titles, with 2700+ specific to aspects of public health and 2500+ on the topic of health education.

More than 24,000 unique journal titles are available in digital format, including ~500 in public aspects of medicine and health, 28 in child health services, 42 in medicine and the

state, 97 in public health, ~360 in social and public welfare, and more than 1500 in law in general, including several titles in conflict resolution and international law.

Online Databases and Resources

NSU provides all students, regardless of location, with convenient and effective access to a wide variety of online electronic bibliographic databases that can be reached via the World Wide Web. Students have online access 24 hours a day, 7 days a week, 365 days a year. A number of these resources specifically support students in Health Science, including these selections:

- Ageline (EBSCOhost) provides citations and abstracts on health-related, public policy, social and fiscal issues related to aging.
- Applied Social Sciences Index and Abstracts (ASSIA) provides indexing and abstracting for 650 journals covering health, social services, sociology, economics, politics, race relations and education.
- Biomedical Reference Collection: Comprehensive Edition provides access to full text for nearly 850 peer-reviewed publications, covering topics such as the health care system. Full text publications available include American Journal of Public Health (JPH). Environmental Health Perspectives etc.
- Books@ Ovid provides full-text of key medical, nursing, and pharmacy texts from a variety of publishers and includes Clinical Evidence.
- CINAHL Plus with Full Text is the world's most comprehensive source of full text
 for nursing & allied health journals, providing full text for more than 620 journals
 and covering topics such as public health, healthcare delivery and promotion,
 epidemiology and statistics, and leadership in health management.
- The Cochrane Database of Systematic Reviews contains full text articles as well
 as protocols focusing on the effects of healthcare. Data is evidence-based
 medicine and is often combined statistically (with meta-analysis) to increase the
 power of the findings of numerous studies.
- DARE includes abstracts of published systematic reviews on the effects of health care from around the world, which have been critically analyzed according to a high standard of criteria.
- *ERIC* contains citations and abstracts for education literature, including articles, books, papers, proceedings and other documents from 1966 to present.
- Family & Society Studies Worldwide contains citations and abstracts for literature on research, policy, and practice in the fields of family science, human ecology, human development and social welfare.
- MEDLINE contains over 4 million citations and abstracts, providing unparalleled access to worldwide biomedical literature. The database contains a broad range of medical topics relating to research, clinical practice, administration, policy issues, and health care services. Produced by the U.S. National Library of Medicine, MEDLINE indexes more than 5000 journals from around the world.

- Nursing & Allied Health Collection: Comprehensive Edition is a valuable resource for nursing and allied health professionals, students, educators and researchers. This database contains nearly 400 full text journals, including nearly 300 peer-reviewed titles covering the areas of nursing, biomedicine, health sciences, consumer health and allied health disciplines.
- PAIS International (Cambridge Scientific Abstracts) provides citations and abstracts related to current issues and public affairs.
- Project Muse (Johns Hopkins University Press) includes full text articles in the humanities and social sciences, including gender studies, cultural studies and political science.
- Science Citation Index Expanded (part of the Web of Science subscription): This
 Thomson ISI database provides abstracts, cited references, times cited, and links
 to full text when available for articles in the sciences and social sciences (1975 to
 present).
- Up-to-Date provides full-text evidence-based topic guides provide clinical information in many specialties and includes guides describing current options for diagnosis, management and therapy, optimal screening and prevention strategies.
- Wilson Web Social Sciences Full Text includes topics of public health, international/global health, health promotion and leadership.

As mentioned already, NSU students have access to full-text and/or full-image documents and articles from more than 24,000 unduplicated full-text journals in 280+ subscription databases. The authoritative nature of the resources that can be accessed in the health sciences is illustrated by NSU full-text access to 18 of the top 20 journal titles in Public, Environmental and Occupational Health as identified by the Institute of Scientific Information's Impact Factor rating. NSU students have online access to the following top journals:

Annual Review of Public Health	American Journal of Preventive Medicine
Environmental Health Perspectives	Genetic Epidemiology
Healthcare risk management	Healthcare strategic management

Journal of healthcare management	Research in healthcare financial management
American Journal of Epidemiology	Cancer Causes & Control (CCC)
Epidemiology	International Journal of Epidemiology
Infection Control & Hospital Epidemiology	Journal of Exposure Science and Environmental
American Journal of Public Health	Bulletin of the WHO

III. Staffing and Services to Support Initiative

Reference Services

The Health Professions Division Library provides all students in the Health Professions Division with help in person, on the phone, and by email on how to use online technologies and personal assistance in conducting research. The goal of reference services in the Health Professions Library is to provide all students with the information literacy skills that enable them to locate, evaluate, and use information independently.

Bibliographic Instruction

Formal training in accessing the library resources will be provided to students in the Health Professions Division Library in Orlando and online. One-on-one training is also available throughout the year. Faculty can request specialized library training when students take their specialization classes. The NSU Libraries also provide handouts, tutorials, pathfinders, and Web pages. These asynchronous materials have the advantage of providing point-of-need help 24 hours a day. The focus of all library training and instructional materials is to prepare students to be continuing life-long learners.

Interlibrary Loan

Students can request documents through interlibrary loan. These include books, copies of journal articles, and more. Resources that can be scanned are disseminated electronically via the ILLiad system. This provides Health Science students with world-class access to primary research materials of 1,000 graduate schools and universities in the United States, Canada, and selected institutions from other countries written since 1997. When students attend classes at the Student Education Center in Orlando, they can also make use of the book drop for returning any NSU books mailed to them.

Physical Facilities and Staff

The NSU Libraries have adequate facilities to house and service the library needs of NSU Health Science students on campus or at a distance. The HPD Library has 19,000 square feet of space with a staff of five librarians and 18 paraprofessionals who can help students in the library as well as provide synchronous and asynchronous services for online students who may live outside of Broward County.

Student and Faculty Information Access

NSU provides students and faculty with access to a comprehensive set of academic computing technologies and related information resources:

NSU is an equity member of the Florida LambdaRail (FLR) network which provides opportunities for faculty members, researchers, and students to collaborate with colleagues around the world on leading edge research projects. NSU maintains a primary 10 Gbps link, and a secondary 1 Gbps backup link to the FLR. All NSU users are provided connectivity to multiple commercial Internet Service Providers (at 100 Mbps), and advanced production regional and national networks, such as the National LambdaRail (NLR) and the Abilene Internet2 backbone (at 100 Mbps). FLR also provides NSU with high speed IP transit paths between members and participants (at 10 Gbps).

NSU maintains high speed data networks at all campus locations and student educational centers. The main campus network backbone infrastructure provides Gigabit Ethernet bandwidth, with fiber optic links connecting buildings and floors. The network is arranged in a star topology with redundant links. Within buildings, switched Ethernet connectivity (at 100 Mbps) is provided to desktop computers and other devices. Gigabit Ethernet and switched Ethernet connectivity is deployed at most other campus and student educational center locations in a similar manner. Connectivity to main campus from other campus and student educational center locations varies from 1.5 Mbps to 1 Gbps depending on bandwidth requirements. NSU provides students with access to the 802.11b/g WINGS wireless network on main campus and at several student educational centers. From off-campus locations, students may access general Web-based electronic resources (e.g. registration, grades, transcripts, email, online courses and the library) using a Web browser and an Internet connection. For Internet access to special or restricted resources, NSU provides Virtual Private Network (VPN) connectivity to students. Students may also access these resources using available 56 Kbps dialup modems.

The HPD library maintains an Internet Website which allows for access to several health-related journals, text books, journals, and other electronic data bases including MEDLINE and MD Consult. Membership in the national library of medicine and other consortia provide for cooperative lending relationships, which afford HPD students and faculty access to international library holdings.

In addition, the HPD library holds over 21000 volumes which may be checked out either in person or virtually.

As with the D.H.Sc. program, the Electronic Library will be an invaluable source for students enrolled in the Ph.D. program. The vast collection of on-line journals, databases and books will

greatly enhance their learning and rival most brick and mortar collections. Each student will be given password access to the library resources that will allow 24 hour access to the databases.

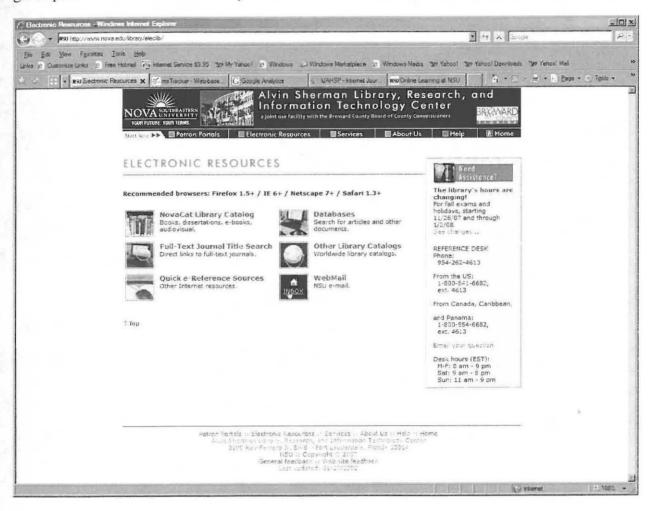


Figure 1: Alvin Sherman Library, Research and Information Technology Center

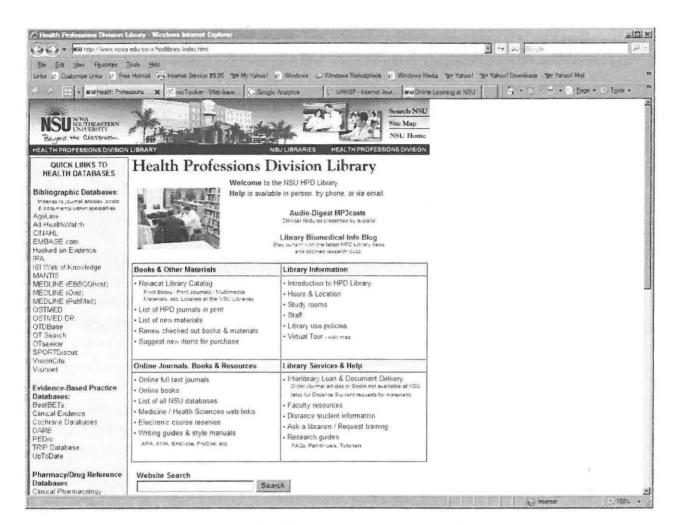


Figure 2: Health Professions Division Library

TEACHING TOOLS

WebCT Template

All courses will be taught using WebCT. The Department of Health Science has developed a template that delivers course content in an interactive and consistent manner. The following graphics are screen shots of the template.

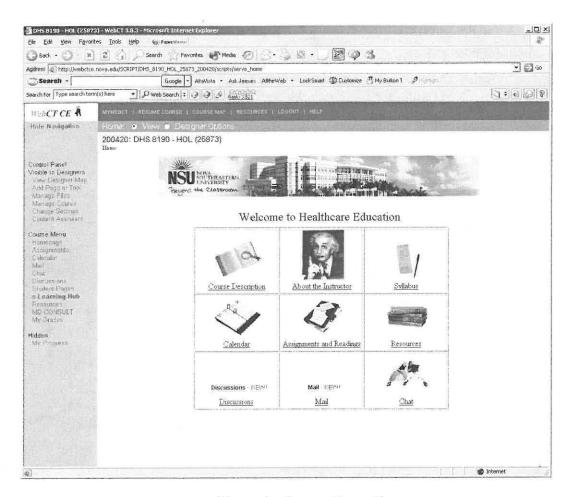


Figure 3: Course Home Page

In addition, the College of Allied Health and Nursing faculty and staff will provide technical training support, and will be involved in program issues touching on technology in order to provide smooth and orderly program progression. As an example, the department chair developed an online orientation for new students, including course demos using Camtasia® which is a screen recorder and demo producer. This will allow for distance demonstrations using WebCT.

Student Center

The common student area (Figure 4) in WebCT is the online student center that the department, in conjunction with the IZONE, developed for all DHS programs to allow students to have an online student union. The B.H.Sc., M.H.Sc. and D.H.Sc. currently have a separate center for their programs. A center will be developed for the Ph.D. as well.

Here the students discuss projects, personal information and anything of importance. This is also used to keep track of all students. It is the policy of the department that students check in to the center at least once every two weeks thereby assuring student / program communication. Sample

papers, course schedules, announcements, summer institute photographs, and many other forms of information are provided in the area.

The center allows the department to post announcements and send email and discussions to the students. It has been told to the department by students that the online student center is a great tool for student retention. By giving the students a place to chat with their classmates and exchange ideas, they don't feel as if they are isolated or islands unto themselves.



Figure 4: D.H.Sc Student Center Homepage

Recent Comment from a Student Regarding Communication in the DHS

There appears to be a commitment on behalf of the Program Director to respond in a timely manner to students and prospective students. Care is given to provide direction and guidance to students as it relates to coursework questions as well as guidance to students as they matriculate and navigate through the complexities of the distance education experience. As the data demonstrates, the concept of distance education is new to many learners. A commitment to

providing remedial training to students newly engaged in the distance medium is necessary in this type of degree program. Nova, through the actions of the D.H.Sc. Program Director and his staff appear to be sensitive to this need and have mechanisms in place to assist students at all levels.

Student / Faculty Research Center

As part of the Quality Enhancement Plan for the College of Allied Health and Nursing, an online research center was developed to facilitate faculty/student cooperative research and publication. The center contains IRB links, publication assistance, journal links, as well as shared and private discussion area.

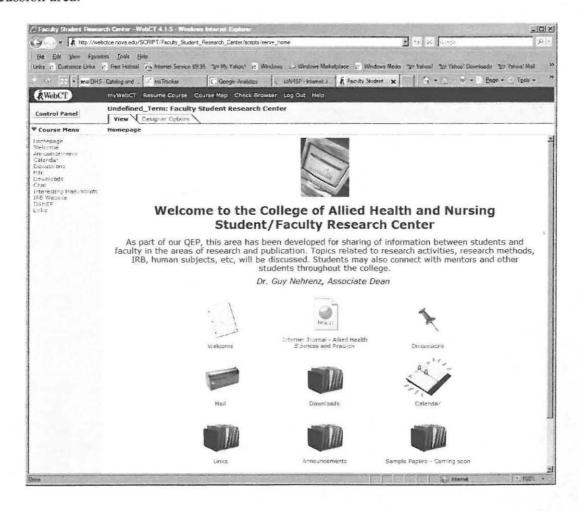


Figure 5: Student/Faculty Research Center

Section F: PHYSICAL RESOURCES

The Ph.D. in Health science will be primarily delivered at a distance. Students will need the following minimum requirements:

Computer

Below is the recommended minimum computer configuration for the Ph.D. program.

- Pentium, 1.5 GHz minimum processor
- 1 GB RAM
- Video capable of 1024 X 768 screen display and streaming video capable
- CD ROM
- Full duplex sound card and speakers
- Microphone with headset or boom microphone
- Cable, DSL, Satellite or Cell Modem
- Internet Service Provider
- Windows XP or higher
- Office XP or higher with Power Point and Word (or Office replacement such as Open Office)
- Adobe Reader

The three required summer institutes will be held at the NSU Orlando Student Educational Center (SEC). The facilities there include computer labs and classrooms and there will be minimal impact on the educational center beyond the allocation of classrooms.

All web-based support (WebCT, Electronic library) is already in place. There will be no major impact from the projected additional Ph.D. students

The sharing of courses and faculty will allow for cost-effective and consistent instruction and will assure that the objectives for the healthcare core are met. These consistencies are important for the students and faculty and are similar in nature to the collaboration between the PsyD and Ph.D. in the psychology program. Both require consistent core knowledge and build on the professional knowledge of the practitioner.

The D.H.Sc., much like the Psy-D, is a health care professional involved in the clinical aspects of health care. The Ph.D. in Health Science is involved in the research aspects of clinical treatment much as the Ph.D. in psychology. The collaboration and diversity between the D.H.Sc. and the Ph.D. will strengthen both degrees and will lead to further future specialization.

Section G: FINANCIAL SUPPORT

Because the Ph.D. will use the majority of the D.H.Sc. courses and would add a research track, the impact of adding the Ph.D. would be a potential increase in revenue for the D.H.Sc. program and a positive cash flow for the Ph.D.

The enrollment into the Ph.D. program is estimated at 15 to 20 students per year, with an expected 20% attrition rate. The attrition rate is reflected in the table below.

The program director position may be offered to one of the current health science faculty. The program director needs to hold a Ph.D. in a health related science, be a licensed, certified or registered health professional and have experience in supervising student research. This may however bring with it the requirement to hire an additional Ph.D. faculty member at half time initially to take over some of the teaching load. This additional part time faculty member could also be used to teach in the D.H.Sc. as time permits. This would allow a split in the salary between the D.H.Sc. and Ph.D.

The current staff members for the department of health science (one program manager, two coordinators, all full time) would be able to handle the support activities for the additional 15 to 20 Ph.D. students.

The Research Core Courses are a Health Professions Division project allowing the cost to be shared among all colleges.

THREE YEAR FINANCIAL PROJECTION Ph.D.

	Year 1 09-10	Year 2 10-11	Year 3 11-12
REVENUE			
Students	15	27 (15 new and 12 from previous year)	35 (15 new, 12 from year 2 and 10 from year 1)
average number of credits per year	20	20	20

TOTAL REVENUE	150,000	270,000	350,000
Allega Carlo Carlo			
EXPENSE		Marine Marin	
Marketing	10,000	10,000	10,000
Travel	3,500	3,500	3,500
50% Program Faculty/Director	40,000	85,000	85000
Program Faculty	40,000	40,000	80,000
Fringe(.28)	22400	35000	46200
FICA(.07)	5600	8750	11550
Office Supplies	2000	2000	2000
Postage	500	500	500
Summer Institute Additional	0	0	8000
TOTAL EXPENSES	124,000	184,750	246,750
NET REVENUE	26,000	85,250	103,250

Section H: EVALUATION AND ASSESSMENT

Evaluation and Assessment

The Doctor of Philosophy in Health Science program will be evaluated and assessed through various processes, described below, that are maintained at the program, academic unit, and institutional levels.

Evaluation and Assessment at the Program and Academic Unit Levels

Student Evaluations

At the end of each semester students complete course and instructor evaluations offering feedback on course organization, delivery and overall content and achievement of stated

outcomes. These evaluations are also reviewed by the faculty and program directors and discussed as needed.

Curriculum Committee

The department of health science has charged the curriculum committee with the review of all proposed course syllabi, objectives and projected outcomes.

Evaluation and Assessment at the Institutional Level

NSU maintains a three tier process of academic program review at the institutional level. The components of the process include the assessment of student learning outcomes, an internal, and an external review of academic programs. Academic program review is one of several components of university planning and evaluation that comprise the overall evaluation of institutional effectiveness. In brief, institutional effectiveness (IE) is evaluated on several levels, including demonstration of the level of achievement of university goals appearing in the strategic plan, academic program review (academic IE), and evaluation of the effectiveness of administrative and educational support units (administrative IE). Information from these processes feed into various facets of university planning and help to inform areas such as levels of university goal achievement and academic quality. Therefore, the results of academic program review (which includes the assessment of student learning outcomes) facilitate university planning and contribute substantially to the overall evaluation of the university's institutional effectiveness.

Assessment of the Outcomes of Student Learning

The Doctor of Philosophy in Health Science program will be evaluated in accord with the university's Assessment of the Outcomes of Student Learning process that is coordinated through the office of the Vice President for Institutional Effectiveness. The purpose of assessing the outcomes of student learning in the academic majors is to demonstrate the extent to which particular outcomes of student learning have been achieved, to improve the quality of teaching in the major, and to discover methods to achieve student learning. Programs are reviewed through the Assessment of Student Learning Outcomes process at approximately five-year intervals. New programs are not required to submit a formal evaluation report until at least one class has graduated from the program. All new programs are required to delineate general and specific outcomes of student learning, and where each is addressed in the curriculum. The review process involves a set of six sequential steps that are undertaken each academic year commencing in September and ending the following August.

Academic center deans are expected to provide leadership for the assessment of the outcomes of student learning process, overseeing and approving the assessment activities within their respective centers, monitoring progress, and publishing a report of the results of the assessment in their center. Deans are expected to take an active role in the assessment process, and clearly communicate expectations of quality to the faculty, especially those developing assessment strategies and writing the reports. At the end of each assessment period, the center dean publishes a report summarizing the results of assessment, conclusions concerning the level of achievement of student learning outcomes, and a description changes in the curriculum, teaching methods, strategies for assessing student achievement, and other changes to be made as a result of the assessment process. Changes and improvements documented in the report provide a record of efforts to improve academic program quality, and to enhance student learning.

The assessment of student learning outcomes in the major is designed as an evolving process that expands in scope and depth of analysis with each new reporting cycle. The assessment reports are expected to address several broad questions central to assessing the effectiveness of academic majors:

- A. Are students able to successfully complete the program and at what rates?
- B. What evidence can be obtained to demonstrate the level of achievement of the particular expected outcomes of student learning in the major chosen for analysis?
- C. Does the major prepare students adequately for employment in the field, advanced study, or with the professional competence needed for success and advancement in their job?

Academic Program Review

In addition to the review processes described above, the Doctor of Philosophy in Health Science program will be reviewed through the university's academic program review process, which incorporates the assessment of student learning outcomes as one of a variety of program assessments. The academic program review process adds reviews of program evaluations by a university Academic Review Committee, and by external consultants.

The purpose of the ARC is to oversee the process of academic program review, and identify strategies for achieving the university's goal of academic excellence or eminence in each program, department, or school. The committee also ensures that newly established programs are effectively managed, and are consistent with the mission, goals, and objectives of the university.

The Academic Review consists of ongoing, high quality peer review of all the University's academic units and programs on a five-year cycle. Reviews are intended to provide a sharpened focus on program areas in which excellence can be achieved and will enhance the national stature and assure the most efficient use of available resources. The objectives of Academic Review then are:

- To assert to all external constituents that Nova Southeastern University seeks the highest standards of academic excellence
- To seek to 'fine-tune' academic programs, through collegial, peer and external consultation to the program, and
- Most importantly, to establish a culture within the University that reflects an endeavor to strive for excellence in each and every one of our academic activities.

The academic program review process consists of the following steps:

- Completion of Self Study. (Typically completed as part of the Assessment of the Outcomes of Student Learning process that is coordinated by the office of the Vice President for Institutional Effectiveness)
- Collection of descriptive information from other similar programs.
- Completion of an evaluative and prescriptive report developed by the *Internal Review Committee*.
- External consultation provided by a colleague, not affiliated with the University, who is an expert and a leader in the field.
- Completion of a *Summary and Recommendations* report made by the Academic Review Committee and submitted to the President of the University.

This process culminates in a meeting between the Dean and the President during which time the results of the Academic Review can be discussed and an action plan resulting from the review, generated.

References

	http://	www	.rmuohp	.edu/body	degree.	html
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http://www.cgedonline.net/jsp/Online Degrees/Program Details/660

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http://www.onlineeducationnewsletter.com/may2003.htm

MEMORANDUM

TO: RAY FERRERO, JR., PRESIDENT

FROM: ACADEMIC REVIEW COMMITTEE

RE: SUMMARY AND RECOMMENDATIONS FOR:

HEALTH SCIENCE, D.H.Sc.

CENTER: HEALTH PROFESSIONS DIVISIONS - ALLIED

HEALTH AND NURSING

DATE: SEPTEMBER 23, 2008

The below summary reflects the Academic Review Committee's evaluation of the above program. This review is based upon the information provided from the Office of Institutional Effectiveness's Assessment of Student Learning Outcomes at the Level of the Major, the Internal Review Committee's report on the program, the external consultant's report, program descriptions, and other printed documents.

Selected Comparative Pre-Eminent Programs:

In response to the President's earlier request, for this year's academic program review process, the center presenting the program under review selected the following as reasonably comparative programs:

- University of Indianapolis-D.H.S. Physical Therapy (Post professional)
- University of Medicine & Dentistry of New Jersey-Health Science, Ph.D.
- Virginia Commonwealth University-Ph.D. Health Related Sciences

IRC Identified Elements of Pre-Eminence:

In preparing its report, the Internal Review Committee for this program identified the following as elements of pre-eminence: Proposed Summary of Recommendations to President Health Science, D.H.Sc. 2007-2008 September 23, 2008 Page 2 of 11

- A. A pre-eminent program in this field has the following elements with respect to its <u>Faculty</u>:
 - Earned doctoral degree
 - Broad scope of expertise in research and practice in their chosen area of specialization
 - Specific areas of interest within their specialty field
 - Diverse clinical research interests
 - Experience in student mentoring
 - Expertise in didactic and clinical teaching
 - Expertise in the use of technology with regards to on-line education
 - Ability to examine and understand current trends and future changes in the field of allied health from a multidisciplinary perspective
 - Knowledge of professional and ethical responsibility and behavior in the allied health professions
 - Knowledge and understanding of diverse and special population health issues and cultural competence in health care
 - Strong and positive local, national, and international relationships within the allied health communities
 - Sufficient number of faculty to meet the program's academic and clinical needs
- B. A pre-eminent program in this field has the following elements with respect to its <u>Faculty Development</u> opportunities:
 - Opportunity to attend and participate in local, national and international professional conferences related to their specific area of expertise to expand knowledge base
 - Opportunity for research exploration in an area of clinical interest
 - Opportunity to explore technology in teaching

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- C. A pre-eminent program in this field has the following elements with respect to its <u>Students</u>:
 - Encourage commitment to and understanding of the allied health professions and health care service delivery models
 - Superior academic preparation and clinical training
 - Opportunity to participate in clinical research
 - Knowledge of and value for the learning process
 - Rigorous admissions process including: Previously completed master's degree from an accredited college or university; GPA no lower than 3.0; Prior health care experience; Three letters of evaluation/recommendation from academic sources; Personal statement outlining motivation, career goals, and applicant's contribution to the program
 - Provide opportunity for service to the community
- D. A pre-eminent program in this field has the following elements with respect to its <u>Student Enhancement</u>:
 - Creation of and participation in a Capstone project or Dissertation research project
 - Provide diverse coursework designed to produce scholars that are the future teachers, researchers, and administrators at the highest level in the field of health related sciences
 - Administer comprehensive examinations after completion of applicable core course work for successful program completion
 - Encourage professional development via attendance or presentation at local, national, and international conferences related to health sciences
 - Multi-cultural and interdisciplinary student body diversity
 - Exposure to latest field-specific technology

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- E. A pre-eminent program in this field has the following elements with respect to its <u>Curriculum and its Curriculum Development</u>:
 - Annual review and revision of program curriculum by all faculty
 - Respond to changes in academic coursework as national needs change as indicated by current research and trends in the field of health related sciences
- F. A pre-eminent program in this field has the following elements with respect to its <u>Student Services</u>:
 - Easy access to faculty and staff with an 'open door' (open telephone/email) policy
 - Streamlined registration process
 - Frequent review of student academic portfolios in order to meet graduation requirements
 - Required on-line comprehensive University orientation program
 - Faculty guidance of formative and summative committees for successful Capstone/Dissertation completion
- G. A pre-eminent program in this field has the following elements with respect to its Mission and Operations Fit with the University:
 - Excellence in the education of doctorally-prepared clinicians and healthcare practitioners
 - Model of best practice by faculty
 - Foster critical thinking skills
 - Respond to changing trends and issues impacting the respective professions represented in the student body and faculty
 - Ensure financial integrity and efficiency
 - Ensure operational efficiency

Program History and Description:

Proposed Summary of Recommendations to President Health Science, D.H.Sc. 2007-2008 September 23, 2008 Page 5 of 11

This program has been in existence for 7 years. When the Doctor of Health Science (DHSc) Program was originally conceived in 1999-2001, the program was first intended to serve physical therapists, and was subsequently redirected towards physician assistants. Prior to its initiation, the scope of the program widened to all "advanced" allied health professionals. The Doctor of Health Science Program (DHSc) at Nova Southeastern University (NSU) is now a post-professional doctoral degree program designed for masters-prepared healthcare professionals. It is designed to provide advanced knowledge and skills in professionalism, health humanities, social sciences, evidence-based practice, health professions educational methodologies, health policy, global health issues, patient safety, research methods and scholarship.

Its enrollment for the past three years has been n=425 students (data available in ASLO report for years 2003-2005). To complete this program successfully, each student must have accumulated at least 60 hours of credit. In addition, students who choose to complete the DHSc with a concentration in Conflict Resolution must complete a minimum of 64 credits to earn the degree. The DHSc program is designed to be completed in a distance-learning online format along with 2 one-week summer sessions. Chat sessions and threaded discussions are a regular required part of the program. This allows for student - professor and student - student interaction. NSU offers this program online with the required Summer Institute to be completed in the University's Main Campus.

The program consists of 6 full-time faculty and 15 part-time/adjunct faculty.

The College of Allied Health and Nursing student/faculty ratio is 11:1. This ratio is determined by using 67 full-time faculty and 110 part-time/adjunct faculty for the College of Allied Health and Nursing and using 1,912 students enrolled in 2007. Specifically, the DHS program's student/faculty ratio yielded a 20:1 ratio (20 students per full-time/part-time faculty).

This program is not subject to accreditation review by any external agency and is not subject to the approval of any entity other than NSU. Furthermore, the program is not intended to meet licensing/certification requirements.

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Program Evaluations and Recommendations:

The university's academic review process considers the following five factors to be significantly related to the overall quality of any academic program. Each of the items for those factors will be evaluated as follows:

'Inadequate',

'Adequate', or

'Excellent'

Each academic area rated is followed by specific recommendations.

I. Curriculum

Adequate is managed by a group of identified faculty who are assigned

the responsibility of regular curriculum review and

development

Adequate provides for adequate coverage of all applicable licensure,

certification, etc. requirements

Adequate is well organized with clear objectives, requirements,

assignments, and grading procedures

<u>Adequate</u> employs effective educational technology in its delivery

Specific 'Curriculum' Recommendations:

 No standard rubric is used to evaluate courses (for addition, merger, or elimination), but faculty professional judgment is utilized in the traditional collegial discussion/feedback fashion. The program should develop a list of Proposed Summary of Recommendations to President Health Science, D.H.Sc. 2007-2008 September 23, 2008 Page 7 of 11

specific competencies that the graduates of the program will possess upon completion and make them readily available to applicants and students.¹

- 2. Consider implementing a comprehensive written examination that is directly linked to stated program goals and objectives (competencies) documenting the program completers' knowledge of the discipline.
- 3. Additional curriculum focused on health care finance, economics and the business aspects of health care practices may be beneficial to the students enrolled in the program.²
- 4. It may be of benefit to the program's students to participate in specific scholarship/original research with direct faculty mentoring.

II. Faculty

Adequate are sufficient in number for teaching and supervision

Adequate possess appropriate credentials and expertise for teaching in their field

Adequate reflect cutting-edge knowledge in their field as evidenced by scholarly involvement and other similar activities

Adequate reflect evidence of familiarity with effective educational techniques and technology

Specific 'Faculty' Recommendations:

^{1.} ECR p3 and IRC p9

². ECR p3.

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- 5. There may be a benefit to having a higher percentage of core full-time faculty appointed within the program so that they can participate in the full array of teaching, mentoring, research/scholarly activity and Program and University administrative responsibilities.
- 6. If the program elects to place future emphasis on preparing its graduates for academic settings (44% of graduates responding to graduate survey indicated being employed in health professions education), then employing additional PhD prepared faculty with original research experience would be important.³
- 7. The Program and University would benefit from having the faculty members spending a greater percentage of time conducting and publishing original research.⁴

III. Students

Adequate are selected based on measurable standards that reflect aptitude to perform in the program

Adequate are effectively tracked and provided ongoing advisement/counseling throughout the Program

<u>Inadequate</u> are tracked after graduation and are regularly 'placed' in settings (job, advanced education, etc.) that are consistent with program goals

Adequate routinely achieve the *Student Outcomes* that have been established by the program

³. IRC p13, ECR p2

^{4.} ECR p2

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Adequate actively participate in faculty scholarship/research

Specific 'Students' Recommendations:

- 8. The program would benefit from assessment of targeted student learning outcomes related to overall program goals; the development of assessment rubrics targeting alumni perceptions of student learning throughout the course of the curriculum would also enhance ongoing curricular development. The program/university will need to develop better techniques for tracking and acquiring data from program completers so that decisions regarding program modifications are driven by high quality data.⁵
- 9. Survey the employers' f program completers as an additional source of data relevant to the program completers' acquisition of the knowledge, skills and abilities taught in the program.⁶
- 10. Use exit interviews or survey students who do not persist in the program to have data available to assess whether any of the forms of attrition might be preventable.⁷
- 11. Recommend the program's students participate in specific scholarship/original research with direct faculty mentoring. It would be helpful for program faculty to consider outlining additional specifications to the project and to evaluate the learning outcomes pertaining to the rigor of required scholarship/research.⁸

⁵. ECR p4. IRC D.1. p10

⁶. ECR p 4.

⁷. ECR p 3.

^{8.} ECR p 2. IRC p 7.

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⁵. ECR p4. IRC D.1. p10

^{6.} ECR p 4.

⁷. ECR p 3.

⁸. ECR p 2. IRC p 7.

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IV. Educational Support Services

<u>Adequate</u> Faculty development opportunities are provided to all levels of

faculty

Adequate Educational support is provided through availability of

technology, library resources, and other similar services

Adequate Administrative services such as course registration, financial

aid, career counseling, etc. are routinely available

Adequate Faculty and administrators are routinely available to students as

mentors and problem solvers

Specific 'Educational Support Services' Recommendations:

12. Consider surveying the employers of program completers as an additional source of data relevant to the program completers' acquisition of the knowledge, skills and abilities taught in the program.

V. Program Mission and Operations

<u>Inadequate</u> are consistent and compatible with University mission, goals, and objectives

Adequate avoid redundancy with other University programs and activities

Adequate reflect collaborative efforts with other University Centers,

Schools, and Colleges

⁹. ECR p 2 and p 4.

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<u>Adequate</u> function cooperatively with University Academic compliance offices (i.e. IE and ARC)

Specific 'Program Mission and Operations' Recommendations:

- 13. As the program grows and the healthcare field expands, the program might consider expanding its collaboration with HSS into other academic units (e.g., psychology and education are two that come to mind). 10
- 14. The program needs to state/publicize clearly the program's mission, vision and values statements. 11

¹⁰. IRC p13

^{11.} ECR p4

Ray Ferrero, Jr., J.D. University President Nova Southeastern University 3301 College Avenue Fort Lauderdale-Davie Florida 33314-7796

President Ferrero,

It is my privilege to have the opportunity to serve as the External Consultant as part of the academic review process for the Nova Southeastern University's Doctorate of Health Science, (D.H.Sc.) degree program. I sincerely enjoyed the opportunity to meet you, learn more about this program, NSU and the many wonderful things that are ongoing at your institution. In preparing this report I have...

- Reviewed the documents supplied and made available concerning the doctorate of health sciences program.
- Conducted an on site visit to the University to meet with students, faculty, administrators members of the Internal Review Committee.

The observations and comments provided in this report are intended to help the University achieve its stated standard of academic excellence and goal of academic preeminence. In an attempt to maintain brevity, for each section I have categorized my comments into strengths, areas for potential improvement and points for consideration. If you would benefit from additional detail on any of these items please feel free to contact me.

1. General (Miscellaneous) Program Comments:

- This is a young program (7years) that is still evolving and thus still being defined.
- This program fills an important and valuable niche (nationally) among health professionals who do not possess a doctorate level degree.
 Obtaining this degree often affords these individuals the credential they need to advance within their organizations.
- Some individuals have expressed the concern that this program appears
 to have an entrepreneurial orientation. While these perceptions are likely
 not based on a full working knowledge of the program's merits (and thus
 may not be accurate), it is a perception that exists among a subset of
 members in the PA education community (and perhaps others). This
 suggests that there may be a need for a public relations plan targeting
 greater communication and information about the program to targeted
 audiences.

2. Faculty and Faculty Development Strengths:

- The current program faculty members possess a broad scope of clinical and educational expertise in their representative disciplines.
- The faculty members appear well adapted to the distance learning modality used in the program and students speak favorably of the faculty members.
- The University values faculty development and reasonable resources are made available to program faculty for this purpose.

Areas of Potential Improvement:

 The Program and University would benefit from having the faculty members spending a greater percentage of time conducting and publishing original research.

Points for Consideration:

- There may be a benefit to having a higher percentage of core full-time faculty appointed within the program so that they can participate in the full array of teaching, mentoring, research/scholarly activity and Program and University administrative responsibilities.
- If the program elects to place future emphasis on preparing its graduates for academic settings (44% of graduates responding to graduate survey indicated being employed in health professions education), then employing additional PhD prepared faculty with original research experience would be important.

3. Students and Student Enhancement Strengths:

- The program has excellent diversity represented among its applicants and students enrolled in the program.
- The program has attracted some very talented students who have achieved many remarkable professional accomplishments.

Areas of Potential Improvement:

- The program should consider the potential benefits/need for a comprehensive examination for the D.H.Sc. degree.
- It may be of benefit to the program's students to participate in specific scholarship/original research with direct faculty mentoring.

Points for Consideration:

 It is unclear to what extent the program attracts very talented health professionals who already possess the skill (competencies) to be taught in

- the program or if the program in fact equips these individuals with the skills that help them achieve their successes.
- The stated elements of pre-eminence related to student enhancement indicate the need for... "diverse coursework designed to produce scholars that are future teachers, researchers and administrators at the highest level in the field of health related sciences." Additional course work might be necessary to prepare program completers to conduct original research and to function as administrators in today's health care systems.
- Consider using exit interviews or survey of students who do not persist in program to have data available to assess whether any of the forms of attrition might be preventable.

4. Curriculum Development

Strengths:

- The course work delivery via distance learning modalities provides maximum flexibility and generally seems to work well for this degree based on student comments.
- Students report that access to instructors and TAs is readily available and helps to maximize their learning.

Areas of Potential Improvement:

- The program should develop a list of specific competencies that the graduates of the program will possess upon completion and make them readily available to applicants and students.
- Consider implementing a comprehensive written examination that is directly linked to stated program goals and objectives (competencies) documenting the program completers' knowledge of the discipline.

Points for Consideration:

- Annual program review should include course failure rates with program modifications based on evaluation of these rates.
- Additional consideration should be given to strategies designed to identify student's writings skills prior to admission and then to specifically develop students writing skills in the program.
- Additional curriculum focused on health care finance, economics and the business aspects of health care practices may be beneficial to the students enrolled in the program.

5. Student Services

Strengths:

 Students spoken with indicated that faculty are readily available and helpful.

Areas of Potential Improvement:

 The Program/University will need to develop better techniques for tracking and acquiring data from program completers so that decisions regarding program modification are driven by high quality data.

Points for Consideration:

 Consider surveying the employers of program completers as an additional source of data relevant to the program completers' acquisition of the knowledge, skills and abilities taught in the program.

6. Program's Mission and Operations Fit with the University Strengths:

- This program is a unique national program that attracts positive attention to the University.
- Program matriculents and completers are accomplished and reflect positively on the Program and University.

Areas of Potential Improvement:

 The program lacks a clearly stated/publicized mission, vision and values statement.

Points for Consideration:

 Given the significant number of students and program completers who are associated with education/faculty roles an associated or additional degree offering of PhD program or research specialization should be considered.

Thank you for allowing me the opportunity to participate in the program's review. I would be happy to expand on any of the comments in this report if it would assist the Program or University in its review process.

Sincerely,

David P. Asprey, PhD, PA-C

David P. asprey

MEMORANDUM

TO: FRANK DE PIANO, VICE-PRESIDENT FOR ACADEMIC

AFFAIRS

FROM: INTERNAL REVIEW COMMITTEE

RE: INTERNAL REVIEW COMMITTEE REPORT FOR DOCTOR OF

HEALTH SCIENCE PROGRAM

CENTER: COLLEGE OF ALLIED HEALTH & NURSING

DATE: February 15, 2008

CC: JOE GROHMAN, CHAIRPERSON, ACADEMIC

REVIEW COMMITTEE

I. Preamble

The elements of pre-eminence as they relate to the type of academic program under review are:

- A. A pre-eminent program in this field has the following elements with respect to its *Faculty*:
 - Earned doctoral degree
 - Broad scope of expertise in research and practice in their chosen area of specialization
 - Specific areas of interest within their specialty field
 - Diverse clinical research interests
 - Experience in student mentoring
 - Expertise in didactic and clinical teaching
 - Expertise in the use of technology with regards to on-line education
 - Ability to examine and understand current trends and future changes in the field of allied health from a multidisciplinary perspective
 - Knowledge of professional and ethical responsibility and behavior in the allied health professions
 - Knowledge and understanding of diverse and special population health issues and cultural competence in health care
 - Strong and positive local, national, and international relationships within the allied health communities
 - Sufficient number of faculty to meet the program's academic and clinical needs

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- B. A pre-eminent program in this field has the following elements with respect to its *Faculty Development* opportunities:
 - Opportunity to attend and participate in local, national and international professional conferences related to their specific area of expertise to expand knowledge base
 - · Opportunity for research exploration in an area of clinical interest
 - · Opportunity to explore technology in teaching
- C. A pre-eminent program in this field has the following elements with respect to its *Students*:
 - Encourage commitment to and understanding of the allied health professions and health care service delivery models
 - Superior academic preparation and clinical training
 - Opportunity to participate in clinical research
 - Knowledge of and value for the learning process
 - Rigorous admissions process including: Previously completed master's degree from an accredited college or university; GPA no lower than 3.0; Prior health care experience; Three letters of evaluation/recommendation from academic sources; Personal statement outlining motivation, career goals, and applicant's contribution to the program
 - Provide opportunity for service to the community
- D. A pre-eminent program in this field has the following elements with respect to its Student Enhancement:
 - Creation of and participation in a Capstone project or Dissertation research project
 - Provide diverse coursework designed to produce scholars that are the future teachers, researchers, and administrators at the highest level in the field of health related sciences
 - Administer comprehensive examinations after completion of applicable core course work for successful program completion
 - Encourage professional development via attendance or presentation at local, national, and international conferences related to health sciences
 - Multi-cultural and interdisciplinary student body diversity
 - · Exposure to latest field-specific technology
- E. A pre-eminent program in this field has the following elements with respect to its Curriculum and its Curriculum Development:
 - Annual review and revision of program curriculum by all faculty
 - Respond to changes in academic coursework as national needs change as indicated by current research and trends in the field of health related sciences

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- F. A pre-eminent program in this field has the following elements with respect to its *Student Services*:
 - Easy access to faculty and staff with an 'open door' (open telephone/email) policy
 - Streamlined registration process
 - Frequent review of student academic portfolios in order to meet graduation requirements
 - Required on-line comprehensive University orientation program
 - Faculty guidance of formative and summative committees for successful Capstone/Dissertation completion
- G. A pre-eminent program in this field has the following elements with respect to its Mission and Operations Fit with the University:
 - Excellence in the education of doctorally-prepared clinicians and healthcare practitioners
 - Model of best practice by faculty
 - Foster critical thinking skills
 - Respond to changing trends and issues impacting the respective professions represented in the student body and faculty
 - Ensure financial integrity and efficiency
 - · Ensure operational efficiency

II. Executive Summary of Internal Review Committee Report

This program has been in existence for 7 years. When the Doctor of Health Science (DHSc) Program was originally conceived in 1999-2001, the program was first intended to serve physical therapists, and was subsequently redirected towards physician assistants. Prior to its initiation, the scope of the program widened to all "advanced" allied health professionals. The Doctor of Health Science Program (DHSc) at Nova Southeastern University (NSU) is now a post-professional doctoral degree program designed for masters-prepared healthcare professionals. It is designed to provide advanced knowledge and skills in professionalism, health humanities, social sciences, evidence-based practice, health professions educational methodologies, health policy, global health issues, patient safety, research methods and scholarship.

Its enrollment for the past three years has been n=425 students (data available in ASLO report for years 2003-2005). To complete this program successfully, each student must have accumulated at least 60 hours of credit. In addition, students who choose to complete the DHSc with a concentration in Conflict Resolution must complete a minimum of 64 credits to earn the degree. The DHSc program is designed to be completed in a distance-learning online format along with 2 one-week summer sessions. Chat sessions and threaded discussions are a regular required part of the program. This allows for student - professor and student -

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student interaction. NSU offers this program online with the required Summer Institute to be completed in the University's Main Campus.

The program consists of 6 full-time faculty and 15 part-time/adjunct faculty.

The College of Allied Health and Nursing student/faculty ratio is 11:1. This ratio is determined by using 67 full-time faculty and 110 part-time/adjunct faculty for the College of Allied Health and Nursing and using 1,912 students enrolled in 2007. Specifically, the DHS program's student/faculty ratio yielded a 20:1 ratio (20 students per full-time/part-time faculty).

This program is not subject to accreditation review by any external agency and is not subject to the approval of any entity other than NSU. Furthermore, the program is not intended to meet licensing/certification requirements.

III. Overview and Vision

- A. Vision statement

 The program does not have a formal vision statement at the time of this review.
- B. Current academic/intellectual profile (what distinguishes it from other programs in the field)
 A broad range of faculty disciplines within the DHSc include several physician

assistants, nurses, a physical therapist, a podiatrist, and a doctor of chiropractic, whose backgrounds are in medical writing, conflict resolution, program quality/reducing medical errors, global health, and exercise physiology. A concentration in conflict resolution offered as a collaborative effort between the College of Allied Health and the Graduate School of Humanities & Social Sciences is designed to prepare students for the global marketplace and to work with diverse clients/groups. The DHSc degree is directed toward enhancing the service and increasing the professional mobility of professionals who have a master's degree. The DHSc program was compared with the Ph.D. in Health Science at University of Medicine and Dentistry of New Jersey, Ph.D. and of Health Related Sciences at Virginia Commonwealth University, and the DHS in physical therapy at the University of Indianapolis, University of Medicine and Dentistry of New Jersey prepares its graduates for roles in leadership and research. The DHS in physical therapy is only open to physical therapists seeking a doctoral degree and expanded practice. The NSU program is open to a variety of healthcare practitioners, including social workers, physical and occupational therapists, etc.

C. Relationship to University's strategic plan
As stated earlier, there is presently no vision statement. The program's mission
statement is: The mission of the Doctor of Health Science Program at Nova

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Southeastern University is to develop leaders and educators in the health sciences via distance learning technologies, thereby providing opportunities for personal and professional growth, while enhancing the quality of, and access to healthcare in the communities served (Dr. Kelly, personal communication). This is consistent with the NSU mission of "preparing students for lifelong learning and leadership roles in business and the professions" (NSU 2006-7 catalogue, p. 5).

D. Recommendations of any previous reviews

No recommendations from previous reviews were found.

IV. Assessment of Quality

A. Faculty and Faculty Development

- 1. The faculty coverage for this program is sufficient to meet the program's needs. The program has 21 faculty affiliated in some capacity, i.e., teaching, advising, mentorship, etc. with students. The full time faculty of the department covers the entire department of health science programs, with 2 full-time faculty administratively assigned to the DHSc alone. Dr. Patricia Kelly is assigned exclusively to the DHSc for instruction and administrative time. There are six faculty that teach full time for NSU in the College of Allied Health and Nursing and devote substantial time to the DHSc. Other faculty are adjuncts but devote the majority of their time in any given semester to the DHS program. ¹
- 2. The program's faculty members are adequately credentialed and appropriately trained for this program's needs. The faculty have adequate qualifications in their respective fields in order to cover the broad range of skills, knowledge and competencies students are required to be part of the complex world of health care in the 21st century.²
- 3. The program's faculty members clearly reflect familiarity with and utilization of effective educational techniques and technology. Evidence of this is presented in a cursory review of the program's faculty curriculum vitae. In addition, all faculty have attended extensive WebCT training at some point, and some faculty have a particularly strong familiarity with these platforms. For instance, one faculty member is in the process of getting his PhD in educational technology from NSU. The Department Chair, has her Ed.D in Instructional Design from NSU, and the Program Director has an Ed.D in Health Care Education. All faculty involved in the program work closely with I-Zone.³

¹DHSc program description, p. 12; also, see http://www.nova.edu/dhs/faculty/; Dr. Kelly, personal communication (1-22-2008)

² Dr. P. Kelly, personal communication (1-22-2008); also see faculty credentials attached to this report ³ Dr. P. Kelly, personal communication (1-22-2008)

- 4. The program's faculty members clearly reflect cutting-edge knowledge in their field as evidenced by scholarly involvement and other similar activities. For instance, one faculty member publishes regularly in the program's on-line journal in the field of ethics, Internet Journal of Allied Health Science and Practice (IJAHSP), and is a reviewer for the journal; this faculty member is also an active member of several local and regional ethics committees. Another faculty has ongoing scholarly interest in global health and public health and is active at this university and her alma maters, University of Miami and FIU, in these areas. Her work is primarily devoted to community organization in these areas, and, as a new faculty, is getting her scholarly research agenda in order. She also practices medicine at Jackson Memorial Hospital. Furthermore, the Program Director is currently involved as an editor for the on-line journal, Internet Journal of Allied Health Science and Practice, is also a peer reviewer for the Journal of the American Academy of Physician Assistants, a peer reviewer for abstracts for the Annual Meetings of the American Academy of Physician Assistants, and is on the editorial board of Advance for Physician Assistants, and have recently published text chapters. She is also a co-author of a joint student faculty publication under review, and devotes significant time assisting doctoral students get published, with much recent success. Most adjunct faculty are heavily involved with service and teaching activities at their home institutions and have adequate bibliographies of publications.4
- 5. The program provides its faculty members with educational support through technology, library resources and other similar services. For instance, all faculty have full library and technology access; full time faculty enjoy all HPD educational offerings and a \$1,400 annual budget for continuing professional development. HPD has an annual conference each January, HSPERS, devoted to health professions education scholarly activities, and many faculty present and participate. HPD has weekly seminars and monthly lunchtime presentations on teaching techniques in the health professions that are very well attended by our faculty.⁵
- The program provides its faculty members with faculty development opportunities such as annual conferences. All faculty attend a minimum of 2 annual conferences as part of their ongoing professional development.⁶
- B. Students and Student Enhancement
- 1. Student diversity is apparent, despite the relatively small size of the program. Of the 117 graduates since the initial graduation year of 2003-2004, 47.44% were male and 52.56 male. 69.23% of the graduates through 2006 were Caucasian, 17.95% African-

⁴ Dr. P. Kelly, personal communication (1-22-2008)

⁵ Dr. P. Kelly, personal communication (1-22-2008)

⁶ Dr. P. Kelly, personal communication (1-22-2008)

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American, 3.85% Hispanic, 2.56% American Indian or Alaskan Native, 3.85% Asian or Pacific Islander and 2.56% unknown or unreported.⁷

- 2. The programs admissions criteria are stated clearly in both print and web-based formats and the program regularly adheres to those standards. Prospective Doctor of Health Science (DHSc) students are selected by a Committee on Admissions that considers the overall qualities of the applicant and their suitability for this course of study. Areas of interest include application content, academic record, prior health care experience, letters of evaluation, and personal motivation. In special circumstances, a personal interview with members of the committee on admissions may be required.
- 3. The students' retention and graduation rates are tracked and those rates are appropriate for this discipline. As reported in the Assessment of Student Learning Outcomes, 86% of students enrolled since the program began in 2002 have persisted.⁹
- 4. The program effectively tracks its graduates with respect to their post-graduate job placements and those placements are consistent with the program's goals. Out of the total graduate population of 117, there were 71 responses to the alumni survey developed by the faculty with assistance from the Office of Instructional Technology. 84% of graduates felt that their educational preparation for employment was better than adequate. Less than 6% felt inadequately prepared. Additionally, 92% of the respondents indicated they were employed full-time in a relevant field.¹⁰
- 5. Students routinely achieve the student outcomes that have been established by the program. However, the faculty has identified some weaknesses in this area. Specifically, an analysis of the capstone project displayed that only 63% of students fully met the assessment criteria. The program has begun analysis for improvement in this area and would benefit from continued analysis regarding the specific areas of deficit displayed by the students.
- 6. Students do not actively participate in faculty scholarship/research. There is the requirement of a capstone project mandatory for all students; however, it is not clear that the students engage in original scholarship/research with faculty. It would be helpful for program faculty to consider outlining additional specifications to the project and to evaluate the learning outcomes pertaining to the rigor of required scholarship/research. According to the ASLO, there is evidence that the Program Director has identified the need for additional rubrics assessing student learning outcomes to enhance the overall capstone experience.

⁷ ASLO report, p. 6

⁸ ASLO report, p. 7; also, see http://www.nova.edu/dhs/admissions

⁹ ASLO report, p. 29

¹⁰ ASLO report, p. 33 & 35

¹¹ ASLO report, p. 71 & 72

¹² ASLO report, p. 80 & 81

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7. Additional comments about the DHSc program are that graduates are serving as leaders of their respective professions: deans, department chairs, academically ranked faculty, senior advanced clinicians, military staff and flag rank officers, senior administrators, chief executive and operating officers, etc.

C. Curriculum Development

1. The program has designated a group of faculty members with the responsibility to review the curriculum regularly and to modify the curriculum as needed. The curriculum committee of the Department of Health Science, headed by Dr. Jodi Clark, is charged with this duty. Previously, the Department of Health Science met regularly as a committee of the whole to review curriculum. Dr. Kelly referred the committee to the program's ASLO report (p.7) which states:

"Over the course of the past four years, since program initiation, the Department of Health Science has regularly met to refine the goals and objectives of the post-professional degree spectrum (BHSc, MHSc, and DHSc) to reflect current educational and clinical realities, and to create a rational transition from one skill level to the next (BHSc to MHSc; MHSc to DHSc, etc). The Department has promulgated this information to all faculty through meeting minutes, etc."

This major change to the curriculum was initiated in September of 2004 to "(1) Include topics pertinent to the wide interests and needs of the interdisciplinary student body and the stated needs of stakeholder professions at the doctoral level and (2) To differentiate the levels of curricular achievement for students at the doctoral level, as compared to the bachelors and masters level," (ASLO, p. 13), Additional courses have been added to the curriculum since the program began, to address the increased learning needs of the student body in a decade of rapid change, advances in clinical informatics/ decision-science, and globalization. (e.g., Evidence-Based Medical Practice, Healthcare Informatics, Global Health Issues, Global Epidemiology, Global Health Policy). Some courses with redundant subject matter were moved to elective status (e.g., National Health Care, Special Populations), or merged with existing courses. Subsequent to the major changes mentioned about, "substantial curricular changes" are now brought to the attention of Dr. Clark. The proposed changes are discussed amongst the faculty at monthly faculty meetings and are also discussed at monthly departmental director's meetings. In addition, those faculty members who are designated with such responsibilities regarding the curriculum are recognized as experts within the program's substantive area(s). For instance, Dr. Clark and her committee are formed of faculty members within the department, and thus have expertise in all courses. The committee consists of health professionals (physicians, nurses, physician assistants, etc.) with doctoral and advanced degrees in their specific

¹³ Dr. P. Kelly, personal communication (1-08-2008)

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disciplines, education, and public health. No standard rubric is used to evaluate courses (for addition, merger, or elimination), but faculty professional judgment is utilized in the traditional collegial discussion/feedback fashion. The curricular change decisions are the reviewed and finalized by the department's Dean or Associate Dean.¹⁴

- 2. The program has a formal system to evaluate the teaching of its curriculum. The program uses the standard Health Professions Division/College of Allied Health and Nursing (HPD/CAHN) course and instructor evaluations. The program uses this HPD/CAHN evaluation format for every course, every semester and regularly monitors the performance of instructors. Additionally, the Department of Health Science as a whole, meets regularly to discuss instructor evaluation across the curriculum of the department. Also, the program uses the data from this evaluation process to modify and improve the educational techniques utilized in the program. This is apparent as the program has consistently discontinued the use of instructors who receive consistently poor or even suboptimal evaluations. ¹⁵
- 3. The program's teaching methodology utilizes educational technology to enhance its students' education. This includes the use of non-geographic internet-based secure teaching platform (enhanced Web CT) on an ongoing basis for all courses. This is supplemented by residential summer institute sessions utilizing classroom educational technologies (e.g., DVD, PowerPoint, etc.).¹⁶
- 4. This program is not designed to lead to any licensure or certification. As a post professional program, all students are required to have appropriate professional licensure and/or certification as appropriate to their specific disciplines, or a nationally recognized health professions academic degree. ¹⁷
- 5. The curriculum is mostly well organized with clear objectives, requirements, assignments, and grading procedures. The ASLO report provides examples of such objectives, requirements, assignments, and grading procedures. The program's original learning objectives were developed "without faculty feedback" (p. 11) since no faculty had been recruited at that time. Since then, the program has undergone substantial revisions and new learning objectives aligned with coursework and assessment strategies were developed by the program's faculty. Some of these learning objectives could still be revised so that a clearer alignment between the learning objectives and the assessment strategies can be reached. For instance, with respect to learning outcome 1.a. "Students will demonstrate the ability to sustain involvement and progress in their core professional disciplines through close familiarity with new modalities of lifelong learning that have emerged in the past

¹⁴ Dr. P. Kelly, personal communication (1-08-2008)

¹⁵ Dr. P. Kelly, personal communication (1-23-2008)

¹⁶ Dr. P. Kelly, personal communication (1-23-2008)

¹⁷ Dr. P. Kelly, personal communication (1-08-2008)

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decade", the report cites "close daily contact with the WebCT platform, internet based information retrieval systems and search engines and continuing engagement in an elective program of academic self-development" as an assessment strategy. The objective, as stated in the report is to "sustain involvement and progress in [one's] core professional discipline" whereas the vehicle is the technology used to meet the objective. The assessment strategy measures whether students are familiar with available technology yet fails to measure distinctively whether progress in the discipline of choice has been achieved. In this context the IRC believes that some of these learning objectives and assessment strategies could use some refinement, especially in a program that takes place exclusively in online format and that relies in the use of adjunct faculty. ¹⁸

6. Additional curriculum considerations are identified by Dr. Kelly and include the previously discussed reformatting of courses regularly by the instructors to ensure that student suggestions and learning outcomes results are reflected in the courses on an ongoing basis. Also, since primary sources (instead of textbooks) are emphasized, readings need to be updated at least annually in every course. Syllabi are reviewed by the program director at least annually to ensure compliance. Moreover, new courses have been added, some courses have been combined, and some courses inconsistent with program learning objectives have been deleted. An entry level course in medical writing is now mandatory for most entering students (based on GRE scores).

D. Student Services

- 1. There is an effective system in place by which the program tracks its students/graduates into their postgraduate careers. Due to the program's relative youth--2002 was the initial year of enrollment--there are only 117 graduates to date. Of that number, 71 have responded to a comprehensive survey regarding their post graduate careers and their perceptions of the educational value of the program. The program would benefit from assessment of targeted student learning outcomes related to overall program goals; the development of assessment rubrics targeting alumni perceptions of student learning throughout the course of the curriculum would also enhance ongoing curricular development. ¹⁹
- Information on student registration, financial aid, and advisement are all readily
 accessible to the students. Financial aid information is available on line, in the
 department office, and at the NSU Office of Financial Aid.²⁰
- 3. Student counseling services are available and the students are aware of how to access these services. This is apparent by a number of resources posted on the program's website. These resources cover course information, library, registration, financial aid

¹⁸ ASLO report, p. 14

¹⁹ ASLO report, p. 33-59

²⁰ Please see http://www.nova.edu/dhs/links.html; also, http://www.nova.edu/cwis/finaid/

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and admissions information as well. In addition, the program's director makes contact with students and is available to provide guidance on an as-needed basis. Finally, the program offers an online student center for the DHSc program where students can post messages, questions and chat with other classmates, professors and administrators if needed.²¹

4. Additional student services comments include the comprehensive assistance that the students can access via the Innovation Zone (I-Zone) for technological support and the library. The online availability of these support services is critical as 48 credits of the 60 credit program are conducted solely online. As a result, the students are in varied locations and may not have ready access to the main campus. The faculty also developed an online student center for the DHSc program. In this virtual lounge, students can post messages, questions, and have chats with classmates. Students can also access the schedule, course plans, links, library resources, and other information. ²²

E. Program's Mission and Operations Fit with the University

1. The program's mission, goals and objectives enhance the university's mission. The university's mission is that "Nova Southeastern University is a dynamic, not-forprofit independent institution dedicated to providing high-quality educational programs of distinction from pre-school through the professional and doctoral levels, as well as service to the community. Nova Southeastern University prepares students for lifelong learning and leadership roles in business and the professions. It offers academic programs at times convenient to students, employing innovative delivery systems and rich learning resources on campus and at distant sites. The university fosters inquiry, research, and creative professional activity, by uniting faculty and students in acquiring and applying knowledge in clinical, community, and professional settings". The program's mission is to develop leaders and educators in the health sciences via distance learning technologies, thereby providing opportunities for personal and professional growth, while enhancing the quality of, and access to healthcare in the communities served The DHSc Program exists to transition health professionals originally educated at the undergraduate or master's level to the doctoral level in terms of their understanding and utilization of the diverse skill sets involved in the delivery of health care today. The program is also serving an increasing number of doctoral level trained students (DO, MD, PharmD, and DC) who wish to expand their interdisciplinary and public health fund of knowledge past the constraints of their core disciplines. There is a clear match between the University's and the Program's missions. The program's goals are to provide graduates with advanced skills in order to fulfill both their current and expanded future roles within the health care delivery system, specifically to: 1) effectively

²¹ Please see http://www.nova.edu/dhs/links.html
http://www.nova.edu/dhs/faqs.html

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educate other health professionals and consumers, 2) administer, direct or manage organizations involved in health care delivery, 3) serve as leaders within their professional organizations, 4) create interdisciplinary systems-based practice environments that ensure patient safety, evidence based health care delivery, and culturally-competent care for diverse populations, and 5) influence the improved delivery of health care on a state, national, and international level.²³

- 2. Program avoids unnecessary redundancy with other university programs and activities. Looking at other doctoral programs within the College of Allied Health & Nursing, such as Ph.D. programs in occupational therapy or physical therapy, this is the only program that accepts and develops the skills of providers from a wide range of disciplines serving clients and populations within the healthcare system for advanced practice in the areas of leadership and policy.24
- 3. The program's mission and operations reflect collaborative efforts with other University Centers, Schools and Colleges. This program offers a concentration in Conflict Resolution, which results from a collaboration between the Graduate School of Humanities and Social Sciences and the College of Allied Health & Nursing.²⁵
- 4. The program functions cooperatively with the university's academic compliance offices, such as the Office of Institutional Effectiveness and the Academic Review Committee. Recently, the ASLO report was completed in 2007, in which suggestions were made about the programs goals, objectives, and how to measure attainment..26
- 5. Other mission fit observations: Additional "mission fit" observations are the use of distance learning technology i.e., the program is primarily delivered by distance, thus convenient to the student wherever he or she is, and requires two one-week sessions during the summer. The requirement of completion in practicum and internship fosters community and clinical application of course content and skills.

V. Recommendations for Future Development

Faculty and Faculty Development A.

As to the faculty and faculty development, this committee does not have specific recommendations. The program, unique in nature, receives input from multiple disciplines in the medical field. It is unreasonable to expect a single faculty member to gather expertise in all medical specialties, thus, the program appears to do a great job at weaving all disciplines using the University's full-time and part-time faculty. If the

²³ Please see http://www.nova.edu/cwis/about-nsu/mission.html; also Dr. Kellly, personal communication (1-07-2008)

24 Please see http://www.nova.edu/dhs/

²⁵ Please see http://www.nova.edu/dhs/catalog/forms/curriculum.pdf

²⁶ ASLO report

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program continues to grow, then hiring additional full time faculty strictly devoted to the program should be considered.

B. Students and Student Enhancement

With respect to the students and student enhancement it is recommended that students are included in ongoing faculty research activities. In addition, revising the capstone experience to include a Comprehensive Exam would allow the program to better assess whether students reached expected learning objectives. While this committee does not want to increase the workload of those currently running the program, it strongly suggests that the program considers revising the capstone experience to make room for more efficient, albeit traditional, assessment strategies.

C. Curriculum Development

To further curriculum development, the program should ensure that curriculum development takes place on a regular basis and in systematic form. While a procedural description was provided to the committee, holding formal curriculum review meetings (as opposed to having a discussion in regular faculty meetings) with the program's faculty could help expedite and focus proposed changes.

D. Student Services

Students appear to be adequately served under this program and actively participate in surveys after graduation (60% responded to the survey). The committee does not have recommendations at this time.

E. Program's Mission and Operations Fit with the University

Regarding the program's mission and operation's fit with the university, the program seems to be aligned with the university's mission and operations. As the program grows and the healthcare field expands, the program might consider expanding its collaboration with HSS into other academic units (e.g., psychology and education are two that come to mind).

Signed:

Dr. Marcelo Castro, IRC Chairperson

Dr. Rachelle Dorne, IRC Member

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Dr. Erica Friedland, IRC Member

Dr. David Pallister, IRC Member

Dr. Shannon Ray, IRC Member

CURRICULUM VITAE- Matthias M. Goldstein

I. Personal data

Full name: Matthias Michael Goldstein, PA-C

Birthdate and Place: 2/28/1968; Long Beach, California

Citizenship: U.S.

Marital status: Married 1/14/91, Beth Goldstein

Children: Dov, 10/26/1991; Benjamin, 4/12/1993; Moshe, 2/16/1996;

Leah, 11/30/1999

II. Education and Professional Training

1986-1990	Ner Israel Rabbinical College Baltimore, MD	B.T.L Talmudic Law
1987-1989	University of Maryland Baltimore County Baltimore, MD	B.A. Business Management & Administration
1995-1997	The George Washington University Washington DC	B.S. PA Studies
1997-1998	University of Nebraska Omaha, Nebraska	M.PAS PA Studies
2003-2005	Nova Southeastern University Ft. Lauderdale, Florida	D.H.Sc Health Sciences

III. Professional Experience

Clinical positions

1997-1999	Physician Assistant Cardiology/ Medicine Good Samaritan Hospital, Baltimore, MD
1997-2002	Physician Assistant Emergency Medicine Franklin Square Hospital, Baltimore, MD
1998-present	Physician Assistant Cardiology Metropolitan Cardiology Associates, Baltimore, MD
1999-2004	Chief Physician Assistant Cardiology/ Medicine

	Good Samaritan Hospital, Baltimore, MD
2000-present	Physician Assistant Emergency Medicine Good Samaritan Hospital, Baltimore, MD
2003-2004	Director Inpatient Cardiology Services Good Samaritan Hospital, Baltimore, MD
2003-present	Chair: Clinical Informatics Steering Committee Good Samaritan Hospital, Baltimore, MD
2004-present Academic pos	Director, Good Health Center, Health Enhancement, Cardiovascular Service Good Samaritan Hospital, Baltimore, MD
1997-2002	EMT-B Instructor University of Maryland Fire Rescue Institute, Aberdeen, MD
1998-present	ACLS Coordinator Good Samaritan Hospital, Baltimore, MD
1999-present	Assistant Clinical Professor/PA Program The George Washington University, Washington, DC
2000-present	Clinical Adjunct Faculty /PA Program Essex Community College/ Towson State University, Baltimore, MD
2000-present	ACLS Regional Faculty American Heart Association, Dallas, Tx
2001-present	Clinical Instructor /PA Program Anne Arundel Community College, Arnold, MD
2001-present	Director Division of Cardiopulmonary Resuscitation Research Good Samaritan Hospital, Baltimore, MD
2002-present	EMT-B Instructor Baltimore County Fire Rescue Academy, Baltimore, MD
	National Faculty The Heart Advocacy Network
Community Se	ervice
1986- 2003	Health Services Instructor

American Red Cross, Baltimore, MD

1993-г	oresent	Emergency Medical Technician-Paramedic Pikesville Volunteer Fire Department, Pikesville, MD
1994-r	oresent	Program Coordinator Project Ezra Instant Response Program, Baltimore, MD
2003-p	oresent	Program Coordinator Project Ezra PAD/AED Program, Baltimore, MD
IV.	Licens	oure and Certification
1992	Maryl	and Institute for Emergency Medical Service Systems, Level II Instructor
1993	MICR	B Emergency Medical Technician Instructor
1993	Cardia	ac Rescue Technician
1993	Pediat	ric Advanced Life Support
1997	NCCP	A Physician Assistant- Certified
1997	Ameri	can Heart Association ACLS Instructor
1998	Nation	nal Registered Emergency Medical Technician-Paramedic
1998	Basic	Trauma Life Support
2000	Ameri	can Heart Association BLS Instructor Trainer
V.	Hono	rs and Awards
2003	Provid	der of the Year - Pikesville Volunteer Fire Department
2005	Physic	cian Assistant of the Year- Maryland Academy of Physician Assistants
VI.	Profe	ssional Affiliations
1993-	present	Member, Baltimore County Volunteer Firemans Association
1997-	present	Fellow, American Academy of Physician Assistants
1999-	present	Member, AHA Cardiopulmonary and Critical Care Council
2001-	present	Fellow, Maryland Academy of Physician Assistants

2005 Maryland Critical Care Nurses Annual Futures Conference, Baltimore, MD

Lecture: Valuable Lab Value

2005 The Heart Advocacy Network, New York, NY

Presentation: Role of Midlevel Practitioners in Cardiovascular Risk Reduction

IX. Research and Grant Support

The Johns Hopkins University, VT QT Variability Study, Site Investigator, 1999-2002

Medstar Research Institute, Low Frequency Doppler PEA Study, Primary Investigator; 2001-2002, Direct cost \$12,000

Medstar Research Institute, Low Frequency Doppler PEA Study, Primary Investigator; 2002-2003, Direct cost \$10,000

Duke Research Institute, Complications After Thrombocytopenia Caused by Heparin (CATCH), Sub-Investigator, 2002-2004

Medstar Research Institute, Validation of the Audible Ultrasound Doppler for the Detection of Pulseless Electrical Activity, Primary Investigator, 2004-present, Direct cost \$18,000

Duke Research Institute, Early Glycoprotien IIb/IIa Inhibition in Patients With Non ST Segment Elevation Acute Coronary Syndrome (EARLY ACS), Sub-Investigator, 2004-present

CHF Solutions: UltrafiltratioN versus IV Diuretics for Patients HospitaLized fOr Acute Decompensated Congestive Heart Failure (UNLOAD), Co-Investigator, 2004-2005

X. Publications

Goldstein MM, Dubin NH, Jarrel K, Zeno JA, Sumner JA. Low Frequency Audible Doppler Reveals That a Substantial Fraction of Patients With Suspected Pulseless Electrical Activity Have Occult Blood Flow.[abstract, 1154-93] J. Am. College Cardiology. (2004) vol 43, no 5 (supplement A) pg. 300A.

IV. Inventions/Patent

Soda Bottle Cover

U.S. patent number: 306,564 Awarded: March 13,1990

CHRISTINE F. LEGLER, PA-C, DHSc. M.S. 4637 NW Imnaha Court Portland, OR 97229 (Home phone/fax) 503-531-0534 (Home e-mail) chrisleg1@ comcast.net

EDUCATION

2002-2004 DHSc - Doctor of Health Science (September 2004)

Nova Southeastern University - Health Professions Division - Ft. Lauderdale, FL

1981 M.S. - Health Education/Administration

University of Pittsburgh - School of Health Related Professions - Pittsburgh, PA

1976 B.S. - Health Science

Hahnemann University - Physician Assistant Program - Philadelphia, PA

PROFESSIONAL EXPERIENCE - INTERNATIONAL

Established clinical rotations for physician assistant students in Ecuador, Haiti, Honduras, China, Brazil, Bahamas, Ghana and Costa Rica with presentations on the role of the Physician Assistant profession and non-physician healthcare providers in each of these countries (1999-2004). Clinical experience in Honduras, Ecuador and China. Active participant at International Health Medical Education Consortium (IHMEC) annual conferences in Honduras (2001), Cuba (2002), New York (2003), and Guatemala (2004). Presenter at the World Family Physicians (WONCA) Asia conference in Beijing Fall 2003. Meetings with representatives from education and healthcare in Cape Coast Ghana (January 2004). Invited presenter for the 3rd International Healthcare Symposium in Shanghai (March 2004). International Travel: China (multiple visits), Tibet, Hong Kong, Thailand, Burma, Vietnam, Cambodia, Nepal, Kenya, Tanzania, Bahamas, Bermuda, Europe, Peru, Brazil, Chile, Ecuador, Mexico, Haiti, Costa Rica, Honduras, Australia, Cuba, Guatemala and Ghana.

PROFESSIONAL EXPERIENCE - ADMINISTRATION AND EDUCATION

PACIFIC UNIVERSITY - FOREST GROVE, OREGON (1996-PRESENT)

Sabbatical (2004-2005)

Completion of the Doctor of Health Sciences degree and submission of papers from various courses to professional journals for potential publication. Visiting professor at the Wenzhou Medical College in China during January/February 2005 to review health professions training programs and observe acupuncture and Oriental Medicine practice. Project director for the final year of the 2002-2005 DHHS-HRSA School of PA Studies diversity project grant and coordination of grant application for continued funding for 2005-2008. Assist with the development of a post-graduate residency for physician assistants in trauma and in-patient services through a partnership with local health care system. Expand clinical work to two-three days per week. Panel presentation on the Global Applicability of Physician Assistants at the WONCA-AAFP international conference (October 2004), presentation on the Pacific University PA Program Kids into Health Care Professions Project at the APAP Annual Conference (November 2004) and participation at the IHMEC conference on the Training of the Global Workforce (March 2005). As the founding chair for the new Association of Physician Assistant Programs International Affairs Committee, develop and implement strategic vision and establish formal liaisons with international medical education associations. Assist the Essential Health Clinic (free clinic) with expansion of services and grant applications. Develop Global Health Care Issues course for the Nova Southeastern University Doctor of Health Sciences distance education program.

10/19/2004

Founding Director/Associate Professor - School of Physician Assistant Studies (1996-2004) Planned, developed and implemented the new Master of Science Physician Assistant Program. Established policies and procedures, curriculum, prerequisites and marketing materials for the program. Recruited, hired and supervised faculty and medical director. Provided leadership for initial and ongoing accreditation with a self study from the Accreditation Review Committee on Education for the Physician Assistant. Developed and monitored 1.9 million program budget including seeking grant funding. Worked with the medical community and health care systems to establish clinical partnerships and identify providers to serve as program advisors. Served as course instructor for Current Topics in Healthcare, Ethics & Diversity, Preventive Medicine and Professional Practices Seminars, Utilized information technology for the management of the program and integrated Web-CT on-line educational system as an integral part of the curriculum. Established international clinical rotations and implemented the diversity projects. Developed and implemented distance education Master of Science completion degree for practicing Physician Assistants and served as course instructor for on-line Issues in Health Care course. Community partner for the development develop Essential Health (free) Clinic to serve uninsured with volunteer medical staff and student physician assistants. Involved in University budget and strategic planning process. Member of President's Council, University Council, Deans/Directors Management Team, International Program Board, College of Health Professions Leadership Council, various search committees and served on other University committees, as requested.

Chair - College of Health Professions Strategic Planning Committee (2003-2004)

Coordinated strategic planning committee to develop a mission, structure and five year strategic plan for the newly formed College of Health Professions that combined the Schools of Physician Assistant Studies, Physical Therapy, Occupational Therapy and Professional Psychology. Facilitated discussions on development of dental hygiene and nursing programs. Completed a needs assessment for the development of a health professions campus as a practicum project for the Doctor of Health Sciences program at Nova Southeastern University.

Project Director and Grant Writer – School of Physician Assistant Studies (2002-2005)

Community Partnership Grant – 3 year HRSA/DHHS PA Training Grant - \$460,300

Overall project goal is to increase access to health care for the medically underserved populations including, minorities, elderly and rural communities. The objectives are to identify/place students at clinical sites serving disadvantaged and special needs populations, increase the number of minority students/graduates in the program, increase the number of graduates working in medically underserved or rural communities, increase in the number of disadvantaged/under-represented minority faculty, increase the awareness of the PA profession as a career path for high school students and develop an outreach program to encourage applicants and identify clinical placements in Hawaii.

Project Director and Grant Writer - School of Physician Assistant Studies (1999-2002)

Diversity Development Grant - 3 year HRSA/DHHS PA Training Grant - \$283,800

Objectives for the Diversity Development Project were to increase the awareness of the Physician Assistant profession as a career path for individuals from minority and rural communities in the Pacific Northwest, expand the information presented to students on cultural issues effecting health care for different ethnic groups, and identify clinical placement sites in communities that provide services to a culturally and geographically diverse population. All project goals were exceeded with an invited article summarizing the achievement published in the Association of Physician Assistant Programs Perspectives journal.

2 10/19/2004

PARTNERSHIP HEALTH PLAN OF CALIFORNIA - SUISUN CITY, CA (1994 -1996)

Director of Health Services

Established and supervised the Quality/Utilization Management departments for a new \$110 million countywide MediCal managed care program serving 45,000 members. Coordinated Health Education and Community Outreach programs. Developed based case management programs for asthma, diabetes and prenatal care. Served as staff to the Physician Advisory, Quality and Utilization, Peer Review and Pharmacy and Therapeutics committees. Assisted Medical Director with the establishment of policies for medical care for the members of the health plan. Closely monitored utilization patterns of members and providers. Participate with senior management team in long and short range planning. Integrated public health needs into managed care program. Worked with community providers to establish practice guidelines and standards for care.

PLANNED PARENTHOOD-SHASTA DIABLO - CONCORD, CA (1987-1994)

Associate Executive Director for Clinical Services

Monitored medical programs for 14 health centers throughout seven-county area for an \$8.5 million non-profit corporation. Supervised ten Center Directors. Developed new health centers and expanded services to include the provision of primary care. Planned and implemented Prenatal and Well-child Programs. Coordinated Quality Assurance and Risk Management programs. Ensured adherence to state and federal licensing standards for all centers and credentialing of medical staff. Assisted Medical Director with supervision of approximately 30 NPs/PAs and ten physicians. Developed medical protocols, forms and patient handouts. Established OSHA, CLIA and Injury Prevention programs. Supervised Family Planning, Perinatal, Gynecology, Abortion, Sterilization, and Colposcopy services. Developed and coordinated internal marketing program. Participated at all levels of senior management, including budget, long-range planning, productivity, efficiency, and customer service. Served as staff adviser to Medical Committee of Board of Directors.

UNIVERSITY OF WISCONSIN (MADISON) - MADISON, WI (1984-1986)

Lecturer - Physician Assistant Program

Coordinated curriculum with review and evaluation of didactic and clinical portions of the program. Integrated geriatrics and preventive medicine into curriculum. Developed student recruitment materials and selection process. Lectured in clinical medicine and patient assessment. Advised and evaluated students. Recruited and evaluated physician preceptors. Participated on program and college committees. Served as faculty adviser to student Physician Assistant organization.

WESTERN MICHIGAN UNIVERSITY - KALAMAZOO, MI (1982-1984)

Clinical Coordinator - Physician Assistant Program

Coordinated and instructed Clinical Medicine and Patient Evaluation courses. Advised and evaluated students. Evaluated and developed curriculum. Recruited and evaluated physician preceptors. Served on program and college committees. Participated in program research projects, including federal grant to integrate geriatrics into curriculum. Served as faculty adviser to student Physician Assistant organization.

PROFESSIONAL EXPERIENCE - CONSULTANT

2001-present Clinic Management, Sy	stems and Gra	ints (Volunteer)
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Essential Health Free Clinic - Hillsboro, OR

1998-2000 Clinic Services/Productivity - Clinic Ole - Napa, CA

1996-1998 Managed Care - Solano Partnership Health Plan - Suisun, CA

1994-1999 Managed Care/Clinic Services - Planned Parenthood Shasta: Diablo - Concord, CA

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PROFESSIONAL EXPERIENCE - CLINICAL

Constitution of the last of th	Rural Family Practice (part-time) – St Helens Family Practice – St Helens, OR
2001- Present	Free Clinic (volunteer) Essential Health Center – Hillsboro, OR
1997-2002	Rural Family Practice (part-time) - Vernonia Health Center - Vernonia, OR
1997-1998	Urgent Care (on-call) - Kaiser Permanente - Portland, OR
1987-1999	Primary Care, Family Planning/STD Services - Planned Parenthood - Concord, CA
1989-1995	Urgent/Primary Care (part-time) - PHP Health Care Corporation - Oakland, CA
1986-1987	Cardiology Research - University of California/San Francisco - San Francisco, CA
1984-1986	Family Practice (part-time/migrant clinic) - La Clinica - Wild Rose, WI
1982-1984	Family Practice (part-time/migrant clinic) - Pullman Health Center - Pullman, MI
1979-1982	Gynecology (full-time) - Women's Health Services - Pittsburgh, PA
1976-1979	Family Practice (full-time) - Primary Health Care Services - Pittsburgh, PA
1976-1979	Family Practice (volunteer) - Pittsburgh Free Clinic - Pittsburgh, PA
1976-1982	Emergency Medical Services (volunteer) - Wilkinsburg and West Mifflin, PA

AWARDS/HONORS

- ♦ Invited participant at the American Council on Education Office of Women in Higher Education Leadership Conference (June 2004)
- Founding Member Society for Preservation of Physician Assistant History (2002)
- ♦ Pacific University Physician Assistant Class of 1999 Appreciation Award (August 1999)
- American Academy of Physician Assistants Committee Appreciation Award (1991-1998 and 1983-1986)
- ♦ Solano Partnership Healthplan Development Appreciation Award (1994 to 1996)
- ♦ Western Michigan University PA Program William G. Birch Association Award (July 1984)
- ♦ Pennsylvania Society of Physician Assistants Outstanding Service Award (August 1983)
- Pennsylvania Society of Physician Assistants Service Award (1979 to 1981)

CERTIFICATION/LICENSE

- ♦ NCCPA Board Certified Physician Assistant, 1976 present
- Oregon Physician Assistant License, 1997-present
- ♦ DEA License, 1988 present
- ♦ California Physician Assistant License, 1986 –2001
- Previous licenses in Pennsylvania, Michigan, Wisconsin
- Previous certification as EMT and MLT

CURRENT/RECENT VOLUNTEER ACTIVITIES

- Board member and Operations Committee Chair Essential Health Clinic (free clinic)
- Housing Development Corporation Board (for low income Latino families)
- ◆ Community Action Organization Health Advisory Board

CURRENT/RECENT PROFESSIONAL MEMBERSHIPS

- ♦ American Academy of Physician Assistants, 1976 present
 - Publications Committee, Member 1983 1985, Chairperson 1985-1986
 - Ouality and Risk Management Committee, Member 1991 1996, Chairperson 1996 1998
 - International Interest Group 1998 to present
- Association of Physician Assistant Programs, 1996-present
 - International Affairs Committee, Chairperson 2004 present,
 - International Ad Hoc Committee, 2002-2003
- Oregon Society of Physician Assistants, 1996-present
 - Representative to Oregon Rural Health Association, 1998-2000
- Oregon Medical Society, 1996-present
- Society of Physician Assistant History, 2002 present
- ♦ WONCA World Organization of Family Doctors, 2002 -present
- ♦ World Health Council, 1998-present
- ♦ International Health Medical Education Consortium (IHMEC), 2000-present
- Association for Medical Education in Europe 2002-present
- American Public Health Association 1997-present
- ♦ Association of Reproductive Health Professionals, 1987 2001
- ♦ National Association for Healthcare Quality 1995 –2000
- American Association of Health Plans 1996-2000
- ♦ Medical Group Management Association, 1990-2000
- ♦ Consulting Editor, Journal of the American Academy of Physician Assistants, 1989-1995
- ♦ California Academy of Physician Assistants, 1985 2000
 - Government Affairs Committee, 1991 -1996
- California Academy of Family Physicians, Primary Care Consortium 1993-1996
- Prior leadership positions with Pennsylvania, Wisconsin and Michigan PA Associations

PUBLICATIONS

- ♦ Legler, C., Breaking down Barriers: Increasing screening mammography in African-American women, JAAPA Archive On-Line Journal, January 2004.
- ♦ Legler, C., Stohs, S., *Integrating Diversity into a Physician Assistant Program*, APAP Perspectives, 14:1, 2003.
- ♦ Legler, C., Understanding the Function of Performance Profiles in Health Care, JAAPA, September 1999.
- ♦ Calabrese, W., Crane, S., Legler, C., Two-sided Coin of PA Credentialing, JAAPA, May 1997.
- ♦ Legler, C., What You Must Know About Discontinuing Care, JAAPA, May 1996.
- ◆ Davis, A. (moderator), Legler, C. (panelist) et al, Managed Care Part 2: Do Corporatized Medicine and PAs make a match? JAAPA, October 1995.

- ♦ Davis, A. (moderator), Legler, C. (panelist) et al, Managed Care Part 1: Corporatization of Medicine and PAs, JAAPA, September 1995.
- ♦ Legler, C. (Peer Reviewer), Managing Risk through Quality PA Practice Book, AAPA 1994.
- ◆ Legler, C., A Survey of Physician Attitudes toward the PA, Physician Assistant, May 1983.
- Legler, C., PA Survey Results Reviewed, Bulletin of the Allegheny County Medical Society, December 1981.
- ♦ Legler, C. A Survey of Physician Attitudes toward the PA, Master's Thesis, University of Pittsburgh, 1981.

PROFESSIONAL PRESENTATIONS

- Global Applicability of Physician Assistants AAFP/WONCA International Conference in Orlando – October 2004.
- Physician Assistant in the Health Care System 3rd International Symposium: Medicine in the 21st Century - Shanghai and Wenzhou China March 2004.
- ◆ Applicability of the Physician Assistant Profession in Ghana Cape Coast Ghana- January 2004.
- Community Medicine in China WONCA Asia Annual Conference Beijing/China November 2003.
- ♦ Guidelines for International Clinical Rotations APAP Fall Conference in Phoenix October 2003.
- Diversity Integration in PA Education (panel) APAP Fall Conference in Phoenix October 2003
- ♦ Preventive Medicine Wenzhou Medical College/China February 2003.
- Role of the Physician Assistant in the United States. Wenzhou Medical College/China-October 2002.
- ♦ International Clinical Rotations APAP Fall Conference in Miami Beach October 2002.
- Poster: Student/Faculty Development in Diversity Integration AAPA Conference in Boston -May 2002.
- ♦ International Rotations for Physician Assistant Students AAPA Annual Conference in Anaheim May 2001.
- · Overview of the Physician Assistant Profession Santiago Chile October 2001.

6

Managed Care: Implications for the PA - AAPA Annual Conference in New York - May1996.

10/19/2004

DOCTOR OF SCIENCES RESEARCH PROJECTS - NOVA SOUTHEASTERN UNIVERSITY

- Doctoral Analysis An Analysis of the Doctor of Health Science Program at Nova Southeastern University – August 2004
- Practicum Health Professions Campus Development for Pacific University January/May 2003
 Executive Summary to Pacific University Leadership and Board May 2003
- Internship Community Medicine in China October 2002/May 2003
 Presentation at WONCA Conference October 2003
- ♦ Independent Study Leadership/Organization in Higher Education
 - University Governance December 2003
 - Women in University Leadership November 2003
- ♦ Independent Study International Health Care
 - International Primary Care and Prevention Strategies April 2004
 - Issues in Travel Medicine for Health Care Providers and Patients April 2004
 - Health Care Issues for Refugees and Immigrants April 2004
 - Global Healthcare Issues for Women and Children May 2004
 - Effect of Poverty and Nutrition on Global Health June 2004
 - Effect of Infectious Diseases on Global Health June 2004
- ♦ Course Research Projects
 - National Health Care System Proposal (National Healthcare Course) March 2003
 - Breast Cancer in African American Women (Special Populations Course article published in JAAPA) – June 2003
 - Assessment of the Pacific University Leadership (Leadership Summer Institute Course) –
 August 2003
 - Latino Cultural Beliefs Toward Health and Health Care (Diverse Populations Course) –
 March 2004
 - A Critical Analysis of the Health Forests Restoration Act (Community, Environmental and Occupational Health Course) – March 2004
 - The Spirit Catches You and You Fall Down Book Review and Ethics Analysis (Healthcare Ethics Course) December 2004
 - Assessment of Conflict Resolution Processes at Pacific University (Conflict Resolution in Healthcare Summer Institute Course) – September 2004

CHRISTINE F. LEGLER PA-C, MS PROJECT DEVELOPMENT

PACIFIC UNIVERSITY - PHYSICIAN ASSISTANT EDUCATION PROGRAM (1996-2004)

Responsible for the development and implementation of the following:

Curriculum

- 28 month primary care Physician Assistant Program
- Course syllabus development for clinical medicine, patient evaluation, psychosocial issues, preventive medicine, pharmacology, anatomy, physiology
- Primary instructor for Current Topics in Healthcare, Preventive Medicine and Professional Practice Issues Seminars for PA Program and on-line Issues in HealthCare course
- Ongoing evaluation of effectiveness of clinical and didactic portions of program
- Graduate Clinical Project process
- Integration of health policy, public health, managed care and evidence based healthcare
- Utilization of information technology throughout program
- Problem-based learning seminars
- Ethics and cultural diversity concepts integrated in clinical courses
- · Clinical affiliations with lecturers and preceptors from medical community
- Establish International Preceptor Program
- Distance Education Master's Completion Program for Practicing Physician Assistants
- Preliminary evaluation of feasibility of a post-graduate residency in trauma/in-patient care

Administration

- Program mission/vision/values, policies and administrative procedures
- Initial/ongoing accreditation through the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) including self study.
- Community partnerships with healthcare systems, medical groups, public health agencies, hospitals and other clinical providers
- Annual and 5 year budget plan and grant submission proposals
- Information systems with use of local area network, program web site and on-line educational software (WEB-CT)
- Marketing plan including program brochures, catalog, presentations and application materials
- Orientation program for new students by faculty, students and university administrators
- Admissions process involving practicing clinicians, graduates, students and faculty
- Diversity Recruitment Program for disadvantaged applicants
- Faculty development especially in areas of information systems, problem based learning and evidence based healthcare.
- Diversity Development Project 3 year DHHS Physician Assistant Training Grant 1999-2002
- Community Partnership Project -3 year DHHS Physician Assistant Training Grant 2002-2005
- Alumni Association including annual CME dinner, newsletter, Josiah Hill Scholarship
- Free Clinic serving uninsured in Washington County staffed by community clinicians, PA faculty and PA students throughout all phases of curriculum
- Feasibility study on the development of a Health Professional Campus including SWOT analysis on each of the health profession programs.
- Evaluation of proposals for development of Dental Hygiene and Nursing programs
- Strategic Plan for the newly developed College of Health Professions

PARTNERSHIP HEALTH PLAN CALIFORNIA- MEDICAID MANAGED CARE (1994-1996)

Responsible for the development and implementation of the following programs:

Clinical Services

- Expanded use of hospice, home health and rehabilitation services
- Complimentary health care services to include acupuncture and chiropractor care
- Nutrition Services for diabetes, weight reduction, lipid reduction and frail elders
- Appropriate utilization of Long Term Care Facilities
- Clinical Guidelines for medication use and referrals for clinical services

Quality Management

- Preventive Services for adults/children with emphasis on increased immunization rates
- Annual chart audit system of plan providers with remediation plans
- Evaluation of appropriateness of emergency department visits
- Referral and follow-up of care systems in plan provider offices
- Member Satisfaction surveys with plan and providers
- Access to Care Audits
- Credentialing of providers
- Office Evaluations of providers for adherence to OSHA, CLIA and state guidelines
- Quality Report Card for providers
- Provider adherence to Clinical Practice Guidelines

Utilization Management

- Hospitalization length of stay, Long Term Care and medical treatment approval process
- Referral authorization program
- Pharmacy Services monitoring system
- Approval process for DME, medical supplies and ancillary services
- Quarterly Utilization Reports rates of hospitalization, referrals, pharmacy, and emergency visits

Case Management

- Asthma Services- emphasis on improved outcomes of care
- Diabetes Care- emphasis on improved control of glucose and decreased complications
- Prenatal Services goal to improve access to prenatal services and decrease pre-term births
- Controlled Medication Use monitor prescribing of controlled medications
- AIDS/HIV monitor appropriateness of care

Training Programs

- Asthma and diabetes clinical treatment guidelines for providers
- Skin Care of LTC patients for Skilled Nursing Facility Staff
- Appropriate Use of Pharmaceuticals for providers
- Cultural Diversity for staff

PLANNED PARENTHOOD: SHASTA DIABLO - PRIMARY CARE SERVICES (1987-1994)

Responsible for the development and implementation of the following programs:

Clinical Programs

- Primary Care Services for low-income families
- Expansion of Family Planning/STD services to include male services, new contraceptive methods and male/female sterilization
- HIV Testing (first FP/STD center in United States to provide service)
- Prenatal Services for low income women
- Well Child services as a complementary service to prenatal care
- Pap and Colposcopy Services

- Mid-life Program including mobile van Mammography
- Expansion of pregnancy termination services

Management Services

- Design of new health centers
- Productivity program with incentives for staff
- Clinical protocols and administrative procedure manuals
- Negotiation of managed care contracts
- Patient education materials in English and Spanish
- Expansion of utilization of physician assistant and nurse practitioners
- Marketing of clinical programs to community

Quality Management Programs

- State licensing for ambulatory health centers
- Credentialing/annual performance evaluation of providers
- Chart audit system for clinical programs with remediation plans
- Adherence to CLIA and OSHA guidelines
- Infection Control Program
- Medical Liability and occurrence monitoring
- Standardization of forms and clinic protocols

Training Programs

- Management, budget, marketing and managed care for managers
- Primary care, prenatal and expanded FP/STD services for clinicians
- Quality Management for staff, clinicians and managers
- Cultural Diversity for staff, clinicians and managers

Patricia E. Kelly, PA-C, MHS, Ed.D 12830 Eleanor Lane Charlevoix MI 49720 231-547-1817 rpackelly@aol.com

Nova Southeastern University 3200 South University Drive Ft. Lauderdale-Davie Florida 33328-2018 954-262-1204 pkelly@nova.edu

TRAINING AND EDUCATION:

1973	Bachelor of Arts, State University of New York at Binghamton
1980	Physician Assistant Program (Primary Care Associate)
	Certificate of Clinical Proficiency
	Stanford University Medical Center and School of Medicine
1982	Masters of Health Services, Primary Health Care
	University of California at Davis
2000	Doctor of Education (Ed.D)
	Nova Southeastern University
	Fischler Graduate School of Education and Human Services
	Programs for Higher Education
	Dissertation: "Determining the Influence of Preadmission Health Care
	Experience on Measures of Entry-level Clinical Competence in a Cohort of
	Physician Assistant Graduates"
2002	Academic Visitor, School of Medicine, Health Policy and Practice,
	University of East Anglia, Norwich, UK; Fall 2002 sabbatical.
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PROFESSIONAL EXPERIENCE:

9/06-present	Program Director and Associate Professor, Doctor of Health Science Program,
	Nova Southeastern University
9/04—9-06	Department Chair, Associate Professor, Department of Health Science
	Program Director, Doctor of Health Science (DHSc) program
	Nova Southeastern University
	College of Allied Health and Nursing
	Ft. Lauderdale, Florida
9/039/04	Adjunct Assistant Professor, Nova Southeastern University, Doctoral Program
	in Health Science
6/033/04	Tenured Associate Professor
	Physician Assistant Program—Central Michigan University
	Principal Investigator and Project Director, Geriatric Physician Assistant
	Training Grant.
2001—2003	Program Director and Tenured Associate Professor
	Central Michigan University Physician Assistant Program
	Project Director, Geriatric Physician Assistant Training Grant
1999-2001	Program Director and Assistant Professor
	Central Michigan University Physician Assistant Program
	Project Director, Physician Assistant Training Grant
1998-1999	Interim Program Director and Assistant Professor
	Central Michigan University Physician Assistant Program
	Project Director, Physician Assistant Training Grant
1996-1998	Director of Didactic Education and Assistant Professor
	Central Michigan University Physician Assistant Program
1995-1996	Senior Physician Assistant, Department of Veterans Affairs
	Division of Medical Oncology, Albany Medical College—Stratton VAMC

1993-1995	Physician Assistant
	Division of HIV Medicine
	Albany Medical College
1992-1993	Academic Coordinator
	Albany Medical College Physician Assistant Program
1991-1992	Physician Assistant, Senior Grade
	Clinical Instructor of Internal Medicine
	University of California at Davis School of Medicine
	Clinic for AIDS and Related Disorders
1989-1991	Faculty Lecturer, FNP/PA Program
	Clinical Instructor of Family Practice
	University of California at Davis School of Medicine
1982-1989	Clinical Instructor of Family Practice
	University of California at Davis School of Medicine
1983-1989	Physician Assistant
,	Sacramento Sierra Medical Group, Sacramento, CA
1982-1983	Physician Assistant Resident in Emergency Medicine
	Los Angeles County/University of Southern California
	Medical Center (LAC/USC Medical Center)
1980-1982	Physician Assistant
4	Department of Family Practice
	University of California at Davis School of Medicine
1978-1980	Clinic Director and Physician Assistant Student (Stanford)
	The Effort Medical Clinic
	Sacramento, CA
1976-1978	Family Planning Coordinator/Women's Health Specialist Physician Assistant
	Trainee (California Health Manpower Pilot Project)
	The Effort Medical Clinic
	Sacramento, CA
1974-1976	Family Planning Counselor/Clinical Assistant
	The Effort Medical Clinic
	Sacramento, CA
OTHER:	Per-Diem or Locums Clinical Work, part-time or consultant appointments,
6/04-present	Physician Assistant, Quickcare Clinic, Dr. Gustav Lo, Petoskey Michigan
1989-present	Principal, Kelly Medical Consulting
1998-present	HRSA Grant Reviewer
2002-2003	ARC-PA (Accreditation Review Commission for Physician Assistant
	Education) site visitor
2001-2003	Consultant and Expert Witness, Medical Board of Michigan
1997-1999	Member, Board of Directors, Michigan Academy of Physician
	Assistants
1997-2002	Physician Assistant (per-diem/pro bono)
	Midland Area Health Center, Midland MI
1986-1992	Consultant/Expert Witness, Medical Board of California
1980-1992	Physician Assistant (per-diem)
	The Effort Medical Clinic, Sacramento, CA
1985-1986	Co-Chair
	Governmental Affairs Committee
	California Academy of Physician Assistants
1984-1985	Director-At-Large
	California Academy of Physician Assistants
1983-1985	Member and Co-Chairperson, Board of Directors, Womenkind Health Clinic
	Sacramento, CA

PUBLICATIONS:

Kelly PE. Clinical Breast Examination, Clinical Procedures, 2nd edition R. Dehn and D. Asprey, eds., 2007, peer reviewed text

Kelly PE. Across the Pond Journal of the American Academy of Physician Assistants, Vol 17, No. 3

Kelly, PE. Physician Assistant Training in Residentially Based Geriatric Primary Care at Central Michigan University, Perspectives in PA Education, Spring 2003

Kelly, PE. Clinical Breast Examination, Clinical Procedures, R. Dehn and D. Asprey, eds., 2001, peer reviewed text

Kelly, PE. Brain Tumors, Primary Care for Physician Assistants, 2nd edition R. Moser, Editor, McGraw-Hill, NY, Spring, 2001; peer reviewed text

Kelly, PE. Breast Cancer (revised)

Colon Cancer (revised)

Testicular Cancer (revised)

Lung Cancer (revised)

Hodgkin's Disease (revised)

Multiple Myeloma (revised)

Pancreatic Cancer (revised)

Thyroid Cancer (revised)

Primary Care for Physician Assistants, 2nd edition R. Moser, Editor, McGraw-Hill, NY, 2001; peer reviewed text

Kelly, PE. A Theory of Practice: PAs, specialists in team medicine Journal of the American Academy of Physician Assistants, September, 1999, Vol. 12 No. 9 (peer reviewed)

Kelly, PE. PAs and their shadows [Workplace Question and Answer] Advance For Physician Assistants, February, 1999

Kelly, PE. Contributor, Oncology Chapters, Moser's Primary Care for Physician Assistants Companion Handbook, Dehn R, Editor, McGraw-Hill, 1998

Kelly, PE. Contributor Oncology Multiple Choice Questions Physician Assistant Pretest

R. Moser, Editor, McGraw-Hill, NY, 1998

Kelly, PE. Breast Cancer

Colon Cancer

Testicular Cancer

Lung Cancer

Hodgkin's Disease

Multiple Myeloma

Pancreatic Cancer

Thyroid Cancer [eight chapters of text]

Primary Care for Physician Assistants R. Moser, Editor, McGraw-Hill, NY, 1998 (peer reviewed text)

Kelly, PE. What's In a Title [Workplace Question and Answer] Advance For Physician Assistants, July, 1998

Kelly, PE. A Most Unusual Case The Clinical Advisor, February, 1998

Kelly, PE. Mammograms and Managed Care [Workplace Question and Answer] Advance for Physician Assistants, September, 1997

Kelly, PE. Overinvolved? [A Clinician's View] Clinician Reviews; 1996; 6[5]: 201-202

Kelly, PE. HIV for the Primary Care Physician Assistant Medical Board of California PA Newsletter, 1990

Ashley, L, Kelly, PE. Restraint of Trade Issues for Non-Physician Providers: A Case Study Nurse Practitioner, December, 1987

Kelly, PE. Dyspareunia and Chronic Pelvic Pain Manual of Outpatient Gynecology,

Havens, CS., Sullivan, N., Tilton, P. Little Brown and Company, 2nd ed., 1991

Kelly, PE Dyspareunia and Chronic Pelvic Pain Manual of Outpatient Gynecology,

Havens, CS., Sullivan, N., Tilton, P. Little Brown and Company, 1st ed., 1986

LETTERS:

Kelly, PE. A different view of what happens when a PA answers a patient's call American Medical News, May 28, 2001

Kelly, PE. Ethical Dilemma Journal of the American Academy of Physician Assistants, January, 1998

Kelly, PE. The Free Clinic's Contribution to Non-Physician Providers [author's title]

Clinician Reviews; 1996; 6[3]: 19

BOOK REVIEWS:

Kelly, PE. Pocket Guide Can Help HIV and Cancer Clinicians Cancer and HIV Nutrition Pocket Guide Wilkes, G., Advance for Physician Assistants, February 1998

INVITED REGIONAL AND NATIONAL PRESENTATIONS:

Kelly, PE, Management of Depression in Primary Care. Michigan Academy of Physician Assistants Annual Meeting, Mt. Pleasant, MI, September, 2000

Kelly, PE, Burn-Out and Emergency Department Clinicians American Academy of Physician Assistants Annual Meeting, Atlanta, GA, June 2, 1999

Kelly, PE. Oncology for the Primary Care Provider Albany Medical College, February, 1996

Kelly, PE. Medical Malpractice Marist College, Poughkeepsie, NY, September 1994, 1995

Kelly, PE. Medical Aspects of HIV Associates of Clinical Pharmacology Annual Meeting, Miami, May 7, 1992

Kelly, PE. Care of the Dying Patient HIV UPDATE—1992, University of California at Davis School of Medicine, April 25, 1992

Kelly, PE., White, L. The Oral Practicum Examination-A Tool for Evaluation of

PA Students Association of Physician Assistant Programs Annual Meeting Poster Session, New Orleans, May, 1990

Kelly, PE. The Impact of Restraint of Trade Issues on Non-Physician Providers Society of Teachers of Family Medicine, Sacramento CA, September 28, 1985

INVITED POSTER PRESENTATIONS

Todd, K, and Kelly, PE. Rural Primary Care Physician Assistant Training Initiative, American Academy of Physician Assistants Annual National Conference, Los Angeles, CA. May, 2001 Rohrs, D, Kelly, PE, Visich, D, and Robbins, S. Geriatric Residentially-Based Primary Care Training Project, American Academy of Physician Assistants National Annual Conference, New Orleans, LA. May, 2003

GRANT REVIEWS:

Reviewer, APAP/NCCPA Research Grant Cycle, Spring, 200; Spring, 2003
Faculty Reviewer, Bureau of Health Professions, Department of Health and Human Services, Physician Assistant Program Training Grants, Silver Springs, Md. April—May, 1997

PUBLICATION/PEER REVIEWER/ OTHER RESEARCH ACTIVITIES:

Associate Editor, Internet Journal of Allied Health Science and Practice, Nova Southeastern University, 2004-present.

Poster Session Reviewer, AAPA Annual Conference, San Francisco, CA, May, 2006

Member, NCCPA/APAP subcommittee, NCCPA/APAP Grants Management (2001-2004)

Member, Research Council, Association of Physician Assistant Programs, 2000-2004

Faculty Reviewer, Peter J. Nyquist Awards, Association of Physician Assistant Programs, 1998, 1999, 2000, 2001, 2002, 2003

Standing Peer Reviewer, Original Health Services Research, Journal of the American Academy of Physician Assistants, 1999—present (active annual reviewer)

Standing Peer Reviewer, Clinical Research, Journal of the American Academy of Physician Assistants, 1998—present (active annual reviewer)

GRANT MANAGEMENT ACTIVITIES:

Project Director, Department of Health and Human Services, Physician Assistant Training Grant 1D21 PE

10118-01A1; July 1998-June, 2001; \$509,004

Principal Investigator/Project Director, Department of Health and Human Services, Geriatric Physician Assistant Training Grant, July 2001-2004, \$673,000

UNIVERSITY COMMITTEES, Nova Southeastern University

University-Wide Committee on Distance Learning Standards, 2006 University-Wide Committee on Articulation Agreements, 2004-2006

COLLEGE COMMITTEES, Nova Southeastern University

Director and Chairs Committee, 2004-present

Admissions Committee and Interview Panelist for the Anesthesiologist Assistant Program, 2005-2006 Admissions Committee for the Department of Health Science, 2004-present

UNIVERSITY COMMITTEES Central Michigan University:

Provost's Ad Hoc Task Force on Multiculturalism and Diversity; Spring, 1998

University Grievance Committee; 1998-2001

Academic Senator; 2001-2004 (two terms)

Dean's Search Committee, Spring-Summer 2002

COLLEGE COMMITTEES, Central Michigan University:

Deans's Advisory Council; July 1, 1998-May, 2003

Building Task Force; April 1999-June, 2002

Academic Integrity Standards; April 1999-June, 2002

Academic Quality Standards; September 1999---June, 2002

Rural Telehealth and Community Education Taskforce; January 2001-June, 2002

CMU Research Advisory Panel; January 2003-May, 2003

DEPARTMENTAL COMMITTEES, Central Michigan University:

Curriculum Committee 1996-1998

Personnel Committee, 1998-2001 (Chair, Fall Semester)

Division Directors Council, 1998-2001

Anatomy Search Committee, 1998-1999

Bylaws Committee, 1998-1999

PROGRAM COMMITTEES, Central Michhigan University:

Chair, Admissions Committee 1996-1998; 2001

Admissions Committee, 1999, 2000, 2001

Faculty Search Committee, Spring 1998

Chair, Faculty Search Committee, Fall, 1998 (two positions)

COMMUNITY COMMITTEES:

Volunteer Personnel Committee, Hospice of Isabella County, Spring 1998

LICENSES AND CERTIFICATIONS:

Michigan PA license-active and current

New York PA license-active and current

NCCPA certification—active and current

DEA certificate-active and current

ACLS-2004

CURRICULUM VITAE RICHARD CLINTON VAUSE JR., PA-C, MPAS CURRENT RANK: CAPTAIN/06 UNITED STATES PUBLIC HEALTH SERVICE HEALTH SERVICE OFFICER PHS SERIAL # 59616

8 ROTHSCHILD COURT SS# 189-42-8000 WOODBURY, NEW JERSEY 08096 (856) 845-6350

PERSONAL DATA DOB: 1 March 1951, Philadelphia, Pennsylvania Marital Status: Married, one daughter, age 25 years

Health: Excellent

Height: 74 inches, Weight: 205 pounds

PROFESSIONAL EXPERIENCE

CURRENT POSITION

October 2001 to Present

Regional Clinical Coordinator/Regional Federal Tort Claims Act Coordinator/ Health Professions Specialist

HRSA Region III, Philadelphia Field Office, Office of Field Operations
Health Resources and Services Administration (HRSA)
Department of Health & Human Services (DHHS)

Philadelphia, Pennsylvania

Responsibilities include providing guidance on clinical and health professions issues to the state teams and the HRSA grantees in Region III. The Regional Clinical Coordinator (RCC) interacts on clinical activities with the Clinical Regional Advisory Network (CRAN), the Bureau of Primary Health Care (BPHC), the Bureau of Health Professions (BHPr), Maternal and Child . Health Bureau (MCHB), the HIV/Aids Bureau (HAB), and with the Regional Clinical Coordinators in the other nine HRSA regions. Responsibilities also include interaction with the state Primary Care Associations (PCA) and the state Primary Care Officers (PCO). position involves review of the Quality Improvement/Risk Management reports and providing guidance to the involved health center as well as to the assigned project officer, site visits when necessary, and providing technical assistance to the Chief Executive Officers and Medical Directors of the grantee clinics in Region III. Also function as the Regional Federal Tort Claims Act Coordinator. This requires serving and a liaison between the Office of General Council and the grantees involved in FTCA actions. Responsibilities as the Health Professions Specialist include providing information and technical assistance to the project officers and grantees concerning those BHPr programs that would be appropriate to the health centers. I also provide technical assistance to organizations and academic institutions about grant and training opportunities in BHPr and assistance with program applications.

August 2000 to September 2001 Health Professions Coordinator, Northeast Cluster (HRSA/NEC)

Health Resources and Services Administration (HRSA)

Department of Health & Human Services (DHHS)

Philadelphia, Pennsylvania

Responsible for the development and coordination of programs and activities relating to Health Professions Workforce Issues, and Health Professions training and education, and their effect on access to care. This includes concept development, preparation of text and presentation material, serving as the intermediary to link academic institutions, state and local government agencies, and community organizations. Interacts with the Field Office Directors in HRSA Regions I, II, and III, on Health Professions Workforce Issues, and Health Professions training issues.

Accomplishments: Organized the four Physician Assistant Training Programs in the Philadelphia area into the Southeastern Pennsylvania Physician Assistant Program Alliance. Developed a plan for regional health professions advisory boards which can also be adopted to primary care issues.

January 2000 to August 2000

Branch Chief

Program Coordination Branch

Division of Health Profession Diversity (DHPD)

Bureau of Health Professions (BHPr)
Health Resources and Services Administration (HRSA)
Department of Health & Human Services (DHHS)

Responsible for the day-to-day coordination of activities of the Division as they related to the Health Careers Opportunity Program, the Centers of Excellence Program, and the Minority Faculty Fellowship Program.

Responsibilities included direct supervision of a staff of 15, to include 10 project officers, four administrative support staff, and one management intern. Responsible for the development of policies and procedures that effect the overall operation of the branch, development of applications and instructions documents, Technical Assistance Presentations, Peer Reviewer Training Workshops, Project Directors Meetings and focus groups. Provided counseling and advise to the project officers and support staff, served as the programs subject matter expert to the Bureau Director and Division Director. Active in the development, evaluation and implementation of tools that improved the overall operation of the programs, and development of program concepts and practices that further expanded the applicant pool as it relates to health and allied health professions.

March 1999 to January 2000 HCOP Program Director/Section Chief Division of Disadvantaged Assistance

Bureau of Health Professions Health Resources and Services Administration (HRSA) Department of Health & Human Services

Function simultaneously as the Program for HCOP activities and as the HCOP Section Chief. Responsibilities include supervision of a staff of four, developing and executing plans for the continued growth of the HCOP, providing advise and expertise on HCOP related matters, serving as the HCOP subject matter expert to the Bureau Director and Division Director, maintenance of a portfolio of 23 grants, development, evaluation and implementation of tools that will improve the overall operation of the program and development of program concepts and practices that will further expand the applicant pool as it relates to health professions. Duties also include planning and implementation of the National Technical Assistance Workshops and development of the audio-visual presentation that is used to teach these workshops, advise to the Chief, Coordination Branch on Commissioned Corps matters and policy and procedures.

May 1998 to March 1999 Public Health Analyst/Senior Program Management Officer Division of Disadvantaged Assistance

Bureau of Health Professions
Health Resources and Services Administration (HRSA)
Department of Health & Human Services

Function simultaneously as a Program Officer and Senior Physician Assistant Advisor to the Division Director.

Responsible for stimulating, planning, advising, directing and evaluating program activities for a portfolio of 24 Health Careers Opportunity Program grants. Duties include communication with administrators and faculty at grant institutions and organizations, providing them with technical assistance in the development and management of their grant. Performs liaison activities with various professional organizations. Responsible for collecting and maintaining information on the progress and important developments of grantees. Studying the trends in health professions education and training, and making recommendations for future needs and changes in program focus. Serve as a focus for the coordination of the Division programs with other HRSA efforts and with similar or related programs supported by other government agencies and private organizations. Serve as a resource to the health profession training community regarding policies and goals of the HRSA.

May 1998 to March 1999 (Continued) Public Health Analyst/Senior Program Management Officer Division of Disadvantaged Assistance

Accomplishments: Developed the audiovisual presentation used for the 1998 and 1999 Technical Assistance Workshops. Supervised the development of the Reviewer Training Workshop conducted in February 2000. Established a first time, active link with the Association of Physician Assistant Programs resulting in increased participation of PAs and PA Programs in the HCOP grant program and Peer Review Process.

May 1995 to January 2000

Aeromedical Physician Assistant

United States Army Health Clinic, the Pentagon

Commander: Colonel Dale K. Block, M. D.

Function as an Aeromedical Physician Assistant in the DiLorenzo Clinic in the Pentagon, performing a full range of aeromedical and primary care tasks. Duties include flight physicals and evaluations for continued flight status, standard history and physicals, episodic care and treatment, specialty referrals, minor surgical procedures, ordering of specialized studies and laboratory test. Duties also include development of treatment and care plans, prescribing of medications, and interpretation of diagnostic studies.

January 1994 - April 1998
Chief Physician Assistant
Federal Bureau of Prisons, Health Services Division
Central Office, Washington, D.C.

Chief Physician Assistant for the Bureau of Prisons, Health Programs Branch. Provided advice to the Medical Director and the Chief, Health Programs Branch, concerning the utilization of Physician Assistants in the Bureau. Developed programs and policy that affected the day-to-day functions of 650+ Physician Assistants, in 93 Federal prisons across the United States. Provided assistance to the field facilities in terms of clinical and administrative support. Served as the Liaison Officer to Physician Assistant professional organizations and other Federal agencies. Made medically related presentations at professional and scientific organization meetings, as well as presentations about the Bureau of Prisons and the Public Health Service regarding student programs, scholarships and employment opportunities. Served as both an Annual Refresher Training instructor and the New Employee Orientation instructor for health related topics. Served on the Bureau's Public Health Service Awards Board, Pharmacy and Therapeutics Committee, Health Services Division Interview Panel, and provided episodic medical care when required.

January 1994 - April 1998 (continued) Chief Physician Assistant Federal Bureau of Prisons, Health Services Division

Accomplishments: Developed and implemented the Bureau of Prisons/United States Air Force P.A. Training Program (located at the Academy of Health Sciences under the Joint Services Training Command) and developed multiple continuing medical programs for the PA clinical staff. Developed the Correctional Health Care Caucus and served as the first President and Editor of the newsletter.

March 1993 - January 1994

Lead Physician Assistant Recruiter

Federal Bureau of Prisons, Medical Recruiting Office

Central Office, Washington, D.C.

Principal responsibility for recruiting Physician Assistants for the Health Services Division of the Bureau of Prisons. Duties included recruiting at major conferences and meetings, presentations to Physician Assistant students and coordinating with the BOP field facilities on recruitment events.

Accomplishments: Responsible for recruiting 20% of the current Certified Physician Assistants with the Bureau.

February 1992 - March 1993

Supervisory Physician Assistant/Assistant Health Services Administrator

Metropolitan Correctional Center, New York

New York, New York

Supervised a staff of 10 Physician Assistants and five clerical staff. Prepared work schedules, performance evaluations, awards and leave requests. Assisted the Health Services Administrator in the daily operation of the Health Service Unit. Maintained the fund control system for two operational fund sites and was responsible for ordering and maintaining all stock and medications required for the daily operation of the clinic.

Accomplishments: Computerized the Health Service Unit Fund Control System, established linkages with several Physician Assistant training programs and established the clinic as a primary care rotation site for second year students.

September 1990 - February 1992 Staff Physician Assistant/ Continuing Medical Education Coordinator Metropolitan Correctional Center, New York New York, New York

Functioned as one of 11 staff Physician Assistants giving care to a varied population of Federal inmates ranging from 800 to 1100. Revitalized and coordinated a weekly continuing medical education conference, insuring at least 40 hours of continuing medical education each year.

Accomplishments: Re-established the Continuing Medical Education Program at the institution and set up a tracking system for logging the credits.

February 1985 - August 1990

Aeromedical Physician Assistant

Eastern ARNG Aviation Training Site

Fort Indiantown Gap, Pennsylvania

Functioned as an Aeromedical Physician Assistant, after completing Army Flight Surgeon Training, and the Assistant Branch Chief, Aeromedical Services Branch, at one of only two Army National Guard Aviation Training Sites. Was responsible for flight physicals, care and health of the flight crews and their families, in-flight medical evaluations, fitness for duty determinations and aeromedical rescue and evacuations. Also responsible for the supervision of nine flight medics, preparation and delivery of lectures on aeromedical topics, and development of aeromedically related courses for officers and enlisted personnel.

February 1983 - February 1985
Orthopaedic Physician Assistant
Eric I. Mitchell, M.D., P.C..
Orthopaedics and Sports Medicine
Philadelphia, Pennsylvania

Duties included initial orthopaedic evaluations, in and out patient care, first assisting in surgery, casting, taping, and splinting. Provided patient education and arranged the surgical schedule for the practice. Assisted in the development of hospital bylaws and was the first Physician Assistant admitted to the staff of Graduate Hospital in Philadelphia.

February 1982 - February 1983
Primary Care Physician Assistant
Montgomery County Emergency Services
An Acute Psychiatric Center
Norristown, Pennsylvania

Provided primary care to a 30 bed inpatient psychiatric unit with remote physician supervision.

August 1980 - February 1982 **Primary Care Physician Assistant Kensington Hospital**Philadelphia, Pennsylvania

One of three Physician Assistants providing care to 45 inpatients, Which included 30 inpatient drug and alcohol detoxification patients and 15 medical/surgical beds. Treated patients in the multiple out-patient clinics, and assisted in surgery when required.

June 1978 - August 1980

Primary Care Physician Assistant

James C. Giuffre Medical Center

Philadelphia, Pennsylvania

Staff Physician Assistant in a 120 bed hospital. Responsibilities were to the in-patient population and the emergency room. Part of the cardiac code team and assisted in surgery for emergencies occurring during evening and early morning shifts.

OTHER WORK EXPERIENCE

December 1997 - July 2000

Primary Care Physician Assistant

Prison Health Services, Curran-Fromhold Correctional Center
Philadelphia, Pennsylvania

March 1975 - September 1976

Administrative Technician,
City of Philadelphia, Streets Department
Philadelphia, Pennsylvania

June 1973 To August 1974

Medical Research Technician

Paul Gyorgy, M.D., National Institute of Health

Philadelphia General Hospital

Philadelphia, Pennsylvania

EDUCATIONAL BACKGROUND

April 1, 2002 to present
Nova Southeastern University,
College of Allied Health – Graduate Distant Education for Allied Health Professionals
Fort Lauderdale, Florida

Student - Doctor of Health Sciences Program (DHSc)

Anticipated Degree Date: August 2004

July 1, 1999 - March 31, 2000 University of Nebraska Medical Center Omaha, Nebraska Degree: Master of Physician Assistant Studies

Granted: March 31, 2000

September 1976 - June 1978
Hahnemann University and Medical College
College of Allied Health Sciences
Philadelphia, Pennsylvania
Degree: Bachelor of Science, Physician Assistant
Granted: June 1978

September 1969 - January1974
Saint Joseph's University
Philadelphia, Pennsylvania

Degree: Bachelor of Science, Biology
Granted: May 1974

MILITARY EXPERIENCE

August 5, 1982 Appointed a Warrant Officer in the Pennsylvania Army National Guard

ASSIGNMENTS

February 1985 - August 1990

Eastern Army Reserve National Guard Aviation Training Site
Colonel Arthur W. Reis, III, Commanding
Served as an Aeromedical Physician Assistant
Trained as an Army Flight Surgeon at the Army Aeromedical
Center, Fort Rucker, Alabama

ASSIGNMENTS (continued)

June 1986
731st General Dispensary
Captain John Steeth, Commanding
Hoenfels, Germany
21 day short tour.

August 1982 to February 1985

108th Combat Support Hospital

Colonel Allen Chandler, Commanding
Philadelphia, Pennsylvania

Slotted as a General Medical Officer

UNIFORMED SERVICE AND MILITARY EDUCATION

October 2002

Emergency Support Function #8 Training (ESF8)

Office of Emergency Preparedness

Ocean City, Maryland

August 2002

Emergency Coordinator Augmentee Training

United States Public Health Service, Noble Training Center

Anniston, Alabama

September 2001
Integrated Health & Medical Weapons of Mass Destruction Training Program
United States Public Health Service, Noble Training Center
Anniston, Alabama

August 1996
Commissioned Corps Readiness Force National Training Conference
Uniformed Services University of the Health Sciences
Bethesda, Maryland

February 1990

Combat Casualty Care Course (C4)

Joint Services Training Command

Camp Bullus, San Antonio, Texas

UNIFORMED SERVICE AND MILITARY EDUCATION (continued)

February 1986
Federal Aviation Administration Aeromedical Examiners Course
Saddlebrook, New Jersey

October 1985 - November 1985

Basic Army Flight Surgeon Course

Lyster Army Community Hospital

Fort Rucker, Alabama

PROFESSIONAL CREDENTIALS AND CERTIFICATIONS

Certified by the National Commission of the Certification of Physician Assistants (Primary Care certification expires June 1, 2002)
Licensed by the Commonwealth of Pennsylvania (expires December 31, 2001)
Credentialed in Primary Care, Federal Bureau of Prisons
Credentialed in Primary Care, Walter Reed Army Medical Center Authorized to perform Army Flying Duty Medical Examinations by the Aeromedical Services Branch, Fort Rucker, Alabama
Certified in Basic and Advanced Cardiac Life Support
Training in Advanced Trauma Life Support

PROFESSIONAL ORGANIZATIONS

Fellow of the American Academy of Physician Assistants (Member, Public Education Committee, June 1996 June 1998) (Member, Nominating Committee, June 1999 to Present) (Chair, Federal Services Congress, June 2001 to July 2002) Fellow of the Public Health Service Academy of Physician Assistants (President 2000 to Present, 1997 to 1998, Board of Directors, 1991 to 1994, Chief Delegate to the AAPA House of Delegated, 1993-1996) Fellow and Life Member of the Society of Army Physician Assistants (Board of Directors 1989 to 1991) Association of Military Surgeons of the United States (Member) Public Health Service Commissioned Officers Association (President of the Thomas Jefferson Branch, Philadelphia, PA) Veterans Caucus of the American Academy of Physician Assistants (Life Member) Anchor and Caduceus Society (Member) The Military and Hospitaller Order of Saint Lazarus of Jerusalem

UNIFORM SERVICES DECORATIONS

2002 Surgeon General's Certificate of Appreciation

2002 Public Health Service National Emergency Preparedness Award

2001 Public Health Service Outstanding Unit Citation

2000 Public Health Service Unit Commendation

2000 Public Health Service Outstanding Unit Citation

1999 Public Health Service Achievement Medal

1999 Public Health Service Unit Commendation

1999 Public Health Service Regular Corp Ribbon

1998 Public Health Service Bicentennial Unit Commendation

1998 Public Health Service Outstanding Unit Citation

1997 Public Health Service Commendation Medal

1997 Public Health Service Unit Commendation

1993 Surgeon General's Exemplary Service Medal

1992 Public Health Service Achievement Medal

1991 Public Health Service Citation

1991 Public Health Service Hazardous Service Medal

1990 Army Commendation Medal

1988 Army Achievement Medal

1986 Army Reserve Component Achievement Medal

1986 Army Reserve Component Overseas Training Ribbon

1983 Army Service Ribbon

UNIFORM SERVICES BADGES

1997 Public Health Services Field Medical Readiness Badge 1990 Public Health Services Associate Recruiters Badge 1990 M-16 Rifle, Sharpshooter, United States Army 1985 Flight Surgeon Wings, United States Army

AWARDS, HONORS, AND APPOINTMENTS

May 2001 American Academy of Physician Assistants, Federal Services Physician

Assistant of the Year, PAragon Award Winner

June 2001 Planning Committee Chair for the Fourth Annual Federal Services

Dining-out Ceremony, American Academy of Physician Assistants

Conference, Boston, Massachusetts

AWARDS, HONORS, AND APPOINTMENTS (continued)

February 2000	Honorary Inductee into Alpha Epsilon Delta Premedical Honor Society, Georgia Delta Chapter, Atlanta, Georgia
January 2000	Planning Committee Chair for the Third Annual Federal Services Dining-out Ceremony, American Academy of Physician Assistants Conference, Chicago, Illinois
May 1999	President of the Mess and Planning Committee Chair for the Second Annual Federal Services Dining-Out Ceremony, American Academy of Physician Assistants Annual Conference, Atlanta, Georgia
May 1999	Nominated for the Federal Services Physician Assistant of the Year PAragon Award, by the Society of Army Physician Assistants
October 1998	Appointed to the Adjunct Faculty of Howard University College of Allied Health Sciences, Washington, D.C.
September 1998	Appointed as an Adjunct Faculty Instructor to the University of Sciences in Philadelphia/Philadelphia College of Osteopathic Medicine, Physician Assistant Program
September 1999	Appointed to the Advisory Committee, Philadelphia College of Osteopathic Medicine, Physician Assistant Program
June 1998 .	Sang the National Anthem and the Public Health Service March for the Commissioned Corps Presentation Ceremony of Admiral David Satcher, Assistant Secretary for Health and Surgeon General of the United States
May 1998	President of the Mess and Planning Committee Chair for the First Annual Federal Services Dining-Out Ceremony, American Academy of Physician Assistants Annual Conference, Salt Lake City, Utah
March 1995	The Surgeon General's Certificate of Appreciation for development of participation in the first Public Health Service Dining Out
May 1994	Uniformed Services Physician Assistant of the Year by the Veterans Caucus of the American Academy of Physician Assistants

AWARDS, HONORS, AND APPOINTMENTS (continued)

May 1992 Sang the National Anthem for the General Session of the American

Academy of Physician Assistants National Conference, Nashville,

Tennessee

November 1990 Earned Honor Graduate status and elected Class President in the

Federal Bureau of Prisons Basic Correctional Techniques Course

Glynco, Georgia

June 1990 Appointed to the Army Reserve AMEDD Leadership Study Panel

COMMISSIONED CORPS ACTIVITIES

February 2002 Deployed to Salt Lake City with the Commissioned Corps Readiness

Force at part of the emergency response plan for the 2002 Winter

Olympics

October 1999 Appointed Commander of the Surgeon General's Honors Cadre

By Admiral David Satcher, Assistant Secretary for Health and Surgeon

General of the United States

June 1998 Escort Officer to Admiral David Satcher, Surgeon General, at his

Commissioned Corps Presentation Ceremony

October 1997 Member, Public Health Service Sword Honor Guard, (Appointed Training

Officer, September 1998 to August 1999)

August 1997 Appointed to the Public Health Service Uniform Board

May 1997 Taught various medical topics for the Second Annual Commissioned

Corps Medical Readiness Force Training Program

September 1996 Deployed to San Juan, Puerto Rico as part of the Commissioned

Corps Readiness Force response to Hurricane Hortense.

August 1996 Developed and taught the "First Responder's Course" for the

Commissioned Corps Readiness Force National Training Conference

June 1994 Appointed to the Federal Bureau of Prisons, Public Health Service

Awards Board

Curriculum Vitae

Richard C. Vause Jr., M.P.A.S., P.A.-C.

COMMISSIONED CORPS ACTIVITIES (continued)

April 1994 Appointed to the Commissioned Corps Appointment Boards for Health

Service Officers.

January 1993 Recorder of the Health Service Officer Professional Advisory Committee

May 1992 Appointed to the Surgeon General's Health Service Officer

Advisory Committee

November 1991 Escort Officer for Rear Admiral Robert Whitney at the 99th General

Meeting of the Association of Military Surgeons

May 1991 Appointed an Associate Recruiter, United States Public Health Service

KEYNOTE PRESENTATIONS

August 2001 Keynote speaker for the Philadelphia University Physician Assistant

Program Commencement Ceremony, Philadelphia, Pennsylvania

November 2000 Keynote speaker for the Veteran's Day Memorial Celebration, Philadelphia

College of Osteopathic Medicine, Philadelphia, Pennsylvania.

October 2000 Keynote address for the American Dental Educators Association Annual

Conference on recruitment of minority candidates, Fort Lauderdale, Florida

July 2000 Keynote speaker for the University of North Carolina at Chapel Hill's

Medical Educational Development Program Commencement Ceremony,

Chapel Hill, North Carolina

February 2000 Keynote speaker for the Induction Ceremony of Alpha Epsilon Delta

Premedical Honor Society, Georgia Delta Chapter, Atlanta, University

Center, Atlanta Georgia

April 1999 Keynote Speaker for the Aspira National Health Careers Program

graduation ceremony, Washington, DC

ACADEMIC AND COMMUNITY PRESENTATIONS

September 2002	Health Resources and Services Administration Update, The President's Initiatives, presented at the National Conference of the National Association of Medical Minority Educators, Baltimore, Maryland
May 2002	"Memorial Day 2002, Lest We Forget" a special powerpoint presentation prepared for the House of Delegates of the American Academy of Physician Assistants, Boston, Massachusetts
May 2002	"The Public Health Response to Bioterrorism: A Grassroots Approach" A panel discussion with William Stanhope, PA-C, et at, presented at the 30 th Annual American Academy of Physician Assistants Conference, Boston, Massachusetts
May 2002	Clinical and Executive Director Orientation, multiples topic presentations, Charlottesville, Virginia
March 2002	Clinical and Executive Director Orientation, multiples topic presentations, Philadelphia, Pennsylvania
February 2002	"Bioterrorism and the Primary Care Physician Assistant: Agents and Treatment," presented and the 20 th Annual Winter Continuing Medical Education Festival for Geisinger Medical Center, Valley Forge, Pennsylvania
October 2001	"The Physician Assistant Profession, Past, Present, and Future" A panel Discussion presented with Richard Smith, M.D., and Physician Assistant Leaders from across the nation, on the occasion of National PA Day, Hosted by the Southeastern Pennsylvania Alliance of Physician Assistant Programs, Philadelphia, Pennsylvania
March 2001	"The Physician Assistant as an Administrator" A panel discussion presented with James Cawley, PA-C, M.P.H., and Richard Rohrs, PA-C to the first year class of the Philadelphia College of Osteopathic Medicine Physician Assistant Program, Philadelphia, Pennsylvania
March 2001	"The United States Public Health Service, Our Past, Present and the Future" Presented to the Edge Hill, Pennsylvania Chapter to the Rotary Club International, Edge Hill, Pennsylvania

ACADEMIC AND COMMUNITY PRESENTATIONS (continued)

February 2001	"The Bureau of Health Professions: It's Mission and Programs" Presented to the president and senior staff of the Community College of Philadelphia, Philadelphia, Pennsylvania
October 2000	"The Bureau of Health Professions: It's Mission and Programs" Presented at the Health Resources and Services Administration, Region III Health Care Conference, Williamsburg, Virginia
October 2000	"The Physician Assistant Career Field, Past, Present and Future" Presented to the first year class of the Philadelphia College of Osteopathic Medicine Physician Assistant Program, Philadelphia, Pennsylvania
March 2000	"The Role of the Physician Assistant in Administration" presented to the senior class of Philadelphia College of Osteopathic, Physician Assistant Program, Philadelphia, Pennsylvania
March 2000	Presentation to the "Philadelphia Seminar" on the Surgeon General's Priorities, Philadelphia, Pennsylvania
October 1999	"The Health Careers Opportunity Program and How to Apply for Federal Grants," Presented to the Association of Physician Assistant Programs, Mid-year Meeting, Austin, Texas
April 1999	"The Painful Shoulder, Diagnosis and Treatment in the Primary Care Environment", Society of Army Physician Assistants 20th Annual Continuing Education Conference, Fayetteville, North Carolina
March 1999	"The Painful Shoulder, Diagnosis and Treatment in the Primary Care Environment", 1999 Annual Conference of the Veterans Affairs Physician Assistant Association and the Public Health Service Academy Of Physician Assistants, Memphis, Tennessee
February 1999	"The Painful Shoulder, Diagnosis and Treatment in the Primary Care Environment", Geisinger Medical Center's 16 th Annual Winter Conference on Primary Care, Hershey, Pennsylvania
February 1999	"The Health Careers Opportunity Program and How to Apply for Grants", Health Resources and Services Administration's Technical Assistance Conference, Winston-Salem State University, Winston-Salem, North Carolina

Richard C. Vause Jr., M.P.A.S., P.A.-C.

ACADEMIC AND COMMUNITY PRESENTATIONS (continued)

February 1999	"The Health Careers Opportunity Program and How to Apply for Grants", Health Resources and Services Administration's Technical Assistance Conference, Tuskeegee University, Tuskeegee, Alabama
June 1998	"Violence in the Health Care Workplace, Using OSHA Recommendations" Commissioned Officers Association, Scientific and Professional Meeting, Alexandria, Virginia
April 1998	"Violence in the Health Care Workplace, Using OSHA Recommendations" Society of Army Physician Assistants 19th Annual Continuing Education Conference, Fayetteville, North Carolina
April 1998	"Violence in the Health Care Workplace, Using OSHA Recommendations" West Virginia Academy of Physician Assistants Spring Continuing Education Conference, Pipestem Resort, West Virginia
February 1998	"Violence in the Health Care Workplace, Using OSHA Recommendations" Geisinger Medical Center's 15 th Annual Winter Conference on Primary Care, Lancaster, Pennsylvania
May 1997	"Violence in the Health Care Workplace", 25th Annual American Academy of Physician Assistants Conference, Minneapolis, Minnesota
April 1997	"Violence in the Health Care Workplace", Society of Army Physician Assistants 18 th Annual Continuing Education Conference, Fayetteville, North Carolina
March 1997	"Violence in the Correctional Environment, a Panel Discussion" National Association of Blacks in Criminal Justice Conference, Norfork, Virginia
February 1997	"Violence in the Health Care Workplace", South Dakota Academy of Physician Assistants Winter Continuing Medical Educations Festival, Rapid City, South Dakota
May 1996	"Violence in the Workplace, A Physician Assistant Crisis", Presented at the 24 Annual Conference of the American Academy of Physician Assistants, New York, New York

Curriculum Vitae

Richard C. Vause Jr., M.P.A.S., P.A.-C.

ACADEMIC AND COMMUNITY PRESENTATIONS (continued)

May 1996 "Primary Care in the Correctional Environment", Chaired the panel

discussion at the 24 Annual Conference of the American Academy of

Physician Assistants, New York, New York

April 1996 "Violence in the Workplace, An Update", Presented at the Society of Army

Physician Assistants 18th Annual Continuing Education Conference,

Fayetteville, North Carolina

May 1995 "Primary Care in the Correctional Environment", Chaired the panel

discussion at the 23 Annual Conference of the American Academy of

Physician Assistants, Las Vegas, Nevada

April 1995 "Violence in the Workplace, A Physician Assistant Dilemma"

Presented at the Society of Army Physician Assistants 17th Annual Continuing Education Conference, Fayetteville, North Carolina

April 1994 "An Update on Tuberculosis", Presented at the Society of Army Physician

Assistants 16th Annual Continuing Education Conference, Fayetteville,

North Carolina

PUBLICATIONS

<u>Violence in the Health Care Workplace</u>, with John Dignam, Ph.D., Kenneth Harbert, Ph.D., Pam Scott, PA-C, Bill Koklhepp, PA-C, et. al., Journal of the American Academy of Physician Assistants, Vol. 10, No.5:38-51, May 1997

PAs in Federal Prisons, principal author with Art Beeler, M.G.A. and Mattese Miller-Blanks, PA-C., Journal of the American Academy of Physician Assistants, Vol. 10, No.2: 59-67, February 1997

CONTINUING MEDICAL EDUCATION

May 2002 30th Annual American Academy of Physician Assistants Conference,

Boston, Massachusetts

January 2002 Johns Hopkins/Bureau of Primary Health Care, Primary Care Policy

Thru May 2002 Development Course, Rockville, Maryland

CONTINUING MEDICAL EDUCATION (continued)

May 2001	29 th Annual American Academy of Physician Assistants Conference, Anaheim, California
April 2001	Society of Army Physicians Assistants 22 th Annual Continuing Education Conference, Fayetteville, North Carolina
May 2000	28 th Annual American Academy of Physician Assistants Conference, Chicago, Illinois
May 1999	27 th Annual American Academy of Physician Assistants Conference, Atlanta, Georgia
April 1999	Society of Army Physicians Assistants 20 th Annual Continuing Education Conference, Fayetteville, North Carolina
February 1999	Geisinger Medical Center's 16 th Annual Winter Conference on Primary Care, Hershey, Pennsylvania
May 1998	26 th Annual American Academy of Physician Assistants Conference, Salt Lake City, Utah
April 1998	Society of Army Physician Assistants 19 th Annual Continuing Education Conference, Fayetteville, North Carolina
April 1998	West Virginia Academy of Physician Assistants Spring Continuing Education Conference, Pipestern Resort, West Virginia
February 1998	Geisinger Medical Center's 15 th Annual Winter Conference on Primary Care, Lancaster, Pennsylvania
April 1997	Society of Army Physician Assistants 18 th Annual Continuing Education Conference, Fayetteville, North Carolina
February 1997	Geisinger Medical Center's 14 th Annual Winter Conference on Primary Care, Hershey, Pennsylvania
May 1997	25 th Annual American Academy of Physician Assistants Conference, Minneapolis, Minnesota

Curriculum Vitae

Richard C. Vause Jr., M.P.A.S., P.A.-C.

CONTINUING MEDICAL EDUCATION (continued)

May 1996	24 th Annual American Academy of Physician Assistants Conference, New York, New York
February 1996	Geisinger Medical Center's 13 th Annual Winter Conference on Primary Care, Valley Forge, Pennsylvania
April 1996	Society of Army Physician Assistants 17 th Annual Continuing Education Conference, Fayetteville, North Carolina
May 1995	23 rd Annual American Academy of Physician Assistants Conference, Las Vegas, Nevada
April 1995	Society of Army Physician Assistants 16 th Annual Continuing Education Conference, Fayetteville, North Carolina
February 1995	Geisinger Medical Center's 12 th Annual Winter Conference on Primary Care, Lancaster, Pennsylvania
December 1994	Veterans Caucus Conference "Topics in the Tropics" in St. Thomas in the United States Virgin Islands
October 1994	California Academy of Physician Assistants Continuing Education Conference, LaJolla, California
May 1994 .	22rd Annual American Academy of Physician Assistants Conference, San Antonio, Texas
April 1994	Surgeon General's 15th Annual Army Physician Assistant

Refresher Course, Fayetteville, North Carolina

CIVILIAN ACTIVITIES

Planning committee for the Learning for Life 2002 National Health Careers Exposition, Bethesda, Maryland
Mentor in the Health Resources and Services Administration Mentor Program Life Member of Alpha Phi Alpha Fraternity
Member of the Saint Joseph's University Alumni Association
Member of the Saint Thomas More High School Alumni Association

Updated: December 1, 2002

Professional Vitae

Sherry A. Robins, RNC, OGNP, CNM, MS, DHSc(c) Certified OB/GYN Nurse Practitioner Certified Nurse Midwife

116 Hubbard Street Midland, Michigan 48640-4225 (969) 835-2614

Licensure:

State of Michigan Professional Registered Nurse

Certification:

- National Certifications Corporation of the Obstetric, Gynecologic and Neonatal Nursing Specialties OB/GYN Nurse Practitioner
- State of Michigan Specialty Certification − Nurse Practitioner
- ACNM Nurse-Midwifery Specialty Certification Certified Nurse-Midwife American Academy of Nurse Midwifery
- 🗪 State of Michigan Specialty Certification Nurse Midwife

Education

- Delta College, University Center, Michigan
 Associate in Applied Science Degree Nursing, 1977
- Saginaw Valley State University, University Center, Michigan Bachelor of Science Nursing, 1989
- Ca University of Michigan, Ann Arbor, Michigan Rackham School of Graduate Studies – School of Nursing Master of Science – Parent-Child Nursing (Nurse Midwifery), 1992

Clinical Experience:

Detroit Medical Center – University Hospitals
Hutzel Hospital, Detroit, Michigan
University of Michigan Hospitals, Women's Hospital
Ann Arbor, Michigan
Henry Ford Medical Center – Cottage Hospital
Pierson Clinic, Grosse Pointe Farms, Michigan

Nova Southeastern University

Doctor of Health Science candidate – est. completion 6//2007

Post Graduate Studies

- Mayo Clinic Rochester Methodist Hospital, Rochester, Minnesota Dermatologic Nursing Program (40 hours), 1981
- OB/GYN Nurse Practitioner Preceptorship Program Option II, Sanford, Michigan Preceptor: M. David Sutton, MD 3000 Clinical Hours, 700 Didactic Hours (1980-1982)
- University of Michigan Medical School, Department of Radiology Ultrasound in Obstetric and Gynecology, 22 Cognate Hours, 1993
- National Procedure Institute, Midland, Michigan Coloposcopy for the Primary Care Physician, 12.25 Cognate Hours, 1994
- Pharmacology Applied Drug Therapy, University of Washington School of Nursing, 36 Cognate Hours.

Preceptor:

Serving as a preceptor for a variety of nursing students, nurse practitioners students, physician assistant students, and medical residents and other graduate students.

Academic Appointments:

University of Michigan – School of Nursing Graduate School
Students
Saginaw Valley State University – School of Nursing, BSN and
Graduate School Students
Andrews University – School of Nursing Graduate Students
MidMichigan Regional Medical Center – Family Practice

MidMichigan Regional Medical Center – Family Practice Residency Program Delta College - School of Nursing

Great Lakes College – School of Nursing Central Michigan University

Professional Publications:

Robins, S. A. (1992). The association of urinary incontinence symptoms associated with parity and pelvic muscle strength. Unpublished Master's Thesis, University of Michigan.

Lay Publication:

"The Teddy Express", Copyright 1980. Pediatric publication series discussing physical and emotional growth and development or children at varying ages and stimulation of parenting activities and other salient information. Utilized by several major hospital based family practice residency programs and private practices through the Unites States.

Professional Presentations:

I have participated in many local, regional and state presentations on a variety of issues concerning the families. I have also been a presenter at several Leadership Midland Conferences. I list of my presentations can be provided upon request.

CURRICULUM VITAE

Helen Ewing RN, DHSc

308 Parkridge Green S.E. Calgary, Alberta - Canada T2J 5G2

Telephone Work: (403) 278-0568 Home (403) 225-0377 Fax (403) 278-0376 E-mail: hewing@telusplanet.net

PROFESSIONAL HIGHLIGHTS AND ATTRIBUTES

- Experienced educator of university and college students at Doctorate, Master and Undergraduate levels in both on-line and face to face teaching
- Knowledgeable and experienced in academic course planning, development, and delivery
- Proven leadership in healthcare settings, both public and private
- · Strong time management, organizational, and prioritizing skills
- Self-directed, flexible, well-organized and able to work independently
- Ability to maintain a clear sense of priorities and vision
- Ability to adapt to new and challenging opportunities
- Outcomes oriented with a reputation of getting the job done
- Strong written and verbal communication skills
- Effective manager and coordinator of multidisciplinary teams
- Extensive experience developing, implementing, and maintaining quality improvement programs and projects
- Comprehensive experience in planning, developing, and implementing organizational philosophies; goals; objectives; programs; policies, and procedures
- Competent manager of budgets of over a million dollars, promoting and implementing cost containment measures and analysing resource use and requirements
- Knowledgeable in research methodology and practices, proposal development, ethics submissions, and project management

PROFESSIONAL EDUCATION

Degree Earned Doctorate of Health Science	Institution Nova Southeastern University Fort Lauderdale, Florida	Completion Sept, 2004
Master of Nursing	University of Calgary Calgary, Alberta	June, 1995
Bachelor of Nursing	University of Calgary Calgary, Alberta	June, 1990
Diploma in Nursing	Wascana Institute Regina, Saskatchewan	June, 1982

PRESENT EMPLOYMENT

2006 - Present

Athabasca University

Centre for Nursing and Health Studies - Calgary, Alberta

Position: Assistant Professor

<u>Duties</u>: teaching undergraduate nursing, Master of Health Studies, and Master of Nursing students; leadership responsibilities; and participating in research. Research focus on Electronic Mentorship in recently graduated nurses.

Courses taught:

(Post-graduate - Masters of Nursing and Health Studies - On-line)
Understanding Organizations: Theory, Analysis and Application
Teaching and Learning in the Clinical Setting
Transforming Healthcare Through Informatics

(Undergraduate - Classroom and On-Line)
Understanding Research
Management and Leadership in Nursing Practice
Teaching and Learning for Health Professionals
Clinical instruction in medical-surgical nursing

<u>Professional activities</u>: course writing, development, coordination, and delivery; program planning, university committee membership; and administrative duties, such as: staffing, mentoring, and supervision; textbook ordering; course scheduling.

Graduate Student Supervision

- Co-Project Supervisor for: Elizabeth M., Master of Nursing student, Athabasca University (2007). Project title: Homeless children's need for enhanced child health and development intervention.

- Final Project Committee for: Carole L., Master of Nursing student, Athabasca University (2007). Project title: A gender-based analysis of ten HIV/AIDS conferences for content and country between 2003 and 2006.

2006 - Present

Nova Southeastern University

College of Allied Health and Nursing

Fort Lauderdale, Florida

Position: Adjunct Assistant Professor

Courses developed and taught:

(Post-graduate - Doctor of Health Science- On-line)

Comparative International Health Systems

Post-graduate Student Supervision

Summative Committee Member for:

- Pat M., Doctorate of Health Science student, Nova Southeastern University (2006). Project title: *Proposed topics and guidelines to enhance the teaching assistant internship.*
- Karen W., Doctorate of Health Science student, Nova Southeastern University (2007). Project title: Management of dysautonomia in severely brain injured patients. Gaining cultural understanding of presenting to Cambodia nurses

RESEARCH EXPERIENCE

2007

Principal Investigator

Research Project: Evaluation of a website for electronic mentorship in newly graduated practicing registered nurses

Athabasca University

2004 - 2006

Co-Investigator

Research project: A spirituality teaching programme for depression: A

randomized controlled trial

Canadian Institute of Natural and Integrative Medicine

PROFESSIONAL ACTIVITIES

Academic Consultant

2007 - Present

Journal World Health and Population - Reviewer for peer reviewed articles

2006 - Present

McMaster University's McMaster Online Rating of Evidence (MORE). Clinical relevance online rating system - Sentinel reader for evidence-based nursing

2006 - Present

Lippincott, Williams & Wilkins

- Sat on review panel for Taylor's Video Guide to Clinical Nursing Skills. Reviewed Perioperative Nursing video
- Reviewer for proposal for Bates guide to Canadian nursing health assessment
- Reviewer for textbook chapter for Weber and Kelly's Health assessment for nursing

Consultant

2007 - Present
Calgary Health Region - Program evaluation of the Smoking Cessation in
the Workplace: Pilot Program

2002 - Present

Budget preparation for clinical drug trials for medical specialists

PUBLICATIONS, PRESENTATIONS, AND PROJECTS

- 2007 Ewing, H. (2007). Mature student survival guide. Returning to school as an adult. Family Health, 23(1), 8-9.
- 2006 Ewing, H. (2006). Beat the clock. Good time management can safeguard your health. Family Health, 22(1), 19-21.
- 2002 Co-Author and Presenter: "Introduction and Overview of Good Clinical Practice: Guidelines for Investigators". Canadian Psychiatric Association Annual Meeting. November 2, 2002. Banff, Alberta.
- 2001 Reesal, R., & Ewing, H. (2001). The art of managing depression in primary care. The Canadian Journal of Continuing Medical Education, 13(10), 209-220.
- 2000 Co-Presented: "The Role of Clinical Investigator: Getting it Right". Saskatchewan Drug Research Institute Trial Symposium. September 16, 2000. Saskatoon, Saskatchewan.
- 1998 Foley, L., & Ewing, H. (1998). The need for I.V. therapy in long term care. Nursing Home, 8(3).

Co-Presented: "The Need for I.V. Therapy in Long Term Care". Canadian Intravenous Nurses Association Annual Conference. October 22, 1998.

Toronto, Ontario.

Principal author for Presentation: "Patient Satisfaction with Computerized Assessment in a Multi-center Clinical Trial". New Clinical Drug Evaluation Unit (NCDEU) Conference. June 10, 1998. Boca Raton, Florida.

EMPLOYMENT PRIOR TO 2006

2004 - 2006	Athabasca University Centre for Nursing and Health Studies - Calgary, Alberta Position: Academic Coordinator/Instructor
2004	BowValley College Continuing Education - Calgary, Alberta Position: Instructor Courses taught (Undergraduate - Classroom) Anatomy, Physiology and Microbiology
1995 - 2004	Centre for Depression and Anxiety Division of Western Canada Behaviour Research - Calgary, Alberta Position: Executive Director
1995 - 1998	Forest Grove Care Centre Calgary, Alberta Position: Quality Improvement Coordinator
1994 - 1996	University of Calgary/Mount Royal College Conjoint Nursing Program - Calgary, Alberta Position: Clinical Instructor for General Surgery
1990 -1993	Calgary General Hospital General Surgical / Trauma Step Down, Unit C7 - Calgary, Alberta Position: Assistant Nursing Unit Manager
1982 - 1989	Regina, Saskatchewan Ottawa, Ontario Calgary, Alberta Position: Staff nurse - Critical Care
1986 - 1988	Victorian Order of Nurses Ottawa, Ontario Position: Community Nurse

PROFESSIONAL MEMBERSHIP AND COMMITTEE PARTICIPATION

Present

- Founding member and President of the Doctor of Health Science Alumni Chapter, Nova Southeastern University

Past

- President of Student Council, Doctorate of Health Science Program, Nova Southeastern University
- Founding member, co-chair and treasurer for the Alberta Clinical Research Association for Clinical Research Professionals
- Treasurer and Secretary for Western Canada Behaviour Research Centre
- Chairperson for the Quality Improvement Team at Forest Grove Care Centre
- Secretary for the Alberta Association of Nurses in Independent Practice, South Central District
- Member of the University of Calgary Masters of Nursing Student's A.A.R.N. Direct Access Working Group
- Team leader for the Research Utilization Group

Randy D. Danielsen, MPAS, PA-C

rdanielsen@ashs.edu 5850 East Still Circle Mesa, AZ 85206 480-219-6041



EDUCATION

- Doctoral (Ph.D.) Candidate, Higher Education, The Union Institute, Cincinnati, Ohio, Expected completion date Fall 2002.
- Masters of Physician Assistant Studies (MPAS) University of Nebraska, 1997, with specialization in Internal Medicine.
- Bachelor of Science, (BS) Cum Laude, Health Education, University of Utah College of Health, Salt lake City, Utah, 1978
- Graduate, Utah MEDEX (Physician Assistant) Program, Class IV, University of Utah Department of Family & Community Medicine, Salt lake City, Utah, 1974

CREDENTIALS

- Certification by the National Commission on the Certification of Physician Assistants (NCCPA), Number 750392
- Arizona Joint Board on the Regulation of Physician Assistants (JBORPA), Number 1081

PROFESSIONAL EXPERIENCE

- 7/98-Present: Associate Professor & Chair, Arizona School of Health Sciences (KCOM) Department of Physician Assistant Studies, Phoenix, Arizona
- 2/95-6/98: Assistant Professor & Associate Director, KCOM Southwest Center for Osteopathic Medical Education & Health Science Physician Assistant Program, Phoenix, Arizona
- 3/99-Present: New Perspectives Health Care, Phoenix, Az. Providing Primary Care, Urgent Care, and Occupational Medicine to various clients.
- 2/95-Present: Occupational Assessments & Services, Phoenix, AZ, Provide both state and international occupational medical coverage (IRIDIUM Launch Team for both China and Kazakhstan).
- 8/94-12/98: CIGNA HealthCare Urgent Care Center, Greg Meyer MD, Glendale, Arizona.

- 8/96-6/98: Desert Urgent Care, Peter G. Frank MD, Phoenix, AZ, 1996-1998, Occupational Medicine and Urgent Care.
- 7/94-2/95: Clinical Educator, Wichita State University Physician Assistant Program, Wichita, Kansas, Unclassified Professional Faculty Member
- 10/93-7/94: Physician Assistant, CIGNA HealthCare of Arizona, Phoenix, Arizona
- 9/92-11/98: Vice-President, HealthCare Associates, Inc., Phoenix, Arizona
- 9/89-9/92: Physician Assistant, United States Air Force, Luke AFB, Arizona, Rank: Major
- 9/84-9/89: Administrative Director, Physician Assistant, Samaritan Health Services, Department of Health & Environmental Systems, Allen B. Moore MD, Phoenix, AZ
- 3/84-9/84: Physician Assistant, Health Maintenance Associates, CIGNA Healthplan, Phoenix, AZ
- 5/82-3/84: Physician Assistant, Maricopa Community Medicine Associates, Phoenix, AZ
- 3/81-5/82: Physician Assistant, Rainbow Health Services, Globe, Arizona
- 2/80-1/81: Physician Assistant, Arizona Heart Institute, Phoenix, AZ
- 8/79-2/80: Physician Assistant, INA Health plan, Phoenix, AZ
- 9/74-8/79: Physician Assistant, Kearns Medical Center, Kearns, Utah

PROFESSIONAL AFFILIATIONS

- The Joint Board on the Regulation of Physician Assistants (JBORPA)
 - Appointed by Governor for four year term, Sept 3, 1986 through July 1, 1990
 - Appointed by Governor for four year term, July 1, 2001 through July 1, 2005
- American Academy of Physician Assistants (AAPA) 1976-Present
 - Public Education Chairman 1977-79
 - Board of Directors 1979-81
 - Chairman, nominating committee 1981-83
 - Chairman, Professional Practice Committee 1983-84
 - Secretary, House of Delegates 1985-86
 - 2nd Vice-Speaker House of Delegates 1986-87
 - 1st Vice-Speaker, House of Delegates 1987-88
 - Member, Task Force on Reorganization 1987-88
 - Chairman, Nominating committee 1988-89
 - Member, Nominating Committee 1989-90
 - Member, Task Force on Recertification 1990-91
 - AAPA Outstanding PA of the Year 1993
 - Member, Professional Practice Council 1993-1996
 - AAPA Representative to the NCCPA 1996-2001
- Arizona State Association of Physician Assistants (ASAPA)
 - Board of Directors 1979-80
 - President 1982-83, 1985-86, 1993-94
 - Newsletter Editor 1984-85, 1988-89

- Chairman Legislative & legal Affairs 1989-90
- Chairman CME Committee 1990-91
- ASAPA Parliamentarian, 1996-98
- Co-Chairman, Legislative & Legal Affairs, 1997-98
- · Association of Physician Assistant Programs (APAP)
 - Member, Membership Committee 1994-00
- National Commission on the Certification of Physician Assistants (NCCPA)
 - NCCPA Commissioner 1997-2001
 - Member, Finance Committee, 1998-99
 - Member, Eligibility & Due process Committee, 1998-2001
 - Chairman, Complaints & Appeals Panel, 1998-2001
 - Member, Recertification Test Writing Committee 1994-1999
 - Vice-President 2000-2001
 - Member, Executive Committee, 2000-2001
- · Veteran's Caucus of the American Academy of Physician Assistants
 - President 1989-90
 - Director 1993-01
- The Arizona Medical Association
 - Affiliate Member, 1998-Present
- The Arizona Osteopathic Medical Association
 - Affiliate Member, 1998-Present
- · American Society of Law, Medicine & Ethics
 - Member, 1999-Present

MILITARY

- Retired May 30, 1998 after 28 years with the United States Air Force and the Army National Guard with the rank of Lieutenant Colonel.
- Vietnam era and Gulf War Veteran.

PUBLICATIONS

- Danielsen, Rd, Barney, WW (1979) Hodgkin's Disease-Case & Point, Physician Assistant Magazine, Aug.
 79
- Danielsen, RD, Gray, CJ (1985) The Febrile Child, PA-85 Magazine, Jan/Feb 86
- Danielsen, RD (1986) The Magnitude and Significance of Mild Hypertension, in Perspectives in Primary Hypertension: A Roundtable Discussion. <u>PA-86 Magazine</u>, May 86
- Danielsen, RD, Ilka, R (1986) Aids Exposure in Healthcare Workers. <u>Physician Assistant</u>, May 1986. Pg 37-44
- Danielsen, RD (1992) Desert Storm-Reflections of a Caregiver, Clinician Reviews, May 1992. Pgs 84-94.
- Danielsen, RD (1993) How to Effectively Hire a Physician Assistant, Arizona Medicine, Aug 1993
- Danielsen, RD (1995) A Father First, Editorial, Clinician Reviews, April 1995, Pgs 119-120.
- Danielsen, RD (1995) Teenage Behavioral Problems: Identifying Troubled Adolescents. <u>Clinician Reviews</u>, May 1995. Pg 55-84

- Glover, JJ, Bundschu, R, Caton, L, Coyte, E., Danielsen, RD, Frary, T., Gerbert, DA, Landel, G., Palenicek, J., Webster, BS (1995) End-Of-Life Decisions: Marking Out A Place for PA's to Stand: A Roundtable, JAAPA, August 1995, Pgs 48-58.
- Danielsen, R; Resisting Rape: Risks and Effectiveness, Physician Assistant, November 1995. Pgs 104-108.
- Danielsen, RD (1996) Karate Injuries: Origins & Prevention, Clinician Reviews, May 1996. Pgs 95-113.
- Danielsen, R; Condit, D., Potenza, A. (1997) The Physician Assistant as Expert Witness. <u>Journal of the American Academy of Physician Assistants</u> May 1997. Pgs 87-100.
- Wallis, B; Danielsen, R, Lab Test: Clip & File (1998) Heat Exhaustion with Rhabdomyolysis. <u>Physician Assistant</u>, March 1998. Vol. 22. No. 3.
- Danielsen, R. (1998) Adolescent Violence in America: What's behind the current epidemic? <u>Clinician Reviews</u>. May 1998.pgs 167-183.
- Danielsen, RD, Davis, RE, Combs, GE (1998) Computerized Testing: Uses and Pitfalls, <u>Perspectives in Physician Assistant Education</u>, Vol. 9, No. 3, summer 1998. Pgs 152-155.
- Danielsen, R.D. (1999) Adolescent Violence: It's Not Going Away, Editorial, <u>Clinician Reviews</u>. June 99, pgs 23-27.
- Danielsen, R.D., Cassidy, B. (1999) Do's and Don'ts for D.O.'s Who Supervise PAs, <u>AOMA Digest</u>, Winter Issue.
- Danielsen, R. (2000) Anatomy of a Learner-Centered Course Syllabus. <u>Perspectives on Physician Assistant</u> Education, Vol. 11, No. 3, Summer/Autumn 2000.
- Danielsen, R.; Davis, R. (2000) Using a Student Test Review Committee in a Physician Assistant Program. Perspectives on Physician Assistant Education, 2001; 12(1): 39-41.
- Cox, CC; Hooper, J; Cambre, KM; Wolf, TM; Jones, A.; Danielsen, R. (2001) Scope of Health Promotion Programs for Physician Assistant Students. <u>Perspectives on Physician Assistant Education</u> 2001; 12(1): 13-16.
- Danielsen, R. (2001) Behavior Problems in Children and Adolescents, in Moser, R.L. <u>Primary Care for</u> Physician Assistants: <u>Clinical Practice Guidelines</u>, 2nd Edition. New York, McGraw-Hill.
- Danielsen, R. (2001) Psychiatry and Behavioral, in Moser, R.L. <u>Primary Care for Physician Assistants:</u> Self-Assessment and Review, 2nd Edition. New York, McGraw-Hill.

ADVISORY/REVIEW BOARDS

- Clinicians Publishing Group, Clinician Reviews Journal, 1994-Present, Editorial Board
- Perspectives on Physician Assistant Education, Review Board 1999-Present

GRANTS

 Physician Assistant Training Grant, PA Program Rural/Medically Underserved Emphasis Project, Division of Medicine, Bureau of Health Professions, \$419,994 over 3 years. Ends June 30,2000.

- Physician Assistant Training Grant, Native American Physician Assistant Program, Division of Medicine, Bureau of Health Professions, \$670,000 over 3 years. Ends June 30, 2003.
- Association of Physician Assistant Programs, Health Promotion in PA Programs, \$2,500. Ends October 30, 2000.

PRESENTATIONS

- 1997
 - How to Be an Expert Witness: A Panel Discussion, presented at the 25th Annual Conference of the American Academy of Physician Assistants in Minneapolis, MN. May 1997.
 - Gulf War Syndrome: An Update, presented at the 25th Annual Conference of the American Academy of Physician Assistants in Minneapolis, MN. May 1997.
- 1998
 - Third Party Reimbursement for Physician Assistant Services, presented at the Arizona Osteopathic Medical Association (AOA) annual meeting in Phoenix, AZ. April 1998.
- 1999
 - How to Prepare for the PANCE presented at the Annual Meeting of the Student Academy of the American Academy of Physician Assistants meeting in Atlanta, GA, May 1999.
 - Desert Survival Workshop: A Team Building Exercise, presented at the Western Regional Meeting
 of the American Academy of Physician Assistants in Las Vegas, NV. February 28,2000.
- 2000
 - How to Prepare for the PANCE presented at the Annual Meeting of the Student Academy of the American Academy of Physician Assistants meeting in Chicago, IL. May 2000.
 - Utilizing a Student Test Review Committee in a PA Program. Presented at the APAP October Meeting. Washington D.C. October 2000.
- 2001
 - How to Prepare for the PANCE presented at the Annual Meeting of the Student Academy of the American Academy of Physician Assistants meeting in Anaheim, California, May 2001.

PERSONAL DATA

- DOB: 6/14/49
- Birthplace: Preston, Franklin County, Idaho
- Active Reader
- Second degree Black Belt, Uechi Ryu Karate (Chinese-Okinawan Martial Art),
- President Arizona Uechi Ryu Karate-Do, Black Belt Instructor.

PERSONAL REFERENCES ON REQUEST

Last Updated: Wednesday, March 06, 2002

Barbara Timmons Strahl, Ph.D.

Professional experience

1997 - present CC Neighborhood Justice Center

Las Vegas, NV

Senior Mediation Specialist

- Train volunteers in community mediation & continuing education requirements
- Responsible for program design & development
- Research & create customized conflict resolution & diversity based curriculum
- Coordinate multiparty, victim offender & prison based mediation programs
- Mediate cases ranging from business to employment and neighbor to criminal
- Developed & coordinate mediation programs for police department, air force base, and university

1995 - 1997

CC Organizational Development Center

Las Vegas, NV

Management Analyst II

- Researched, developed & presented training to County staff
- Provided consultation to County departments
- Scheduled & published a training calendar
- Facilitated public dialogues
- Designed & implemented County-wide management conference

1994 - present

Consulting & Training (CAT) Link

Las Vegas, NV

Mediator, Consultant & Trainer

- Adjunct professor for University of Nevada Las Vegas
- Provide mediation, facilitation, & collaborative problem solving services
- Mediate business & equal economic opportunity cases
- Research, design & facilitate training based on needs, specializing in mediation, conflict resolution, diversity, communication, team building & leadership
- Consult with & provide technical assistance to government, nonprofit agencies & private business

1991 - 1995

Florida Atlantic University

Fort Lauderdale, FL

Instructor

- Researched, designed & facilitated training for State employees including juvenile justice law, contracting, supervisory skills & workplace violence
- Consulted with & provided technical assistance to juvenile justice programs
- Specialized in conflict resolution (mediation) & crisis intervention

1990 - 1991

Eckerd Youth Development Center

Okeechobee, FL

Training Manager / Specialist

- Conducted comprehensive staff orientation program
- Developed & facilitated in-service training based on needs analysis, including team development & conflict resolution
- Instrumental in achieving American Corrections Association accreditation

1989 – 1990 Eckerd Youth Challenge Program

gram Okeechobee, FL

Program Director

- Using a team approach, designed & administered residential facility for delinquents
- Responsible for hiring, training, & supervising staff for residential & educational programs
- Involved in American Corrections Association accreditation process

1987 - 1988 PB Regional Juvenile Detention Center W. Palm Beach, FL

Assistant Superintendent

- Administered large juvenile detention center
- Responsible for hiring, training, & supervising approximately 60 management & line staff
- Used a team approach to build operating & programming systems

1978 - 1987 Des Moines Alternative High School Des Moines, IA

Teacher / Associate Teacher

- Instructed drop-outs in Social Studies, Career Development, Industrial Arts, & Self Esteem Building
- Designed & taught outdoor course, culminating in a wilderness canoe trip
- Involved in the design & operation of an alternative 9th grade program
- Designed & taught a community based sociology course, resulting in a book
- Participated in the planning & execution of a regional education conference
- Involved in school accreditation process

Education

1999 - 2005

Nova Southeastern University

Fort Lauderdale, Florida

PhD Conflict Analysis & Resolution

1991 - 1995

Nova Southeastern University

Fort Lauderdale, Florida

MS Special Education (emphasis in learning disabilities & conflict resolution)

1985 - 1987

Simpson College

Indianola, Iowa

Teaching Certificate in Sociology

1980 - 1984

Iowa State University

Ames, Iowa

BS Education (with emphasis in Therapeutic Recreation)

Professional memberships

American Society for Training & Development

Association for Conflict Resolution

Juvenile Justice Trainers Association

National Association for Community Mediation (Co-chair)

Victim Offender Mediation Association

N000 d1

Bini Litwin 1161 S.W. 74th Terrace Plantation, Florida 33317 954-792-1262

CAREER SUMMARY: Documented success in all aspects of health care administration with a strong emphasis on operations and business development. Proven ability in:

- > Product Development
- > Program Implementation
- > Physician Relations
- Data Analysis
- Staff Development

- > Fiscal Management
- > Strategic Planning
- Network Development
- > Managed Care Contracting
- Physical Plant Design

PROFESSIONAL EXPERIENCE:

POLARIS GROUP, Hingham, Mass.

1997-1998

Consultant-Outpatient Services

Reported to Vice President, Product Specialists will full responsibility for providing consultative services to acute and postacute care providers with an emphasis on analysis, development and implementation of outpatient products, including, but not limited to: Rehab Agency, Comprehensive Outpatient Rehab Facility (CORF), Adult Day Care. Scope of services included market and financial feasibility analysis, strategic planning, operational assessment, product development, network development, marketing plan and collateral development. Projects completed and accepted for implementation include:

- Market Analysis for CCRC Outpatient Services
- > Financial Feasibility Study for CCRC Outpatient Services
- ➤ Market Analysis for Comprehensive Outpatient Services
- Market Analysis for Adult Day Care Program

Pending projects included:

- > Operational Assessment for CCRC
- > Strategic Plan for start-up Professional Medical Management Company

ORNDA HEALTHCORP, Miami, FL (Now Tenet Health System) Regional Director of Corporate Services

1994-1997

Reported to the Regional Vice President with responsibility for the development, implementation and management of Corporate Health Services for the South Florida tri-county area. Activities focused on all aspects of corporate services including; employee health and wellness services and network development, operational coordination, and marketing of WorkMed, an integrated workers' compensation system that generated workers' compensation revenues in excess of \$9,000,000.

- Developed and implemented strategies that increased gross revenue 17%.
- Developed standardized program components and coordinated activities of corporate services network that included 9 hospitals, 11 primary care sites, 90 physician specialists and 12 ancillar centers.
- Responsible for training, development and oversight of 9 hospital Corporate Service program coordinators.
- Developed and managed workers' compensation IPA consisting of over 90 primary care and specialist physicians.
- Procured and negotiated regional workers' compensation managed care contracts for IPA and hospital services.
- Developed and implemented business plan for Corporate Services, including \$65,000 marketing budget and collateral material development.
- Served as resource for specialty program development including pain management, diabetes, arthritis, rehab services.

FLORIDA MEDICAL CENTER, Ft. Lauderdale, FL Director of Business Development Assistant Administrator

1993-1994

Direct report to the CEO of a 458 bed acute care hospital with responsibility for the development and implementation of business building strategies in all hospital market segments, including physician and payer relationships, marketing and public relations, planning and product line management. Managed budget in excess of \$1,000,000 and staff of 10.

- Developed new products, including Stem Cell transplant, Industrial Health, E.R. Fast Track, and Chemo Infusion with combined projected revenues in excess of \$1,000,000.
- Negotiated managed care contracts, including eight (8) capitated contracts (22,000 members) for Rehabilitation Outpatient Program.
- Implemented physician, contract and program tracking systems that enabled monthly monitoring and re-direction of business development activities.
- Designed, developed and managed a 10,000 sq. ft. certified outpatient rehabilitation facility with annual revenues in excess of \$2,000,000.
- Implemented Product Line Task force that provided service integration and staff development to increase market presence and improve resource utilization with projected product volume increases of 10% and budget savings of 20%.
- Administration of Rehabilitation Services, including in-patient, out-patient and Cardiac Rehabilitation Programs with operating budget in excess of \$5,000,000 and staff of 28.

Bini Litwin Page 3

PARKWAY REGIONAL MEDICAL CENTER, N. Miami Beach, FL Rehabilitation Services Product Line Manager

1970-1994

Reported to the COO with responsibility for administration of Rehabilitation Services for a 412 bed acute care hospital, including departments of Physical, Occupational, Speech and Recreational Therapy, Cardiac Rehabilitation, patient service areas for Orthopedics, Arthritis, and Rehabilitation.

- > Provided fiscal management of annual budget in excess of \$12,000,000.
- Directed staff of 56 employees.
- > Developed marketing strategies and program development to ensure annual growth of services in excess of 10%.
- > Facilitated licensure and accreditation reviews, including successful CARF accreditation of inpatient and outpatient rehab programs.

EDUCATION:

Barry University, Miami, FL Masters in Business Administration

State University of New York at Buffalo, Buffalo, NY. Bachelor of Science in Physical Therapy

Technical Skills: Excel, Word, Outlook and Power Point.

PROFESSIONAL EXPERIENCE:

Adjunct Professor:

Florida International University

Barry University

Medical College of Georgia

Guest Faculty:

ASID Chapter Conference, Orlando FL NHFL Florida So. Chapter, Miami FL ASID National Conference, Dallas TX AHA Conference, Dallas TX Denver CO FPTA Chapter Conference, Orlando FL

PUBLICATIONS:

Clinical Consideration in Treating the Minority Patient Physical Therapy Clinical Management: Fall 1982

The Relationship Between Duration of Physical Therapy Services in the Acute Care

Setting and Change in Functional Status in Patients With Lower-Extremity

Orthopedic Problems

Physical Therapy: January 1998

JODI P. CLARK, MD MPH

4300 N.W. 186 Street Miami, Florida 33055 jodipjuanclark@yahoo.com (305)-804-4768

EDUCATION:

2000 - 2003

FLORIDA INTERNATIONAL UNIVERSITY SCHOOL OF

PUBLIC HEALTH/ EPIDEMIOLOGY

Miami, FL

Primary Concentration in Epidemiology/Biostatistics Second Concentration in Health Education/Promotion

Graduate Teaching Certificate Program

GPA 3.9

2002-2002

CENTERS FOR DISEASE CONTROL AND PREVENTION/

ASSOCIATION OF STATE AND TERRITORIAL

DIRECTORS OF HEALTH PROMOTION AND PUBLIC HEALTH EDUCATION NATIONAL INTERNSHIP

PROGRAM

Miami-Dade County Health Department, FL

1997-2000

UNIVERSITY OF MIAMI SCHOOL OF MEDICINE/

JACKSON MEMORIAL HOSPITAL (PUBLIC HEALTH

TRUST) Miami, FL

Internal Medicine Residency Program

Board Certified in Internal Medicine November 2000

1992-1996

UNIVERSITY OF MIAMI SCHOOL OF MEDICINE

Miami, FL

Doctorate in Medicine (MD)- May 1996

GPA 3.5

1988-1992

UNIVERSITY OF MIAMI

Miami, FL

Bachelor of Science-Biology Major. Chemistry Minor.

Psychology Minor. Dance Minor.

GPA 3.9

HONORS/AWARDS:

University of Miami

Dean's List- Fall 1989- Spring 1992

President's Honor Roll- Fall 1990- Spring 1991, Spring

1992

The National Dean's List-Spring 1989-Spring 1992

Golden Key National Honor Society- 1991

Alpha Epsilon Delta- 1990 Phi Kappa Phi- 1991 Honor Council- 1992 Phi Beta Kappa- 1992

University of Miami Donor Scholarship 1988-1992 Bowman Ashe Memorial Scholarship 1990-1992

University of Miami School of Medicine/ Residency

McClelland Trust Rotary Scholarship 1994-1996 Most Outstanding Medical Resident Award 2000

PROFESSIONAL MEMBERSHIPS:

American Public Health Association American Medical Association American College of Physicians

RESEARCH EXPERIENCE:

Department of Health/Project Quest- South Beach AIDS Project Evaluation Impact Cross-Sectional Survey- March 2001 University of Miami/ Florida International University Hepatitis C Study- May 2001 Florida International University Dept of Public Health Cardiovascular Research Associate - January 2001- 2003 Florida International University/ South Florida Syphilis Health Promotion Program Impact Evaluation Study- 2004

CONFERENCE PRESENTATION AND PUBLICATIONS:

Chizan-Pluta, A, Clark, J, Averhart, C, Cardenas, G, Jennings, T, La Greca, A, Devieux, J, and Malow, R, 2002, <u>Adolescent Life Stress and Sexual Risk Taking: Implications for HIV Prevention, National Institute of Mental Health Role of Families in Preventing and Adapting to HIV/AIDS, July 24-26, Miami, Florida.</u>

Clark, J., Chizan-Pluta, A, Averhart, C, Jean-Gilles, M, La Greca, A, Devieux, J, and Malow, R, 2002, <u>Haitian Adolescents and HIV Risk Taking: Data From a Community Sample in Miami, Florida</u>, National Institute of Mental Health Role of Families in Preventing and Adapting to HIV/ AIDS, July 24-26, Miami, Florida.

Clark, J, Martinez, L, Lucenko, B, Devieux, J, and Malow, R, 2002, <u>Gender Differences In Condom Skills and Condom Attitudes</u> <u>Among Mentally Ill Adults at Risk for HIV</u>, 130th American Public Health Association Annual Meeting, November 9-13, Philadelphia, Pennsylvania.

Darrow W, Bierstaker S, Geiss E, Chevalier K, Clark J, Marrero Y, Obiaja K, Mills V. 'Hooking up' on the Internet, 'club drug' use, and risks for acquiring syphilis among men who have sex with men in an international resort area. Presented at the 13th IUSTI Asia Pacific Conference, on Wednesday, July 7, 2004, item 019

Darrow W, Bierstaker S, Geiss E, Chevalier K, Clark J, Marrero Y, Obiaja K, Mills V. Risky sexual behaviors associated with recreational drug use among men who have sex with men in an international resort area: challenges and opportunities. Presented at the first NIDA/DAARC International Conference focusing on HIV/AIDS hosted by the University of Miami, Friday, August 27, 2004

Darrow W, Bierstaker S, Chevalier K, Clark J, Marrero Y, Mills V, Geiss E and Obiaja K. <u>Risky sexual behaviors associated with recreational drug use among men who have sex with men in an international resort area: Challenges and opportunities.</u> Accepted for publication in the Journal of Urban Health.

HEALTH EDUCATION/PROMOTION EXPERIENCE:

Florida International University/ Public Health Graduate Teaching Assistant 2001-2003

Barry University/ Graduate Medical Sciences- Adjunct Clinical Professor for Master of Public Health Program, Physician Assistant Program and Podiatric Medicine Program 2003present

Nova Southeastern University- Health Professions Division-Department of Health Science- Assistant Professor 2006present

Nova Southeastern University- Health Professions Division-College of Allied Health and Nursing- Department of Health Science- Committee on Student Progress Chair- January 2007-Present

Nova Southeastern University- Health Professions Division-College of Allied Health and Nursing- College Wide Curriculum Committee Member- January 2007- Present Nova Southeastern University-Health Professions Division-Library Faculty Advisory Committee- October 2007- Present Miami Rescue Mission-Broward Outreach Center/ Volunteer Health Education and Wellness Coordinator for WARRM (Women At Risk Reintegration Program)

COMPUTER TRAINING:

Training in MS Word, Excel, PowerPoint, Access, Publisher, Blackboard, Web CT, FrontPage, SASS, SPSS

Peter George Holub, DPM, MS

16000 Opal Creek Dr. * Weston, FL 33331 (954) 384-0100 * fayholub@bellsouth.net

WORK EXPERIENCE

2005-Present

Assistant Professor

Nova Southeastern University 3200 South University Dr. Ft. Lauderdale, FL 33328

Teach online and on campus courses in Anatomy, Medical Ethics, Health Systems Management, Health Policy and Medical Writing for the Bachelor, Master and Doctor of Health Science programs. I also serve as adjunct professor for the College of Optometry, teaching online courses in Research Ethics.

2004-2005

Adjunct Professor Barry University 11300 NE 2nd Ave.

Miami Shores, FL 33161

Taught graduate level Biomechanics and conducted concurrent laboratories in the Exercise Science Program at the St. Petersburg campus.

2003-2005

Allied Health Instructor Southwest Florida College

1685 Medical Lane Fort Myers, FL 33907

Taught online and on-campus classes in Anatomy & Physiology, Medical Law and Ethics, Pharmacology, and Medical Terminology to students in the Surgical Technology, Medical Assistant and Pharmacy Technician Programs.

2003-2004

Teacher

Gateway Charter School 12850 Commonwealth Dr. Fort Myers, FL 33913

Prepared and conducted General Science lectures and labs for $6^{\rm th}$, $7^{\rm th}$ and $8^{\rm th}$ grade students. Established guidelines for academic success, including guidance and support of acceptable attitudes and behaviors.

2001-2003

Community Ambassador

White Course Graduate Housing The Pennsylvania State University

Planned and administered social and educational community programs for Penn State graduate students with the goal of cultivating active resident involvement. Served on the University Apartments Community Council and facilitated communication between the University Administration and students.

2001-2003

Teaching Assistant
Department of Kinesiology
The Pennsylvania State University

Prepared undergraduate level Kinesiology courses at the University Park campus and conducted research in Biomechanics at the Center for Locomotion Studies (CELOS). This required maintaining course websites, managing laboratories, and lecturing on human physiology, biomechanics, health and fitness. Co-authored a laboratory manual for Kinesiology 180, "Foundations of Kinesiology," a new course exploring the multidisciplinary field of kinesiology through active learning, teambased problem solving, and laboratory activities.

1994 to 2000

Program Director Leech Lake Band of Ojibwe Cass Lake, MN

Helped establish policies and procedures for diabetic foot care provided to more than 78,000 Native Americans on 33 reservations. Coordinated Tribal and Federal health programs, administered Federal, State and private funds, initiated research projects, developed health policy and procedures, documented care and educational services, interpreted diagnostic exams, supervised staff, and managed the entire foot care program budget. Compiled epidemiological reports and published them in the form of training manuals and educational packets to share with administrators and clinicians on a nationwide basis. Taught at the Leech Lake Tribal College, trained other allied health employees, and supervised the operations of an orthotic and prosthetic laboratory.

1996 to 2000

Clinic Director Ah-Gwah-Ching Mental Health Center Walker, MN

Provided comprehensive and conscientious podiatric medical services to meet the needs of frail and elderly patients. Cultivated and maintained a positive rapport with a wide variety of health care professionals.

1985 to 1993

Clinic Owner/Director 915 Electric Avenue Seal Beach, CA

Provided daily podiatric care while managing the entire financial and administrative functions of a multi-specialty clinic. Initiated and maintained good relationships with a wide variety of professionals in various health care and business settings.

1986 to 1987

Technical Writer/Editor Quest Publishing Company Brea, CA

Researched and wrote scientific articles for the *Journal of Clinical Engineering*, a quarterly journal for hospital clinical engineers and biomedical equipment technicians.

EDUCATION

2006	Doctoral Candidate Computing Technology in Education Nova Southeastern University	
2003	Doctoral Candidate Philosophy of Sport The Pennsylvania State University University Park, Pennsylvania	
2002	M.S. Kinesiology The Pennsylvania State University University Park, Pennsylvania	
1984	D.P.M. Doctorate in Podiatric Medicine and Surgery California College of Podiatric Medicine San Francisco, California	
1982	B.S. General Science California College of Podiatric Medicine San Francisco, California	
1979	B.A. in Biophysics University of California Berkeley, California	
TRAINING/CERTIFICATION		
1984-2006	Continuing education and coursework in clinical and surgical podiatric medicine (including CME in HIV/AIDS; Antibiotic Prophylaxis; Diabetes; Peripheral Arterial Disease; Deep Venous Thrombosis; Differentiating Joint Disorders; and Wound Care).	
2006	Professional Grant Writing and Research, ICI, 2006	
2006	Florida Bioethics Network Spring Conference	
2005-2006	Monthly Seminar Attendance Center for Teaching and Learning Nova Southeastern University	

2005 Medical Intensive

Designing "Out of the Box" Health Policy

Gesundheit Institute Urbana, Illinois

2005 Certification in the Protection of Human Research

Subjects (CITI)

2005 Third International Vein Congress: In-Office

Techniques, Miami, FL. ACCCME continuing medical

education for physicians.

2005	Elluminate online training workshop. NSU technology Training services.
2005	WebCT Updating Your Course web course development workshop. NSU technology training services.
2005	WebCT Evaluation Tools Quizzes web course development workshop. NSU technology training services.
2004-2005	Distance Education Professional Development, WebCT certificate. SWFC technology training services.
2003	Biology 6-12 Teaching Certification Eligibility Florida Department of Education
2003	Certification in College Teaching Center for Excellence in Learning & Teaching The Pennsylvania State University University Park, Pennsylvania
2002-03	Teaching with Technology Workshops Teaching Assistant Certification Program The Pennsylvania State University University Park, Pennsylvania
2001	Chemical Storage and Waste Management Certification Regulatory Affairs The Pennsylvania State University
2001	Cadaver Testing Area Protocol Center for Locomotion Studies Laboratory The Pennsylvania State University University Park, Pennsylvania
2001	Human Subjects Research Basic Training Penn State Regulatory Affairs University Park, Pennsylvania
LICENSURE	
1985-2002	Podiatric Medicine and Surgery California (1985 - 1992)& Minnesota (1992 - 2002)
SKILLS	
Computer	Course Management Systems (Angel, Cyberclass, and WebCT), Gait Lab (Novel, Vicon, Kistler), MS Word, Excel, PowerPoint, Premiere 6.0, Photoshop, MATLAB, LabView, and Minitab.
Administrative	Managed the business operations of a multispecialty clinic; directed federal, state and tribal public

health programs; serve on admissions and professional review committees.

PAPERS/PUBLICATIONS/PRESENTATIONS

2006	"Modeling Professionalism in the Online Environment" HPD Faculty Research Development Committee Nova Southeastern University
2006	Ethical Practices in Medical Advertising Presentation Bioethics and Health Law Consortium of South Florida Nova Southeastern University
2005	Diabetic Foot Complications Presentation at the Designing Lifestyles Group Sessions Sponsored by an NSU grant to provide community health education
2005	Medical Math Refresher course for allied health care students Student Learning Center Southwest Florida College
2005	Gait Analysis in the 19 th Century: Bringing Motion to Light Master's Thesis at The Pennsylvania State University
2002	Predicting Plantar Pressures Using Video Thermography Research Proposal Center for Locomotion Studies The Pennsylvania State University
2001	The Role of Plantar Cutaneous Mechanoreceptors in the Control of Stair Descent Experimental Methods Research Project Center for Locomotion Studies The Pennsylvania State University
2003	And the Weird Was Made Flesh and Dwelt Among Us Proposal for dissertation on the phenomenology of congenital hand anomalies Department of Kinesiology The Pennsylvania State University
2003	Learning to Walk: Walking to Learn Philosophical research paper using Thoreau's essay "Walking" as a template for personal and social transformation Department of Kinesiology The Pennsylvania State University
2003	Foundations of Kinesiology

Laboratory Manual for Kinesiology 180, a brand new core course for kinesiology majors (Fall 2003)

Department of Kinesiology

The Pennsylvania State University

2001 The Charcot Foot: A Consequence of Microdamage

Accumulation?
Graduate Forum Paper/Presentation
Center for Locomotion Studies
The Pennsylvania State University

PROFESSIONAL MEMBERSHIPS/AWARDS

2006 2nd Place Award for NSU "Two Shorts Competition"

"Modeling Professionalism in the Online Environment" Awarded by HPD Faculty Research Development Committee

Nova Southeastern University

2005-2006 Representative

Health Science Program

College Evaluation Committee Health Professions Division Nova Southeastern University

2005-2006 Member

Admissions Committee Vascular Sonography

Nova Southeastern University

2005-2006 Member

Bioethics and Health Law Consortium of South Florida Monthly academic/professional meetings to discuss bioethical and legal issues related to the health

care system.

2006 Emcee

7th Annual Student Life Achievement Awards

Nova Southeastern University

2006 Coach and Moderator for HPD 2nd Annual Ethics Bowl

Nova Southeastern University

2005 Judge & Member of Ethics Bowl Committee

Planning & organization of the $1^{\rm st}$ Annual Ethics Bowl (serving as judge 10/8/05) and sponsor for Southeast

Regional Ethics Bowl Competition (11/5/05).

Nova Southeastern University

2005 Best Online Ethics Essay

Faculty Entry

Nova Southeastern University

