

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 12-13, 2024**

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<b>TAB</b>	<b>DESCRIPTION</b>	<b>ACTION</b>
1	<b>BOARD POLICY III.G. POSTSECONDARY PROGRAM REVIEW AND APPROVAL – SECOND READING</b>	Action Item
2	<b>BOARD POLICY III.Q. ADMISSION STANDARDS – SECOND READING</b>	Action Item
3	<b>BOISE STATE UNIVERSITY – BACHELOR OF SCIENCE IN NEUROSCIENCE</b>	Action Item
4	<b>BOISE STATE UNIVERSITY – BACHELOR OF ARTS/BACHELOR OF APPLIED SCIENCE IN PUBLIC SERVICE LEADERSHIP</b>	Action Item
5	<b>UNIVERSITY OF IDAHO – SCHOOL OF HEALTH AND MEDICAL PROFESSIONS</b>	Action Item
6	<b>UNIVERSITY OF IDAHO – ONLINE MASTER OF SCIENCE IN GERONTOLOGY</b>	Action Item
7	<b>UNIVERSITY OF IDAHO – MASTER OF PHYSICIAN ASSISTANT STUDIES</b>	Action Item
8	<b>UNIVERSITY OF IDAHO – DIRECT-ENTRY, MASTER OF SCIENCE IN NURSING</b>	Action Item

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**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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**SUBJECT**

Board Policy III.G., Postsecondary Program Review and Approval – Second Reading

**REFERENCE**

August 29, 2019	The Board was presented with a first reading of proposed amendments to Board Policy III.G. Policy, which was referred back to Instruction, Research, and Student Affairs (IRSA) for additional discussion.
October 17, 2019	The Board approved the first reading of proposed amendments, which adds baccalaureate degree programs to the list of programs reviewed by the Board and changes requirements for new academic program proposals that consist of new state appropriations.
December 2019	The Board approved the second reading of proposed amendments to Board Policy III.G.
June 10, 2020	The Board approved a one-year, partial waiver of the requirement for full proposals in Board Policy III.G.3.d and 4.d for modifications to academic programs, career technical programs and instructional and administrative units.
June 16, 2021	The Board approved an extension of the partial waiver of the requirement for full proposals in Board Policy III.G.3.d. and 4.d for modifications to academic programs, career technical programs and instructional and administrative units.
June 16, 2021	The Board approved the first reading of proposed amendments to Board Policy III.G, which reorganizes and streamlines proposal requirements and provides flexibility to the Executive Director to delegate authority to designees for the approval of academic and career technical program changes.
August 26, 2021	The Board approved the second reading of proposed amendments to Board Policy III.G.
December 15, 2021	The Board approved the first reading of proposed amendments to Board Policy III.G., correcting duplicative language and aligning approval roles.
February 17, 2022	The Board approved the second reading of proposed amendments to Board Policy III.G.
April 17, 2024	The Board approved the first reading of proposed amendments to Board Policy III.G.

**APPLICABLE STATUTE, RULE OR POLICY**

Idaho State Board of Education Governing Policies & Procedures, Section III.G.  
Idaho Code §§ 33-2107A, 33-2202, 33-2205

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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**BACKGROUND/DISCUSSION**

In August 2021, the Board approved a major revision to Board Policy III.G. Postsecondary Program Approval and Discontinuance. This revision restructured the policy to include three levels of review, based on the nature of requested programmatic changes: full proposal, short proposal, and letter of notification. In February 2022, the Board approved amendments to correct an unintended conflict in the policy related to actions requiring a short proposal.

Over the past two years of implementing the significantly revised policy, Board staff and institutions have noted several minor-to-moderate changes that would further streamline the program review and approval process. The proposed amendments include these changes. Other proposed changes help to better align Board policy with Idaho Code related to the approval of career technical education programs and align the policy with updated practices related to the role of the Professional Standards Commission (PSC) in reviewing new educator preparation programs. Finally, proposed amendments would allow for some accreditors' external reviews to supplant the required external peer review under certain conditions.

**IMPACT**

Amendments will clarify and streamline the program review and approval process and bring it into alignment with current practice. They will also clearly articulate the differential roles and responsibilities of the Board's executive director and the Division administrator in program review and approval. Amendments will also increase efficiency and reduce duplicative costs for the development of some doctoral programs.

**ATTACHMENTS**

Attachment 1 – Board Policy III.G. Postsecondary Program Review and Approval  
– Second Reading

**BOARD STAFF COMMENTS AND RECOMMENDATIONS**

There were two proposed amendments added between the first and second readings. These amendments direct the Board's executive director or designee (in case of academic programs) and the state administrator (in cases of CTE programs) to develop and publish a timeline to ensure timely submission of program proposals that require review and approval by the full Board.

Board staff recommends approval of these amendments.

**BOARD ACTION**

I move to approve the second reading of proposed amendments to Board Policy III.G, Postsecondary Program Review and Approval, as submitted in Attachment 1.

Moved by \_\_\_\_\_ Seconded by \_\_\_\_\_ Carried Yes \_\_\_\_\_ No \_\_\_\_\_

Idaho State Board of Education  
**GOVERNING POLICIES AND PROCEDURES**

SECTION: III. POSTSECONDARY AFFAIRS

SUBSECTION: G. Postsecondary Program Review and Approval [February 2022 June 2024](#)

This subsection shall apply to the University of Idaho, Idaho State University, Boise State University, Lewis-Clark State College, North Idaho College, College of Eastern Idaho, College of Southern Idaho, and College of Western Idaho.

1. Classifications and Definitions

- a. Academic Program shall mean a postsecondary educational program offered by an institution of higher education that leads to an academic or professional degree, certificate, or other recognized educational credential as defined in Board Policy Section III.E.
- b. Academic Program Components shall include options, minors, emphases, tracks, concentrations, specializations, and cognates as defined by each institution. For the purposes of this policy, a certificate is not an academic program component.
- c. Administrative Unit shall mean offices, centers, bureaus, or institutes that are responsible for carrying out administrative functions, research, or public service as their primary purpose, and are not responsible for academic or career technical programs.
- d. Career Technical Program shall mean a sequence or aggregation of competencies that are derived from industry-endorsed outcome standards and directly related to preparation for employment in occupations requiring a career technical certificate or degree as defined in Board Policy Section III.E. These programs must include competency-based applied learning that contributes to an individual's technical skills, academic knowledge, higher-order reasoning, and problem-solving skills.
- ~~e. Career Technical Program Component shall mean instructional paths to fields of specialized employment, consisting of more than one specialized course.~~
- ~~f.e.~~ Financial Impact shall mean the total financial ~~resources~~expenditures, regardless of funding source, needed to support personnel costs, operating expenditures, capital outlay, capital facilities construction or major renovation, and indirect costs that are incurred as a direct result of establishing, modifying, or discontinuing a new instructional program, instructional unit, or administrative unit. ~~This includes the impact of moving resources from existing programs to proposed programs.~~
- ~~g.f.~~ Full Proposal shall mean a document submitted to the Board Office or Idaho Division of Career Technical Education (IDCTE) that contains details about substantive changes to academic or career technical education programming or administration that require review and approval by the full Board, ~~or the Board's Executive Director, of the Board~~ the IDCTE State Administrator (State



**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

Administrator), or designee, as specified in this policy. The Full Proposal template is developed and maintained by the Executive Director, State Administrator, or designee-Board Office in collaboration with IDCTE as appropriate.

h.g. Instructional Unit shall mean departments, institutes, centers, divisions, schools, colleges, campuses, branch campuses, and research units (e.g. extension centers) that are responsible for academic programs or career technical programs.

i.h. Letter of Notification shall mean a letter from the institution to the Executive Director, IDCTE-State Administrator or designee, notifying the Board Office or IDCTE as appropriate of changes to academic or career technical education programming or administration that do not require advanced approval by the Board, ~~or the~~ Executive Director, State Administrator, or designee, as specified in this policy.

j.i. Major shall mean a principal field of academic specialization that usually accounts for 25 to 50 percent of the total degree requirements. The concentration of coursework in a subject matter major serves to distinguish one program from others leading to the same or a similar degree.

k.i. Short Proposal shall mean a document submitted to the Board Office or IDCTE that contains details about non-substantive changes to academic or career technical education programming or administration that require review and approval by the Executive Director, State Administrator, or designee, as specified in this policy. The Short Proposal template is developed and maintained by the Board Office in collaboration with IDCTE as appropriate.~~Executive Director, State Administrator, or designee as applicable to the type of program.~~

## 2. Roles and Responsibilities

Program planning, review, and approval shall be a collaborative process which includes the Board, Board office staff, IDCTE staff, the institutions, faculty, external advisory groups, regional and specialized accreditation bodies, and other stakeholders pursuant to Board Policy III.Z.

a. Each institution shall establish and maintain policies and procedures for evaluating existing programs and developing new program proposals. This evaluation process should be an integral component of the institution's academic and career technical education planning and budgeting processes.

b. The Council on Academic Affairs and Programs (CAAP) shall review ~~new~~ program proposals and discontinuation requests ~~shall be reviewed by the Council on Academic Affairs and Programs (CAAP)~~. CAAP shall make recommendations to the Instruction, Research, and Student Affairs (IRSA) committee on instructional programmatic matters and related policy issues.

- c. ~~The State Administrator of IDCTE shall approve academic microcredentials developed by the institutions, in consultation with Board Staff, in addition to career technical microcredentials. The Idaho Division of Career Technical Education~~The State Administrator shall review and make recommendations as appropriate to the IRSA Committee and/or the Board on instructional programmatic matters and policy issues related to ~~their IDCTE's~~ roles and responsibilities. ~~The State Administrator of the Idaho Division of Career Technical Education is authorized to approve academic microcredentials developed by the institutions in addition to career technical microcredentials.~~

~~The Professional Standards Commission shall review and make recommendations as appropriate to the Board on educator preparation programs for educator certification purposes. Educator preparation program approval for state certification purposes is governed by Administrative Code through a separate process. The processes for earning approval for certification should be conducted concurrently with the program approval process when practicable.~~

3. Procedures for Review and Approval of Changes to Academic Programming and Administration ~~Proposal Submission and Approval~~

Proposed changes to academic programs and administration at the institutions shall be submitted to the Board for one of three levels of review: a Full Proposal, a Short Proposal, or a Letter of Notification. Institution staffs shall ~~are strongly encouraged to consult with Board staff to determine the appropriate level of review before submitting proposed changes to the Board office.~~

- a. Actions Requiring a Full Proposal

Subsequent to institutional review and consistent with institutional policies, but prior to implementation, actions related to academic programs or units identified in this subsection require approval by the Board or the Executive Director or designee as indicated, and shall be submitted by the institution as a Full Proposal. There are three different types of Full Proposal forms: a form for a discontinuation of a program, a form for new instructional/administrative units, and a form for all other actions requiring a Full Proposal.

- i. The following actions require approval by the Board:

- 1) Establishment of a new branch campus or change in location geographically apart from the main campus, regardless of financial impact. A location of an institution that is geographically apart and independent of the main campus is permanent in nature; offers at least 50% of the courses of an educational program leading to a degree, certificate, or other educational credential; has its own faculty and

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

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**ATTACHMENT 1**

administrative organization; and has its own budgetary and hiring authority. Subsection 3.a.i.1 does not apply to ~~the~~ community colleges.

- 2) Establishment of any new academic undergraduate or graduate program with a financial impact of \$250,000 or more per fiscal year.

a) All doctoral program proposals shall require an external peer review, regardless of financial impact. The external peer-review panel shall consist of at least two (2) members and will be selected by the Executive Director or designee and the requesting institution's Chief Academic Officer. Board staff shall notify the institution in writing whether it may proceed with the external peer-review process. External reviewers shall not be affiliated with a public Idaho institution. The review shall consist of a paper and on-site peer review, followed by the issuance of a report and recommendations by the panel. Each institution shall provide the panel with a template developed by the Executive Director or designee. The peer reviewer report and recommendations shall be a significant factor in the Board's evaluation of the program.

- i. For programs that require specialized accreditation, external review for the accreditation process may supplant standard external peer review as described in this paragraph, and may occur after approval of the program by the Board, if and only if receipt of initial accreditation is required before any student enrolls in the program. Institutions must receive from the Executive Director or designee approval to supplant external peer review with specialized accreditation review prior to submitting a doctoral program proposal. Institutions shall submit a copy of the specialized accreditation report to the Board Office within 30 days of completion of the review.

b) New educator preparation programs must utilize the Board approved new education preparation program approval process and require ~~concurrent~~ submission of a Full Proposal to the Executive Director or designee ~~and the Professional Standards Commission (PSC),~~ regardless of financial impact. The PSC new education preparation program approval process ensures programs meet the Idaho standards for educator certification. The Executive Director or designee ensures the program proposal is consistent with the program approval process and meets the standards approved by the Board and established by rule in Administrative Code pursuant to Section 33-1254 Idaho Code. The PSC makes recommendations to the Board for approval of programs as vehicles for meeting the state certification requirements.

- 3) Establishment by a community college of any new applied baccalaureate program, pursuant to Section 33-2107A, Idaho Code.

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

- 4) Establishment of any new program with academic program fees as defined in Board Policy Section V.R.
  - 5) Adding program fees to existing programs requires full Board approval consistent with Board Policy Section V.R; however, such changes do not require submission of a Full Proposal.
- ii. The following actions require approval by the Executive Director or designee:
- 1) Establishment of any new academic undergraduate or graduate program with a financial impact of less than \$250,000 per fiscal year.
  - 2) Discontinuation of an academic undergraduate or graduate program or instructional or administrative unit.
  - 3) Establishment of any new instructional or administrative unit.
  - 4) Establishment of any new or discontinuation of any existing academic undergraduate and graduate certificates consisting of more than 30 credits and with a financial impact of \$250,000 or more per fiscal year.
  - 5) Expansion of an existing program outside an institution's Designated Service Region, with the exception of programs for which institutions have statewide program responsibilities as defined in Board Policy III.Z.
  - 6) Conversion of a program option into a stand-alone program with a financial impact of \$250,000 or more per fiscal year.
  - 7) Consolidation of two or more undergraduate programs into one undergraduate program with a financial impact of \$250,000 or more per fiscal year.
  - 8) Consolidation of two or more graduate programs into one program.
  - 9) Splitting of a graduate program into two or more programs.
  - 10) Addition of an academic undergraduate, graduate, or specialized certificates or degrees to an existing programs with a financial impact of \$250,000 or more per fiscal year.

Each Full Proposal shall be reviewed by the Council on Academic and Affairs and Programs CAAP within thirty (30) days of receipt submission to the Board Office. At the sole discretion of the Executive Director or designee, any Full Proposal may be referred to the full Board for review and approval. ~~The Executive Director or designee shall develop and publish a timeline for review of full proposals for timely inclusion on the agendas of regularly scheduled board meetings. To ensure review by the full Board, the 30-day review must end at least fifteen (15) calendar days before the agenda material submission deadline for the targeted regular Board meeting. Requests requiring new state appropriations shall be submitted to the Board for review prior to or concurrently with submission of an institution's annual budget request.~~

- b. Actions Requiring a Short Proposal

Subsequent to institutional review and consistent with institutional policies, but prior to implementation, the following actions related to academic programs or units require approval by the Executive Director or designee and shall be submitted by the institution as a Short Proposal:

- i. Establishment of a new or discontinuation of any existing academic undergraduate or graduate certificate consisting of more than 30 credits with a financial impact of less than \$250,000 per fiscal year.
- ii. Addition of an [academic undergraduate, graduate, or specialized](#) certificate ~~or degree~~ to an existing program with a financial impact of less than \$250,000 per fiscal year.
- iii. Splitting of an undergraduate program into two or more undergraduate programs.
- iv. Consolidation of two or more undergraduate programs into one undergraduate program with a financial impact of less than \$250,000 per fiscal year.
- v. Conversion of one program option into a stand-alone program with a financial impact of less than \$250,000 per fiscal year.
- vi. Conversion or transition of a degree type (e.g., Bachelor of Arts to Bachelor of Science).
- vii. Conversion or transition of a certificate type (e.g., Technical Certificate of Completion to Basic Technical Certificate).
- viii. Deviation from [certificate or degree](#) program credit definitions [as provided in Board Policy III.E](#).
- ix. Changes to program names or degree titles related to Statewide Program Responsibilities as defined in Policy III.Z (requires full board approval).
- x. Establishment of new programs consisting of multiple certificates with similar coursework.
- xi. Establishment of a dual degree from existing programs with a financial impact of less than \$250,000 per fiscal year.
- xii. Modification to existing academic instructional or administrative units.

At the sole discretion of the Executive Director or designee, institutions may be required to submit a Full Proposal for any action identified in this subsection.

c. Actions Requiring a Letter of Notification

Subsequent to institutional review and consistent with institutional policies, and ~~within at least~~ 30 days ~~after~~ ~~before~~ implementation, institutions shall notify the Executive Director or designee of the following actions related to academic programs or units via a Letter of Notification:

- i. Establishment of a new, modification to, or discontinuation of an academic program component.

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

- ii. Establishment of a new or discontinuation of any existing academic undergraduate or graduate certificate consisting of fewer than thirty (30) credits.
- iii. [Expansion of an existing P program expansion](#) within an institution's Service Region as defined in Board Policy III.Z.
- iv. [Expansion of an existing statewide program offered by an institution with Statewide Program Responsibilities as defined in Board Policy III.Z.](#)
- ~~iv. A change from clock hours to credit hours for an academic program.~~
- v. Addition of an online option to an existing academic program.
- vi. Transition of an academic program with less than fifty percent (50%) of courses offered online exclusively to fifty percent (50%) or more of courses offered online exclusively.
- vii. Transition of an academic program to an exclusively online format.
- viii. Addition or removal of courses that represent a significant departure from existing academic program offerings or method of delivery.
- ix. A change in name or title of any academic program or instructional or administrative unit.
- x. A change of Classification of Instructional Program (CIP) code for any academic program.
- xi. A ~~credit~~ change to [the total number of credits required to earn a certificate or degree to](#) an existing academic program.

At the sole discretion of the Executive Director or designee, institutions may be required to submit a Short Proposal or Full Proposal for any action identified in this subsection.

- d. [Other M minor content](#) changes to curriculum, descriptions of individual courses, or catalog listings do not require notification to or approval by the Board or the Executive Director or designee.
- ~~d.e.~~ [Requests to establish, modify, or discontinue a microcredential, as defined in Board Policy III.E, require approval by the State Administrator or shall be submitted by the institution in accordance with a templated developed by IDCTE.](#)

**4. Career Technical Program Proposal Submission and Approval**

**a. Actions Requiring a Full Proposal**

Subsequent to institutional review and consistent with institutional policies, but prior to implementation, requests for changes to career technical programs or units identified in this subsection require approval by the State Administrator ~~or the Executive Director~~ or designee and shall be submitted by the institution as a Full Proposal.



- i. Establishment of a new career technical education program or certificate. New career technical programs or certificates with a financial impact of \$250,000 or more per fiscal year require approval by the full Board.
- ii. Discontinuation of career technical programs ~~and components~~.
- iii. Establishment of new career technical administrative or instructional units.
- iv. Expansion of a career technical program outside an institution's Designated Service Region as defined in Board Policy III.Z.
- v. Consolidation of two or more career technical programs into one career technical program with a financial impact of \$250,000 or more per fiscal year.
- vi. Conversion of one certificate or degree option within a ~~option~~ into a stand-alone career technical program with a financial impact of \$250,000 or more per fiscal year.
- vii. Addition of career technical certificates or degrees to existing career technical programs with a financial impact of \$250,000 or more per fiscal year.

For new or modified career technical programs or certificates, a Program Profile ~~Attachment B~~ is required. Each Full Proposal shall be reviewed by ~~the Council on Academic and Affairs and Programs~~ CAAP within 30 days of ~~receipt~~ submission to IDCTE. At the sole discretion of the State Administrator ~~or Executive Director~~ or designee, any Full Proposal may be referred to the Board for review and approval. ~~The State Administrator shall develop and publish a timeline for review of full proposals for timely inclusion on the agendas of regularly scheduled board meetings. To ensure review by the full Board, the 30-day review must end at least fifteen (15) calendar days before the agenda material submission deadline for the targeted regular Board meeting.~~

b. Actions Requiring a Short Proposal

Subsequent to institutional review and consistent with institutional policies, but prior to implementation, requests for changes in career technical programs or units identified in this subsection require approval by the State Administrator ~~or Executive Director~~ or designee and shall be submitted by the institution as a Short Proposal.

- i. Splitting of a career technical program into two or more career technical programs.
- ii. Consolidation of two or more career technical programs into one career technical program with a financial impact of less than \$250,000 per fiscal year.
- iii. Conversion of one certificate or degree option within a ~~option~~ into a stand-alone career technical program with a financial impact of less than \$250,000 per fiscal year.
- iv. Addition of career technical certificates, specialized certificates, or degrees to existing career technical programs with a financial impact of less than \$250,000 per fiscal year.

- v. ~~[Inactivation of a career technical program \(refer to paragraph 8 of this policy\).](#)~~ ~~Inactivation of a career technical program. Inactivation allows program re-evaluation and assessment in response to rapid changes in industry for up to three years. If industry demand for the program does not resume within three years following approved inactivation, the program shall be discontinued pursuant to paragraph 7 of this policy.~~
- vi. Addition or removal of courses that represent a significant departure from existing career technical program offerings or method of delivery.
- vii. Modification to existing career technical instructional or administrative units.
- viii. Conversion or transition of one career technical program degree or certificate level to another degree or certificate level.
- ix. Transition of a career technical program to an exclusively online format.
- x. Addition of an online option to an existing career technical program.
- xi. Transition of a career technical program with less than fifty percent (50%) of courses offered online exclusively to fifty percent (50%) or more of courses offered online exclusively.

For the addition or modification of career technical programs or certificates, a Program Profile ~~Attachment B~~ is required. Upon the recommendation of the State Administrator or at the discretion of the Executive Director or designee, institutions may be required to submit a Full Proposal for any action identified in this subsection.

c. Actions Requiring a Letter of Notification

Subsequent to institutional review and consistent with institutional policies, and within 30 days ~~after~~ before implementation, institutions shall notify the State Administrator ~~or the Executive Director~~ or designee of the following changes to career technical programs or units via a Letter of Notification and Program Profile as appropriate:

- ~~i. Establishment of a new, modification to, or discontinuation of a career technical program component.~~
- ~~ii.i.~~ Career technical program expansion within an institution's Designated Service Region as defined in Board policy III.Z.
- ii. Re-activation of a career technical program within three years from inactivation.
- iii. A change from clock hours to credit hours for a career technical program.
- iv. A change in the name or title of any career technical program or instructional or administrative unit.
- v. A change of Classification of Instructional Program (CIP) code for any career technical program.
- vi. A ~~credit~~ change to the total number of credits required to earn a certificate or degree to an existing career technical program.
- vii. Minor changes to career technical courses. ~~Requires a program profile Attachment B and letter.~~



**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

Upon the recommendation of the State Administrator ~~or at the discretion of the Executive Director~~ or designee, institutions may be required to submit a Short Proposal or Full Proposal for any action identified in this subsection.

- d. Requests to establish, modify, or discontinue a microcredential, as defined in Board Policy III.E, require approval by the State Administrator or shall be submitted by the institution in accordance with a template developed by ~~the Division of Career Technical Education~~ IDCTE.
- e. Requests requiring new state appropriations shall be included in the annual budget request of ~~the Idaho Division of Career Technical Education~~ IDCTE for Board approval.

5. Sunset Clause for Academic and Career Technical Program Approval

Academic and career technical programs approved by the Board ~~or Executive Director~~, ~~or State Administrator~~ Administrator must be implemented within five years. A program not implemented within five years from the approval date requires submission for approval of an updated proposal. Institutions shall notify the Executive Director, State Administrator, or designee in writing when an approved program has not been officially implemented within the sunset timeframe. Institutions may request a change in the sunset timeframe indicated in the program proposal if a program's implementation is delayed.

6. Academic and Career Technical Program Proposal Review Timeline and Denial Procedures

- a. The Executive Director, State Administrator, or designees shall act on any Full Proposal or Short Proposal within ~~thirtyfourty-five~~ (3045) days from proposal submission.
- b. If the Executive Director or designee denies a proposal, he/she shall provide specific reasons in writing to the institution. The institution shall have thirty (30) days in which to address the issue(s) for denial of the proposal. The Executive Director or designee shall have ten (10) working days after the receipt of the institution's response to re-consider the denial. If the Executive Director or designee denies the request after re-consideration, the institution may send its request and the supporting documents related to the denial to the Board for final reconsideration.

7. Program Discontinuance

The primary considerations for program discontinuance are whether the program is an effective use of the institution's resources, no longer serves student or industry

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

needs, or when programs no longer have sufficient students to warrant allocation of resources. This policy does not apply to programs that are discontinued as a result of financial exigency as defined in Board Policy Section II.N.

- a. Institutions shall develop policies, in accordance with the Northwest Commission on Colleges and Universities Accreditation Handbook, which requires institutions to make appropriate arrangements for enrolled students to complete affected programs in a timely manner with minimum interruptions.
- b. Any faculty or staff members whose employment the institution seeks to terminate due to the discontinuance of a program based upon Board Policy Section III.G. shall be entitled to the following procedures:
  - i. Non-classified contract employees, including non-tenured faculty, may be dismissed or have their contracts terminated or non-renewed in accordance with Board and institutional policies.
  - ii. State of Idaho classified employees shall be subject to layoff as provided in the rules of the Division of Human Resources. Classified employees of the University of Idaho shall be subject to layoff as provided in the policies of the University of Idaho.
  - iii. Tenured faculty will be notified in writing that the institution intends to dismiss them as a result of program discontinuance. This notice shall be given at least twelve (12) months prior to the effective date of termination.
  - iv. An employee who receives a notice of termination as a result of program discontinuance is entitled to use the internal grievance procedures of the institution. The sole basis to contest a dismissal following a program closure is in compliance with these policies.

8. Career Technical Program Reduction, ~~or~~ Termination, Prioritization, and Inactivation

For the reduction or termination of career technical programs, institutions shall adhere to criteria set forth by ~~Idaho Division of Career Technical Education~~ IDCTE.

a. Conditions for Reduction or Termination

A program is subject to reduction or termination when ~~one~~ two or more of the following conditions exist. Standards for the metrics listed below will be predetermined at the local level according to the institution's program health metrics for each category.

- i. Inadequate Job Opportunities
- ii. Inadequate Student Enrollment
- iii. Inadequate Positive Placement
- iv. Inadequate Completion Rate

v. Inadequate Finances

b. Inactivation allows program re-evaluation and assessment in response to rapid changes in industry for up to three years. If industry demand for the program does not resume within three years following approved inactivation, the institution shall submit a discontinuation full proposal pursuant to paragraph 4 of this policy.

b.c. Notice to Employees

The institution must give notice in writing to employees who are affected by a program reduction or termination in accordance with Board and institutional policies.

9. Reporting

a. ~~The Executive Director or designee shall report s~~Semi-annually all approved program changes shall be reported to the Board ~~regarding all program proposals approved by the Executive Director or designee.~~

b. All baccalaureate and graduate level programs approved by the Board require a report on the program's progress in accordance with a timeframe and template developed by the Executive Director or designee.

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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**SUBJECT**

Board Policy III.Q., Admission Standards – Second Reading

**REFERENCE**

June 2007	Board approved the first reading of amendments to Board Policy III.Q.
August 2007	Board approved the second reading of amendments to Board Policy III.Q.
December 2013	Board approved the first reading of amendments to Board Policy III.Q.
February 2014	Board approved the second reading of amendments to Board Policy III.Q.
April 2017	Board approved the first reading of amendments to Board Policy III.Q.
June 2017	Board approved the second reading of amendments to Board Policy III.Q.
June 2020	Board approved a temporary waiver of the College Entrance Exam minimum admission requirement in response to the COVID-19 pandemic.
June 2021	Board approved removing College Entrance Exam minimum admission requirements.
April 2024	Board approved the first reading of amendments to Board Policy III.Q to update sections on direct admissions, high school requirements, and Career Technical Education program admissions.

**APPLICABLE STATUTES, RULE OR POLICY**

Idaho State Board of Education Governing Policies & Procedures, Section III.Q, Admission Standards

**BACKGROUND / DISCUSSION**

In Spring 2024, postsecondary representatives agreed to include Idaho Standard Achievement Test (ISAT) scores, along with GPA and SAT scores, as criteria for the Direct Admissions program. This decision was supported by research data and specifically adjusts admissions criteria for Lewis-Clark State College and Idaho State University.

The policy updates and improves the admissions process by offering more tailored communications, simplifying high school course requirements, streamlining Career Technical Education (CTE) admissions, and refining provisional admissions for high-achieving students from non-accredited high schools.

**IMPACT**

Approval of the policy amendments will improve readability and interpretability of

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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the policy. Additionally, amendments provide clearer guidance to Board staff and institutions on direct admissions decisions and to institutional admissions offices on acceptable approaches for high school admission.

**ATTACHMENTS**

Attachment 1 – Board Policy III.Q. Admission Standards – Second Reading

**STAFF COMMENTS AND RECOMMENDATIONS**

The proposed policy amendments were reviewed by Board staff, enrollment/admissions staff at all eight institutions, career technical college deans, the Council on Academic Affairs and Programs at their March 28, 2024 meeting, and the Instruction, Research, and Student Affairs Committee of the Board at their April 4, 2024 meeting.

There were no changes between first and second reading. Staff recommends approval.

**BOARD ACTION**

I move to approve the second reading of proposed amendments to Board Policy III.Q, Admission Standards as presented in Attachment 1.

Moved by \_\_\_\_\_ Seconded by \_\_\_\_\_ Carried Yes \_\_\_\_\_ No \_\_\_\_\_

Idaho State Board of Education  
**GOVERNING POLICIES AND PROCEDURES**

SECTION: III. POSTSECONDARY AFFAIRS

SUBSECTION: Q. Admission Standards

June 2021 June 2024

1. Institution Policies

Each postsecondary institution must establish institutional policies which meet or exceed the following minimum academic and career technical admission standards. Additional and more rigorous requirements also may be established by the institutions for admission to specific programs, departments, schools, or colleges. Consistent with institutional policies, admission decisions may be appealed by applicants to the institutional admissions committee. Career Technical Education program admission requirements apply to all technical colleges, including the College of Eastern Idaho, the College of Southern Idaho, the College of Western Idaho, Lewis-Clark State College, Idaho State University College of Technology, and North Idaho College.

2. Institutional Academic Program Admission

a. a. Direct Admission

Students attending an Idaho public school, or Idaho private school that has entered a Direct Admission participation agreement with the Board, may be notified of their admission to an Idaho public college or university through the State Board's Direct Admission Program. ~~Admission awarded through the program is contingent on the verified level of achievement in high school curriculum and successful completion of Idaho high school graduation requirements.~~ Direct admissions offers are based on the following criteria:

<u>Verified Achievement</u>	<u>Institution Admission</u>
<u>ISAT Math level <math>\geq 3</math> and ELA/Literacy level <math>\geq 3</math></u> <u>OR</u> <u>Unweighted GPA = 3.0</u>	<u>Admission to all Idaho public institutions.</u>
<u>Unweighted GPA between 2.25 and 2.99</u>	<u>Admission to Idaho's public community colleges, Lewis-Clark State College and Idaho State University.</u>
<u>Unweighted GPA &lt; 2.25</u>	<u>Admission to Idaho's public community colleges.</u>

Admission awarded though the program is contingent on the verified level of achievement in high school curriculum (grade point average), performance on the

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

11th grade Idaho Standards Achievement Test (ISAT), and successful completion of Idaho high school graduation requirements. Direct admission decisions apply only to offers of admission to Idaho public institutions made between October 1 to June 30 of the senior year of high school.

**a.b. Academic ~~Program~~ Regular Admission**

An applicant who is not admitted under the Board's Direct Admission Program must graduate from a high school accredited by a body recognized by the Board and complete the Admission Standards Core Courses with a minimum 2.00 cumulative grade point average. Cognia is the Board's recognized high school accrediting body. Applicants who graduated from high school prior to ~~1989-1995~~ will be subject to the admission standards at the time of their high school graduation. Each institution may develop a separate policy for the admissions and placement of international students.

**Admission Standards Core Courses**

Subject Area	Minimum Requirement	Select from These Subject Areas
Secondary Language Arts and Communication	8 credits	Composition, Literature, and Oral Communication
Mathematics	6 credits	<p>A minimum of six (6) credits. Secondary Mathematics includes Integrated Mathematics, Applied Mathematics, Business Mathematics, Algebra, Geometry, Trigonometry, Fundamentals of Calculus, Probability and Statistics, Discrete Mathematics, and courses in Mathematical Problem Solving and Quantitative Reasoning. A total of 8 credits are strongly recommended. Four (4) of the required mathematics credits must be taken after 9<sup>th</sup> grade.</p> <p>Courses not identified by traditional titles, (i.e., Algebra I or Geometry), may be used as long as they contain all of the critical components of higher math functions prescribed by the State Mathematics Content Standards.</p> <p>Institutions may recognize other Mathematics courses as meeting this requirement if those courses are taken in compliance with the Idaho state minimum graduation requirements.</p>
Social Studies	5 credits	<p>American Government (state and local), Geography, U.S. History, and World History.</p> <p>Other courses may be selected from Economics, including Consumer Economics, if it aligns to the state content standards, Psychology, and Sociology.</p>
Science	6 credits	<p>Secondary sciences include instruction in Applied Sciences, Earth and Space Sciences, Physical Sciences, and Life Sciences. <del>A maximum of two (2) credits may be derived from career technical</del></p>

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

		<p><del>science courses when courses are aligned to state career technical content standards, and/or Applied Biology, and/or Applied Chemistry. (Maximum of two (2) credits).</del></p> <p>Institutions may recognize other Science courses as meeting this requirement if those courses are taken in compliance with the Idaho state minimum graduation requirements.</p> <p>Must have laboratory science experience in at least two (2) credits.</p> <p>A laboratory science course is defined as one in which at least one (1) class period per week is devoted to providing students with the opportunity to manipulate equipment, materials, or specimens; to develop skills in observation and analysis; and to discover, demonstrate, illustrate, or test scientific principles or concepts.</p>
Arts and Humanities (including world languages)	2 credits	<p>Humanities courses include instruction in Visual Arts, Music, Theatre, Dance, or World Language aligned to the Idaho content standards for those subjects. Other courses such as Literature, History, Philosophy, Architecture, or Comparative World Religions may satisfy the humanities standards if the course is aligned to the Interdisciplinary Humanities Content Standards. History courses beyond those required for state high school graduation may be counted toward this category.</p> <p>World Language is strongly recommended. The Native American Languages may meet the world language credit requirement</p>
Other College Preparation	3 credits	<p>Speech or Debate [no more than one (1) credit]. Debate must be taught by a certified teacher.</p> <p>Studio/Performing Arts (art, dance, drama, and music).</p> <p>Foreign Language (beyond any foreign language credit applied in the Humanities/Foreign Language category).</p> <p><del>Secondary Career Technical courses, (no more than two (2) credits) in Agricultural Science and Technology; Business Technology Education; Computer Science Technology; Engineering; Family and Consumer Sciences; Marketing Technology Education; Technology Education, and individualized occupational training.</del></p>

If the student graduated from a high school that does not offer a required course, applicants may contact the institutional admission officer for clarification of provisional admission procedures.

High school credit counted in one (1) category (e.g., Humanities/World Languages) may not also count in another category.

cb. Academic Provisional Alternative Admission

- i. A degree-seeking applicants s who does not qualify for admission based on



**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

subsection 2.ba. above, ~~but who may be granted alternative admission if they satisfies satisfy~~ one (1) ~~or more~~ of the criteria below, ~~may seek provisional admission by petitioning the institutional admissions officer:~~

- 1) Graduated from a secondary school accredited by a body recognized by the Board but has not completed the Admission Standards Core courses set forth above;
- 2) Did not graduate from a secondary school accredited by a body recognized by the Board, ~~[e.g. including home-schooled students, and has acceptable performance on either the~~ General Educational Development (GED) diploma holders], ~~and have acceptable predictive indicators of academic success approved test or another standardized diagnostic test accepted by~~ the institution;
- 3) Deserves consideration by the institution because of special status (e.g., ~~disadvantaged or minority students, delayed entry students,~~ returning veterans, ~~or~~ gifted and talented students wishing to enter college early, ~~or other students in unique circumstances as determined by the institution~~). Each institution may develop a separate policy for the admission of special status students.

~~A student seeking provisional admission to any public postsecondary institution must take at least one (1) assessment indicator that will allow the institution to assess competency and placement.~~

- ~~ii. If provisionally admitted, a student will enroll with provisional standing and is subject to the institutional grade retention. Students granted alternative admission may have conditions placed on their admission, subject to institutional policies. A provisionally admitted student may change to regular admission status upon satisfactory completion of Students may be granted admission and be required to satisfactorily complete up to fourteen (14) baccalaureate level credits, twelve (12) of which must be general education courses credits. Regular admission status must be attained within three (3) registration periods or the student will be dismissed, subject to institutional committee appeal procedures.~~

de. Academic Transfer Admission

- i. A degree-seeking student who, after graduating from high school or earning a GED, has earned at least fourteen (14) or more semester hours of transferable academic college level credit from a regionally accredited college or university with a minimum cumulative GPA of 2.00 may be admitted.
- ii. A student not meeting the requirement in subsection 62.ba. may petition the

institutional admissions officer to be admitted. If admitted, the student ~~must enroll on probation status, meet all conditions imposed by the institutional admissions committee, and complete the first semester with a minimum 2.00 GPA, or may be dismissed.~~ may have conditions placed on their admission, subject to institutional policies as described in subsection 2.cb.ii.

d. Academic Program Placement

Placement assessment indicating potential for success may be required for some academic programs. Placement requirements vary according to the program. Each institution shall establish academic program placement policies and publish these policies in an accessible manner on the institution's website.

3. Career Technical Program Admissions

~~a. Admission Standards~~

~~Regular or Provisional Institutional academic~~ admission standards apply to individuals who seek a technical certificate or Associate of Applied Science (A.A.S.) degree through a career technical program. The admission standards and placement criteria do not apply to workforce development or short-term training programs. Career technical programs employ program admission and student advising/navigation processes in addition to institutional ~~program academic~~ admission.

~~b. Student Advising~~

- ~~i. Clarify the importance of career planning and preparation: high school students should be actively engaged in career planning prior to entering the 9th grade. Career planning assures that students have sufficient information about self and work requirements to adequately design an education program to reach their career goals.~~
- ~~ii. Emphasize that career technical courses in high school, including career technical advanced opportunities and work-based learning connected to school-based learning, are beneficial to students seeking continued education in career technical programs at the postsecondary level.~~
- ~~iii. Clarify the kind of educational preparation necessary to successfully enter and complete postsecondary studies. Mathematics and science are essential for successful performance in many career technical programs. Programs of a technical nature generally require greater preparation in applied mathematics and laboratory sciences.~~
- ~~iv. Clarify that career technical programs of one or two years in length may require additional time if applicants lack sufficient educational preparation.~~

~~c. Career Technical Program Regular Admission~~

~~Students desiring Regular Admission to any of Idaho's technical colleges must meet the following standards. Students planning to enroll in programs of a technical nature are also strongly encouraged to complete the recommended courses. Admission to a specific career technical program is based on the capacity of the program and specific academic and/or physical requirements established by the technical college/program.~~

~~i. Standards for students who graduated from high school in 1997 or earlier~~

- ~~1) High School diploma with a minimum 2.0 GPA<sup>4</sup> from a high school accredited by a body recognized by the Board; and~~
- ~~2) Placement examination as determined by the institution. Scores may also be used to determine placement eligibility for specific career technical programs; and~~
- ~~3) Satisfactory completion of high school coursework that includes at least the following:
  - ~~a) Mathematics — 4 credits (6 credits recommended) from challenging math sequences of increasing rigor selected from courses such as Algebra I, Geometry, Applied Math I, II, and III, Algebra II, Trigonometry, Discrete Math, Statistics, and other higher-level math courses. Two (2) mathematics credits must be taken in the 11th or 12th grade. Less rigorous mathematics courses taken in grades 10-12 after 1998, such as pre-algebra, review mathematics, and remedial mathematics, shall not be counted.~~
  - ~~b) Science — 4 credits (6 credits recommended, with 4 credits in laboratory science) including at least 2 credits of laboratory science from challenging science courses including applied biology/chemistry, principles of technology (applied physics), anatomy, biology, earth science, geology, physiology, physical science, zoology, physics, chemistry, and agricultural science and technology courses (500 level and above).~~
  - ~~c) Secondary Language Arts and Communication — 8 credits. Applied English in the Workplace may be counted for English credit.~~
  - ~~d) Other — Career technical courses, including postsecondary credits~~~~

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<sup>4</sup>An institution may substitute a composite index placement exam score and high school GPA for the GPA admission requirement.

~~earned pursuant to Board Policy III.Y. Advanced Opportunities and organized work-based learning experiences connected to the school-based curriculum, are strongly recommended. High School Work Release time not connected to the school-based curriculum will not be considered.~~

~~ii. Standards for Others Seeking Regular Career Technical Program Admission~~

~~Individuals who graduated from high school, received their GED prior to 1997, or who are at least 21 years old and who desire Regular Admission to the technical colleges must have a:~~

- ~~1) High School diploma with a minimum 2.0 GPA from a high school accredited by a body recognized by the Board; or~~
- ~~2) General Educational Development (GED) certificate; and~~
- ~~3) Diagnostic/placement tests as determined by the institution. Scores may also be used to determine admission eligibility for specific career technical programs.~~

~~d. Career Technical Program Provisional Admission~~

~~Students who do not meet all requirements for Regular Admission may apply to a technical program under provisional admission. Provisionally admitted students who are conditionally admitted must complete appropriate remedial, general and/or technical education coursework related to the career technical program for which Regular Admission status is desired, and to demonstrate competence with respect to that program through methods and procedures established by the technical college. Students desiring Provisional Admission must meet the following standards:~~

- ~~i. High School diploma or GED certificate; and~~
- ~~ii. diagnostic/placement tests as determined by the institution. Scores may also be used to determine placement eligibility for specific career technical programs.~~
- ~~iii. Institutions may allow individuals who do not have a high school diploma or GED to be admitted if the applicant can demonstrate the necessary ability to succeed in a career technical program through appropriate tests or experiences as determined by the institution.~~

~~ea. Career Technical Program Placement Criteria~~

Placement test scores indicating potential for success ~~are generally~~ may be required for enrollment in a career technical program of choice. Placement score requirements vary according to the program.

Each institution shall establish career technical program placement policies and publish these policies in an accessible manner on the institution's website.

Specific career technical programs may require different levels of academic competency and admission requirements. Students must also be familiar with the demands of a particular occupation and how that occupation matches individual career interests and goals. Therefore, before students can enroll in a specific program, the following placement requirements must be satisfied:

- i. Specific program requirements (including placement exam scores) established by the technical program. A student who does not meet the established requirements for the program of choice will have the opportunity to participate in remedial education to improve their skills; and
- ii. Formal procedures and definitions for program admission employed by the technical college. Program admission requirements and procedures shall be clearly defined and published for each program.

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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**BOISE STATE UNIVERSITY**

**SUBJECT**

Bachelor of Science in Neuroscience

**APPLICABLE STATUTE, RULE, OR POLICY**

Idaho State Board of Education Governing Policies & Procedures, Section III.G.

**BACKGROUND/DISCUSSION**

Boise State University proposes to offer a Bachelor of Science in Neuroscience degree program. This interdisciplinary degree program will have two tracks: a cellular and molecular track, and a cognitive and behavioral track. Faculty members from various departments, most notably departments of Biological Sciences, Psychological Sciences, and Kinesiology will collaboratively offer the core courses as well as the emphasis and elective courses, providing students with a comprehensive and versatile educational experience.

Neuroscience is a growing interdisciplinary field that works closely with other disciplines including biology, chemistry, psychology and medicine, studying cellular, functional, behavioral, molecular and medical aspects of the nervous system. Neuroscience contributes to a better understanding of a wide range of conditions such as Alzheimer's, autism spectrum disorders, epilepsy, addiction, and the effects of stroke etc., and to strategies to treat and prevent these and many other health issues.

**IMPACT**

A bachelor's degree in neuroscience offers a versatile skillset applicable across numerous industries. Graduates find themselves working in research, academia, healthcare (as providers, support staff, or doing clinical research), pharmaceuticals, biotechnology, and even tech industries. In Idaho, the demand for a bachelor's degree prepared workforce is greatest in the biotechnology and medical technology fields. Furthermore, with nearly all counties in Idaho lacking sufficient numbers of healthcare providers, neuroscience graduates are well-positioned to alleviate this critical need. The proposed program will substantially strengthen the pre-professional preparation of future providers, such as is necessary to ensure a strong pipeline of these licensed professionals.

A November 2023 Market Analysis performed by Hanover Research for Boise State University summarized the demand as follows: "Labor and student demand indicators are strong for neuroscience-related bachelor's degree programs and for related occupations. Regional and national student demand for bachelor's degrees in neuroscience degrees has increased faster than the average growth observed for bachelor's degrees in all fields between 2017 and 2021. Likewise, employment projections for related occupations are strong. Whether graduates of the program decide to go directly into the workforce or pursue a professional degree, demand

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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for related occupations is projected to increase over the next decade. Moreover, the competitive environment supports the creation of a new bachelor's degree in neuroscience program in the region.”

The significance of neuroscience extends far beyond career opportunities. It underpins advancements in treating mental health issues, addiction, and age-related neurodegenerative diseases. Neuroscience also plays a vital role in supporting children with developmental disabilities and preparing workplaces for a neurodivergent workforce. Emerging fields like neurotechnology hold even greater promise for improving lives. Neuroscience research is fundamental to enhancing well-being, productivity, and overall societal progress.

This interdisciplinary program capitalizes on existing coursework across various departments, minimizing the need for additional resources. This program will add two lab courses; one in cellular and molecular neuroscience (NEURO 395) and a course in applied and computational neuroscience (NEURO 396). This program is expected to grow to approximately 200 students by year six generating revenue from new enrollments. In the initial years, the program will likely incur a small deficit based on estimated tuition revenue, which will be covered by one-time support from institutional funds.

Once the program is fully up and running and reaches approximately 200 students, the program will require annual instructional needs to include clinical faculty members, adjuncts, GTAs and administrative personnel. In particular, the program will require the addition of one clinical faculty member in the Department of Psychological Sciences, and one professional staff member to assist with marketing, recruiting, and advising students in the program. The addition of 14 sections of lecture will not require specialized teaching space and would not create a significant impact on the academic units. The program will also require six additional sections of labs. The lab space for Biology (BIOL 228), Kinesiology (KINES 371), and two sections of Neuroscience I (NEURO 395) labs are available for this purpose. Boise State University is in the planning stages of constructing a new science building. Space for the two neuroscience labs is included as a priority area in the plans for the building. There are four new content areas that will require textbooks. Boise State estimates that, with the currently available texts, there will be one-time costs of approximately \$475, with occasional updates for new editions.

Total expenditures range from \$38,743 - \$553,860 of on-going funding over a four-year period and \$45,000 one-time funding in year one. A \$20,000 stipend for the program director will be covered by the College of Health Sciences. Additional funds will come from the Memorandum of Agreement to cover program deficits through the first couple of years. Student fees will include special course fees for the two new lab courses. The first year will focus on course design without lab courses. This will give faculty time to design the courses and propose the fees in accordance with Board policy.

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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**ATTACHMENTS**

Attachment 1 – Bachelor of Science, Neuroscience Proposal

**STAFF COMMENTS AND RECOMMENDATIONS**

Boise State University anticipates 20 initial enrollments at implementation reaching 190 by year five and graduating five students in FY28 and 25 by FY29. Based on comparable experiences at the University of Montana and the significant population disparity between Missoula and Boise, BSU conservatively estimates attracting twice the number of majors into its neuroscience program once fully established. As provided in the proposal, market analyses conducted by the College of Innovation and Design and the Division of Extended Studies validate this demand, particularly highlighting the absence of undergraduate neuroscience programs in Idaho and the growing need for such degrees in the state.

The program identified 80-100 students for program sustainability. If the program does not reach 50 by year three, it will be evaluated and considered for major changes. If the number is 80 or below by year five, the program will be considered for discontinuation.

Boise State’s request to offer a Bachelor of Science in Neuroscience is consistent with their Service Region Program Responsibilities and their current institution plan for Delivery of Academic Programs in Region III. There are presently no undergraduate programs offered in the state. A search in the state’s program inventory shows that University of Idaho offers a Master of Science and PhD in Neuroscience. Currently, no institution has statewide program responsibility specifically for neuroscience multidisciplinary programs.

The proposal completed the program review process and was presented to the Council on Academic Affairs and Programs on May 2, 2024; and to the Instruction, Research, and Student Affairs on May 30, 2024.

**BOARD ACTION**

I move to approve the request by Boise State University to create a Bachelor of Science in Neuroscience, as presented in Attachment 1.

Moved by \_\_\_\_\_ Seconded by \_\_\_\_\_ Carried Yes \_\_\_\_\_ No \_\_\_\_\_





**FULL PROPOSAL FORM**

Academic Degree and Certificate Program

Date of Proposal Submission:	April 5, 2024		
Institution Submitting Proposal:	Boise State University		
Name of College, School, or Division:	College of Health Sciences, School of Allied Health Sciences		
Name of Department(s) or Area(s):	Interdisciplinary. (Biology, Psychology, and Kinesiology are the lead departments).		
Official Name of the Program:	Neuroscience		
Implementation Date:	August 2024		
Degree Information:	Degree Level: Undergraduate	Degree Type: Bachelor of Science	
CIP code (consult IR /Registrar):	26.1501		
Method of Delivery: Indicate percentage of face-to-face, hybrid, distance delivery, etc.	Face to face		
Geographical Delivery:	Location(s)	Boise	Region(s) III
Indicate (X) if the program is/has: (Consistent with Board Policy V.R.)	<input type="checkbox"/>	Self-Support fee	<input type="checkbox"/>
			Professional Fee <input type="checkbox"/> Online Program Fee <input type="checkbox"/>
Indicate (X) if the program is: (Consistent with Board Policy III.Z.)	X	Regional Program Responsibility	Statewide Program Responsibility <input type="checkbox"/>

**Proposed Action**

- New program offering**
  - Undergraduate program
  - Graduate program
  - Undergraduate certificate (30 credits or more)
  - Graduate certificate (30 credits or more)

**New branch campus or change in location**

- Modification of Existing Academic Programs**
  - Converting one program option to a stand-alone program
  - Consolidating two or more undergraduate programs into one
  - Consolidating two or more graduate programs into one
  - Splitting an existing program into two or more programs
  - Program expansion outside an institution's Designated Service Region as defined in Board Policy III.Z.
  - Adding certificate or degrees to existing programs

Tim Dunnagan 03/19/2024  
Tim Dunnagan (Mar 19, 2024 15:46 MDT)  
 College Dean Date

Leslie Durham 03/20/2024  
Leslie Durham (Mar 20, 2024 16:54 MDT)  
 College Dean Date

Jo Ellen DiNucci 04/04/2024  
Jo Ellen DiNucci (Apr 4, 2024 09:02 MDT)  
 FVP/Chief Fiscal Officer Date

John Buglialter 03/25/2024  
John Buglialter (Mar 25, 2024 16:53 MDT)  
 Provost/VP for Instruction Date

[Signature] 04/04/2024  
 President Date

[Signature] 4/30/2024  
 Vice President for Research NA Date

[Signature] 04/30/2024  
 Academic Affairs Program Manager, OSBE Date

[Signature] Date  
 Chief Financial Officer, OSBE Date

[Signature] 5/8/2024  
 Chief Academic Officer, OSBE Date

\_\_\_\_\_  
 SBOE/Executive Director or Designee Approval Date

## Rationale for Creation or Modification of the Program

1. **Describe the request and give an overview of the changes that will result.** What type of substantive change are you requesting? Will this program be related or tied to other programs on campus? Identify any existing program that this program will replace. If this is an Associate degree, please describe transferability.

Boise State University proposes the creation of an interdisciplinary **Bachelor of Science (BS) in Neuroscience** degree program. Leveraging existing courses and resources, the program will draw upon a critical mass of tenured and tenure-track faculty with established expertise in relevant fields. Faculty members from various departments, most notably departments of Biological Sciences, Psychological Sciences, and Kinesiology, will collaboratively offer the core courses as well as the emphasis and elective courses, providing students with a comprehensive and versatile educational experience. The program will have two tracks: cellular and molecular track and cognitive and behavioral track.

Neuroscience is a growing interdisciplinary field that works closely with other disciplines including biology, chemistry, psychology and medicine, studying cellular, functional, behavioral, molecular and medical aspects of the nervous system. Neuroscience contributes to a better understanding of a wide range of conditions such as Alzheimer's, autism spectrum disorders, epilepsy, addiction, and the effects of stroke etc., and to strategies to treat and prevent these and many other health issues.

A bachelor's degree in an interdisciplinary area such as neuroscience is marketable across many labor sectors. A November 2023 Market Analysis performed by Hanover Research for Boise State University summarized the demand as follows:

“Labor and student demand indicators are strong for neuroscience-related bachelor's degree programs and for related occupations. Regional and national student demand for bachelor's degrees in neuroscience degrees has increased faster than the average growth observed for bachelor's degrees in all fields between 2017 and 2021. Likewise, employment projections for related occupations are strong. Whether graduates of the program decide to go directly into the workforce or pursue a professional degree, demand for related occupations is projected to increase over the next decade. Moreover, the competitive environment supports the creation of a new bachelor's degree in neuroscience program in the region.”

2. **Need for the Program.** Describe evidence of the student, regional, and statewide needs that will be addressed by this proposal to include student clientele to be served and address the ways in which the proposed program will meet those needs.
  - a. **Workforce and economic need:** Provide verification of state workforce needs that will be met by this program. Include job titles and cite the data source. Describe how the proposed program will stimulate the state economy by advancing the field, providing research results, etc.

**National Demand.** The Hanover Research Market Analysis indicates that “at the national level, neuroscience-related bachelor's degree conferral volume grew at an annualized rate of 10.4 percent, much faster than the 1.3 percent annualized growth rate for bachelor's

degree conferrals across all fields in the nation.” Further, the US Bureau of Labor statistics expects a 13% increase in the number of jobs for persons with a Neuroscience degree over the next decade. Of course, many of these opportunities are spread across several occupations or disciplines as described, below. Further, it is important to note that many jobs, such as those in academia and research will likely also require graduate level education (such as is available at the University of Idaho), and this program will prepare students for those masters and doctoral level programs as well.

A recent (2023) Biospace report describes the large increase in demand for neuroscientists as being particularly relevant to the following sectors:

1. **Research and Academia:** Many graduates with a bachelor's degree in neuroscience find opportunities to work as research assistants or lab technicians in academic and research institutions. They contribute to ongoing research projects, assist in data collection and analysis, and support the work of faculty and researchers. Graduates may go on to receive doctoral degrees supporting the state's needs for higher education in traditional fields such as biological sciences and psychological sciences, but many of these scientists will also go on to emerging disciplines such as bioinformatics and functional genomics that are becoming increasingly more important areas of study and application. Importantly, the University of Idaho has graduate degree programs in Neuroscience and offers opportunities for those with undergraduate degrees who wish to go onto research and other academic positions.
2. **Healthcare Providers:** Nationally, as well as here in Idaho, there is a shortage of licensed healthcare providers in practically all disciplines, many of which require a graduate degree (e.g., physician, physician assistant, physical therapist, occupational therapist, etc.). Across the country, neuroscience is becoming increasingly more desirable as the undergraduate degree of choice for students moving on into these healthcare careers. For example, at the university of Montana, in just four years, the Bachelor of Science in Neuroscience has become the 2<sup>nd</sup> most popular undergraduate degree in the division of Biological Sciences and the 3<sup>rd</sup> most popular degree for pre-med students. Noting that there are currently no undergraduate degree programs in neuroscience available in the state of Idaho, it is evident that the proposed program will fill a gap in undergraduate education in an area that is becoming increasingly important in the preparation of future healthcare providers.
3. **Healthcare Provider Support and Clinical Research:** Graduates with undergraduate neuroscience degrees also find positions in healthcare settings, working alongside medical professionals to assist in patient care, conduct clinical trials, and contribute to the understanding of neurological disorders. Neuroscience is a growing area of interest among clinicians in Southwest Idaho. Serving the needs of patients with chronic conditions such as Alzheimer's and related dementias, Parkinson's Disease, as well as people with physical and cognitive developmental disabilities, just to name a few. All of these patient groups need services that cannot be entirely met through a medical model, but require comprehensive health and wellness services throughout a lifetime.
4. **Pharmaceutical and Biotechnology Industry:** The pharmaceutical and biotechnology industries often seek individuals with neuroscience backgrounds for roles in drug development, testing, and clinical research. These professionals play a crucial role in advancing treatments for neurological conditions. This also includes pharmacogenetics as well as new and exciting emerging field of electroceuticals that are showing promise for regenerating damaged nerve tissue.

5. **Neuropsychology and Mental Health Support:** Graduates with BS degrees are also needed in roles such as neuropsychological technicians, aiding in the assessment and treatment of individuals with cognitive and neurological disorders. They may also find roles in mental health facilities or rehabilitation centers.
6. **Education and Outreach:** Some individuals with a bachelor's degree in neuroscience pursue careers in education, working as science educators or outreach coordinators in science museums, educational institutions, or community organizations.
7. **Tech Industry:** The technology industry relies heavily on modeling human behavior to support needs across a wide array of labor sectors. For example, organizations such as Amazon and Google rely heavily on understanding of human perception and behavior, and seek out young professionals who have a background in neuroscience to support product development.
8. **Government and Policy:** A background in neuroscience can be valuable in roles related to policy-making, regulatory affairs, and public health initiatives focused on human behavior, and neurological issues. This particularly relevant as we face several crises of addiction, suicide ideation, and many behavioral health needs.
9. **Communication and Journalism:** Graduates can work as science writers, communicators, or journalists, helping not only to bridge the gap between scientific research and the general public, but understanding effective communication strategies for individuals with unique backgrounds and learning strategies.
10. **Other:** A bachelor's degree in an interdisciplinary area such as neuroscience is marketable across many labor sectors. It is impossible to touch on all of the opportunities for which such a degree would provide excellent preparation. Further, the impact of this area of academic preparation is not simply limited to those obtaining the BS degree. Therefore, we will also offer opportunities for students to receive a minor in Neuroscience, thereby strengthening their academic preparation in fields such as Special Education, Counseling, Business, Computer Science, Theater, Art, Linguistics, Radiologic Sciences, and of course other subdisciplines in Biology, Psychology, Kinesiology, and many more.

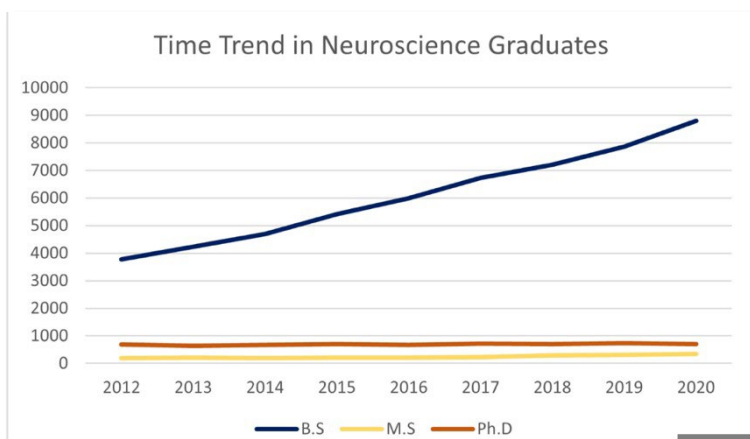
**State and Regional Demand.** The November 2023 market analysis from Hanover concludes that “regional student demand for bachelor’s in neuroscience degrees increased between 2017 and 2021. The volume of regional bachelor’s degree conferrals in the field grew by 6.3 percent annually over the observed period, which is faster than the 4.9 percent annualized growth rate observed for all fields.” Moreover, “graduates of the bachelor’s in neuroscience degree can expect a thriving labor market through 2031. Employment for neuroscience-related occupations is projected to grow between 2021 and 2031 at all geographical levels. An analysis of job postings from regional employers over the last six months indicates that most employers seek candidates with bachelor’s degrees. Hospitals, higher education institutions, and healthcare companies...are the top regional employers.” They further report that currently there are 7400 job opportunities in this region and that roughly 64% of these require a Bachelor’s degree.

In Idaho, the demand for a bachelor’s degree prepared workforce is greatest in the biotechnology and medical technology fields. Of course, students with a neuroscience degree are highly sought out by nearly every sector of the economy as described above. However, the results of the Hanover market analysis suggest that the tremendous need for healthcare providers and healthcare industry leaders will drive a considerable amount of the enrollment in this undergraduate degree program. Nearly every county in Idaho is a medically underserved

provider area. As an example, according to a 2021 State Physician Workforce Data Report from the Association of American Medical Colleges, Idaho has the greatest shortage of physicians with only 184.3 physicians per 100,000 people. The national average is 283.4 per 100,000 people. With respect to rehabilitative fields, such as physical therapy and occupational therapy, a 2021 report from Projection Central estimates that between 2020 and 2030 the fields of Physical and Occupational Therapy will experience a 24% and 11% increase in job demand, respectively. The proposed program will substantially heighten the interest in and strengthen the pre-professional preparation of future providers, such as is necessary to ensure a strong pipeline of these licensed professionals.

- b. Student demand.** What is the most likely source of students who will be expected to enroll (full-time, part-time, outreach, etc.)? Provide evidence of student demand/ interest from inside and outside of the institution.

Nationally, the rate at which undergraduate degrees in neuroscience are conferred has more than doubled over the last decade. In 2012 there were less than 4000 degrees awarded across the US, compared to 2020, when nearly 9000 undergraduate students completed their neuroscience degrees.



In fact, currently, out of 1800 fields of study available to undergraduate students in the US, neuroscience is the 75<sup>th</sup> most popular, placing it in the top 4% of programs.

Regionally, we have already demonstrated that the closest undergraduate degree program in neuroscience (Missoula, MT) has enjoyed tremendously popularity. While it is impossible to establish cause an effect, it is also important to note that the implementation of the degree program at University of Montana also coincides with a plateau of the dramatic decrease in enrollment they had faced in previous years. But we can easily surmise that the implementation of this creative interdisciplinary program has had its intended positive impact on interest and enrollment.

The University of Montana and surrounding community is roughly one-third the size of Boise. This fall the university of Montana admitted slightly over 1200 freshman, while Boise State admitted nearly 3300. Based on the current undergraduate enrollment of approximately 100 students majoring in neuroscience at the University of Montana, it would not be unreasonable to anticipate an enrollment of more than 200 students at Boise State when the program is fully subscribed.

Locally, we believe that the program will attract new students as well as many of those who would otherwise have come to Boise State anyway to pursue degrees in fields such as Biological Sciences, Psychological Sciences and Kinesiology, to name a few. Collectively these programs are home to over 2,000 students. A recent survey of 360 current students in these programs indicates that 10% would seriously consider the neuroscience major, another 15% might consider it, and 50% indicate they would consider it were it not for the fact that they are too close to graduation. Further, it is evident that while high school enrollment in Boise is flat or trending slightly downward, the high school enrollment inclusive of surrounding communities throughout Southwest Idaho is up approximately 3.5%.

**c. Societal Need.** Describe additional societal benefits and cultural benefits of the program.

There are many serious societal issues for which neuroscience provides an essential area of knowledge and study. The growing mental health crisis and prevalence of addictive behavior require both behavioral and pharmacologic treatment strategies that are highly dependent on our understanding of neurobiology and behavioral science. The dramatic increase in the number of older adults creates a societal need not only for the study of healthy aging, but of particular relevance is the clear demand to develop treatment strategies for those persons suffering with neurodegenerative diseases such as Alzheimer's Disease and other related Dementia's, Parkinson's Disease and so on. At the other end of the age spectrum, neuroscience is crucial to our ability to support children with developmental disabilities, including the recent increased incidence of autism spectrum disorders and the like. As these young people move towards working age, businesses are seeking to better understand how to accommodate neurodiverse populations in the work force. An emerging related area is neurotechnology. Advances in neuroscience contribute to the development of neurotechnology like brain-computer interfaces (BCIs) that can improve the lives of people with disabilities, offering them greater independence and opportunities for participation in society. This is just scratching the surface of the areas where the study of neuroscience provides knowledge that is essential to solving societal issues. In short, the study of neuroscience addresses a wide range of societal needs, ultimately contributing to better overall well-being, productivity, and social progress. Continued investment in neuroscience education and research is essential to address these pressing societal challenges.

**3. Program Prioritization**

Is the proposed new program a result of program prioritization?

Yes \_\_\_\_\_ No X \_\_\_\_\_

If yes, how does the proposed program fit within the recommended actions of the most recent program prioritization findings.

**4. Credit for Prior Learning**

Indicate from the various cross walks where credit for prior learning will be available. If no PLA has been identified for this program, enter 'Not Applicable'.

Not Applicable.

**5. Affordability Opportunities**

Describe any program-specific steps taken to maximize affordability, such as: textbook options (e.g., Open Educational Resources), online delivery methods, reduced fees, compressed course

scheduling, etc. This question applies to certificates, undergraduate, graduate programs alike.

This interdisciplinary program capitalizes on existing coursework across various departments, minimizing the need for additional resources. While only three new courses and a "Finishing Foundations" experience are required, two of these courses will involve laboratory components, potentially incurring a minimal lab fee. However, the department is committed to optimizing cost efficiency through measures like minimizing lab supply expenses and maximizing their utilization. Faculty teaching these courses have the autonomy to select appropriate textbooks, while remaining mindful of students' financial constraints and utilize open educational resources as appropriate.

**Enrollments and Graduates**

- 6. **Existing similar programs at Idaho Public Institutions.** Using the chart below, provide enrollments and numbers of graduates for similar existing programs at your institution and other Idaho public institutions for the most past four years.

There are no undergraduate degrees in Neuroscience in Idaho.

Instit.	Program Name	Fall Headcount Enrollment in Program				Number of Graduates From Program (Summer, Fall, Spring)			
		FY__	FY__	FY__	FY_ (most recent)	FY__	FY__	FY__	FY_ (most recent)
	None								
	N/A								

- 7. **Justification for Duplication** (if applicable). If the proposed program is similar to another program offered by an Idaho public higher education institution, provide a rationale as to why any resulting duplication is a net benefit to the state and its citizens. Describe why it is not feasible for existing programs at other institutions to fulfill the need for the proposed program.

Not Applicable. There are no undergraduate degrees in Neuroscience in Idaho.

- 8. **Projections for proposed program:** Using the chart below, provide projected enrollments and number of graduates for the proposed program:

Proposed Program: Projected Enrollments and Graduates First Five Years	
Program Name:	
Projected Fall Term Headcount Enrollment in Program	Projected Annual Number of Graduates From Program

FY 25 (first year)	FY 26	FY 27	FY 28	FY 29		FY 25 (first year)	FY 26	FY 27	FY 28	FY 29	
20	45	95	145	190		0	0	0	5	25	

- 9. Describe the methodology for determining enrollment and graduation projections.** Refer to information provided in Question #2 “Need for the Program” above. What is the capacity for the program? Describe your recruitment efforts? How did you determine the projected numbers above?

Our best estimate of the demand for the degree is based on the recent experience of the University of Montana. We believe this is an apt comparison insofar as they have a strong biology and chemistry department, but until the introduction of neuroscience there was not as heavy an emphasis on human biology and biochemistry. Because the population of Boise and the undergraduate enrollment of Boise State are roughly two-and-a-half to three times the size of Missoula and the University of Montana, respectively, we conservatively estimate that we will draw twice the number of majors into our neuroscience program when it is fully established.

Our investigation included gauging interest among existing students in relevant fields such as Biology, Psychology, and Kinesiology, as well as college-bound high school students. Additionally, market analysis studies conducted by the College of Innovation and Design and the Division of Extended Studies confirmed a growing demand for this degree in Idaho, especially considering its absence at the undergraduate level. These findings were further bolstered by the independent analysis from Hanover Research.

- 10. Minimum Enrollments and Graduates.**

- a. What are the minimums that the program will need to meet in order to be continued, and what is the logical basis for those minimums?

Based on the projected revenue per student for this program, and the estimated costs for running the program, we would need a minimum of 80 - 100 students in the program in order to be long-term sustainable.

- b. **If those minimums are not met, what is the sunset clause by which the program will be considered for discontinuance?**

If the program does not reach to 50 students by year 3, it will be evaluated and considered for major changes. If number of students in the program is at 80 or below by year 5, program will be considered for discontinuation.

- 11. Assurance of Quality.** Describe how the institution will ensure the quality of the program. Describe the institutional process of program review. Where appropriate, describe applicable specialized accreditation and explain why you do or do not plan to seek accreditation.



Regional Institutional Accreditation: Boise State University is regionally accredited by the Northwest Commission on Colleges and Universities (NWCCU). Regional accreditation of the university has been continuous since initial accreditation was conferred in 1941. Boise State University is currently accredited at all degree levels (A, B, M, D).

Program Review: Boise State has instituted a new program review procedure. At the inception of new programs, the programs will submit to the Office of the Provost a three-year assessment plan to be scheduled into the Periodic Review/Assessment Reporting Cycle. The plan includes program learning outcomes; and an implementation plan with a timeline identifying when and what will be assessed, how the programs will gather assessment data, and how the program will use that information to make improvements. Then, every three years, the programs will provide Program Assessment Reports (PAR), which will be reviewed by a small team of faculty and staff using a PAR Rubric, which includes feedback, next steps, and a follow-up report with a summary of actions.

Program Prioritization (PP, 5-year review cycle): Program prioritization is a mandatory process of the State Board of Education for all Idaho universities. Program prioritization is designed to increase alignment of resources with mission and the strategic plan and priorities of an institution, and help make informed decisions through conducting a careful evaluation of programs and services.

Similar to Biology, Psychology, and Kinesiology, Neuroscience does not have a professional license or accrediting body that provides a discipline specific external review. Consequently, this proposed curriculum was developed by a group of eight faculty members representing different disciplines (Biological Sciences, Psychological Sciences, Kinesiology, and Special education). In addition, input was sought from the departments of Computer Science and Languages and Linguistics. The steps taken to inform the group also included chairs visiting University of Montana and bringing University of Montana faculty to Boise State to meet with our university leadership, college leadership, department chairs, and faculty members.

If the program is approved, we will provide continued quality assurance through the following means:

- Annual informal assessment (described in Section 17 below)
- Participation in the university required 3-year academic program review process (describe in section 17 below).
- Creation of a community advisory panel from clinicians and industry partners with an background in neuroscience.
- Period site visit (once every 7 years) from faculty at peer institutions.

The assessment process is described in more detail in section 17.

12. **In accordance with Board Policy III.G., an external peer review is required for any new doctoral program.** Attach the peer review report as **Appendix A**

N/A.

13. **Teacher Education/Certification Programs** All Educator Preparation programs that lead to certification require review and recommendation from the Professional Standards Commission (PSC) and approval from the State Board of Education.

Will this program lead to certification?

Yes \_\_\_\_\_ No X \_\_\_\_\_

If yes, on what date was the Program Approval for Certification Request submitted to the Professional Standards Commission?

**14. Three-Year Plan: If this is a new proposed program, is it on your institution’s approved 3-year plan?**

Yes X No \_\_\_\_\_

If yes, proceed to question 15. If no:

**a. Which of the following statements address the reason for adding this program outside of the regular three-year planning process.**

Indicate (X) by each applicable statement:

	Program is important for meeting your institution’s regional or statewide program responsibilities.
	The program is in response to a specific industry need or workforce opportunity.
	The program is reliant on external funding (grants, donations) with a deadline for acceptance of funding.
	There is a contractual obligation or partnership opportunity related to this program.
	The program is in response to accreditation requirements or recommendations.
	The program is in response to recent changes to teacher certification/endorsement requirements.

**b. Provide an explanation for all statements you selected.**

N/A

**Educational Offerings: Curriculum, Intended Learning Outcomes, and Assessment Plan**

**15. Curriculum. Provide descriptive information of the educational offering.**

**a. Summary of requirements.** Provide a summary of program requirements using the following table.

Credit hours in required courses offered by the department (s) offering the program.	66-69 credit hours (depending on emphasis and choice of stats course.
Credit hours in required courses offered by other departments:	3 credits of Computer Science are required.
Credit hours in institutional general education curriculum	38 credit hours of University Foundations are required.
Credit hours in free electives	8-13 credit hours
Total credit hours required for degree program:	120 credit hours

**b. Curriculum.** Provide the curriculum for the program, including credits to completion, courses by title and assigned academic credit granted.

**I. University Foundations**

• Must Complete:

- CHEM 111 - General Chemistry I (FN) (3)
- CHEM 111L - General Chemistry I Laboratory (FN) (1)
- PSYC 101 - Introduction to Psychology (FS) (3)
- BIOL 227 - Human Anatomy and Physiology I + lab (FN) (4)

**II. Major CORE Requirements**

• Complete the following

- BIOL 117 - Intro to Neuroscience through Disease Models (3)
- BIOL 228 - Human Anatomy and Physiology II + lab (4)
- KINES 303 - Neuroanatomy and Physiology (3)
- PSYC 335 - Biological Basis of Behavior (3)
- PSYC 367 - Neuroscience of Human Brain Research (3)
- BIOL 310 - Human Genetics (3)
- NEURO 311 - Introduction to Neurogenetics (3)
- NEURO 395 - Lab Techniques in Neuroscience I (4)
- NEURO 396 - Lab Techniques in Neuroscience II (4)
- NEURO 401 - Capstone in Neuroscience (1)
- CHEM 112 - General Chemistry II (3)
- CHEM 112L - General Chemistry II Laboratory (1)
- NEURO 402 - Endocrinology (3)

• Complete 1 of the following

- MATH 254 Statistical Methods (FM)\* (3)
- PSYC 295 Statistical Methods (3)
- KINES 301 Statistics, Measurement and Evaluation (3)

\* Can be used to fulfill a Foundations requirement.

• Complete 6 credits of the following

- VIP 100 - Introduction to Vertically Integrated Projects (1)
- VIP 200 - Vertically Integrated Projects (1-2)
- VIP 400 - Vertically Integrated Projects (1-2)
- WRITE 212 - Introduction to Technical Communication (3)

- PSYC 488 - Directed Research (3)
- BIOL 479 - Undergraduate Research Experience (1-3)
- KINES 479 - Undergraduate Research Experience (1-3)
- NEURO 479 - Undergraduate Research Experience (1-3)

\* At least 3 credits must come from upper division courses.

- Complete 1 of the following
  - CS 111- Introduction to Programming (3)
  - CS 133\* - Foundations of Data Science (3)
  - MSE 150 - Computational Tools for Material Science (3)

\* recommended
- Complete 1 of the following
  - AMI 330 - Introduction to Sectional Anatomy (2)
  - KINES 270 - Applied Anatomy (2)

### III. Track Requirements

- Complete 1 of the following tracks
  - **Cellular/Molecular Track**

Take the following

    - BIOL 192 – Biology II: Introduction to the Diversity of Life (4)
    - BIOL 320 – Cell Biology (3)
    - BIOL 431 – Pharmacology (3)
    - BIOL 442 – Molecular Neurobiology (3)
    - CHEM 308 – Organic Chemistry I Laboratory (2)

Take at least 1 of the following:

    - CHEM 301 – Survey of Organic Chemistry (3)
    - CHEM 307 – Organic Chemistry I (3)
  - **Cognitive /Behavioral Track**

Take the following

    - KINES 375 - Motor Learning and Human Performance (2)
    - KINES 378 - Motor Development & Human Behavior (2)
    - PSYC 341 - Sensation & Perception (3)

Take at least 1 of the following:

    - PSYC 343 – Cognitive Psychology (3)

- NEURO 343 – Cognitive Neuroscience (3)

Take at least 9 credits of the following

- IMGSCI 408 - Sectional Anatomy in Imaging Sciences (3)
- PHYS 111 - General Physics I (FN) (4)
- PHYS 211 - Physics I with Calculus (FN) (4)
- PHYS 211L - Physics I with Calculus Lab (FN) (1)
- KINES 370 - Biomechanics (3)
- KINES 371 - Biomechanics Lab (1)
- KINES 363 - Exercise Psychology (3)
- ED-ESP 358 - Severe Disabilities (3)
- ED-ESP 458 - Autism Spectrum Disorders (3)
- LING 305 - Introduction to Linguistics (3)
- LING 406 - Psycholinguistics (3)

#### IV. Electives

Take at least 3 credits of approved elective(s).

- AHS 455 - Cardiovascular Physiology (3)
- AHS 355 - Physical Dimensions of Aging (3)
- KINES 416 - Neuromechanics (3)
- KINES 429/435 - Neuromechanics Research (3)
- KINES 363 - Exercise Psychology (3)
- KINES 330 - Exercise Physiology (3)
- KINES 331 - Lab for Exercise Physiology (1)
- PHYS 112 - General Physics II (FN) (4)
- PHYS 212 - Physics II with Calculus (4)
- PHYS 212L - Physics II with Calculus Lab (1)
- VIP 100 - Introduction to Vertically Integrated Projects (1)
- VIP 200 - Vertically Integrated Projects (1-2)
- VIP 400 - Vertically Integrated Projects (1-2)
- ADST 109 - Drugs of Use and Abuse (3)
- ADST 255 - Introduction to the Field of Addiction (3)

Take at least 10 credits from the following: Electives to total 120 credits (10)

**c. Additional requirements.** Describe additional requirements such as comprehensive

examination, senior thesis or other capstone experience, practicum, or internship, some of which may carry credit hours included in the list above.

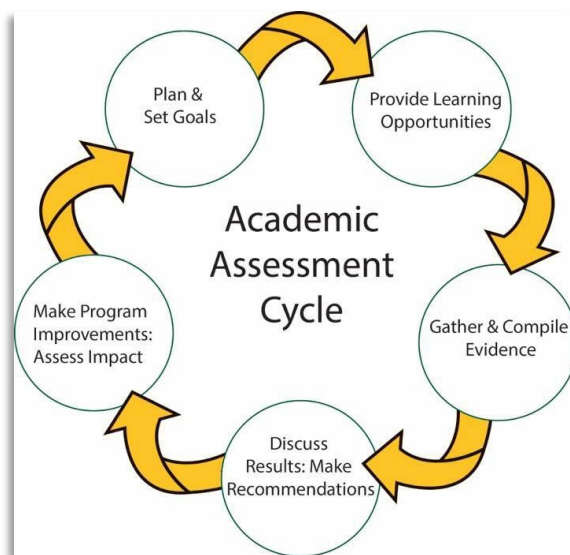
NEURO 401 – Capstone in Neuroscience: a finishing foundation course that will include a capstone project, the nature of which can vary depending upon the student’s career interest, but in any case, will represent the culmination of research hours, experiential learning, or other guided discovery experiences.

**16. Learning Outcomes: Expected Student Learning Outcomes and Connection to Curriculum.**

- a. Intended Learning Outcomes.** List the Intended Learning Outcomes for the proposed program, using learner-centered statements that indicate what students will know, understand, and be able to do, and value or appreciate as a result of completing the program.

Graduates will be able to:

1. Identify and describe the anatomy, physiology, and neurochemistry of the nervous and endocrine systems, and their control of homeostasis. (Core/Foundational)
2. Apply neuroanatomy to understand behavior and/or functional characteristics of the nervous system of human and/or other living beings. (Both Emphases).
3. Demonstrate the ability to distinguish normal from abnormal neuroanatomy and physiology and their implications on functional abilities of human and/or other living beings. (Both Emphases)
4. Demonstrate the ability to identify, critically analyze and synthesize neuroscience research. (Core/Foundational)
5. Demonstrate neuroscience research relevant skills and methodologies, including but not limited to: ethical considerations, hypothesis forming, laboratory skills, and data collection and analysis. (Core/Foundational)
6. Demonstrate proficiency in verbal and written communication of neuroscience concepts and research findings. (Core/Foundational)



**17. Assessment plans.**

- a. **Assessment Process.** Describe the assessment plan for student learning outcomes that will be used to evaluate student achievement and how the results will be used to improve the program.

The Neuroscience degree program director will be responsible for informal annual program assessment.

Program Review: Boise State has instituted a program review procedure. At the inception of new programs, the programs will submit to the Office of the Provost a three-year assessment plan to be scheduled into the Periodic Review/Assessment Reporting Cycle. The plan includes program learning outcomes; and an implementation plan with a timeline identifying when and what will be assessed, how the programs will gather assessment data, and how the program will use that information to make improvements. Then, every three years, the programs will provide Program Assessment Reports (PAR), which will be reviewed by a small team of faculty and staff using a PAR Rubric, which includes feedback, next steps, and a follow-up report with a summary of actions.

**Gather and Collect Evidence:** A variety of metrics will be used to evaluate the quality of the program and student experiences. Relative to the specific program learning outcomes listed above, we have created the following curriculum map identifying courses that address the PLOs. At the most elementary level, student performance in these courses will provide insight into the extent of their learning.

Of particular relevance to the assessment of the program “overall” is the evaluation of student performances in “Vertically Integrated Project” courses, research hours, and the NEURO 401 capstone projects.

In addition, the following metrics will provide additional information that will be used in assessing the overall quality of the student experiences, and integrated into the assessment process:

- Student satisfaction surveys/exit interviews
- Acceptance rates to graduate and professional degree programs
- Input from a Community Advisory Board
- Alumni surveys

**Recommendations, Improvements, and Impact:** Following a discussion of the evidence, the faculty will make recommendations for program improvements, considering the impact of a curriculum change on the entire student experience. The program director and adviser will then meet with department chairs to evaluate the impact that the recommendations might have on the operations of affected units as well as students and other student service offices.

**Plan and set goals:** Once the impact has been evaluated, the new goals will be articulated along with plans that either do not create any significant negative impact or include a mitigation strategy to protect against any unintended consequences of a curriculum change.

The formal academic program review is submitted every three years to the Provost’s office for University level review.

**Resources Required for Implementation – fiscal impact and budget.**

Organizational arrangements required within the institution to accommodate the change including administrative, staff, and faculty hires, facilities, student services, library; etc.

**18. Physical Facilities and Equipment:** Describe the provision for physical facilities and equipment.

- a. Existing resources.** Describe equipment, space, laboratory instruments, computer(s), or other physical equipment presently available to support the successful implementation of the program.

This program adds two lab courses; one in cellular and molecular neuroscience (NEURO 395) as well as a course in applied and computational neuroscience (NEURO 396). As for the cellular and molecular course, Professor Troy Rohn in the department of Biological Sciences manages a basic science lab that is equipped to support the instructional needs of this course. Thus, the space and equipment are already in place. The space needed for the applied and computational neuroscience labs has not yet been finalized; however, there are some options available. One option is for students to work in a variety of spaces where equipment is already located. There are several pieces of equipment and computing resources that will support this course, such as EEG, EMG, ECG and other non-invasive cardiovascular measurement instruments, NiFR, and other imaging equipment. In addition, we also have sophisticated gait and human movement analysis systems. Thus, space is not a barrier to implementation of this program.

It is important to note that the university is in the planning stages of constructing a new science building. Space for these two “neuroscience labs” is included as a priority area in the plans for the building.

- b. Impact of new program.** What will be the impact on existing programs of increased use of physical resources by the proposed program? How will the increased use be accommodated?

**Lecture Space.** The proposed degree program, once fully enrolled and assuming 200 majors, will require the addition of 14 sections of lecture courses [1 in Biology, 4 in Kinesiology, 5 in Psychology, and 4 in Neuroscience (School Allied Health)]. The lecture components of these courses do not require specialized teaching space and thus would not create a significant impact on the academic units.

**Lab Spaces.** The proposed degree program, once fully enrolled and assuming 200 majors will require 6 additional sections of labs (1 in Biology, 1 in Kinesiology, and 4 in Neuroscience). The lab space for Biology (BIOL 228), Kinesiology (KINES 371), and two sections of Neuroscience I (NEURO 395) labs are available for this purpose. We have as of yet to identify a space for one of Neuroscience II (NEURO 396) labs; however, we have options as described above. Thus, space is not a barrier to implementation of this program. Maintenance/replacement of equipment and supplies will be assured through lab fees, including fees for the new lab courses (NEURO 395 and NEURO 396).

**Office Space.** The proposed degree program includes the addition of one clinical faculty member in the department of Psychological Sciences, and one professional staff member to assist with marketing, recruiting, and advising students in the program. The clinical



faculty member will have an office in the department of Psychological Sciences the New staff member will be housed in an existing and currently available office space in Norco suite 113.

Thus, the proposed work does not significantly impact physical resources of the involved units. Again, the university is in the planning stages of a new science building, and has indicated that the plans are going to include dedicated space for Neuroscience teaching and research labs.

- c. **Needed resources.** List equipment, space, laboratory instruments, etc., that must be obtained to support the proposed program. Enter the costs of those physical resources into the budget sheet.

There are only two new lab courses for this degree program; NEURO 395 and 396. As noted above, the basic science lab needed for NEURO 395 already exists and is fully operational. While we have not yet identified a specific space for NEURO 396, ample equipment exists to support the laboratory experiences for this course. Equipment includes, but is not limited to, 3-D gait and human movement analysis equipment, EMG, EEG, NiFR, ECG and other non-invasive cardiovascular function equipment, computers for computational neuroscience instruction, and certain imaging modalities including body segment MRI. Thus, because a critical mass of faculty members is already engaged in teaching and research in the area of neuroscience, there will not be a need for additional equipment.

19. **Library and Information Resources:** Describe adequacy and availability of library and information resources.

- a. **Existing resources and impact of new program.** Evaluate library resources, including personnel and space. Are they adequate for the operation of the present program? Will there be an impact on existing programs of increased library usage caused by the proposed program? For off-campus programs, clearly indicate how the library resources are to be provided.

We have consulted with Megan Davis, Library Liaison for the College of Health Sciences. She has assessed existing resources and indicates that the Boise State Library owns or otherwise has access to scores of journals and texts that are among the most popular in the field of neuroscience. Because the vast majority of courses in the program already exist and the vast majority of research faculty are already on campus, the need for any additional materials does not seem significant.

- b. **Needed resources.** What new library resources will be required to ensure successful implementation of the program? Enter the costs of those library resources into the budget sheet.

There are four new content areas that will require textbooks. While the texts have not yet been selected, we estimate that, with the currently available texts, there will be onetime costs of approximately \$475, with occasional updates for new editions.

20. **Faculty/Personnel resources**

- a. **Needed resources.** Give an overview of the personnel resources that will be needed to

implement the program. How many additional sections of existing courses will be needed? Referring to the list of new courses to be created, what instructional capacity will be needed to offer the necessary number of sections.

This degree plan has costs associated with the following:

- addition of five new core courses, including two labs (NEURO 310, 343, 395, 396,402),
- a “Finishing Foundations” experience (NEURO 401),
- an expected increase in demand for some existing core courses when the program is well-established with 200 students, and
- some costs for administration of the program (e.g., operations, advising, marketing & recruiting etc.)

**Instructional Personnel.** We evaluated seat capacity for 200 majors (when the program reaches its projected size when fully established) in all of the current courses in Biological Sciences, Psychological Sciences, and Kinesiology that are either core, emphasis, or optional courses for the BS in Neuroscience. We estimated instructional needs takes into account additional sections and additional resources in existing courses as well as the five new core courses, including the two new labs mentioned above to estimate the needs for instructional personnel and resources needs.

When the program reaches approximately 200 students, we estimate the following annual instructional needs:

**BIOLOGY: \$68,156**

- \$47,135.30 for a 0.5 FTE clinical faculty member. A clinical faculty member in Biology is currently 97,270.60 (\$67,000 salary, \$13,750 fixed fringe and, \$13,520.60 in variable fringe).
- \$21,021 for 0.5 GTA (0.25FTE). A 1.0 GTA currently costs \$42,041 (including health insurance and variable fringe).

**PSYCHOLOGY: \$97,271**

- \$97,270.60 for a 1.0 FTE clinical faculty member (\$67,000 salary, \$13,750 fixed fringe and, \$13,520.60 in variable fringe).

**KINESIOLOGY: \$86,815**

- \$60,794 for a 0.625 FTF clinical faculty (9-month base salary (\$67,000 salary, \$13,750 fixed fringe, and \$13,520.60 in variable fringe).
- \$21,021 for 0.5 GTA (0.25FTE). A 1.0 GTA currently costs \$42,041 (including health insurance and variable fringe).
- \$5,000 for one adjunct

**NEUROSCIENCE (School of Allied Health): \$46,000**

- \$11,000 per year to support 0.125 FTF faculty (NEURO 310)
- \$5,000 per year to support one adjunct faculty member (NEURO 402)
- \$30,000 per year to support Vertically Integrated Project (VIP) instruction that will be transferred to participating units.

**Administrative Personnel.** The attached budget shows funding for a professional staff member who will be responsible for marketing, recruiting, and advising students in the program. The staff member will also be asked to work with other School of Allied Health staff personnel to support day-to-day business operations of the school, particularly as

related to the administration of the Neuroscience program. The School of Allied Health has resources to support faculty time for program leadership.

- b. Existing resources.** Describe the existing instructional, support, and administrative resources that can be brought to bear to support the successful implementation of the program.

**Instructional support.** There are at least ten faculty members across the three lead units (Biological Sciences, Psychological Sciences, and Kinesiology) whose work supports this degree program. There is some “unused capacity” in existing coursework that is available to support this program. There are 11 courses that currently have capacity to accommodate this program. In addition, these faculty members will provide research experiences and vertically integrated project opportunities that will support the students’ educational experiences.

Over the past three years or so the department of Biological Sciences has filled two faculty vacancies with this program in mind, Psychological Sciences has made one such hire, as has the department of Kinesiology. In addition, there is one vacant line in the School of Allied Health Sciences that will be devoted to supporting the instructional and research activities associated with this program.

**Administrative resources.** This program will be housed in the School of Allied Health Sciences, one of four schools in the College of Health Sciences. The School Director and Business Office Manager will provide day-to-day operational support for the program. The School also has resources sufficient to support the administrative duties of a program director.

- c. Impact on existing programs.** What will be the impact on existing programs of increased use of existing personnel resources by the proposed program? How will quality and productivity of existing programs be maintained?

The practical impact on participating units is primarily limited to the addition of sections of already existing coursework. The requisite research experiences of the students (a minimum of 6 credit hours) may, in some instances, pull a faculty member away from other instructional activities, but this is always the case and might occur irrespective of this program. Importantly, the introduction of this interdisciplinary program into the experiences of these departments has the potential to offer a significant positive impact for faculty, staff and students. The collaborative efforts across units will create opportunities for interdisciplinary work that is necessary to answer complex problems. Thus, the impact on existing programs is likely to be incredibly positive.

Regardless, all programs participate in periodic academic review to ensure that program quality is maintained. We have also developed a memorandum of agreement among the lead departments (BIOL, PSYCH, KINES), colleges (COAS, COHS), and the university that creates guardrails to ensure that the instructional needs of programs are met.

- d. Needed resources.** List the new personnel that must be hired to support the proposed program. Enter the costs of those personnel resources into the budget sheet.
- 1.0 FTE Clinical faculty in the department of Psychological Sciences
  - 0.5 FTE Clinical faculty in the department of Biological Sciences
  - 0.625 FTE Clinical faculty in the department of Kinesiology
  - 1.0 FTE Professional Staff (marketing, recruiting, advising, some operations)

- 1.0 FTE Graduate Teaching Assistants (i.e., two graduate assistants)
- Approximately 2.50 FTE of Adjunct/overload support.

## 21. Revenue Sources

- a) **Reallocation of funds:** If funding is to come from the reallocation of existing state appropriated funds, please indicate the sources of the reallocation. What impact will the reallocation of funds in support of the program have on other programs?

N/A

- b) **New appropriation.** If an above Maintenance of Current Operations (MCO) appropriation is required to fund the program, indicate when the institution plans to include the program in the legislative budget request.

N/A. This program will be funded through tuition from new enrollments. In the initial years, the program will incur a small deficit based on estimated tuition revenue, but the institution will not incur a deficit. The deficit at the program level will be covered by one-time support from the institutional funds as described below.

- c) **Non-ongoing sources:**

- i. If the funding is to come from one-time sources such as a donation, indicate the sources of other funding. What are the institution's plans for sustaining the program when that funding ends?

Funding of \$20,000 for program director stipend will come from the College of Health Sciences. Additional institutional funds will come from a Memorandum of Agreement by the Office of Provost, College of Arts and Sciences and College of Health Sciences to cover program deficits through the first couple of years of the program. It is estimated that in year 2, the program will run a deficit of \$78,228.80, and in year 3 the program will incur a deficit of \$43,650.99. The program is expected to be quite small in its first year (soft-launch year) with limited expenses and capacity in existing first year classes will be sufficient.

- ii. Describe the federal grant, other grant(s), special fee arrangements, or contract(s) that will be valid to fund the program. What does the institution propose to do with the program upon termination of those funds?

N/A

- d) **Student Fees:**

- i. If the proposed program is intended to levy any institutional local fees, explain how doing so meets the requirements of Board Policy V.R., 3.b.

The two new lab courses are likely to result in "special course" fees as described in subsection "e" of the State Board of Education Policy V. If the degree program is approved, the faculty members who will develop those courses will propose lab fees for those courses. We will not offer these courses in the first year of the program as they are upper division courses, thereby giving the faculty members time to design the courses and propose the fees in accordance with state policy.

- ii. Provide estimated cost to students and total revenue for self-support programs and

for professional fees and other fees anticipated to be requested under Board Policy V.R., if applicable.

N/A

22. Using the excel **budget template** provided by the Office of the State Board of Education, provide the following information:
- Indicate all resources needed including the planned FTE enrollment, projected revenues, and estimated expenditures for the first **four** fiscal years of the program.
  - Include reallocation of existing personnel and resources and anticipated or requested new resources.
  - Second- and third-year estimates should be in constant dollars.
  - Amounts should reconcile subsequent pages where budget explanations are provided.
  - If the program is contract related, explain the fiscal sources and the year-to-year commitment from the contracting agency(ies) or party(ies).
  - Provide an explanation of the fiscal impact of any proposed discontinuance to include impacts to faculty (i.e., salary savings, re-assignments).

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

**I. PLANNED STUDENT ENROLLMENT**

	FY 25		FY 26		FY 27		FY 28	
	FTE	Headcount	FTE	Headcount	FTE	Headcount	FTE	Headcount
A. New enrollments		10		40		90		140
B. Shifting enrollments		10		5		5		5
<b>Total Enrollment</b>		20		45		95		145

**II. REVENUE**

	FY 25		FY 26		FY 26		FY 27	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
1. New Appropriated Funding Request								
2. Institution Funds	\$20,000.00		\$20,000.00	\$78,228.80	\$20,000.00	\$43,650.00	\$20,000.00	
3. Federal								
4. New Tuition Revenues from Increased Enrollments	\$88,125.00		\$318,082.50		\$636,135.00		\$989,390.00	
5. Student Fees								
6. Other (i.e., Gifts)								
<b>Total Revenue</b>	<b>\$108,125.00</b>	<b>\$0.00</b>	<b>\$338,082.50</b>	<b>\$78,228.80</b>	<b>\$656,135.00</b>	<b>\$43,650.00</b>	<b>\$1,009,390.00</b>	<b>\$0.00</b>

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

III. EXPENDITURES										
	<u>FY 25</u>		<u>FY 26</u>		<u>FY 26</u>		<u>FY 27</u>			
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time		
<b>A. Personnel Costs</b>										
1. FTE			3.250		5.000		6.250			
2. Faculty					\$ 103,515.00		\$ 142,160.60			
3. Adjunct Faculty			\$ 69,364.21		\$ 68,639.37		\$ 92,670.64			
4. Graduate/Undergrad Assistants	\$ 18,743.00		\$ 18,743.00		\$ 37,486.00		\$ 56,229.00			
5. Research Personnel										
6. Directors/Administrators	\$ 20,000.00		\$ 20,000.00		\$ 20,000.00		\$ 20,000.00			
7. Administrative Support Personnel			\$ 61,000.00		\$ 62,830.00		\$ 64,714.90			
8. Fringe Benefits			\$ 22,270.78		\$ 52,247.87		\$ 69,084.37			
9. Other:										
	<b>Total Personnel and Costs</b>		<b>\$ 38,743.00</b>	<b>\$ -</b>	<b>\$ 191,377.99</b>	<b>\$ -</b>	<b>\$ 344,718.24</b>	<b>\$ -</b>	<b>\$ 444,859.51</b>	<b>\$ -</b>

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

	FY 25		FY 26		FY 27		FY 28	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b><i>B. Operating Expenditures</i></b>								
1. Travel			\$4,000.00		\$4,000.00		\$4,000.00	
2. Professional Services				\$30,000.00		\$30,000.00	\$30,000.00	
3. Other Services		\$10,000.00		\$30,000.00	\$30,000.00		\$30,000.00	
4. Communications		\$30,000.00		\$10,000.00		\$10,000.00	\$10,000.00	
5. Materials and Supplies (incl Library		\$5,000.00		\$5,000.00	\$1,367.01	\$3,649.99	\$5,000.00	
6. Rentals								
7. Materials & Goods for Manufacture & Resale								
8. Miscellaneous			\$16,772.00	\$3,228.80	\$25,000.00		\$30,000.00	
<b><i>Total Operating Expenditures</i></b>	\$0.00	\$ 45,000.00	\$20,772.00	\$ 78,228.80	\$ 60,367.01	\$ 43,649.99	\$ 109,000.00	\$ -

	FY 25		FY 26		FY 27		FY 28	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b><i>C. Capital Outlay</i></b>								
1. Library Resources								
2. Equipment								
<b><i>Total Capital Outlay</i></b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0



**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

	FY 25		FY 26		FY 27		FY 28	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b>D. Capital Facilities Construction or Major Renovation</b>								
<b>E. Other Costs</b>								
Utilities								
Maintenance & Repairs								
Other								
<b>Total Other Costs</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>TOTAL EXPENDITURES:</b>	\$38,743	\$45,000	\$212,150	\$78,229	\$405,085	\$43,650	\$553,860	\$0
<b>Net Income (Deficit)</b>	\$69,382	-\$45,000	\$125,933	\$0	\$251,050	\$0	\$455,530	\$0

Budget Notes (specify row and add explanation where needed; e.g., "I.A.,B. FTE is calculated using..."):	
I.A.B.	Under FTE are students who are new to the program and under Headcount are total students. The shifting enrollments under FTE are students who change major to Neuroscience. The shifting enrollments under Headcount reflect attrition
II.2	College of Health Sciences will contribute \$20,000 of institutional funds to cover the stipend for the Program Director. Provost will contribute one-time funds to make up Bronco Budget 2.0 deficits in years 2 and 3, if needed.
II.4	New tuition is estimated assumign half of students are "new" and the 2/3 of students are in state and 1/3 out of state
III A	Year 2 = 1.0 FTE staff, 0.000 FTE faculty, 2.0 FTE adjuncts, 0.25 FTE GAs (0.5 GTAs) = 3.250 total FTE Year 3 = 1.0 FTE staff, 1.500 FTE faculty, 2.0 FTE adjuncts, 0.50 FTE GAs (1.0 GTAs) = 5.000 total FTE Year 4 = 1.0 FTE staff, 2.000 FTE faculty, 2.5 FTE adjuncts; 0.75 FTE GAs (1.5 GTAs) = 6.250 total FTE
III B 2-5	The COHS has recommended significant expenditures for marketing and recruiting in years 1-4
III B 5	This include \$475 for Library materials
III B 8	Operating costs

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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**BOISE STATE UNIVERSITY**

**SUBJECT**

Online Bachelor of Arts/Bachelor of Applied Science in Public Service Leadership

**APPLICABLE STATUTE, RULE, OR POLICY**

Idaho State Board of Education Governing Policies & Procedures, Section III.G. and Section V.R.

**BACKGROUND/DISCUSSION**

Boise State University proposes the creation of a new interdisciplinary baccalaureate degree program in Public Service Leadership in both fully online and hybrid delivery formats. The proposal describes 1) a *wholly online program* that will award a Bachelor of Arts (BA) or Bachelor of Applied Science (BAS) in Public Service Leadership. The BA/BAS program in Public Service Leadership will utilize the Online Program Fee model outlined in SBOE Policy V.R. as it pertains to wholly online programs; and 2) a *traditional/hybrid* Bachelor of Arts (BA) in Public Service Leadership, which will incorporate courses from the online programs but allow flexibility for students who prefer an in-person program as well those students who may have already earned credits toward another School of Public Service degree.

The Bachelor of Arts (BA) or Bachelor of Applied Science (BAS) in Public Service Leadership program provides a unique and interdisciplinary approach to public service careers. This program goes beyond traditional Social and Political Science degrees by combining a strong foundation in public service theory with leadership development. This customizable structure allows students to tailor their learning to their specific interests within the public sector, making it ideal for those seeking a focused education with real-world application. Designed for individuals passionate about making a positive impact through public service careers, the program welcomes both traditional and non-traditional students, including those already working in the public and non-profit sectors.

**IMPACT**

Idaho's growing population and rising demand for strong public and non-profit organizations require new public service leaders who can collaborate effectively and provide leadership throughout these industries. Our program addresses this need by equipping graduates with the skills to navigate complex public policy issues and lead across diverse organizations, ensuring a more responsive and effective public sector.

The Public Service Leadership program is designed to be both accessible and impactful. Recognizing the challenges faced by busy individuals balancing work, family, and education, Boise State proposes to offer the program in both online and hybrid formats, catering to diverse learning styles and allowing those with non-

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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traditional backgrounds to thrive. This flexibility makes the program ideal for those seeking a focused education that fits their busy lives.

Affordability is another key consideration. The fully online programs (BA/BAS) will be launching at a very market competitive rate of \$375 per credit hour in accordance with Board Policy V.R. For 120 credit hours this amounts to a total of \$45,000. Full-time students are able to finish this flexible degree in 3-5 semesters depending on the number of credits they transfer in. This structure makes the Public Service Leadership program an attractive option for those seeking a cost-effective path to a fulfilling career. Programs operating under the online program fee model at Boise State University are expected to be fiscally sustainable. If enrollments do not meet expectations, expenses will be adjusted to reflect actual activity. The program's financial sustainability will be evaluated annually.

The School of Public Service program director will oversee administration, eliminating the need for additional staff. Experienced instructional staff and adjunct instructors will deliver the online courses, with their salaries funded by program revenue. The traditional/hybrid program will employ a cost-effective approach where students will utilize online versions of the new courses, requiring no additional instructors and existing Public Service courses and certificates. The anticipated smaller enrollment size for the in-person/hybrid program further ensures minimal disruption to our course offerings and staffing plans.

Total expenditures range from \$118,764 - \$237,976 of one-time funding over four years. In year one and two, existing resources will absorb all additional workload and responsibilities for both online and face-to-face/hybrid programs. Depending on enrollment in all programs, years three, four, and five may require hiring additional adjunct faculty and allocating additional administrative support. As the program grows, adjunct faculty may need to be hired to teach additional course sections.

**ATTACHMENTS**

Attachment 1 - Bachelor of Arts and Bachelor of Applied Science in Public Service Leadership Proposal

**STAFF COMMENTS AND RECOMMENDATIONS**

Boise State University projects 10 initial enrollments for the online program option to reach 111 by Fall 2028 and graduating seven starting in FY26. For the face-to-face program option, the program projects six initial enrollments to reach 34 by Fall 2028 and graduating four starting in FY27. Because the program will be using the online program fee model, minimum enrollments are based on course registrations. This includes 126 annual credits and 4.2 annual FTEs in Year one; 361 annual credits and 12.0 annual FTEs in Year two; 412 annual credits and 13.7 FTEs in Year three; 453 annual credits and 15.1 FTEs in Year four, and 553 annual credits and 18.4 FTEs in Year five.

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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The minimum expected enrollment for the face-to-face option is 10 enrolled students by year three and 15 by year five. For the face-to-face program, given it will also rely on online courses, the decision to continue the degree will be determined by the success of the online program. If the combined enrollment for both program options is below 20 after year three, the program will be evaluated and considered for major changes. If the combined enrollment remains at 30 or below after year six, all will be evaluated for discontinuation.

Boise State's request to offer an online Bachelor of Arts in Public Service Leadership is consistent with their Service Region Program Responsibilities and their current institution plan for Delivery of Academic Programs in Region III. There are presently no comparable online programs offered in the state. Currently, no institution has statewide program responsibility specifically for public service education programs.

Boise State also requests approval to assess an online program fee of \$375 per credit for the bachelor's program consisting of 120 credits, which amounts to \$45,000. Based on the information for the online program fee provided in the proposal, staff finds that the policy criteria have been met for this program.

The proposal completed the program review process and was presented to the Council on Academic Affairs and Programs on May 2, 2024; and to the Instruction, Research, and Student Affairs on May 30, 2024.

**BOARD ACTION**

I move to approve the request by Boise State University to create a new online Bachelor of Arts and Bachelor of Applied Science in Public Service Leadership, and a hybrid/face-to-face Bachelor of Arts in Public Service Leadership as presented in Attachment 1.

Moved by \_\_\_\_\_ Seconded by \_\_\_\_\_ Carried Yes \_\_\_\_\_ No \_\_\_\_\_

AND

I move to approve the request by Boise State University to charge an online program fee of \$375 per credit for the BA/BAS Public Service Leadership program, in conformance with the program budget submitted to the Board in Attachment 1.

Moved by \_\_\_\_\_ Seconded by \_\_\_\_\_ Carried Yes \_\_\_\_\_ No \_\_\_\_\_



**Idaho State  
Board of Education**

**FULL PROPOSAL FORM**

Academic Degree and Certificate Program

Date of Proposal Submission:	April 5, 2024		
Institution Submitting Proposal:	Boise State University		
Name of College, School, or Division:	School of Public Service		
Name of Department(s) or Area(s):			
Official Name of the Program:	Public Service Leadership		
Implementation Date:	Fall 2024		
Degree Information:	Degree Level: Undergraduate	Degree Type: Bachelor's	
CIP code (consult IR /Registrar):	44.0401 Public Administration		
Method of Delivery: Indicate percentage of face-to-face, hybrid, distance delivery, etc.	Fully online (BA/BAS), face-to-face/hybrid (BA)		
Geographical Delivery:	Location(s)	Boise	Region(s) III
Indicate (X) if the program is/has: (Consistent with Board Policy V.R.)	Self-Support fee	Professional Fee	X Online Program Fee
Indicate (X) if the program is: (Consistent with Board Policy III.Z.)	Regional Program Responsibility	Statewide Program Responsibility	

**Proposed Action**

- New program offering**
  - Undergraduate program
  - Graduate program
  - Undergraduate certificate (30 credits or more)
  - Graduate certificate (30 credits or more)
- New branch campus or change in location**

- Modification of Existing Academic Programs**
  - Converting one program option to a stand-alone program
  - Consolidating two or more undergraduate programs into one
  - Consolidating two or more graduate programs into one
  - Splitting an existing program into two or more programs
  - Program expansion outside an institution's Designated Service Region as defined in Board Policy III.Z.
  - Adding certificate or degrees to existing programs

Angela J. Bos 03/27/2024  
Angie Bos (Mar 27, 2024 12:39 MDT)

College Dean \_\_\_\_\_ Date

Graduate Dean/other (as applicable) \_\_\_\_\_ Date

Jo Ellen DiNucci 04/04/2024  
Jo Ellen DiNucci (Apr 4, 2024 08:37 MDT)

FVP/Chief Fiscal Officer \_\_\_\_\_ Date

John Buckwalter 03/31/2024  
John Buckwalter (Mar 31, 2024 21:59 MDT)

Provost/VP for Instruction \_\_\_\_\_ Date

mg 04/04/2024

President \_\_\_\_\_ Date

Vice President for Research (as applicable) \_\_\_\_\_ Date

Dusty Sanchez 4/30/2024

Academic Affairs Program Manager, OSBE \_\_\_\_\_ Date

John G. ... 05/01/2024

Chief Financial Officer, OSBE \_\_\_\_\_ Date

JJ Bliss 5/8/24

Chief Academic Officer, OSBE \_\_\_\_\_ Date

SBOE/Executive Director or Designee \_\_\_\_\_ Date

Approval

**Before completing this form, refer to Board Policy Section III.G., Postsecondary Program Approval and Discontinuance.** This proposal form must be completed for the creation of each new program. All questions must be answered.

### **Rationale for Creation or Modification of the Program**

- 1. Describe the request and give an overview of the changes that will result.** What type of substantive change are you requesting? Will this program be related or tied to other programs on campus? Identify any existing program that this program will replace. If this is an Associate degree, please describe transferability.

Boise State University proposes the creation of a new interdisciplinary baccalaureate degree program in **Public Service Leadership** in both fully online and hybrid delivery formats. The proposal describes 1) a **wholly online program** that will award a **Bachelor of Arts (BA) or Bachelor of Applied Science (BAS) in Public Service Leadership**. The BA/BAS program in Public Service Leadership will utilize the Online Program Fee model outlined in SBOE Policy V.R. as it pertains to wholly online programs; and 2) an **in-person Bachelor of Arts (BA) in Public Service Leadership**, which will incorporate courses from the online programs but allow flexibility for students who prefer an in-person program as well those students who may have already earned credits toward another SPS degree.

The proposed program is interdisciplinary and aligns with the need to offer a general and customizable public service degree. Public Service is an interdisciplinary field applicable to a multitude of industries. The combination of public service theory and leadership skills gained in the proposed programs will establish a well-defined path for students to earn their bachelor's degree.

The BA/BAS in Public Service Leadership is an academic program designed for individuals passionate about making a difference through public service careers. It provides a specialized curriculum distinct from other Social and Political Science (SPS) programs, catering to students interested in or already working within the public and/or nonprofit sector. This program is ideal for those seeking a focused public service education with greater flexibility compared to traditional SPS degrees such as criminal justice or political science. By offering a customizable curriculum, the program allows students to tailor their learning to their specific interests and public sector career aspirations. This flexibility, combined with the program's focus on public service, makes it a compelling choice for those dedicated to positive community impact.

- 2. Need for the Program.** Describe evidence of the student, regional, and statewide needs that will be addressed by this proposal to include student clientele to be served and address the ways in which the proposed program will meet those needs.

- a. Workforce and economic need:** Provide verification of state workforce needs that will be met by this program. Include job titles and cite the data source. Describe how the proposed program will stimulate the state economy by advancing the field, providing research results, etc.

The employment demand for public service leadership skills crosses multiple industry government and non-government organizations (NGO) sectors and aligns with various academic disciplines. Approximately 100,000 unique job postings in the U. S. from October 2022 to October 2023 required or preferred a bachelor's degree in public service with specific skills in auditing, compliance, human services, case management or psychology.

The U. S. workforce demand for public service leaders with a bachelor’s degree has a gradual upward trend spanning from approximately four thousand job postings per month in November 2019 to approximately six thousand job postings in 2022.

**Job Titles**

- Social and Community Service Managers (SOC 11-9150)
- Miscellaneous Social Scientists and Related Workers (SOC 19-3090)
- Urban and Regional Planners (SOC19-3050)
- Compliance Officers (SOC 13-1040)
- Legislators (SOC 11-1030)

<b>2021 National Employment Matrix Title and Code</b>		<b>Employment</b>		<b>Job Openings Due to Growth &amp; Replacement Needs 2021-2031</b>
		<b>2021 (in thousands)</b>	<b>2031 (in thousands)</b>	
Social and Community Service Manager	11-9150	175,805	218,000	+42,195
Miscellaneous Social Scientists and Related Workers	19-3090	64,283	72,696	+8,413
Urban and Regional Planners	19-3050	39,408	45,574	+6,166
Compliance Officers	13-1040	349,207	424,240	+75,033
Legislators	11-1030	52,023	57,157	+5,134
<b>TOTAL</b>		<b>680,726</b>	<b>817,667</b>	<b>+136,941</b>

<b>2021-2031 Idaho Long Term Employment Projections</b>		<b>Employment</b>		<b>Job Openings Due to Growth &amp; Rep. Needs 2021-2031</b>
		<b>2021</b>	<b>2031</b>	
Social and Community Service Manager	11-9150	990	1166	+176
Miscellaneous Social Scientists and Related Workers	19-3090	326	400	+74

Urban and Regional Planners	19-3050	412	539	+127
Compliance Officers	13-1040	1696	2068	+372
Legislators	11-1030	640	765	+125
<b>TOTAL</b>		4,064	4,938	+874

- b. Student demand.** What is the most likely source of students who will be expected to enroll (full-time, part-time, outreach, etc.). Provide evidence of student demand/ interest from inside and outside of the institution.

The online public service leadership degrees primarily serve post-traditional students, including those coming back from a break in their undergraduate education seeking to complete their degree as well as those looking to build on degrees earned in community colleges. These students often juggle multiple responsibilities, such as full-time employment, family, or other commitments, and seek the flexibility and accessibility characteristic of an online program.

The in-person/hybrid public service leadership degree will serve students whose public service interests do not necessarily fit within traditional programs, such as political science and criminal justice. Prospective students for all three programs may have an interest or may already be working in the public and/or nonprofit sector, as well as prior credits earned toward another SPS undergraduate degree.

There are four different types of students who will enter this program.

- The career starter who is new to the field
- The career advancer who is already employed in the field and is interested in moving up in the field
- The degree finisher who has previous college experience that fits within the field, but has not yet finished a degree
- The career changer who is currently employed in a different field and is interested in changing fields

Student demand is anticipated to be 60% part-time and 40% full-time.

- c. Societal Need:** Describe additional societal benefits and cultural benefits of the program.

Idaho's growing population and increasing demand for organizations that provide a structure and support to our governmental and NGO organizations underscore a pressing demand for contemporary public service leaders who can provide empathetic leadership throughout these industries. With public service roles evolving to require collaboration among individuals from diverse organizations, within various divisions, and across different cultures, it is crucial to impart our students with the essential skills needed to address the evolving needs and expectations of society. Our program focuses on policy, ethics, leadership, and problem-solving in the public realm, ensuring that students are well-prepared not only for fundamental processes but also for the intricate dynamics inherent in modern public service settings. This emphasis underscores the



immediate necessity for effective leadership in shaping a more responsive and effective public sector.

**3. Program Prioritization**

Is the proposed new program a result of program prioritization?

Yes \_\_\_\_\_ No X

If yes, how does the proposed program fit within the recommended actions of the most recent program prioritization findings.

**4. Credit for Prior Learning**

Indicate from the various cross walks where credit for prior learning will be available. If no PLA has been identified for this program, enter 'Not Applicable'.

Not Applicable

**5. Affordability Opportunities**

Describe any program-specific steps taken to maximize affordability, such as: textbook options (e.g., Open Educational Resources), online delivery methods, reduced fees, compressed course scheduling, etc. This question applies to certificates, undergraduate, graduate programs alike.

The fully online programs will be launching at a very market competitive rate of \$375 per credit hour. Full-time students are able to finish this degree in 3-5 semesters depending on the number of credits in transfer.

Aside from the baseline tuition rate, faculty are exploring Open Educational Resources (OER) to defray costs for books for both the in-person and online degree options.

**Enrollments and Graduates**

**6. Existing similar programs at Idaho Public Institutions.** Using the chart below, provide enrollments and numbers of graduates for similar existing programs at your institution and other Idaho public institutions for the most past four years.

Instit	Program Name	Fall Headcount Enrollment in Program				Number of Graduates From Program (Summer, Fall, Spring)			
		FY__	FY__	FY__	FY_ (most recent)	FY__	FY__	FY__	FY_ (most recent)
	<b>None - No similar programs offered in Idaho</b>								

7. **Justification for Duplication** (if applicable). If the proposed program is similar to another program offered by an Idaho public higher education institution, provide a rationale as to why any resulting duplication is a net benefit to the state and its citizens. Describe why it is not feasible for existing programs at other institutions to fulfill the need for the proposed program.

No other Idaho public institution offers a similar program. Not applicable.

8. **Projections for proposed program:** Using the chart below, provide projected enrollments and number of graduates for the proposed program:

<b>Proposed Program: Projected Enrollments and Graduates First Five Years</b>										
<b>Program Name: Public Service Leadership</b>										
<b>Projected Fall* Term Headcount Enrollment in Program (Online BA and BAS)</b>						<b>Projected Annual Number of Graduates from Program (Online BA and BAS)</b>				
Fall 2024 (first year)	Fall 2025	Fall 2026	Fall 2027	Fall 2028		FY25 (first year)	FY26	FY27	FY28	FY29
10	37	67	90	111		0	7	15	29	39
<b>Projected Fall Term Headcount Enrollment in Program (Face to face / Hybrid BA)</b>						<b>Projected Annual Number of Graduates from Program (Face to Face / Hybrid BA)</b>				
Fall 2024 (first year)	Fall 2025	Fall 2026	Fall 2027	Fall 2028		FY25 (first year)	FY26	FY27	FY28	FY29
6	13	19	26	34		0	1	4	7	10

\*Please note that the projected fall term headcount enrollment for reported in this table is slightly lower than the numbers reported in the attached budget for FY25 – FY29 since students can start this program both in fall and in spring semesters.

9. **Describe the methodology for determining enrollment and graduation projections.** Refer to information provided in Question #2 “Need for the Program” above. What is the capacity for the program? Describe your recruitment efforts? How did you determine the projected numbers above?

The online enrollment and graduation estimates come from a rigorous analysis of year-over-year growth in comparable programs, accounting for a conservative attrition rate. The in-person estimates follow a similar conservative methodology with the expectation that the online program will experience faster growth, as in-person students will likely continue to prefer traditional SPS degrees, such as political science or criminal justice. The program’s

size will be scaled to demand for the program. The numbers in the table above reflect a reasonable and attainable scaling up of both the online and in-person programs.

Student services include both student support staff and faculty. Marketing, recruitment, and advising efforts will be managed by the program director and his/her support staff at the School of Public Service, along with the support from Extended Studies for the online programs in coordination with other online programs.

Marketing and recruitment efforts will include a digital marketing campaign, a web landing page, request for information form and a full program website with details regarding the key program assets, curriculum plan, and costs. In addition, a comprehensive communication plan will be implemented to attract and nurture interested students. Strategic, personalized communications will engage and support students throughout the recruitment life cycle. For the online programs, our coaching approach to student services will support online students and maintain their connection to Boise State through graduation.

**10. Minimum Enrollments and Graduates.**

- a. What are the minimums that the program will need to meet in order to be continued, and what is the logical basis for those minimums?

Because the online program will be utilizing the online fee model, it is best to put minimum enrollment in terms of course registrations, which are what translate to revenue. Based on estimated expenses for instruction and for support personnel expenses, estimate the minimum number of course registrations to achieve break-even is:

- Year 1: Annual credits 126, Annual FTEs 4.2
- Year 2: Annual credits 361, Annual FTEs 12.0
- Year 3: Annual credits 412, Annual FTEs 13.7
- Year 4: Annual credits 453, Annual FTEs 15.1
- Year 5: Annual credits 553, Annual FTEs 18.4

The minimum expected enrollment for the face to face/hybrid program is 10 students enrolled in the program by Year 3 and 15 students by Year 5.

- b. If those minimums are not met, what is the sunset clause by which the program will be considered for discontinuance?

Programs operating under the online program fee model at Boise State University are expected to be fiscally sustainable. If enrollments do not meet expectations, expenses will be adjusted to reflect actual activity. The program's financial sustainability will be evaluated annually. If it is determined to be fiscally unsustainable in the long term, it will be discontinued. This approach ensures financial prudence.

Because the in-person program will rely on the online program offerings as well as existing SPS courses, the decision to continue the degree will be determined by the success of the online program. If the combined enrollment in online and face-to-face/hybrid programs is below 20 after Year 3, program will be evaluated and considered for major changes. If the combined number of students in these programs

remain at 30 or below by Year 6, all baccalaureate programs in Public Service Leadership will be considered for discontinuation.

11. **Assurance of Quality.** Describe how the institution will ensure the quality of the program. Describe the institutional process of program review. Where appropriate, describe applicable specialized accreditation and explain why you do or do not plan to seek accreditation.

**Regional Institutional Accreditation:** Boise State University is regionally accredited by the Northwest Commission on Colleges and Universities (NWCCU). Regional accreditation of the university has been continuous since initial accreditation was conferred in 1941. Boise State University is currently accredited at all degree levels (A, B, M, D).

**Program Review:** Boise State has instituted a new program review procedure. At the inception of new programs, the programs will submit to the Office of the Provost a three-year assessment plan to be scheduled into the Periodic Review/Assessment Reporting Cycle. The plan includes program learning outcomes; and an implementation plan with a timeline identifying when and what will be assessed, how the programs will gather assessment data, and how the program will use that information to make improvements. Then, every three years, the programs will provide Program Assessment Reports (PAR), which will be reviewed by a small team of faculty and staff using a PAR Rubric, which includes feedback, next steps, and a follow-up report with a summary of actions.

**Program Development Support:** The online **Bachelor's in Public Service Leadership** is one of several that are being created via the eCampus Expansion Initiative at Boise State University.

- **Program Design:** Boise State's online program development process includes a facilitated program design process to assist program faculty members in the creation of an intentional, cohesive course progression aligned to both course and program learning outcomes.
- **Course Design and Development:** Each course is designed and developed by a faculty member. They work with the assistance of a team of experts, which includes an instructional designer, a multimedia developer, a quality assurance specialist, and a course developer. The end result is a program version of each course. All courses for the program are developed with a consistent look and feel using a common course template aligned with nationally recognized Quality Matters course design standards.
- **Course Maintenance:** The academic department is responsible for the continuous course improvement of online program courses.

The development of the in-person Bachelor's in Public Service Leadership program will follow the development of the online program.

**Academic Integrity:** Academic integrity is vital to the mission of Boise State University and encompasses the totality of academic rigor, ethical behavior, intellectual curiosity, appropriate teamwork, and persistence. All assignments submitted by a student must represent his/her own ideas, concepts, and current understanding or must cite the original source. Boise State proactively supports academic integrity by providing training, maintaining a website dedicated to academic integrity, providing tools such as pedagogical strategies, workshops, and tips for designing tests, as well as establishing policies and procedures for students who violate the

academic integrity policy within the Student Code of Conduct. For the online program and courses, we will use the following strategies to encourage academic integrity:

- During the design and development of the curriculum and assessment of each course, instructors will be informed by staff of Boise State's eCampus Center about best practices for online course design based on Quality Matters™ and best practice strategies to promote academic integrity in online education based on WCET's recommendations (Version 2.0, June 2009)
- Through the program development process, course production, course launch support provided by the eCampus Center, and other means, instructors will be reminded about the importance of academic integrity and encouraged to report and act upon suspected violations.
- Academic integrity will be addressed within online student orientation. Programs may require online students to complete the university's Academic Integrity Online Workshop.
- At the beginning of each course, the instructor will communicate expectations regarding academic integrity to students in the syllabus and verbally and may require completion of the university's Academic Integrity Online Workshop.

**Student Authentication:** The online program and courses will include mechanisms by which we authenticate the identity of students enrolled in the program. We will use the following mechanisms:

- During the admissions process, the university will confirm required official transcripts and other documentation required for admission into the program.
- Associated with access to and use of our Learning Management System, a secure log-in environment will be provided and students will be required to use strong passwords and change them every 90 days.
- When high-stakes exams are required, faculty will be encouraged to utilize remote or online proctoring services when appropriate. In those instances, students will need to provide valid photo identification before gaining access to the graded assessments or other required activities.
- Instructors will utilize Turnitin plagiarism detection program when appropriate.
- Instructors are expected to be informed of and aware of the importance of student identity authentication and to report and act upon suspected violations.

12. **In accordance with Board Policy III.G., an external peer review is required for any new doctoral program.** Attach the peer review report as **Appendix A**.

13. **Teacher Education/Certification Programs** All Educator Preparation programs that lead to certification require review and recommendation from the Professional Standards Commission (PSC) and approval from the State Board of Education.

Will this program lead to certification?

Yes \_\_\_\_\_ No X

If yes, on what date was the Program Approval for Certification Request submitted to the Professional Standards Commission?

14. **Three-Year Plan:** If this is a new proposed program, is it on your institution’s approved 3-year plan?

Yes  X  No  \_\_\_\_\_

If yes, proceed to question 15. If no:

a. **Which of the following statements address the reason for adding this program outside of the regular three-year planning process.**

Indicate (X) by each applicable statement:

	Program is important for meeting your institution’s regional or statewide program responsibilities.
	The program is in response to a specific industry need or workforce opportunity.
	The program is reliant on external funding (grants, donations) with a deadline for acceptance of funding.
	There is a contractual obligation or partnership opportunity related to this program.
	The program is in response to accreditation requirements or recommendations.
	The program is in response to recent changes to teacher certification/endorsement requirements.

b. **Provide an explanation for all statements you selected.**

**Educational Offerings: Curriculum, Intended Learning Outcomes, and Assessment Plan**

15. **Curriculum.** Provide descriptive information of the educational offering.

- **Summary of requirements.** Provide a summary of program requirements using the following table.

Credit hours in required courses offered by the department (s) offering the program.	24
Credit hours in required courses offered by other departments:	0
Credit hours in institutional general education curriculum	37-41
Credit hours in free electives	31-47
Total credit hours required for degree program:	120

- **Curriculum.** Provide the curriculum for the program, including credits to completion, courses by title and assigned academic credit granted.

**Fully Online BA**

- Take at least 37 credits from: University Foundations
- Take the following:

- SPS200 - Problem Solving in Public Service (3)
- SPS240 - Data in Public Service (3)
- SPS301 - Engagement and Empathy in Public Service (3)
- LEAD325 - Foundations of Leadership (3)
- SPS361 - Ethics in Public Service (3)
- SPS362 - Policy Analysis (3)
- SPS363 - Applied Research for Public Service (3)
- SPS491 - Public Service Capstone (3)
- Take 15 credits from the following:
  - Complete 1 of the following
  - Take 15 credits from:  
CONFLICT, CJ, SPS, POLS, ENVSTD, GLOBAL, LEAD, MILSCI, URBAN, or PUBADM 300-499
    - Or a certificate with additional courses from above to total 15 credits
      - Complete 1 of the following:
        - Conflict Management Online Certificate
        - Conflict Management Certificate
        - Leadership and Human Relations Certificate
        - Planning Certificate
- Take at least 6 credits from the following:
  - Upper-division electives
- Take at least 38 credits from the following:
  - Electives to total 120 credits

### Fully Online BAS

- Take between 20 and 48 credits from the following types of courses:
  - Technical associate degree (AAS or equivalent), an advanced technical certificate (ATC), or an intermediate technical certificate (ITC) awarded by a regionally accredited institution
- Take at least 37 credits from: University Foundations
- Take the following:
  - SPS200 - Problem Solving in Public Service (3)
  - SPS240 - Data in Public Service (3)
  - SPS301 - Engagement and Empathy in Public Service (3)
  - LEAD325 - Foundations of Leadership (3)
  - SPS361 - Ethics in Public Service (3)
  - SPS362 - Policy Analysis (3)
  - SPS363 - Applied Research for Public Service (3)
  - SPS491 - Public Service Capstone (3)
- Complete 1 of the following
  - Take 12 credits from:  
CONFLICT, CJ, SPS, POLS, ENVSTD, GLOBAL, LEAD, MILSCI, URBAN, or PUBADM 300-499
  - Or a certificate with additional courses from above to total 12 or more credits
    - Complete one of the following
      - Conflict Management Certificate
      - Conflict Management Certificate

- Leadership and Human Relations Certificate
- Planning Certificate
- Take between 27 and 0 credits from the following types of courses:
  - Electives to total 120 credits

### In-person BA

- Take at least 37 credits from: University Foundations
  - Take the following:
    - SPS200 - Problem Solving in Public Service (3)
    - SPS240 - Data in Public Service (3)
    - SPS301 - Engagement and Empathy in Public Service (3)
    - LEAD325 - Foundations of Leadership (3)
    - SPS362 - Policy Analysis (3)
    - SPS491 - Public Service Capstone (3)
  - Take at least 3 credits from the following:
    - POLS412 - Ethics in Public Policy (1 - 3)
    - SPS361 - Ethics in Public Service (3)
  - Take at least 1 of the following:
    - POLS301 - Advanced Political Science Methods (3)
    - SPS363 - Applied Research for Public Service (3)
    - **Take 16 credits from the following:**
      - Complete 1 of the following
        - Take 16 credits from: CONFLICT, CJ, SPS, POLS, ENVSTD, GLOBAL, LEAD, MILSCI, URBAN, or PUBADM 300-499
        - Or a certificate with additional courses from above to total 16 credits
      - Complete 1 of the following
        - Conflict Management Certificate
        - Leadership and Human Relations Certificate
        - Planning Certificate
    - Take at least 6 credits from the following:
      - Upper-division electives
    - Take at least 37 credits from the following:
      - Electives to total 120 credits
- **Additional requirements.** Describe additional requirements such as comprehensive examination, senior thesis or other capstone experience, practicum, or internship, some of which may carry credit hours included in the list above.
  - SPS 491: Capstone and/or Project - Students apply their knowledge and skills in public service leadership as it aligns with their career goals, develop and present their professional portfolio.

### 16. Learning Outcomes: Expected Student Learning Outcomes and Connection to Curriculum.



- a. **Intended Learning Outcomes.** List the Intended Learning Outcomes for the proposed program, using learner-centered statements that indicate what students will know, understand, and be able to do, and value or appreciate as a result of completing the program.
- Comprehend the landscape of public service: Describe the complexities and challenges associated with the field of public service, especially as they relate to democratic institutions and collaboration with non-governmental organizations.
  - Develop and implement evidence-based problem-solving strategies to make informed decisions that enhance the quality and impact of public services.
  - Learn and apply leadership competencies tailored to the diverse organizational contexts and settings characteristic of the public sector.
  - Employ theoretical knowledge to enhance the application of practical skills in resolving real-world policy challenges

#### 17. **Assessment plans.**

- a. **Assessment Process.** Describe the assessment plan for student learning outcomes that will be used to evaluate student achievement and how the results will be used to improve the program.

Student achievement and satisfaction of student learning outcomes will be assessed through assignments in course work and completion of the capstone course. The BA/BAS in Public Service Leadership programs will also undergo annual program assessment that includes interviews of graduating students, faculty observations and discussions, and compilations of student capstone work. In coordination with the School of Public Service Dean and eCampus, the Program Lead will monitor admission, enrollment, degree process, and career placement. These key metrics will inform regular reviews of the programs and assessment of their health.

#### **Resources Required for Implementation – fiscal impact and budget.**

Organizational arrangements required within the institution to accommodate the change including administrative, staff, and faculty hires, facilities, student services, library; etc.

18. **Physical Facilities and Equipment:** Describe the provision for physical facilities and equipment.

- a. **Existing resources.** Describe equipment, space, laboratory instruments, computer(s), or other physical equipment presently available to support the successful implementation of the program.

No impact is anticipated.

- b. **Impact of new program.** What will be the impact on existing programs of increased use of physical resources by the proposed program? How will the increased use be accommodated?

No impact is anticipated.

- c. **Needed resources.** List equipment, space, laboratory instruments, etc., that must be obtained to support the proposed program. Enter the costs of those physical resources into the budget sheet.

N/A

**19. Library and Information Resources:** Describe adequacy and availability of library and information resources.

- a. **Existing resources and impact of new program.** Evaluate library resources, including personnel and space. Are they adequate for the operation of the present program? Will there be an impact on existing programs of increased library usage caused by the proposed program? For off-campus programs, clearly indicate how the library resources are to be provided.

Library resources are currently adequate with no anticipated impact on usage. The Albertson library provides research databases, electronic textbook reserves and also books by mail for distance studies students.

- b. **Needed resources.** What new library resources will be required to ensure successful implementation of the program? Enter the costs of those library resources into the budget sheet.

No additional library resources are required.

**20. Faculty/Personnel resources**

- a. **Needed resources.** Give an overview of the personnel resources that will be needed to implement the program. How many additional sections of existing courses will be needed? Referring to the list of new courses to be created, what instructional capacity will be needed to offer the necessary number of sections?

Personnel: There are no additional resources required for the administration of this program as this program will fall within the scope of duties for the School of Public Service program director Luke Fowler. The primary resources for personnel will be to use existing instructional staff and adjunct instructors. These costs are covered by revenue generated from the online program fees in the fully online BA/BAS program.

We do not anticipate additional instructional expenses for the in-person/hybrid program, as students enrolled in that program will take the online versions of the new courses. We anticipate that enrollment in the in-person/hybrid program will be small enough that it will not change the initial plans or timeline for scaling the program course offerings.

Courses: This program will require the creation of four new courses. The creation of these courses will use existing teaching capacity with expertise in public service in coordination with program and course design consultation in the Division of Extended Studies.

Please note that there are no separate expenses for the face-to-face / hybrid program since all instructional expenses for the four new online courses, and program director and administrative services are accounted for in the budget for the online program.

- b. Existing resources.** Describe the existing instructional, support, and administrative resources that can be brought to bear to support the successful implementation of the program.

For years one and two, existing resources including faculty, advising and administrative support will absorb all additional workload and responsibilities for both the online and in-person/hybrid programs. Depending on enrollment in all programs, years three, four and five may require hiring of additional adjunct faculty and allocating additional administrative support.

- c. Impact on existing programs.** What will be the impact on existing programs of increased use of existing personnel resources by the proposed program? How will the quality and productivity of existing programs be maintained?

This program was designed collaboratively with the various departments within the School of Public Service to meet the needs of students who want a more general degree and as the starting point for a pathway that is customizable using existing and developing certificates.

- d. Needed resources.** List the new personnel that must be hired to support the proposed program. Enter the costs of those personnel resources into the budget sheet.

Current advising and support staff will be used to meet the needs for advising and other support. As the program grows, adjunct faculty may need to be hired to teach additional course sections.

## 21. Revenue Sources

- a) **Reallocation of funds:** If funding is to come from the reallocation of existing state appropriated funds, please indicate the sources of the reallocation. What impact will the reallocation of funds in support of the program have on other programs?

N/A

- b) **New appropriation.** If an above Maintenance of Current Operations (MCO) appropriation is required to fund the program, indicate when the institution plans to include the program in the legislative budget request.

No new appropriation will be needed.

- c) **Non-ongoing sources:**

- i. If the funding is to come from one-time sources such as a donation, indicate the sources of other funding. What are the institution's plans for sustaining the program when that funding ends?

N/A

- ii. Describe the federal grant, other grant(s), special fee arrangements, or contract(s) that will be valid to fund the program. What does the institution propose to do with the program upon termination of those funds?

N/A

d) **Student Fees:**

- i. If the proposed program is intended to levy any institutional local fees, explain how doing so meets the requirements of Board Policy V.R., 3.b.

N/A

- ii. Provide estimated cost to students and total revenue for self-support programs and for professional fees and other fees anticipated to be requested under Board Policy V.R., if applicable.

- i. The student fee for the online programs will be in accordance with the Online Program Fee as defined in the Board Policy V.R., 3.a.x. That policy enables the institution to set a price-point appropriate for the program; students will pay an online program fee in lieu of tuition. The price-point for the online program fee will be as follows: \$375 per credit.
- ii. We project that by the third year of the program, it will generate a gross revenue of \$203,725 and \$92,027 in Year 3 net revenue, with a cumulative net revenue of \$39,549 for the online program fee model program itself.
- iii. The Public Service Leadership bachelor's degree program plans to open enrollment to any student within the online program fee model ecosystem. This means, there will be additional revenue from students enrolled in online programs that are not seeking the Public Service Leadership degree.

**22.** Using the excel **budget template** provided by the Office of the State Board of Education, provide the following information:

- Indicate all resources needed including the planned FTE enrollment, projected revenues, and estimated expenditures for the first **four** fiscal years of the program.
- Include reallocation of existing personnel and resources and anticipated or requested new resources.
- Second- and third-year estimates should be in constant dollars.
- Amounts should reconcile subsequent pages where budget explanations are provided.
- If the program is contract related, explain the fiscal sources and the year-to-year commitment from the contracting agency(ies) or party(ies).
- Provide an explanation of the fiscal impact of any proposed discontinuance to include impacts to faculty (i.e., salary savings, re-assignments).

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

**Budget for Fully Online BA/BAS**

**I. PLANNED STUDENT ENROLLMENT**

	FY <u>2025</u>		FY <u>2026</u>		FY <u>2027</u>		FY <u>2028</u>	
	FTE	Headcount	FTE	Headcount	FTE	Headcount	FTE	Headcount
A. New enrollments	3.8	18	12.6	42	22.3	70	30.8	93
B. Shifting enrollments	0.4	2	1.4	5	2.5	8	3.4	10
<i>Total Enrollment</i>	4.2	20	14.0	47	24.8	78	34.2	103
<i>Student Credit Hours Generated</i>	126		4m		743		1,027	

**II. REVENUE**

	FY <u>2025</u>		FY <u>2026</u>		FY <u>2027</u>		FY <u>2028</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
1. New Appropriated Funding Request								
2. Institutional Funds								
3. Federal								
4. New Tuition Revenues from Increased Enrollments								
5. Student Fees		\$47,250		\$156,955		\$278,572		\$385,122
6. Other, Shared Course Revenue		\$1,481		\$4,918		\$8,724		\$12,053
<i>Total Revenue</i>	\$0	\$48,731	\$0	\$161,872	\$0	\$287,297	\$0	\$397,176

Budget Notes:

I.A, B. Calculation of FTE and headcount as follows:

>1 FTE = 24 credits

>Headcount determined as the distinct number of students in the program that year.

>Assume that 90% of the enrollments will be new enrollments and 10% will be shifting enrollments.

>Assume 25% attrition from 1st to 2nd semester, then 3% attrition every semester. No attrition for last semester.

II.5. Student Fee revenue calculated as Student Credit Hours \* \$375 per credit.

\$375 calculated as estimate of 2024-2025 per credit rate.

To be conservative, assume in calculations that per-credit fee does not increase over time to align with the amount charged to traditional resident students.

II.6. The Public Service Leadership bachelors will receive revenue from SPS students taking classes within the shared course suite. This has been calculated with each degree student taking an additional 6 credits over 4 semesters at \$47/per credit.

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

**III. EXPENDITURES**

	FY <u>2025</u>		FY <u>2026</u>		FY <u>2027</u>		FY <u>2028</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b>A. Personnel Costs</b>								
1. FTE		1.10		1.20		1.70		1.75
2. Faculty		\$0		\$14,907		\$15,342		\$15,776
3. Adjunct Faculty		\$23,688		\$24,399		\$25,109		\$25,820
4. Graduate/Undergrad Assistants		\$0.00		\$0.00		\$0.00		\$0.00
5. Research Personnel		\$0.00		\$0.00		\$0.00		\$0.00
6. Directors/Administrators		\$33,531		\$23,024		\$23,715		\$30,533
7. Administrative Support Personnel		\$2,942		\$3,030		\$3,121		\$3,214
8. Fringe Benefits		\$14,429		\$16,871		\$19,335		\$21,735
9. Other: Discussion Group Leads		\$0		\$0		\$10,076		\$10,362
<b>Total Personnel and Costs</b>	<b>\$0</b>	<b>\$74,589</b>	<b>\$0</b>	<b>\$82,231</b>	<b>\$0</b>	<b>\$96,698</b>	<b>\$0</b>	<b>\$107,439</b>

Budget Notes (continued)

- III.A.2 Faculty FTE: Calculated using (Credit hour load)/24 for faculty; assistant professor teaching capston courses at buyout rate
- III.A.3 Adjunct FTE: Calculated using (Credit hour load)/24; calculated at \$1,316 cost per credit hour; Y1 18 credits of instruction, Y2 24 credits of instruction, Y3/Y4 36 credits of instruction, Y5 45 credits of instruction
- III.A.6 Administrator: Program Coordinator (.1-3 FTE); paid for via existing workload paid for by SPS arrangement
- III.A.7 Support: Scheduling Coordinator (.05 FTE); paid for via existing workload paid for by SPS arrangement
- III.A.8 Benefits calculated at staff fringe rate of \$13,750+(annual wage\*20.52%) professional staff and \$13,750+(annual wage\*20.52%) classified staff
- III.A.9 Discussion Group Lead FTE: Calculated using (Credit hour load)/24; calculated at \$792.17 per credit hour; Y3/Y4 12 credits of instruction, Y5 18 credits of instruction

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

	<u>FY 2025</u>		<u>FY 2026</u>		<u>FY 2027</u>		<u>FY 2028</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b><i>B. Operating Expenditures</i></b>								
1. Travel								
2. Marketing and Promotion		\$20,000		\$10,000		\$10,000		\$10,000
3. Other Services								
4. Communications								
5. Materials and Supplies		\$10,000		\$5,000		\$5,000		\$5,000
6. Rentals								
7. Materials & Goods for Manufacture & Resale								
8. Miscellaneous - Computer Hardware/Software								
<b><i>Total Operating Expenditures</i></b>	<u>\$0</u>	<u>\$30,000</u>	<u>\$0</u>	<u>\$15,000</u>	<u>\$0</u>	<u>\$15,000</u>	<u>\$0</u>	<u>\$15,000</u>

Budget Notes (continued):

III.B.2 Expenses to market the program

III.B.5 Materials & Supplies: Office supplies and materials



**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

	FY 2025		FY 2026		FY 2027		FY 2028	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b>C. Capital Outlay</b>								
1. Library Resources								
2. Equipment								
<b>Total Capital Outlay</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>D. Capital Facilities Construction or Major Renovation</b>								
<b>E. Other Costs</b>								
1. Boise State University Support		\$14,175		\$47,086		\$83,572		\$115,537
2. Expenses								
Utilities								
Maintenance & Repairs								
3. Student Scholarships		\$0						
<b>Total Other Costs</b>	<b>\$0</b>	<b>\$14,175</b>	<b>\$0</b>	<b>\$47,086</b>	<b>\$0</b>	<b>\$83,572</b>	<b>\$0</b>	<b>\$115,537</b>
<b>TOTAL EXPENDITURES:</b>	<b>\$0</b>	<b>\$118,764</b>	<b>\$0</b>	<b>\$144,318</b>	<b>\$0</b>	<b>\$195,270</b>	<b>\$0</b>	<b>\$237,976</b>
<b>Net Income (Deficit) to College</b>	<b>\$0</b>	<b>-\$70,033</b>	<b>\$0</b>	<b>\$17,555</b>	<b>\$0</b>	<b>\$92,027</b>	<b>\$0</b>	<b>\$159,199</b>

Budget Notes (specify row and add explanation where needed; e.g., "I.A.,B. FTE is calculated using..."):

III.E.1 Boise State University Support is defined as follows:

Boise State Central Services (10.00% of revenue): A fund dedicated to funding support services for online students.

Boise State eCampus Center (8.75% of revenue): Provide funding for initiative management, online course/program development and other support services

Boise State Online Innovation Fund (2.3% of revenue): Seed funding for academic programs, course development stipends to faculty, open education resource grants and eventually innovation grants

Boise State Online Tuition Fund (1.5% of revenue)

Boise State Online Marketing, Recruitment, Enrollment, Advising and Retention Fund (7.45% of revenue): A fund dedicated to marketing the program, recruiting students, enrolling qualified students, advising students and retaining students throughout the life of the program

**Budget for Face-to-Face/Hybrid BA**

**I. PLANNED STUDENT ENROLLMENT**

	<u>FY 2025</u>		<u>FY 2026</u>		<u>FY 2027</u>		<u>FY 2028</u>	
	FTE	Headcount	FTE	Headcount	FTE	Headcount	FTE	Headcount
A. New enrollments	1.5	6	4.7	12	7.5	17	10.2	24
B. Shifting enrollments	0.2	1	0.5	1	0.8	2	1.1	3
<b>Total Enrollment</b>	<u>1.6</u>	<u>6</u>	<u>5.3</u>	<u>13</u>	<u>8.3</u>	<u>19</u>	<u>11.4</u>	<u>26</u>
<b>Student Credit Hours Generated</b>	<u>49</u>		<u>158</u>		<u>249</u>		<u>341</u>	

**II. REVENUE**

	<u>FY 2025</u>		<u>FY 2026</u>		<u>FY 2027</u>		<u>FY 2028</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
1. New Appropriated Funding Request								
2. Institution Funds								
3. Federal								
4. New Tuition Revenues from Increased Enrollments		\$5,778.00		\$11,228.39		\$15,456.24		\$20,618.51
5. Student Fees								
6. Other, Shared Course Revenue								
<b>Total Revenue</b>	<u>\$0</u>	<u>\$5,778</u>	<u>\$0</u>	<u>\$11,228</u>	<u>\$0</u>	<u>\$15,456</u>	<u>\$0</u>	<u>\$20,619</u>

**Budget Notes:**

- I.A, B. Calculation of FTE and headcount as follows:
  - >1 FTE = 24 credits
  - >Headcount determined as the distinct number of students in the program that year.
  - >Assume that 90% of the enrollments will be new enrollments and 10% will be shifting enrollments.
  - >Assume 25% attrition from 1st to 2nd semester, then 3% attrition every semester. No attrition for last semester.

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

**III. EXPENDITURES**

	FY <u>2025</u>		FY <u>2026</u>		FY <u>2027</u>		FY <u>2028</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b>A. Personnel Costs</b>								
1. FTE	_____	_____	_____	_____	_____	_____	_____	_____
2. Faculty	_____	_____	_____	_____	_____	_____	_____	_____
3. Adjunct Faculty	_____	_____	_____	_____	_____	_____	_____	_____
4. Graduate/Undergrad Assistants	_____	_____	_____	_____	_____	_____	_____	_____
5. Research Personnel	_____	_____	_____	_____	_____	_____	_____	_____
6. Directors/Administrators	_____	_____	_____	_____	_____	_____	_____	_____
7. Administrative Support Personnel	_____	_____	_____	_____	_____	_____	_____	_____
8. Fringe Benefits	_____	_____	_____	_____	_____	_____	_____	_____
9. Other: Discussion Group Leads	_____	_____	_____	_____	_____	_____	_____	_____
<b>Total Personnel and Costs</b>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>

Budget Notes (continued)

III.A Personnel Costs shared with online programs

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

	FY <u>2025</u>		FY <u>2026</u>		FY <u>2027</u>		FY <u>2028</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b><i>B. Operating Expenditures</i></b>								
1. Travel	_____	_____	_____	_____	_____	_____	_____	_____
2. Marketing and Promotion	_____	_____	_____	_____	_____	_____	_____	_____
3. Other Services	_____	_____	_____	_____	_____	_____	_____	_____
4. Communications	_____	_____	_____	_____	_____	_____	_____	_____
5. Materials and Supplies	_____	_____	_____	_____	_____	_____	_____	_____
6. Rentals	_____	_____	_____	_____	_____	_____	_____	_____
7. Materials & Goods for Manufacture & Resale	_____	_____	_____	_____	_____	_____	_____	_____
8. Miscellaneous - Computer Hardware/Software	_____	_____	_____	_____	_____	_____	_____	_____
<b><i>Total Operating Expenditures</i></b>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>

Budget Notes (continued):

III.B.2 Operating expenditures shared with online program

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

	FY <u>2025</u>		FY <u>2026</u>		FY <u>2027</u>		FY <u>2028</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b>C. Capital Outlay</b>								
1. Library Resources	_____	_____	_____	_____	_____	_____	_____	_____
2. Equipment	_____	_____	_____	_____	_____	_____	_____	_____
<b>Total Capital Outlay</b>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
<b>D. Capital Facilities Construction or Major Renovation</b>								
<b>E. Other Costs</b>								
1. Boise State University Support	_____	_____	_____	_____	_____	_____	_____	_____
2. Expenses	_____	_____	_____	_____	_____	_____	_____	_____
Utilities	_____	_____	_____	_____	_____	_____	_____	_____
Maintenance & Repairs	_____	_____	_____	_____	_____	_____	_____	_____
3. Student Scholarships	_____	_____	_____	_____	_____	_____	_____	_____
<b>Total Other Costs</b>	<u>\$0</u>	_____	_____	_____	_____	_____	_____	_____
<b>TOTAL EXPENDITURES:</b>	<u>\$0</u>	_____	_____	_____	_____	_____	_____	_____
<b>Net Income (Deficit) to College</b>	<u>\$0</u>	<u>\$5,778</u>	<u>\$0</u>	<u>\$11,228</u>	<u>\$0</u>	<u>\$15,456</u>	<u>\$0</u>	<u>\$20,619</u>

Budget Notes (specify row and add explanation where needed; e.g., "I.A.,B. FTE is calculated using..."):  
 III. C,D,E Capital and other costs shared with online programs

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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**UNIVERSITY OF IDAHO**

**SUBJECT**

School of Health and Medical Professions

**APPLICABLE STATUTE, RULE, OR POLICY**

Idaho State Board of Education Governing Policies & Procedures, Sections III.G.  
Idaho Code § 33-113

**BACKGROUND/DISCUSSION**

As a unit of the University of Idaho (UI), we propose to establish the School of Health and Medical Professions (SHAMP) in the College of Graduate Studies. The school will provide the citizens of the State of Idaho an opportunity to fill a critical workforce shortage in healthcare. Idaho's population has been growing at an exceptional rate for five consecutive years, surpassing the national growth rate by a substantial margin. The mission of SHAMP is to improve the health of the people of Idaho by developing a robust academic health care delivery system that will educate and set forth a skilled workforce of healthcare professionals to attack this critical healthcare shortage.

To fulfill our mission, the following goals and objectives are set forth:

- To create educational opportunities to train the citizens of the State of Idaho in healthcare professions which will in turn expand and strengthen the healthcare services in Idaho.
- Expand health care academic programs to address the critical workforce shortage.
- Addressing Idaho's rural health care needs which often face the brunt of workforce shortages.
- Developing academic programs to help train and retain healthcare professionals, ensuring that even the most remote areas receive adequate medical and mental health services.
- Meeting the needs of the future which shows a continual population growth both in Idaho and nationally. This underscores the importance of establishing healthcare academic programs now to meet future workforce needs and reduce reliance on out-of-state recruitment.
- To build the school upon the highest quality, basic, applied, and clinical research available at the University of Idaho.

**IMPACT**

Idaho's population has been growing at an exceptional rate for five consecutive years, surpassing the national growth rate by a substantial margin. This population surge has strained the state's healthcare system, underscoring the necessity for expanding healthcare services within Idaho. For example, Idaho ranks at the bottom among all states in terms of practicing physicians per capita. Moreover, a

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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significant percentage of the state's physicians are approaching retirement age, further exacerbating the shortage.

Furthermore, it is quite evident that we simply do not have enough health care workers to take care of us and the situation could get worse if we do not act. The Idaho Business for Education sponsored a Health Care Summit in June of 2022 to address the workers' healthcare crisis. In the report, they explored why we have a crisis, how it affects our health care professionals and their patients, and it recommends specific ways our leaders can help solve it. One of the chief ways to solve this crisis is ramping up educational opportunities for the citizens in the State of Idaho.

Healthcare jobs in Idaho are projected to be the fastest growing professions this decade, with nearly 10,000 new jobs being projected, according to the Idaho Department of Labor. The population that the new School will serve encompasses a broad demographic from the classroom to the bedside, by training a healthcare workforce who will in turn provide essential healthcare services to the people of Idaho.

Based on this important need, we propose to create the School of Health and Medical Professions at the University of Idaho which will provide the citizens of the State of Idaho an opportunity to fill this critical workforce shortage. The school will include three new departments and six new programs, along with existing programs such as the WWAMI Medical Education program and the Athletic Training program. The areas of justification include the following:

- Critical Workforce Shortage
- Enhancing Access to Care
- Addressing Rural Healthcare Need
- Future Demand

The School is requesting 3.5 FTE; \$589,200 total General Fund personnel cost funding with benefits. In addition to the state support, the School will match the FTE and salary for a total personnel cost of \$1,080,010 (includes fringe benefits) for 7.0 FTE. This includes an Associate Dean of Curriculum, Associate Dean of Clinical Curriculum, Associate Dean of Admissions and Assessment, as well as department chairs and program coordinators. All personnel costs are based on market data and costs for comparable positions per the University of Idaho's Market-based Compensation model. Faculty and staff within WWAMI will also be redirected to the School.

The budget also consists of various expenditures to support the School and its programs. This includes \$100,000 in operating expenditures, as well as a one-time request for \$200,000 in capital outlay for equipment costs. The total amount for the FY25 budget is \$1,180,010. Each following year includes a 5% inflation added to the budget for all expenditures. Alternate funding has been identified for the

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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Physician Assistant Program, as required by legislative intent for FY 2025. Total expenditures are \$1,180,010 ongoing annually to include \$200,000 one-time funding.

**ATTACHMENTS**

- Attachment 1 – School of Health and Medical Professions Proposal
- Attachment 2 – School of Health and Medical Professions Organizational Chart
- Attachment 3 – Letters of Support
- Attachment 4 – Institution Response
- Attachment 5 – HB 734 College and Universities 2025 Appropriation

**BOARD STAFF COMMENTS AND RECOMMENDATIONS**

As provided in the proposal, the proposed new School of Health and Medical Professions will consist of three departments (Department of Medicine, Department of Clinical Medicine, and Department of Nursing). The Departments of Medicine and Clinical Medicine were approved in April 2022 under separate proposals which were established to provide medical education programming for Idaho WWAMI students and provide an administrative home for the WWAMI program. The Department of Nursing has not yet been approved and is included in the proposal as part of the request to establish the School. The School has also identified six new programs to help address the critical workforce shortage in health care. Three of these have been submitted through full proposals and will be considered by the Board under separate agenda items. These include Direct-Entry Master of Science in Nursing, Master of Science in Gerontology, and Direct-Entry Master of Physician Assistant Studies. The other three programs will be submitted separately in the future. Staff notes that the six programs were added to the university's updated three-year plan, which will be considered by the Board in August of this year.

Included in the proposal are plans to reorganize these programs once reviewed and approved by the Board and existing programs into the departments. An organizational chart is provided under Attachment 2.

- The Department of Medicine currently houses the existing WWAMI program and will include the Doctorate of Anatomical Sciences (not yet submitted), and the proposed MS in Gerontology.
- The Department of Clinical Medicine will house the Doctorate of Psychology (not yet submitted), the proposed Direct-entry Master of Physician Assistant Studies, and existing Athletic Training programs.
- The new Department of Nursing will house the proposed Direct-entry MSN and the Doctorate, Certified Registered Nurse Anesthetist (not yet submitted).

The proposal completed the review process and was presented to the Council on Academic Affairs and Programs on March 28, 2024 and to the Instruction,



**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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Research, and Student Affairs committee on May 30, 2024. Letters of support are also provided under Attachment 3.

Staff notes that the fiscal impact for the proposed School surpasses the threshold for Executive Director approval and is being forwarded to the Board for its consideration consistent with Board Policy III.G.

Idaho State University has shared concerns about the establishment of a new instructional unit that would effectively not have program offerings yet. These, in part, include Direct-Entry Master of Physician Assistant Studies, Direct-Entry Master of Science in Nursing, and Master of Science in Gerontology. ISU has expressed significant concerns about the Physician Assistant program and Master of Science in Nursing to include costly and duplicative programming, increased stress to an already overburdened preceptor system, unnecessary costs to students, and lack of collaboration with the state's existing MPAS program. Given the concerns raised, ISU is requesting that the Board hold the approval of the new school to assess concerns of the proposed programming from University of Idaho.

Staff recommends the Board consider whether there is a need for two schools of health professions within the state system focused on similar and unique health care programs. Staff recommends the Board table this proposal pending consideration of the underlying new program requests.

**BOARD ACTION**

I move to approve the request by the University of Idaho to establish the School of Health and Medical Professions as presented in Attachment 1.

Moved by \_\_\_\_\_ Seconded by \_\_\_\_\_ Carried Yes \_\_\_\_\_ No \_\_\_\_\_



Institutional Tracking No. \_\_\_\_\_

*Revised 5/15/2024-ps*

# PROPOSAL FORM

Instructional and Administrative Units

Date of Proposal Submission:	09/26/2023, Revised 3/19/2024 per OSBE Request
Institution Submitting Proposal:	University of Idaho
Name of School, School, or Division:	The School of Health and Medical Professions
Name of Department(s) or Area(s):	Department of Medicine, Department of Clinical Medicine, Department of Nursing
Title of Proposed Unit	School of Health and Medical Professions
Proposed Implementation Date:	FY25 (Fall of 2024)

Indicate whether this request is either of the following:

- New Administrative Unit                       New Instructional Unit

*[Signature]*                      3/20/24  
 Dean                                      Date                      Vice President for Research (as applicable)                      Date

*[Signature]*                      3/20/24  
 Graduate Dean (as applicable)                      Date                      OSBE Program Manager/IDCTE Director,  
 Program Services    Date

*[Signature]*                      3/20/24  
 FVP/Chief Fiscal Officer                      Date                      State Administrator, IDCTE                      Date

*[Signature]*  
 Provost/VP for Instruction                      Date                      Chief Financial Officer, OSBE                      Date

*[Signature]*  
 President                                      Date                      Chief Academic Officer, OSBE                      Date

\_\_\_\_\_  
 SBOE/Executive Director or Designee Approval                      Date



# PROPOSAL FORM

Instructional and Administrative Units

Date of Proposal Submission:	09/26/2023, Revised 3/19/2024 per OSBE Request
Institution Submitting Proposal:	University of Idaho
Name of School, School, or Division:	The School of Health and Medical Professions
Name of Department(s) or Area(s):	Department of Medicine, Department of Clinical Medicine, Department of Nursing
Title of Proposed Unit	School of Health and Medical Professions
Proposed Implementation Date:	FY25 (Fall of 2024)

Indicate whether this request is either of the following:

New Administrative Unit

New Instructional Unit

Jeffrey G. Seegmiller, Ed.D. 10/9/23

Dean Date

Vice President for Research (as applicable) Date

Graduate Dean (as applicable) Date

OSBE Program Manager/IDCTE Director, Program Services Date

FVP/Chief Fiscal Officer Date

State Administrator, IDCTE Date

Provost/VP for Instruction Date

Chief Financial Officer, OSBE Date

President Date

Chief Academic Officer, OSBE Date

\_\_\_\_\_  
SBOE/Executive Director or Designee Approval Date

1. What are the goals and objectives for the new unit?

As a unit of the University of Idaho, we intend to establish the School of Health and Medical Professions (SHAMP) which will provide the citizens of the State of Idaho an opportunity to fill a critical workforce shortage in healthcare. Idaho's population has been growing at an exceptional rate for five consecutive years, surpassing the national growth rate by a substantial margin. The mission of SHAMP is to improve the health of the people of Idaho by developing a robust academic health care delivery system that will educate and set forth a skilled workforce of healthcare professionals to attack this critical healthcare shortage.

To fulfill our mission, the following goals and objectives are set forth:

- To create educational opportunities to train the citizens of the State of Idaho in healthcare professions which will in turn expand and strengthen the healthcare services in Idaho.
- Expand health care academic programs to address the critical workforce shortage.
- Addressing Idaho's rural health care needs which often face the brunt of workforce shortages.
- Developing academic programs to help train and retain healthcare professionals, ensuring that even the most remote areas receive adequate medical and mental health services.
- Meeting the needs of the future which shows a continual population growth both in Idaho and nationally. This underscores the importance of establishing healthcare academic programs now to meet future workforce needs and reduce reliance on out-of-state recruitment.
- To build the school upon the highest quality, basic, applied, and clinical research available at the University of Idaho.

2. What is the relationship of the unit to the university's mission and priorities? Is the unit involved in instruction and if so, to what extent?

The mission of the University of Idaho is to shape the future through innovative thinking, community engagement and transformative education. The School of Health and Medical Professions stands firm in this mission by providing educational offerings that will transform the lives of our students through engaged learning and self-reflection. Our teaching and learning will include graduate, professional and continuing education offered through face-to-face instruction, technology-enabled delivery and hands-on experience. Our educational programs will strive for excellence and will be enriched by the knowledge, collaboration, diversity and creativity of our faculty, students and staff. The programs listed below have been identified as areas of workforce development to help meet the needs of the healthcare shortage.

The School of Health and Medical Professions will be the foundation on which our programs will grow. The school will be located within the College of Graduate Studies. Please note that the bulk of these specific programs are currently not being offered in our state institutions, except for the Physician's Assistant Program.

**Doctorate Psychology (PsyD) program\***

The entire state of Idaho is a mental health shortage area and Idaho has the lowest number of psychiatrists per capita. Considering overall mental health care, Mental Health America ranks Idaho 49<sup>th</sup> out of 51 (including D.C.) in adult care, 45<sup>th</sup> in youth care, while ranking 50<sup>th</sup> (second highest) in the prevalence of mental illness (19% average). The University of Idaho has a foundation of faculty and facilities that can be leveraged to develop a doctorate in this clinical

psychology program that will address deficiencies in mental health care. Once implemented, graduates will be able to focus on mental health needs related to early childhood development, adolescent, and young adult care needs, such as suicide prevention, substance use disorder and mental health counseling, and geriatric care.

#### **Direct-Entry Master of Science in Nursing (MSN)**

The University of Idaho has a foundation of faculty and facilities that can be leveraged to develop a Master of Science in Nursing (MSN). The MSN prepares the graduate for a position as a Registered Nurse, as well as a leadership role in varied settings such as hospitals, health department, clinics, among other practice areas.

#### **Doctorate – Anatomical Science Education (DAS)\***

Expert knowledge of the anatomical sciences is central to diagnosis and treatment of disease and as such in-depth coursework in this area has long been the foundation of health sciences curricula. Despite this, health sciences programs nationwide are facing an increasing shortage of highly trained anatomy educators. The Doctorate of Anatomical Sciences program is designed to train individuals to become fully qualified educators in all of the anatomical disciplines and conduct educational scholarly research for promotion and tenure.

#### **Master of Science, Gerontology**

The Master of Science in Gerontology prepares graduates to assume major leadership roles in the field of aging, primarily in the planning, administration, and evaluation of programs in the private and public sectors, as well as executive positions in the delivery of direct services to older people and their families and in the instruction of older adults and service providers.

#### **Certified Registered Nurse Anesthetist (CRNA) Doctorate\***

The practice of anesthesia is a recognized specialty in nursing. Considered an essential role to the health care workforce, nurse anesthetists provide anesthesia and related care before and after surgical, therapeutic, diagnostic, and obstetrical procedures. They also provide pain management and emergency services such as airway management.

#### **Physician Assistant (PA) - Masters**

Working interdependently with physicians, PAs (Physician Assistant) provide diagnostic and therapeutic patient care in virtually all medical specialties and settings. They take patient histories, perform physical examinations, order laboratory and diagnostic studies, prescribe medications, and develop patient treatment plans. Their job descriptions are as diverse as those of their supervising physicians, and include clinical practice, patient education, team leadership, medical education, health administration, and research.

\*Program proposals for each of these academic programs will be submitted separately to SBOE for review and approval.

### 3. What is the demand for the unit's services? What population will the unit serve?

Idaho's population has been growing at an exceptional rate for five consecutive years, surpassing the national growth rate by a substantial margin.

This population surge has strained the state's healthcare system, underscoring the necessity for expanding healthcare services within Idaho. For example, Idaho ranks at the bottom among all states in terms of practicing physicians per capita. Moreover, a significant percentage of the state's physicians are approaching retirement age, further exacerbating the shortage.

Furthermore, it is quite evident that we simply do not have enough health care workers to take care of us and the situation could get worse if we do not act. The Idaho Business for Education sponsored a Health Care Summit in June of 2022 to address the workers' healthcare crisis. In the report, they explored why we have a crisis, how it affects our health care professionals and their patients, and it recommends specific ways our leaders can help solve it. One of the chief ways to solve this crisis is ramping up educational opportunities for the citizens in the State of Idaho. Please see following white paper from the Idaho Business for Education:

<http://idahobe.org/wp-content/uploads/2022/08/HEALTH-CARE-SUMMIT-WHITE-PAPER-3.0.pdf>

Healthcare jobs in Idaho are projected to be the fastest growing professions this decade, with nearly 10,000 new jobs being projected, according to the Idaho Department of Labor. The population that the new School will serve encompasses a broad demographic from the classroom to the bedside, by training a healthcare workforce who will in turn provide essential healthcare services to the people of Idaho.

Based on this important need, we propose to create the School of Health and Medical Professions at the University of Idaho which will provide the citizens of the State of Idaho an opportunity to fill this critical workforce shortage. The school will include three new departments and six new programs, along with existing programs such as the WWAMI Medical Education program and the Athletic Training program. The areas of justification include the following:

- **Critical Workforce Shortage:** Idaho's healthcare workforce shortage poses a significant threat to public health and access to quality care. Expanding healthcare academic programs is essential to address this urgent need.
- **Enhancing Access to Care:** Building on the success of the WWAMI medical program and partnerships, this budget request will allow the University of Idaho to initiate new healthcare programs within the School of Health and Medical Professions.
- **Addressing Rural Healthcare Needs:** Rural communities often face the brunt of workforce shortages. Developing academic programs will help train and retain healthcare professionals, ensuring that even the most remote areas receive adequate medical and mental health services.
- **Future Demand:** Projected growth in demand for healthcare professionals, both in Idaho and nationally, underscores the importance of establishing healthcare academic programs now to meet future workforce needs and reduce reliance on out-of-state recruitment.

4. Describe the proposed unit's organizational structure.

The new School of Health and Medical Professions located within the College of Graduate Studies will be supported by the many excellent administrative and academic units at the University of Idaho main campus (Financial Services, Human Resources, Risk Management, Facilities Management, and Business & Administrative services). The Dean for the School of

Health and Medical Professions provides leadership to the Administration and Business Affairs division, which includes an executive assistant, support staff in finance, marketing and strategic initiatives, and laboratory management. The dean will oversee five academic and business divisions. We are currently proposing the new school and six new programs under three departments (Department of Medicine, Department of Clinical Medicine and the Department of Nursing). Our Idaho WWAMI Medical Education program is also included in this organizational structure and is under the Department of Medicine.

- 1) Department of Medicine
  - a) WWAMI Medical Education Program
  - b) Doctorate of Anatomical Sciences
  - c) Master of Science – Gerontology
  
- 2) Department of Clinical Medicine
  - a) Doctorate of Psychology
  - b) Physician Assistant
  - c) Athletic Training
  
- 3) Department of Nursing\*
  - a) Master of Science – Nursing
  - b) Doctorate, Certified Registered Nurse Anesthetist

\*To better align the proposed nursing programs with the University of Idaho policy, we propose to establish a Department of Nursing to be housed in the School of Health and Medical Professions. This will help to streamline and clarify our administrative tasks. We do not anticipate any additional cost. As instructed by board staff, this serves as our letter of notification process.

We are working closely with the College of Education, Health and Human Sciences to transition their Athletic Training Programs into the new School as shown on the attached organizational chart. In addition, our future strategic plan is to improve healthcare for all on-campus students and create “Vandal Health” which will provide hands-on experience and training for our students in these healthcare programs. Note: Please see the attached organizational chart.

5. What targets have been set to assess the proposed unit’s success in achieving objectives?

GOAL 1: A WELL, EDUCATED CITIZENRY – Continuously improve access to health and medical education for individuals of all backgrounds, ages, abilities, and economic means.

GOAL 2: CRITICAL THINKING AND INNOVATION - SHAMP will provide an environment for the development of innovative ideas, and practical and theoretical knowledge to foster the development of healthcare workers (psychologists, gerontologists, physician assistants, nurses, anatomists, and future physicians) who contribute to the health and wellbeing of Idaho’s people and communities.

GOAL 3: Effective and Efficient Delivery Systems – Deliver health and medical education, training,

research, and service in a manner which makes efficient use of resources and contributes to the successful completion of our health and medical education program goals for Idaho.

6. Briefly describe the processes that will demonstrate the quality of the unit.

1. Set School and program performance measures as a series of goals to meet over time.
2. Define goals and objectives of the school and its programs and evaluate.
3. Report and use the evaluation findings to improve the school, programs, and its courses.
4. Each program will have an assessment process to be used for continuous program improvement through the following mechanisms:
  - To evaluate how well students are achieving the intended learning outcomes, the following assessment processes will be employed:
  - Examinations and Quizzes: Regular assessments will include written examinations and quizzes to evaluate knowledge acquisition and critical thinking skills.
  - Clinical Skills Assessment: Clinical skills will be assessed through direct observation, practical examinations, and skills checklists during clinical rotations.
  - Case Studies and Care Plans: Students will complete case studies and care plans to demonstrate their ability to apply theoretical knowledge to real-world patient care scenarios.
  - Reflective Journals and Portfolios: Students will maintain reflective journals and e-portfolios, providing insights into their personal and professional growth.
  - Peer and Self-Assessment: Peer evaluations and self-assessments will be incorporated for group projects and personal reflection on skills development.

Assessment findings will be used for continuous program improvement through the following mechanisms:

- Faculty Meetings: Regular faculty meetings will involve discussions of assessment results, with a focus on identifying areas of improvement and refining teaching methods and curriculum.
- Curriculum Review: Assessment data will inform curriculum revisions, ensuring alignment with current healthcare trends and best practices.
- Faculty Development: Faculty will receive training and support to enhance assessment techniques and teaching strategies, addressing areas where student performance needs improvement.
- Feedback Loops: Continuous feedback loops will be established with students, incorporating their input to make program enhancements.

Assessment Activity Timing - Assessment activities will occur throughout the program at various frequencies:

- Formative assessments (quizzes, in-class discussions) will be ongoing throughout each semester.
- Summative assessments (midterm, final examinations) will occur at the end of relevant courses and following year one and year two. Alumni and industry surveys will be completed two years following graduation.
- Clinical skills assessments and evaluations will be conducted during clinical rotations.
- Case studies, care plans, and projects will be assigned periodically.



7. Indicate the number of students, businesses, industries, and/or other clients to be served by this unit. Include a description of faculty participation and student involvement in the unit if applicable.

Entering Enrollment	Program/Degree Title
15	Direct Entry – Master of Science Degree, Nursing (MSN)
20	Doctorate – Anatomical Science Education (DAS) - Self Support
20	Master of Science – Gerontology – Self Support
10	Certified Registered Nurse Anesthetist (CRNA) - Self Support
20	Physician Assistant
15	Doctorate of Psychology (PsyD)
Academic Personnel	Description
11	Fulltime Faculty
4.5	Parttime Faculty
7	Administration and Staff
Hospital/Clinic Training Sites	Location
Gritman Medical Center and Medical Clinics	Moscow, Idaho
St. Joseph Regional Medical Center	Lewiston, Idaho
Tri State Hospital and Medical Clinics	Clarkston, Washington
Whitman Hospital and Medical Clinics	Colfax, Washington
Pullman Regional Hospital and Medical Clinics	Pullman, Washington
Kootenai Medical Center	Coeur d’Alene, Idaho
Bonner General Health	Sandpoint, Idaho
North Idaho Acute Care Hospital	Post Falls, Idaho

8. Financial Impact: Using the **budget template**, provide a narrative budget summarizing the needs and requirements for implementing the new unit.

The WWAMI Medical Education Program has recently submitted a request for Fiscal Year 2025 to the State of Idaho for educational support to create a new School of Health and Medical Professions (SHAMP). Based on feedback from policymakers and Idaho business leaders, our request is dedicated to addressing healthcare workforce needs, one of the most pressing issues the state is facing today. We acknowledge the importance of flexibility to adapt to evolving challenges and workforce needs of the future. The budget summary is as follows:

Positions will be full-time, and part-time and most will be benefit-eligible.

Healthcare Workforce – this request for the new School includes the programs that will require State support (Doctorate in Psychology, along with state support for the new School which includes Associate Dean of Curriculum, Associate Dean of Clinical Curriculum, Associate Dean of Admissions and Assessment, as well as department chairs and program coordinators. (Requesting 3.5 FTP; \$589,200 total General Fund PC funding with benefits). In addition to the state support, SHAMP will match the FTE and salary for a total personnel cost of \$1,080,010 (includes fringe benefits) for 7.0 FTE.

All personnel costs are based on market data and costs for comparable positions as per the University of Idaho's Market-based Compensation model.

The budget included in this proposal not only includes the budget request for FTE, salary and benefits that were submitted to the State of Idaho for FY25. It is necessary to include various expenditures to support the School and its programs. Therefore, the budget for this proposal includes \$100,000 in operating expenditures, as well as a one-time request for \$200,000 in capital outlay for equipment costs. The total amount for the FY25 budget is \$1,180,10.00. Each following year includes a 5% inflation added to the budget for all expenditures.

Current staff and faculty will be re-directed. Faculty and staff within WWAMI will be redirected to the new School of Health and Medical Professions. Please see the organizational chart under supportive documentation.

Alternate funding has been identified for the Physician Assistance Program, as required by legislative intent for FY 2025.

In conclusion, the primary beneficiaries, if this request is granted, are the individuals and communities who will be served by future PAs or Nurses, Clinical Psychologists, and other graduates of the new School of Health and Medical Professions. Thus, the impact could encompass all of Idaho. The approval of the proposal will reduce shortages of health professionals and enable Idahoans seeking care to obtain it. Many Idahoans who seek these health professional degrees will be more likely to stay in Idaho to practice.

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

**Program Resource Requirements.**

- Indicate all resources needed including the planned FTE enrollment, projected revenues, and estimated expenditures for the first **four** fiscal years of the
- Include reallocation of existing personnel and resources and anticipated or requested new resources.
- Second and third year estimates should be in constant dollars.
- Amounts should reconcile subsequent pages where budget explanations are provided.
- If the program is contract related, explain the fiscal sources and the year-to-year commitment from the contracting agency(ies) or party(ies).
- Provide an explanation of the fiscal impact of any proposed discontinuance to include impacts to faculty (i.e., salary savings, re-assignments).

**I. PLANNED STUDENT ENROLLMENT**

	<u>FY 25</u>		<u>FY 26</u>		<u>FY 27</u>		<u>FY 28</u>	
	FTE	Headcount	FTE	Headcount	FTE	Headcount	FTE	Headcount
A. New enrollments								
B. Shifting enrollments								
<b>Total Enrollment</b>	0	0	0	0	0	0	0	0

**II. REVENUE**

	<u>FY 25</u>		<u>FY 26</u>		<u>FY 27</u>		<u>FY 28</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
1. New Appropriated Funding Reques	\$589,200.00	\$100,000.00	\$589,200.00		\$589,200.00		\$589,200.00	
2. Institution Funds	\$590,810.00	\$100,000.00	\$590,810.00		\$590,810.00		\$590,810.00	
3. Federal								
4. New Tuition Revenues from Increased Enrollments								
5. Student Fees								
6. Other (i.e., Gifts)								
<b>Total Revenue</b>	\$1,180,010	\$200,000	\$1,180,010	\$0	\$1,180,010	\$0	\$1,180,010	\$0

***Ongoing is defined as ongoing operating budget for the program which will become part of the base.  
One-time is defined as one-time funding in a fiscal year and not part of the base.***

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

**III. EXPENDITURES**

	<u>FY 25</u>		<u>FY 26</u>		<u>FY 27</u>		<u>FY 28</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b>A. Personnel Costs</b>								
1. FTE	<u>7.0</u>		<u>7.0</u>		<u>7.0</u>		<u>7.0</u>	
2. Faculty								
3. Adjunct Faculty								
4. Graduate/Undergrad Assistants								
5. Research Personnel								
6. Directors/Administrators	<u>695000</u>		<u>695000</u>		<u>695000</u>		<u>695000</u>	
7. Administrative Support Personnel	<u>120000</u>		<u>120000</u>		<u>120000</u>		<u>120000</u>	
8. Fringe Benefits	<u>265010</u>		<u>265010</u>		<u>265010</u>		<u>265010</u>	
9. Other:								
<b>Total Personnel and Costs</b>	<u><u>\$1,080,010</u></u>	<u><u>\$0</u></u>	<u><u>\$1,080,010</u></u>	<u><u>\$0</u></u>	<u><u>\$1,080,010</u></u>	<u><u>\$0</u></u>	<u><u>\$1,080,010</u></u>	<u><u>\$0</u></u>

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**

**JUNE 13, 2024**

**ATTACHMENT 1**

	<u>FY 25</u>		<u>FY 26</u>		<u>FY 27</u>		<u>FY 28</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b>B. Operating Expenditures</b>								
1. Travel	\$20,000.00		\$20,000.00		\$20,000.00		\$20,000.00	
2. Professional Services	\$10,000.00		\$10,000.00		\$10,000.00		\$10,000.00	
3. Other Services								
4. Communications	\$20,000.00		\$20,000.00		\$20,000.00		\$20,000.00	
5. Materials and Supplies	\$40,000.00		\$40,000.00		\$40,000.00		\$40,000.00	
6. Rentals								
7. Materials & Goods for Manufacture & Resale								
8. Miscellaneous	\$10,000.00		\$10,000.00		\$10,000.00		\$10,000.00	
<b>Total Operating Expenditures</b>	<u>\$100,000</u>	<u>\$0</u>	<u>\$100,000</u>	<u>\$0</u>	<u>\$100,000</u>	<u>\$0</u>	<u>\$100,000</u>	<u>\$0</u>

	<u>FY</u>		<u>FY</u>		<u>FY</u>		<u>FY</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b>C. Capital Outlay</b>								
1. Library Resources								
2. Equipment		\$200,000.00						
<b>Total Capital Outlay</b>	<u>\$0</u>	<u>\$200,000</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**

**JUNE 13, 2024**

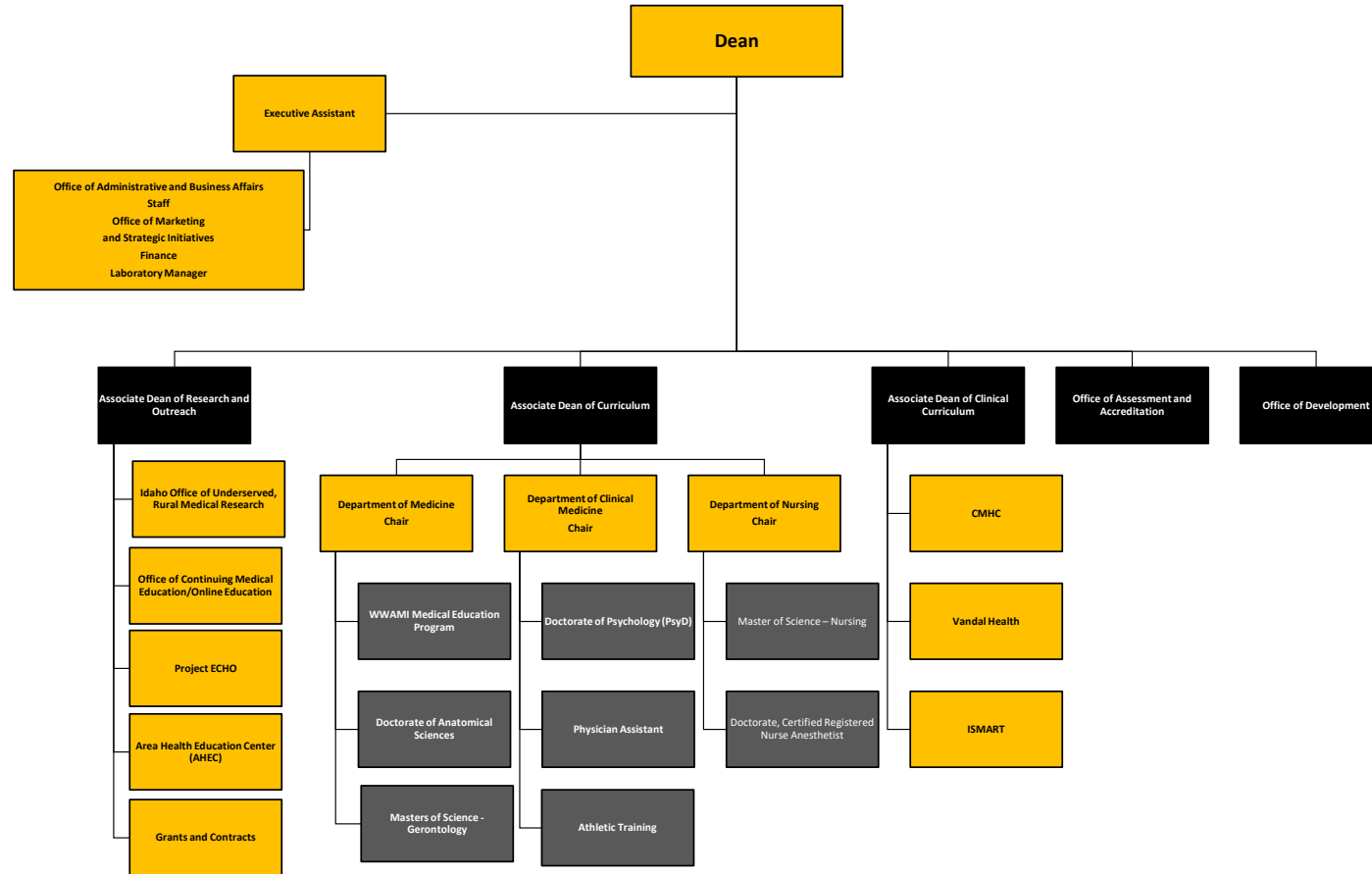
**ATTACHMENT 1**

	FY _____		FY _____		FY _____		FY _____	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b>D. Capital Facilities Construction or Major Renovation</b>	_____	_____	_____	_____	_____	_____	_____	_____
<b>E. Other Costs</b>								
Utilities	_____	_____	_____	_____	_____	_____	_____	_____
Maintenance & Repairs	_____	_____	_____	_____	_____	_____	_____	_____
Other _____	_____	_____	_____	_____	_____	_____	_____	_____
<b>Total Other Costs</b>	<u>    \$0</u>	<u>    \$0</u>	<u>    \$0</u>	<u>    \$0</u>	<u>    \$0</u>	<u>    \$0</u>	<u>    \$0</u>	<u>    \$0</u>
 <b>TOTAL EXPENDITURES:</b>	<u>\$1,180,010</u>	<u>\$200,000</u>	<u>\$1,180,010</u>	<u>\$0</u>	<u>\$1,180,010</u>	<u>\$0</u>	<u>\$1,180,010</u>	<u>\$0</u>
 <b>Net Income (Deficit)</b>	<u>    \$0</u>	<u>    \$0</u>	<u>    \$0</u>	<u>    \$0</u>	<u>    \$0</u>	<u>    \$0</u>	<u>    \$0</u>	<u>    \$0</u>

Budget Notes (specify row and add explanation where needed; e.g., "I.A.,B. FTE is calculated using..."):

III.A	Salary costs are split 50/50 between Appropriation and Institutional funds.
III.A.1	FTE - 3.5 Appropriation / 3.5 Institution
III.A.8	Fringe Benefits - 41.3% staff/Administrative/31% Director/Administrators
III.B	Operating expenditures - these were not included in the budget request to the State of Idaho for FY25, but are necessary to support the School
III.C	Capital Outlay - Equipment - Computers, components, software (one time)

# School of Health and Medical Professions



April 15, 2024

William F. Ganz, MD, FACS  
1502 West Bellerive Lane  
Coeur D'Alene, ID 83814  
208-755-7707

Jeff Seegmiller, Ed.D., AT  
Regional Dean, Director & Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

I am writing to express my support for the University of Idaho and the proposed health professions program, including the proposed School of Health and Medical Professions.

As a practicing neurosurgeon in Coeur D'Alene, Idaho since 2001 I have seen rapid growth of our population, but unfortunately I have not seen commensurate growth in health care professionals. The recent Covid 19 pandemic exposed the marginal health care workforce and because of over-worked health care professionals, many of our best nurses, physician assistants, respiratory therapists, OR technicians, physical and occupational therapists retired from the workforce. Even a number of physicians retired early because of the workload burnout. As you may be aware, Idaho ranks near the bottom in the ratio of physicians and nurses to patients. There is no sign of decreased population growth in Idaho and we need to be prepared to train more physicians, nurses, PAs and other health care workers to care for our growing population.

I am encouraged to learn of the direct entry Master of Science in Nursing(MSN), the Doctor of Psychology in Clinical Psychology(PsyD), the Doctor of Anatomical Sciences(DAS), the Certified Nurse Anesthetist(CRNA) DNP degree, the Masters of Science in Gerontology(MS), and the Physician Assistant(PA) training programs. In my experience, Physician Assistants are particularly in short supply and difficult to recruit from out of our state. Also, there is an acute need for Clinical Neuropsychologists; there are none practicing in North Idaho and it is a significant need.

As you are aware, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. These are daunting deficits in our ability to deliver health care to the citizens of our state.

The best way to recruit health care workers to our state is to train them in our state. There is a critical shortage in training programs in the State of Idaho. This initiative by the University of Idaho is key starting solution to address this issue which is getting worse each year. This what our educational institutions should be addressing and promptly! Have you tried getting in to see



a health care provider lately? It typically takes weeks to get into see a physician: primary care and specialists, which is not good care.

I fully support these proposed academic programs and urge the Idaho State Board of Education to act expeditiously to approve these programs. The School of Health and Medical Professions is a vital asset to our state, but needs to grow to meet the needs of our growing population.

Sincerely,

A handwritten signature in black ink that reads "William F. Ganz, MD, FACS". The signature is written in a cursive style.

William F. Ganz, MD, FACS

Kootenai Neurosurgery and Spine

Steven E. Ozeran, MD, FACS



Steven E. Ozeran,  
MD, FACS

Board-Certified  
American Board  
of Plastic Surgery,  
American Board of  
Surgery

Fellow  
American College of  
Surgeons

Residency  
Plastic Surgery,  
University of  
Wisconsin-Madison;  
General Surgery,  
University of  
California-Davis

MD  
University of  
Chicago-Pritzker

Member  
American Society  
of Plastic Surgeons,  
American Medical  
Association,  
Idaho Medical  
Association

Surgical  
procedures:

- Breast enlargement
- Breast reduction
- Breast lift
- Breast reconstruction
- Blepharoplasty (eyelid surgery)
- Gynecomastia (male breast reduction)
- Tummy tuck
- SmartLipo MPX body contouring
- Body lift after weight loss
- Reconstructive surgery
- Hand surgery
- Scar Revision

Non surgical  
enhancements:

- Botox® Cosmetic
- Restylane®
- Radiesse®
- Cosmetic peels
- Dermabrasion
- Obagi® skin care products

For your comfort &  
convenience:

- Caring, highly experienced staff
- Accredited surgery center
- Insurance accepted
- Visa & MasterCard welcome

Jeff Seegmiller, Ed.D., AT

Regional Dean/Director, Professor

Idaho WWAMI Medical Education Program

University of Idaho

Dear Dr. Seegmiller:

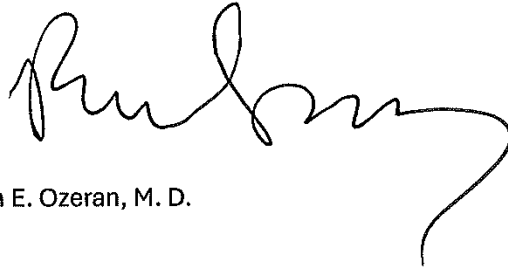
I am writing to express my support for the University of Idaho and their proposed health professions programs. I understand that these include the direct entry Master of Science in Nursing, the Doctor of Psychology, in Clinical Psychology, the Doctor of Anatomical Sciences, the Certified RN Anesthetist degree (CRNA), the Master's of Science in Gerontology, and Physician's Assistant (PA) training programs. All of these programs would greatly help improve the state's healthcare infrastructure and help with medical provider shortages across the state. As a physician in Idaho for nearly 30 years, I can personally attest to decline in patients' ability to access necessary healthcare evaluations and treatments; it's quite common for patients to wait weeks, sometimes months for appointments with their doctors or healthcare providers. Emergency rooms have become overburdened as patients need somewhere to go for care and this adds further to the financial stress on our healthcare systems. Some patient delays can result in delayed diagnoses with associated increased morbidity and even death. The value in the establishment of these training programs as there is already tremendous stress on our local healthcare systems. We need more qualified healthcare providers. And as the population of the state has shown tremendous growth, further adding stress to an already strained system, educating more healthcare providers is definitely needed as this is not a short-term problem.

I believe that these proposed programs will not complete with existing healthcare programs at other institutions as this phenomenon is not unique to Idaho. There is currently a national shortage of healthcare providers, but more dire in Idaho and some other states; and it would behoove us to educate our own. One of the things we see with local training programs is that many of these providers continue to practice in this state which further helps Idaho meet its goal of treating its citizens. These needs are not only limited to the present, but with population growth, they are expected to worsen. Currently, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HPSA's) for medical care, and 100% are HPSA's for mental health. With

the continued population growth and the current shortage of training facilities, these crises will only become more dire.

I thus fully support these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

A handwritten signature in black ink, appearing to read "Steven E. Ozeran". The signature is fluid and cursive, with a long, sweeping tail that extends to the right.

Steven E. Ozeran, M. D.



Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Northwest Specialty Hospital, I am writing to express our support for the University of Idaho and their proposed health professions programs, including the direct entry Master of Science in Nursing (MSN) and the Physician Assistant (PA) training programs. As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) and Idahoans are left with severe shortages of healthcare access.

Importantly, these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs.

Sincerely,



Rick Rasmussen

CEO, Northwest Specialty Hospital

[Rick.Rasmussen@nwsh.com](mailto:Rick.Rasmussen@nwsh.com) // 208-262-2310

To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

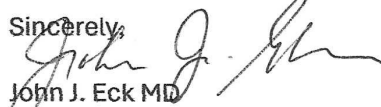
Thank you for your continued focus on the critical shortages in medical providers that Idahoans experience and for providing solutions to this challenge. I was very happy that the state legislature approved funding for the Doctorate Psychology (PsyD), Direct-Entry Master of Science in Nursing (MSN), Doctorate - Anatomical Science Education (DAS), Master of Science, Gerontology, Certified Registered Nurse Anesthetist (CRNA) Doctorate, and the Physician Assistant (PA)/Masters programs. This approval was imperative and reflects the core values of Idahoans to create solutions that reflect the unique needs of our state and our communities.

As an independent primary care physician practicing for over 30 years and a business owner, I have seen the need first-hand for more medical professionals and the consequences of provider shortages. Workforce shortages in the medical professions affect everyone: Patients, other employees, business owners, medical providers, and our great state. The strain on our current system not only affects individuals personally but also affects society at large by decreasing productivity, decreasing revenues, and making it more difficult for businesses to find and retain talent. Our future workforce throughout all sectors will continue to be affected if we do not respond to the current healthcare challenge.

As a physician, patient, business owner, and medical provider working in and with health organizations, I believe the University of Idaho health professions programs, including the proposed School of Health and Medical Professions are essential to the health of Idaho. Of note, these programs will not compete with existing healthcare programs at other institutions but will contribute to improving the diversity of the healthcare workforce which will be required in the future for a healthy Idaho.

I stand in full support of these academic programs and strongly encourage the State Board of Education to approve these programs as well as the School of Health and Medical Professions quickly.

Sincerely,



John J. Eck MD  
208 Solutions LLC  
188 W. Hulls Ridge Ct.  
Boise, Idaho 83702



Jeff Seegmiller, Ed.D., AT  
Regional Dean/Director, Preofessor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

I retired 2 years ago after 41 years of emergency medicine practice at St. Joseph's Regional Medical Center in Lewiston, Idaho. I am writing to support the proposed School of Health and Medical Professions.

As an emergency physician, I was acutely aware of the shortage of mental health professionals, nurses and physician assistants. The need for mental health care grew exponentially during my years in practice, but when I left my hospital, our mental health services had been reduced by 75% from the level of care 15 years earlier. Due to difficulties in nurse recruitment, we had to staff positions with locum tenens who, although well qualified, had no commitment to the community and were much more expensive than hiring a local person. A training program at the University of Idaho would undoubtedly help alleviate these shortages.

I am especially excited about the prospect of the Masters of Gerontology program (and not just because I am now a senior citizen.) Gerontology was historically a neglected area of medicine and given our aging population, the need for practitioners specializing in care of the aged continues to grow.

I believe that people often choose to work close to where they have received their medical training, so a program at the University of Idaho would benefit Idaho. I urge the Idaho State Board of Education to approve these programs.

Sincerely,



Jay Hunter M.D.

PO Box 415  
Hayden, ID 83835  
April 8, 2024

Jeff Seegmiller, Ed.D.  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
The University of Idaho

Dear Dr. Seegmiller,

As a retired general surgeon and strong supporter of medical education, I am writing to express my support for the University of Idaho and their proposed health professions programs, including the establishment of the School of Health and Medical Professions.

I am pleased to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs. The demand for medical professionals in these fields is high. Expanded medical education in these particular areas will help Idaho address serious health provider shortages.

The University of Idaho is well-positioned to develop and implement expanded medical education programs. It is important to note that the proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed

Expanded medical education is essential for the overall future of healthcare. Developing the next generation of medical professionals will help to ensure that patients have access to high-quality care.

I fully support these academic programs and urge the Idaho State Board of Education to move quickly with their approval for the establishment of the School of Health and Medical Professions.

Sincerely,

Thomas K. Thilo, MD  
tomthilo@hotmail.com  
(208) 661-1114

# John Huckabay

7800 S Swan Ct Coeur dAlene ID 83814

[dhuckabay@aol.com](mailto:dhuckabay@aol.com) (208) 771 4426

14 April 2024

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Jeff:

A few comments on your proposed expansion of the Medical School in Moscow. It can go without saying that I am deeply vested in the School. I fully believe that your proposed expansion of programs is badly needed. All help address the critical shortage of health care in Idaho. As the lowest ranked State in the US in medical professionals per population we need to do all we can to reverse this trend to provide better care for our population.

The program that I believe has the potential for quickest results is the Physician Assistant one. I work with other institutions with these programs. It fits very well with the MD instruction in that 23 of the 25 month program is identical. I realize that the purpose of the Education Board is to assure that costs are not duplicated with competing programs. This is not the case with your proposal as there are very few new costs and by adding to the existing classes you will actually lower the per student cost.

I have my personal medical care provided by practices that have PA's as the first line in patient care. I am always amazed at the quality and empathy that I see. Several of these practices are run by past students that I have supported that are now MD's. I get to chat with them about their experiences with the PA's and have never had a negative comment.

I will tell you a bit of a story on the CRNA program. As you are aware I worked in the military. I used to need to put in the nerve blocks for certain surgeries. It normally takes three, my average time was about 30 minutes, and I did a lot of them. I had emergency surgery a few years back. The CRNA completed the block procedure in less than 10 minutes, and was gentle in doing it. Obviously, I was impressed.

I believe that your proposed expansion is needed quickly. You have shown that you manage the School with limited overhead. I work with many other School's and none have a lower support and administration to student ratio. This shows me that you are not trying to build an empire at the burden of the taxpayers.

I fully support your proposals to the point that should they come to pass I will increase my financial support to the students in these programs to help assure their success. At least with the PA and CRNA ones you will find that most of the applicants will be alternative students, meaning they have come from the workforce and have obligations. It is critical to assist these people to rapidly become productive.

I certainly hope that you gain rapid approval for the expansion of education in Moscow.

Regards,

John Huckabay  
Via email



## JACK T. RIGGS, M.D.

04-25-24

To: Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

From: Jack T. Riggs, MD

Dear Dr. Seegmiller,

I am writing today to express my enthusiastic support for the **University of Idaho** and their newly proposed health professions programs, including the proposed **School of Health and Medical Professions (SHAMP)**.

The addition of direct entry Master of Science in Nursing (MSN), Doctor of Psychology in Clinical Psychology (PsyD), Doctor of Anatomical Sciences (DAS), Certified Registered Nurse Anesthetist (CRNA) DNP degree, Master of Science in Gerontology (MS), and Physician Assistant (PA) training programs at the University of Idaho will truly benefit all the citizens of Idaho.

As you know, there is a critical need for increased access to specialized professionals in our state. Currently, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. Too many Idahoans are left with severe shortages of healthcare access.

I believe these proposed programs would improve and increase a healthcare workforce that is highly needed. A statewide shortage in healthcare workers is a combination of significant population growth combined with too few academic programs to meet the state needs. A growing and aging population will continue to strain the state's healthcare system, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

I fully support these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,



Jack T. Riggs, MD  
Former Lt. Governor of Idaho  
Former WWAMI Student E-76  
Member, WWAMI Advisory Board  
[jack@rephasing.com](mailto:jack@rephasing.com)  
208-818-1763



J-U-B COMPANIES

THE  
LANGDON  
GROUPGATEWAY  
MAPPING  
INC.

April 24, 2024

Dr. Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of J-U-B ENGINEERS, Inc., we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are excited to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As a midsize employer with our entire employee base residing in the intermountain west, we recognize the critical need for increased access to specialized professionals in our community and state. In recent years there has been a decline in healthcare access or services for many populations in our region. Quality healthcare is a primary concern for our employees and a critical recruitment aspect for attracting quality talent to our organization.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

**J-U-B ENGINEERS, Inc.**

A handwritten signature in black ink, appearing to read "Brian Smith".

Brian Smith, P.E.  
President/CEO



## Coeur d'Alene Public Schools

DISTRICT ADMINISTRATIVE CENTER  
1400 N. Northwood Center Court, Coeur d'Alene, ID 83814

OFFICE 208.664.8241

FAX 208.664.1748

[www.cdaschools.org](http://www.cdaschools.org)

April 29, 2024

Jeff Seegmiller, Ed.D., LAT, ATC  
Regional Dean and Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho  
1875 Perimeter Drive MS 4061  
Moscow, ID 83844-4061

Dear Dr. Seegmiller,

On behalf of Coeur d'Alene District 271, we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

Health education plays a pivotal role in improving community well-being by promoting knowledge and healthy practices across all age groups. As an academic organization we know the importance of health education and development allowing increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

A handwritten signature in black ink, appearing to read 'Shon Hocker', is written over a horizontal line.

Dr. Shon Hocker  
Superintendent of Schools  
Coeur d'Alene Public School District 271  
[shon.hocker@cdaschools.org](mailto:shon.hocker@cdaschools.org)  
208-664-8241 ext. 10008

**INVEST | INSPIRE | INNOVATE**

We invest in each student to prepare, challenge and advance  
well-educated, resilient and future-ready citizens.



2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

Dear Dr. Seegmiller,

In my capacity as the Chief Nursing Officer of Kootenai Health, I wish to express our strong support for the University of Idaho's proposed School of Health and Medical Professions (SHMP).

The introduction of the direct entry Master of Science in Nursing (MSN), Doctor of Psychology in Clinical Psychology (PsyD), Doctor of Anatomical Sciences (DAS), Certified Registered Nurse Anesthetist (CRNA) DNP degree, Master's of Science in Gerontology (MS), and Physician Assistant (PA) training programs reflects a proactive response to the escalating health care needs of our community and state.

At Kootenai Health, we recognize the critical shortage of healthcare professionals across Idaho, especially in medically underserved areas. This shortage not only challenges our ability to meet the diverse healthcare needs of our population but also underscores the importance of expanding access to specialized health care education.

These proposed programs align closely with our commitment to excellence in patient care and nursing education. By enhancing the availability of advanced nursing education opportunities, we can cultivate a highly skilled workforce capable of delivering comprehensive and compassionate care to our patients.

Moreover, we firmly believe that these programs will complement existing health care initiatives, contributing to the overall enhancement of health care services throughout Idaho. As our population continues to grow and age, the demand for qualified health care professionals will only intensify, making the approval of these programs all the more urgent.

In conclusion, I am proud to lend my full support to the University of Idaho's efforts to establish the School of Health and Medical Professions and its associated programs. I urge the Idaho State Board of Education to approve these initiatives, as they represent a significant step forward in addressing our state's healthcare challenges.

Thank you for your dedication to advancing healthcare education and improving the health and well-being of all Idahoans.

Sincerely,

A handwritten signature in black ink, appearing to read "Kelly Espinoza", written over a circular scribble.

Kelly Espinoza, PhD, RN

Chief Nursing Officer, Kootenai Health



2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

To:  
Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

As the Executive Vice President of Kootenai Clinic, I am pleased to convey our organization's support for the University of Idaho's proposed School of Health and Medical Professions (SHMP).

We are excited about the potential of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs to address the pressing health care needs in our community and state.

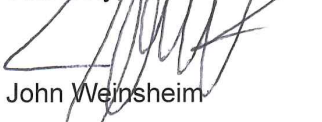
At Kootenai Clinic, we are keenly aware of the challenges posed by the shortage of specialized health care professionals across Idaho. With 98% of Idaho counties designated as Health Provider Shortage Areas (HSPAs) for medical care and 100% for mental health, there is an urgent need to expand access to quality health care services.

We firmly believe these proposed programs will not only alleviate the shortage of health care professionals, but also enhance the overall quality of care provided to Idaho residents. By addressing the growing demand for health care services, we can improve health outcomes and enhance the well-being of our community.

Moreover, we view these programs as complementary rather than competitive, recognizing the need for collaboration among academic institutions to meet the evolving health care needs of our state. As Idaho's population continues to grow and age, the strain on our health care infrastructure will only increase, further highlighting the importance of expanding health care services within the state.

In conclusion, I urge the Idaho State Board of Education to approve the establishment of the School of Health and Medical Professions and its associated programs. Kootenai Clinic stands ready to support these initiatives and looks forward to collaborating with the University of Idaho to advance health care education and improve access to quality care for all Idahoans.

Sincerely,



John Weinsheim

Executive Vice President of Kootenai Clinic





2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

As a dedicated board member of Kootenai Health, I am pleased to convey our steadfast support for the University of Idaho's proposed health professions programs, including the establishment of the School of Health and Medical Professions.

The inclusion of the direct entry Master of Science in Nursing (MSN), Doctor of Psychology in Clinical Psychology (PsyD), Doctor of Anatomical Sciences (DAS), Certified Registered Nurse Anesthetist (CRNA) DNP degree, Master's of Science in Gerontology (MS), and Physician Assistant (PA) training programs exemplifies a proactive approach to addressing the pressing health care needs of our community and state.

Kootenai Health recognizes the profound impact of health care workforce shortages on our region, with the majority of Idaho counties designated as Health Provider Shortage Areas (HSPAs) for medical and mental health care. These shortages underscore the critical need for expanded access to specialized health care professionals.

Importantly, we view these proposed programs as complementary rather than competitive, aimed at bolstering the existing health care workforce to better serve our growing population. The demographic surge of aging Idahoans further emphasizes the urgency of expanding health care services within the state.

Therefore, we wholeheartedly endorse these academic programs and urge the Idaho State Board of Education to expeditiously approve the establishment of the School of Health and Medical Professions, along with the proposed programs.

Thank you for your dedication to advancing health care education and improving access to quality care for all Idahoans.

Sincerely,



Dave Bobbitt

Secretary and Treasurer, Kootenai Health Board of Trustees



KootenaiHealth

2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

To:  
Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

I am writing to express Kootenai Health's support for the proposed School of Health and Medical Professions (SHAMP) at the University of Idaho. As the CEO of Kootenai Health, the regional referral center for the ten northern counties of Idaho, I can confidently say the creation of SHAMP will greatly contribute to the advancement of health care delivery in our state.

The programs outlined in the proposal for SHAMP align closely with the evolving health care needs of Idahoans. We recognize the immense value they would bring to our health system and the patients we care for. In particular, there is a critical shortage of Advanced Practice Providers (APPs) in North Idaho, and the only programs in our region are offered through private, out-of-state universities.

Each degree, Clinical Psychology (PsyD), Direct-Entry Master of Science in Nursing (MSN), Doctorate in Anatomical Science Education (DAS), Master of Science in Gerontology, Certified Registered Nurse Anesthetist (CRNA) DNP degree, and Physician Assistant (PA) Master's programs are all critical in preparing highly skilled health care professionals to meet the complex demands of quality health care delivery.

We firmly believe the establishment of SHAMP will enhance educational opportunities for aspiring health care professionals in our community, fostering a pipeline of talent that will contribute to the improvement of health care delivery and patient outcomes. Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

Kootenai Health fully supports the establishment of the School of Health and Medical Professions at the University of Idaho. We are confident that SHAMP will play a pivotal role in shaping the future of health care education and practice, and we look forward to the opportunity to collaborate closely with the university in realizing this vision.

Sincerely,



Jameson C. Smith  
CEO, Kootenai Health



COEUR D'ALENE AREA  
ECONOMIC DEVELOPMENT CORPORATION

3731 N Ramsey Rd, Suite 110B ~ Coeur d'Alene, ID 83814 ~ 1.208.667.4753

April 29, 2024

To: Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of the Coeur d'Alene Area Economic Development Corporation/Jobs Plus, Inc., we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As an organization dedicated to economic development and assisting businesses with workforce challenges, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages for healthcare access.

We strongly believe these proposed programs will not compete with existing healthcare programs at other institutions, but rather, would improve talent supply that is highly needed. Statewide shortages in our healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

Gynii A Gilliam, President/CEO  
Email: [gynii@cdaedc.org](mailto:gynii@cdaedc.org); Phone: (208)667-4753

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President & CEO



**KootenaiHealth**

2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Kootenai Health, we are writing to express our support for the University of Idaho and its proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care, and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would improve a highly needed workforce. Statewide shortages in the healthcare workforce are related to drastic population growth in the state and a paucity of academic programs to meet the state's needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We fully support these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

**Kelly McCarthy Pöl**, DNP, RN, NP-D, CHSE  
Manager Clinical Education and Simulation

Kootenai Health  
2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.5189  
kpol@kh.org



To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Syringa Hospital & Clinics, we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are excited to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As a rural hospital dedicated to advancing improving the health and well-being of our community, we recognize the critical need for increased access to specialized professionals in both our local community and in our state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

We believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather grow and develop a workforce that is greatly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

Abner King, FACHE  
Chief Executive Officer  
[aking@syringahospital.org](mailto:aking@syringahospital.org)  
208-983-8525



To:  
Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Bonner General Hospital, we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

John Hennessy  
Chief Executive Officer  
Bonner General Hospital



25 Jacobs Gulch • Kellogg, Idaho 83837 • (208) 784-1221 • Fax (208) 784-0961

To:  
Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Shoshone Medical Center, I am writing to express support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

Several of the planned programs would help expand access to critical healthcare and mental health services in Idaho. As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. Shoshone county is a designated Health Provider Shortage Area (HSPA) for both medical care and mental health services. Providing these educational pathways will help alleviate the critical shortage of services we currently experience. Population growth and an aging population will continue to increase demand for medical and mental health services, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

Thank you for the opportunity to express support for these academic programs; I urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,



Paul Lewis  
CEO  
[plewis@shomed.org](mailto:plewis@shomed.org)

To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of the Coeur d'Alene Casino Resort Hotel, we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

Laura Penney, CEO

[lpenny@cdacasinocom](mailto:lpenny@cdacasinocom)





# North Idaho College

1000 West Garden Avenue, Coeur d'Alene, Idaho 83814  
[www.nic.edu](http://www.nic.edu)

**President's Office**  
(208)769-3303 phone  
[nick.swayne@nic.edu](mailto:nick.swayne@nic.edu)

18 March 2024

Idaho State Board of Education  
650 West State Street, 3rd Floor  
Boise, ID 83702

Dear Idaho State Board of Education,

I am writing to express my wholehearted support for the University of Idaho and their proposed health professions programs. As President of North Idaho College, I am acutely aware of the healthcare challenges facing our state, particularly in northern Idaho, where shortages of healthcare providers have reached unprecedented levels.

The statistics paint a stark picture: with 98% of the state designated as health professional shortage areas, our citizens are left grappling with limited access to essential healthcare services. This not only impacts our economy but, more importantly, jeopardizes the well-being of our community members.

The University of Idaho's proposal to introduce a doctorate in clinical psychology (PsyD), a Physician Assistant program, and a direct entry Master of Science in Nursing are much-needed steps towards addressing these critical shortages. These programs are tailored to meet the specific needs of our region, where the shortage of healthcare professionals is most acute.

It's important to emphasize that these proposed programs are not intended to compete with existing offerings at other universities, but rather to complement and enhance the range of healthcare education available within the state. There is a clear and demonstrated need for these programs, with a level of interest that is currently underserved.

As we look towards the future, it is imperative that we invest in the growth of all health professional programs to ensure the vitality of our healthcare workforce. The University of Idaho, as our state's top research institution, is well-positioned to play a leading role in this endeavor.

(continued)

I am enthusiastic about the prospect of collaboration between the University of Idaho's new health programs and our own North Idaho College health professions programs to expand collaborative initiatives. Together, we can work towards meeting the healthcare needs of northern Idaho and the state as a whole.

Thank you for your attention to this matter. I stand ready to offer any assistance or support necessary to bring these vital programs to fruition.

Sincerely,

A handwritten signature in black ink that reads "Nick Swayne". The signature is written in a cursive, flowing style.

Nick Swayne, PhD  
President, North Idaho College



**Idaho State  
University**

Idaho State Board of Education

March 28th, 2024

Re: University of Idaho Proposal to Form College of Health and Medical Professions

This letter constitutes Idaho State University's response to the University of Idaho's recent proposal to inaugurate a School of Health and Medical Professions. This proposal rests on the assumption that the School will have 3 viable programmatic offerings: a Physician Assistant program, a Master of Science in Nursing program, and a Master of Science in Gerontology program. ISU has expressed significant reservations about the Physician Assistant program and the Master of Science in Nursing program, as these programs will be ineffectual in responding to state needs, result in costly and duplicative programming, stress an already overburdened clinical preceptor system, expose students to unnecessary costs, and fail to leverage the state's existing investment in other institutions of higher education that could partner with them on expanding programming. Should the State Board of Education wish to see any additional data not contained in our individual proposal responses to assess the validity of these concerns, we welcome the opportunity to provide such data.

Given the significant reservations about the proposed programming, and the necessity of such programming to justify the instantiation of the School of Health and Medical Professions, ISU petitions the State Board of Education to reject approval of this proposal until such time as the programmatic offerings of the University of Idaho justify its creation.

**Office of Academic Affairs**

921 South 8th Avenue, Stop 4092 | Pocatello, ID 83209 | (208) 282-4026 | [isu.edu/provost](http://isu.edu/provost)



LEGISLATURE OF THE STATE OF IDAHO  
Sixty-seventh Legislature Second Regular Session - 2024

IN THE HOUSE OF REPRESENTATIVES

HOUSE BILL NO. 734

BY APPROPRIATIONS COMMITTEE

AN ACT

RELATING TO THE APPROPRIATION TO THE STATE BOARD OF EDUCATION AND THE BOARD OF REGENTS OF THE UNIVERSITY OF IDAHO; APPROPRIATING ADDITIONAL MONEYS TO THE STATE BOARD OF EDUCATION AND THE BOARD OF REGENTS OF THE UNIVERSITY OF IDAHO FOR COLLEGE AND UNIVERSITIES AND THE OFFICE OF THE STATE BOARD OF EDUCATION FOR FISCAL YEAR 2025; REDUCING THE APPROPRIATION TO THE STATE BOARD OF EDUCATION AND THE BOARD OF REGENTS OF THE UNIVERSITY OF IDAHO FOR COLLEGE AND UNIVERSITIES AND THE OFFICE OF THE STATE BOARD OF EDUCATION FOR FISCAL YEAR 2025; PROVIDING FOR THE USE OF APPROPRIATED FUNDS; PROVIDING FOR THE USE OF APPROPRIATED FUNDS; AND DECLARING AN EMERGENCY AND PROVIDING AN EFFECTIVE DATE.

Be It Enacted by the Legislature of the State of Idaho:

SECTION 1. In addition to any other appropriation provided by law, there is hereby appropriated to the State Board of Education and the Board of Regents of the University of Idaho for College and Universities and the Office of the State Board of Education the following amounts to be expended according to the designated programs and expense classes from the listed funds for the period July 1, 2024, through June 30, 2025:

	FOR PERSONNEL COSTS	FOR OPERATING EXPENDITURES	TOTAL
I. BOISE STATE UNIVERSITY:			
FROM:			
General			
Fund	\$4,292,600		\$4,292,600
Unrestricted			
Fund	<u>521,000</u>		<u>521,000</u>
TOTAL	\$4,813,600		\$4,813,600

II. IDAHO STATE UNIVERSITY:			
FROM:			
General			
Fund	\$2,991,900	\$552,100	\$3,544,000
Charitable Institutions Endowment Income			
Fund	31,700		31,700
Normal School Endowment Income			
Fund	357,200		357,200

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**

**JUNE 13, 2024**

**ATTACHMENT 5**

2

	FOR PERSONNEL COSTS	FOR OPERATING EXPENDITURES	TOTAL
1           Unrestricted			
2           Fund	<u>589,700</u>	<u>0</u>	<u>589,700</u>
3           TOTAL	\$3,970,500	\$552,100	\$4,522,600
4			
5           III. LEWIS-CLARK STATE COLLEGE:			
6           FROM:			
7           General			
8           Fund	\$551,700	\$268,800	\$820,500
9           Normal School Endowment Income			
10          Fund		352,200	352,200
11          Unrestricted			
12          Fund	<u>225,000</u>	<u>0</u>	<u>225,000</u>
13          TOTAL	\$776,700	\$621,000	\$1,397,700
14			
15          IV. UNIVERSITY OF IDAHO:			
16          FROM:			
17          General			
18          Fund	\$3,548,200	\$290,000	\$3,838,200
19          Agricultural College Endowment Income			
20          Fund		65,700	65,700
21          Scientific School Endowment Income			
22          Fund		49,700	49,700
23          University Endowment Income			
24          Fund		266,500	266,500
25          Unrestricted			
26          Fund	<u>942,900</u>	<u>0</u>	<u>942,900</u>
27          TOTAL	\$4,491,100	\$671,900	\$5,163,000
28			
29          GRAND TOTAL	\$14,051,900	\$1,845,000	\$15,896,900

30           SECTION 2. Notwithstanding any other provision of law to the contrary,  
31 the appropriation to the State Board of Education and the Board of Regents of  
32 the University of Idaho for College and Universities for Boise State Univer-  
33 sity is hereby reduced by \$4,600 from the General Fund from operating expen-  
34 ditures for the period July 1, 2024, through June 30, 2025.

35           SECTION 3. USE OF APPROPRIATED FUNDS. State-appropriated funds shall  
36 not be utilized to support diversity, equity, inclusion, or social justice  
37 ideology as part of any student activities, clubs, events, or organizations

1 on campus. Each college and university shall submit a written report of its  
2 expenditures related to these activities to the Joint Finance-Appropriations  
3 Committee no later than December 1, 2024.

4 SECTION 4. USE OF APPROPRIATED FUNDS. State-appropriated funds for  
5 capacity enhancement at the University of Idaho shall not be utilized to  
6 support undergraduate nursing or physician assistant programs that are pro-  
7 vided by other colleges, universities, and community colleges that receive  
8 state appropriated funds.

9 SECTION 5. An emergency existing therefor, which emergency is hereby  
10 declared to exist, this act shall be in full force and effect on and after  
11 July 1, 2024.

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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**UNIVERSITY OF IDAHO**

**SUBJECT**

Online Master of Science in Gerontology

**APPLICABLE STATUTE, RULE, OR POLICY**

Idaho State Board of Education Governing Policies & Procedures, Sections III.G., and III.Z.

**BACKGROUND/DISCUSSION**

University of Idaho proposes to establish an online Master of Science in Gerontology degree program in the proposed School of Health and Medical Professions (SHAMP) in the College of Graduate Studies. The University of Idaho has a foundation of faculty and facilities that can be leveraged to develop this degree. The Master of Science in Gerontology prepares graduates to assume major leadership roles in the field of aging, primarily in the planning, administration, and evaluation of programs in the private and public sectors, as well as executive positions in the delivery of direct services to older people and their families and in the instruction of older adults and service providers.

Gerontologists are essential members of the healthcare workforce and play a crucial role in expanding access to quality healthcare for Idaho's most rural communities. Current workforce projections estimate job growth in areas of human services (noted below). Individuals with a strong academic degree in gerontology will be well-suited to work in and be leaders in multiple fields germane to aging. For example, individuals in medicine and other social services (psychology, nursing, social work, etc.) may benefit from additional training and certification in gerontology. Law and policy professionals may likewise benefit from training, given the projected shift in policymaking related to aging, Medicare, and elder law (Morton 2015).

**IMPACT**

Idaho's population has been growing at an exceptional rate for five consecutive years, surpassing the national growth rate by a substantial margin. This population surge has strained the state's healthcare system, underscoring the necessity for expanding healthcare services within Idaho. It is quite evident that we simply do not have enough healthcare workers to take care of us and the situation could get worse if we do not act.

Idaho students and Idaho citizens would benefit from an advanced degree option in gerontology. Idaho currently has no Gerontology degree options. North Idaho College offers a 6-week, 25-hour Certificate in Gerontology, and Boise State University offers an Adult-Gerontology Nurse Practitioner (NP) master's degree.

The aging population brings with it a significant shift in economic, health, and social factors, all of which are not adequately addressed in the current workforce. For

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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example, the aging population is at increased risk of chronic health conditions and normal aging factors, such as musculoskeletal changes, sensory-perceptual changes, and immune system changes. Dementia: dementia is characterized as a decline in cognition that negatively impacts function. Unfortunately, dementia is more common with age. Alzheimer's disease and related dementias (ADRD) are a significant public health concern and contribute to mortality and morbidity. The Alzheimer's Disease International (ADI) organization estimates that 55 million people worldwide currently live with dementia, but this number is projected to reach 78 million by 2030 and 131 million by 2050 (ADI 2015 report; ADI 2021 report). The economic impact was estimated to be \$818 billion in 2015, \$1 trillion in 2018, and is projected to be \$2 trillion by 2030.

Idaho Projections: From 2012 to 2030, Idaho's aging population (data from age 60+) is expected to grow 33%. The prevalence of Alzheimer's disease in Idaho will increase 32% and Medicaid costs will increase \$60 million dollars between 2018 and 2025.

Gerontology programs are typically comprised of multidisciplinary faculty and undergraduate applicants come from a wide range of fields. There is no specific undergraduate major in gerontology that would be required. The degree will likely be of interest to those in health and human services, who have an interest in aging. Gerontology may be included in healthcare support occupations and allied fields. The table below provides projected employment growth in Idaho in a 2020-2030 projection model.

Code	Title	Percentage increase by 2030
31-9000	Other Healthcare Support Occupations	22.9%
31-0000	Healthcare Support Occupations	19.7%
31-1120	Home Health and Personal Care Aides	18.6%
21-1022	Healthcare social work	20.3%
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21-1094	Community Health Workers	19.5%
21-1099	Community/Social Service Specialists, All Other	12.5%
25-1072	Postsecondary Nursing Instructors	19.0%
29-1122	Occupational Therapy	23.2%
29-1126	Respiratory Therapy	21%
29-1127	Speech-Language Pathology	20%
29-1181	Audiology	25.7%

Healthcare jobs in Idaho are projected to be the fastest growing professions this decade, with nearly 10,000 new jobs being projected, according to the Idaho Department of Labor. The population that the Gerontology program will serve encompasses a broad demographic from the classroom to the bedside, by training a healthcare workforce who will in turn provide essential healthcare services to the people of Idaho.

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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Based on this important need, we propose to create the Masters of Gerontology degree to fill this critical workforce shortage. The areas of justification include the following:

- Critical Workforce Shortage
- Enhancing Access to Care
- Addressing Rural Healthcare Need
- Future Demand

In summary, if this request is granted, the primary beneficiaries are the individuals and communities who will be served by future Gerontologists. In addition, Idahoans who desire to seek a Gerontology degree will be able to remain in the state for their training, and therefore, increasing the likelihood they will stay in Idaho to practice.

The program will be offered online so there are no resources required for facilities and equipment. Courses will be created and offered with existing WWAMI faculty and adjunct faculty. The program proposes to hire 1 FTE as a director and 1 additional faculty member as an assistant professor. Faculty and staff within WWAMI will be redirected to the College of Graduate Studies (see organizational chart, Attachment 2). Total expenditures are \$291,935 – 301,935 of ongoing funds annually and \$60,000 of one-time funds in year one a program director, associate assistant, adjunct, or associate professors (to equal two FTEs), and costs associated with travel, materials, and communication. The program is requesting a self-support fee of \$12,000 per year. A budget addendum is included to demonstrate how the program aligns with State Board Policy V.R requirements.

**ATTACHMENTS**

- Attachment 1 – Master of Science in Gerontology Program Proposal
- Attachment 2 – Letters of Support
- Attachment 3 – Presidents’ Response to Health Proposals
- Attachment 4 – HB 734 College and Universities 2025 Appropriation

**BOARD STAFF COMMENTS AND RECOMMENDATIONS**

The proposed program aims to address the increasing demand for professionals equipped to address the complex challenges of an aging population in Idaho. Through the establishment of this program, the university seeks to provide a comprehensive interdisciplinary education tailored to individuals working in various fields, including healthcare, social services, law, and policy.

The program projects 20 initial enrollments at implementation reaching 60 by year five and graduating 18 starting in FY27. These numbers were based on current faculty availability and the planned hiring for adjunct faculty. To maintain program sustainability, the program identified five students per term, assuming the revenue for five students will not meet expenditure for FTE salaries. Should those numbers not be reached, the program will be evaluated after three years of concurrent

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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enrollment deficiency. The program will sunset following four years of enrollment deficiency and teach-outs will occur for matriculating students.

In accordance with State Board Policy III.Z responsibilities, no institution has statewide program responsibility specifically for gerontology programs. Additionally, Policy III.Z is not applicable to programs for which 90% or more of all activity is required or completed online. The proposed program is not listed in the university's current approved three-year plan; however, it has been added to their updated plan which will be reviewed by the Board in August of this year.

Boise State University offers an Adult-Gerontology Nurse Practitioner master's degree, which is scheduled to be discontinued. The options listed below were recently changed to create a new Family Nurse Practitioner emphasis and a new Adult-Gerontology Nurse Practitioner, Acute Care emphasis under the Doctor of Nursing Practice.

<b>Program</b>	<b>CIP Code</b>	<b>Degree</b>	<b>Location</b>	<b>Responsibility</b>	<b>Method of Delivery</b>
Adult-Gerontology Nurse Practitioner – Acute Care option <b>(scheduled for discontinuation)</b>	53.3818	MN	Boise	Regional	Online
Adult-Gerontology Nurse Practitioner-Primary Care option <b>(scheduled for discontinuation)</b>	53.3818	MN	Boise	Regional	Online

University of Idaho also requests approval to assess a self-support program fee of \$12,000 per year for the master's program in accordance with Board Policy V.R. Based on the information for the self-support program fee provided in the proposal and addendum, staff finds that the criteria have been met for this program.

The proposal completed the program review process and was presented to the Council on Academic Affairs and Programs on March 28, 2024; and to the Instruction, Research, and Student Affairs on May 30, 2024.

Board staff recommends approval.

**BOARD ACTION**

I move to approve the request by the University of Idaho to create an online Master of Science in Gerontology, as presented in Attachment 1.

Moved by \_\_\_\_\_ Seconded by \_\_\_\_\_ Carried Yes \_\_\_\_\_ No \_\_\_\_\_

AND

I move to approve the request by the University of Idaho to charge a self-support fee of \$12,000 per year for the Master of Science in Gerontology, in conformance with the program budget submitted to the Board in Attachment 1.

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

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Moved by \_\_\_\_\_ Seconded by \_\_\_\_\_ Carried Yes \_\_\_\_\_ No \_\_\_\_\_





Institutional Tracking No. \_\_\_\_\_

**Idaho State Board of Education**

Revised 5/8/2024-ps

**FULL PROPOSAL FORM**

Academic Degree and Certificate Program

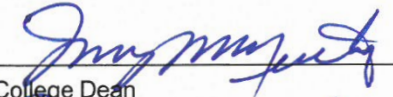
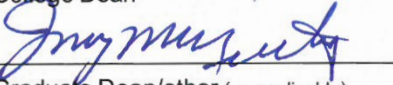
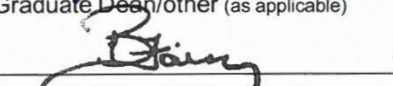
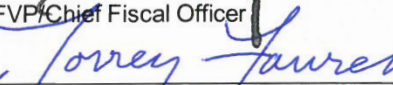
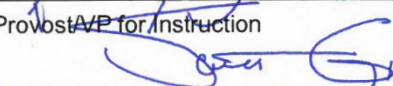
Date of Proposal Submission:	12/8/2023		
Institution Submitting Proposal:	University of Idaho		
Name of College, School, or Division:	College of Graduate Studies		
Name of Department(s) or Area(s):	College of Graduate Studies		
Official Name of the Program:	Master's of Science in Gerontology		
Implementation Date:	Fall 2025		
Degree Information:	Degree Level: Graduate	Degree Type: Masters	
CIP code (consult IR /Registrar):	30.1101		
Method of Delivery: Indicate percentage of face-to-face, hybrid, distance delivery, etc.	Online		
Geographical Delivery:	Location(s)	Online	Region(s) Online
Indicate (X) if the program is/has: (Consistent with Board Policy V.R.)	<input checked="" type="checkbox"/> Self-Support fee	<input type="checkbox"/> Professional Fee	<input type="checkbox"/> Online Program Fee
Indicate (X) if the program is: (Consistent with Board Policy III.Z.)	<input checked="" type="checkbox"/> Regional Program Responsibility	<input type="checkbox"/> Statewide Program Responsibility	

**Proposed Action**

- New program offering**
  - Undergraduate program
  - Graduate program
  - Undergraduate certificate (30 credits or more)
  - Graduate certificate (30 credits or more)

**New branch campus or change in location**

- Modification of Existing Academic Programs**
  - Converting one program option to a stand-alone program
  - Consolidating two or more undergraduate programs into one
  - Consolidating two or more graduate programs into one
  - Splitting an existing program into two or more programs
  - Program expansion outside an institution's Designated Service Region as defined in Board Policy III.Z.
  - Adding certificate or degrees to existing programs

	3/20/24	_____	_____
College Dean	Date	Vice President for Research (as applicable)	Date
	3/20/24	_____	_____
Graduate Dean/other (as applicable)	Date	Academic Affairs Program Manager, OSBE	Date
	3/20/24	_____	_____
FVP/Chief Fiscal Officer	Date	Chief Financial Officer, OSBE	Date
	_____	_____	_____
Provost/VP for Instruction	Date	Chief Academic Officer, OSBE	Date
	_____	_____	_____
President	Date	SBOE/Executive Director or Designee Approval	Date

Before completing this form, refer to Board Policy Section III.G., Postsecondary Program Approval and Discontinuance. This proposal form must be completed for the creation of each new program. All questions must be answered.

### **Rationale for Creation or Modification of the Program**

1. **Describe the request and give an overview of the changes that will result.** What type of substantive change are you requesting? Will this program be related or tied to other programs on campus? Identify any existing program that this program will replace. If this is an Associate degree, please describe transferability.

**Response:** The Idaho WWAMI Medical Education program proposes the development of a Master of Science in Gerontology. It will not replace any existing programs. This is a substantive change, with a new program offering, requiring the addition of courses not currently offered at the University of Idaho.

2. **Need for the Program.** Describe evidence of the student, regional, and statewide needs that will be addressed by this proposal to include student clientele to be served and address the ways in which the proposed program will meet those needs.
  - a. **Workforce and economic need:** Provide verification of state workforce needs that will be met by this program. Include job titles and cite the data source. Describe how the proposed program will stimulate the state economy by advancing the field, providing research results, etc.
  - b. **Student demand.** What is the most likely source of students who will be expected to enroll (full-time, part-time, outreach, etc.). Provide evidence of student demand/ interest from inside and outside of the institution.
  - c. **Societal Need:** Describe additional societal benefits and cultural benefits of the program.

Response to item 2, parts a-c above:

#### **Rationale**

With rising longevity and the aging population, older adults (age 65+) will represent a large portion of our population.

Table 1.2 and figure 1.1 below are from the Alzheimer's Disease International (ADI) 2015 report. These data demonstrate a continued increase in the aging population worldwide.

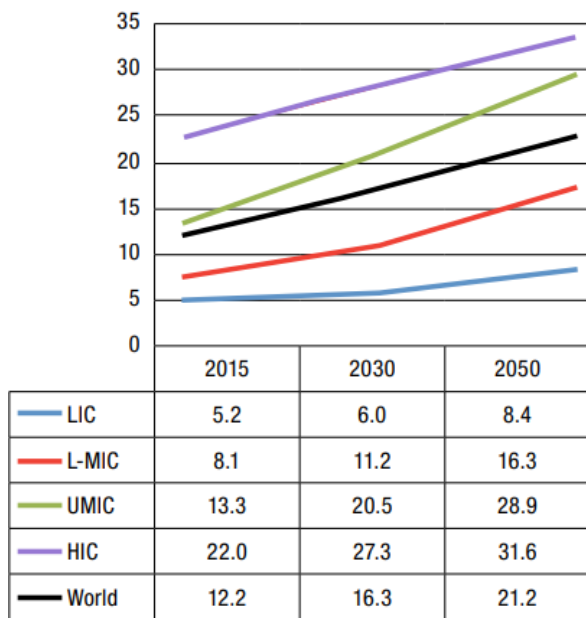
Table 1.2

The world's population of older people (age 60 and over, millions), and their distribution according to country income level (World Bank Classification 2009 and 2015)

Year	Current and projected numbers of older people (% of total population)					% increase over time	
	2010	2015		2030	2050	2015-2030	2015-2050
World Bank income classification	2009	2009	2015	2015	2015	2015	2015
HIC	232.3 (30.4%)	258.7 (28.9%)	309.4 (34.6%)	403.9 (29.4%)	482.5 (23.9%)	31%	56%
UMIC	116.4 (15.2%)	135.3 (15.1%)	319.8 (35.7%)	531.5 (38.7%)	760.8 (37.7%)	66%	138%
L-MIC	356.2 (46.6%)	431.7 (48.2%)	233.1 (26.0%)	386.0 (28.1%)	665.3 (32.9%)	66%	185%
LIC	59.8 (7.8%)	69.5 (7.8%)	32.9 (3.7%)	53.5 (3.9%)	111.4 (5.5%)	63%	239%
World	764.7 (100%)	895.2 (100%)		1347.8 (100%)	2020.0 (100%)	51%	126%

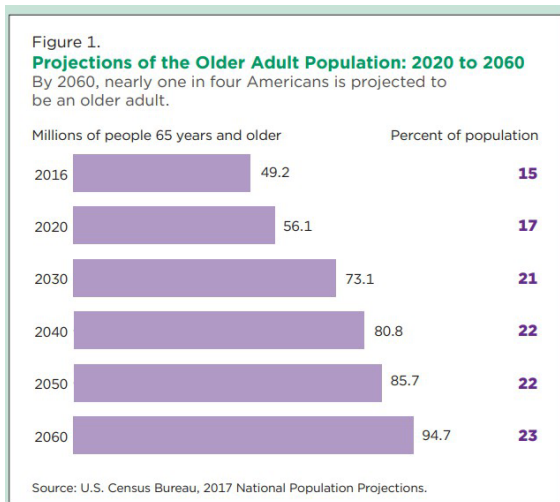
Figure 1.1

Percentage of the total population aged 60 years and over, by country income level, 2015 to 2050



**US Data:**

By 2030, all baby boomers will be over 65 years old and by 2034, older adults will outnumber children for the first time (US Census Bureau) and 1 in 5 Americans will be over 65 years old (Vespa et al., 2018; See figure below).



The aging population brings with it a significant shift in economic, health, and social factors, all of which are not adequately addressed in the current workforce. For example, the aging population is at increased risk of chronic health conditions and normal aging factors, such as musculoskeletal changes, sensory-perceptual changes, and immune system changes. Dementia: dementia is characterized as a decline in cognition that negatively impacts function. Unfortunately, dementia is more common with age. Alzheimer's disease and related dementias (ADRD) are a significant public health concern and contribute to mortality and morbidity. The Alzheimer's Disease International (ADI) organization estimates that 55 million people worldwide currently live with dementia, but this number is projected to reach 78 million by 2030 and 131 million by 2050 (ADI 2015 report; ADI 2021 report). The economic impact was estimated to be \$818 billion in 2015, \$1 trillion in 2018, and is projected to be \$2 trillion by 2030.

#### Idaho Projections:

From 2012 to 2030, Idaho's aging population (data from age 60+) is expected to grow 33%. The prevalence of Alzheimer's disease in Idaho will increase 32% and Medicaid costs will increase \$60 million dollars between 2018 and 2025 (Idaho Commission on Aging, Annual Report retrieved from [https://aging.idaho.gov/wp-content/uploads/2019/01/ICOA\\_AnnualReport\\_SF18\\_FINAL.pdf](https://aging.idaho.gov/wp-content/uploads/2019/01/ICOA_AnnualReport_SF18_FINAL.pdf))

Idaho currently has no Gerontology degree options. North Idaho College offers a 6-week, 25-hour Certificate in Gerontology, and Boise State University offers an Adult-Gerontology Nurse Practitioner (NP) master's degree. Idaho students and Idaho citizens would benefit from an advanced degree option in gerontology.

#### Plan:

The University of Idaho College of Graduate Studies will create and offer a master's (MS) in gerontology, delivered as an online 30-credit degree. Gerontology is the scientific study of aging from a biopsychosocial perspective, including content themes related to development, healthy aging, biological aspects of aging, social and emotional function in aging, and economic and policy factors related to aging.

#### Projected Growth of Workforce

Current workforce projections estimate job growth in areas of human services (noted below). Individuals with a strong academic degree in gerontology will be well-suited to work in and be leaders in multiple fields germane to aging. For example, individuals in medicine and other social services (psychology, nursing, social work, etc.) may benefit from additional training and certification in gerontology. Law and policy professionals may likewise benefit from training, given the projected shift in policymaking related to aging, Medicare, and elder law (Morton, 2015).

Gerontology programs are typically comprised of multidisciplinary faculty and undergraduate applicants come from a wide range of fields. There is no specific undergraduate major in gerontology that would be required. The degree will likely be of interest to those in health and human services, who have an interest in aging. Gerontology may be included in healthcare support occupations and allied fields. The table below provides projected employment growth in Idaho in a 2020-2030 projection model (retrieved from <https://lmi.idaho.gov/data-tools/occupational-industry-projections/>).

Code	Title	Percentage increase by 2030
31-9000	Other Healthcare Support Occupations	22.9%
31-0000	Healthcare Support Occupations	19.7%
31-1120	Home Health and Personal Care Aides	18.6%
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29-1122	Occupational Therapy	23.2%
29-1126	Respiratory Therapy	21%
29-1127	Speech-Language Pathology	20%
29-1181	Audiology	25.7%

**Citations:**

Gauthier, S., Rosa-Neto, P., Morais, J. A., & Webster, C. (2021). World Alzheimer Report 2021: Journey through the diagnosis of dementia. *Alzheimer’s Disease International, 2022*, 30.

Morton, S. (2015). *Addressing the health needs of an aging America: New opportunities for evidence-based policy solutions*. Health Policy Institute at University of Pittsburgh.

Prince, M., Wimo, A., Guerchet, M., Ali, G. C., Wu, Y. T., & Prina, M. (2015). *World Alzheimer report 2015. The global impact of dementia: an analysis of prevalence, incidence, cost and trends* (Doctoral dissertation, Alzheimer's disease international).

Vespa, J., Armstrong, D. M., & Medina, L. (2018). *Demographic turning points for the United States: Population projections for 2020 to 2060* (pp. 25-1144). Washington, DC: US Department of Commerce, Economics and Statistics Administration, US Census Bureau.

**3. Program Prioritization**

Is the proposed new program a result of program prioritization?

Yes\_\_\_\_\_ No\_X\_\_\_\_\_

If yes, how does the proposed program fit within the recommended actions of the most recent program prioritization findings.

**4. Credit for Prior Learning**

Indicate from the various cross walks where credit for prior learning will be available. If no PLA has been identified for this program, enter 'Not Applicable'.

Not applicable.



**5. Affordability Opportunities**

Describe any program-specific steps taken to maximize affordability, such as: textbook options (e.g., Open Educational Resources), online delivery methods, reduced fees, compressed course scheduling, etc. This question applies to certificates, undergraduate, graduate programs alike.

**Response:**

Implementing cost-effective strategies such as utilizing Open Educational Resources (OER) for textbooks, along with our digital library resources, will reduce the need for students to purchase additional materials or subscriptions. Students will have access to a wide range of e-journals, e-books, and databases relevant to the gerontology program. Lastly, the gerontology program is 100% online which provides the students the flexibility to learn from anywhere, reducing any incurring costs of transportation.

**Enrollments and Graduates**

**6. Existing similar programs at Idaho Public Institutions.** Using the chart below, provide enrollments and numbers of graduates for similar existing programs at your institution and other Idaho public institutions for the most past four years.

Not applicable: There are no MS gerontology programs in Idaho.

Instit .	Program Name	Fall Headcount Enrollment in Program				Number of Graduates From Program (Summer, Fall, Spring)			
		FY__	FY__	FY__	FY_ (most recent)	FY__	FY__	FY__	FY_ (most recent)

**7. Justification for Duplication** (if applicable). If the proposed program is similar to another program offered by an Idaho public higher education institution, provide a rationale as to why any resulting duplication is a net benefit to the state and its citizens. Describe why it is not feasible for existing programs at other institutions to fulfill the need for the proposed program.

Not applicable.

**8. Projections for proposed program:** Using the chart below, provide projected enrollments and number of graduates for the proposed program:

Proposed Program: Projected Enrollments and Graduates First Five Years											
Program Name: MS in Gerontology											
Projected Fall Term Headcount Enrollment in Program						Projected Annual Number of Graduates From Program					
FY26 (first year)	FY27	FY28	FY29	FY30		FY26 (first year)	FY27	FY28	FY29	FY30	
20	40	60	60	60		0	18	36	54	54	

9. **Describe the methodology for determining enrollment and graduation projections.** Refer to the information provided in Question #2 “Need for the Program” above. What is the capacity for the program? Describe your recruitment efforts? How did you determine the projected numbers above?

As noted above, there are no MS Gerontology degrees offered in Idaho, but there are healthcare-related workforce needs and the population in ID is aging and is projected to age further. The above enrollment and graduation projections as based on current faculty availability and planned hiring for adjunct faculty.

10. **Minimum Enrollments and Graduates.**

a. What are the minimums that the program will need to meet in order to be continued, and what is the logical basis for those minimums?

5 Students per term, assuming the revenue for 5 students will meet expenditure for FTE salaries.

b. If those minimums are not met, what is the sunset clause by which the program will be considered for discontinuance?

In the event enrollment minimums are not met the program will undergo evaluation after three years of concurrent enrollment deficiency. The program will sunset following four years of enrollment deficiency. Teach-outs will occur for matriculating students and a new cohort will not be filled.

11. **Assurance of Quality.** Describe how the institution will ensure the quality of the program. Describe the institutional process of program review. Where appropriate, describe applicable specialized accreditation and explain why you do or do not plan to seek accreditation.

The program will undergo program prioritization as part of the University of Idaho quality improvement plan <https://www.uidaho.edu/provost/ir/assessment-evaluation/program-review>

While not required at the national level, there is a gerontology accreditation process put forth by the Accreditation for Gerontology Education Council based on standards for gerontology programs by the Academy for Gerontology in Higher Education (AGHE). The University of Idaho has structured the curriculum based on the distal goal of pursuing accreditation and the courses are designed to align with the accreditation process.

The AGHE offers competencies for graduate-level education in gerontology in three categories. These include the following:

1. Category 1 - Core competencies (expected of all programs)
  - a. Frameworks for understanding human aging (e.g., developmental perspectives).
  - b. Biological aspects of aging.
  - c. Psychological aspects of aging.
  - d. Social aspects of aging.
  - e. The humanities and aging
  - f. Research and Critical Thinking.
2. Category 2 - Interactional Competencies (should be broadly represented):
  - a. Attitudes and prospectives: Developing a gerontological perspective
  - b. Ethics and Professional Standards
  - c. Communication with and on behalf of older persons.
  - d. Interdisciplinary and community collaboration
3. Category 3 – Contextual Competencies Across Fields of Gerontology
  - a. Well-being, health and mental health.
  - b. Social Health
  - c. Program/service development
  - d. Arts and Humanities
  - e. Business and finances
  - f. Policy
  - g. Research, application, and evaluation

**12. In accordance with Board Policy III.G., an external peer review is required for any new doctoral program. Attach the peer review report as Appendix A.**

Not applicable

**13. Teacher Education/Certification Programs** All Educator Preparation programs that lead to certification require review and recommendation from the Professional Standards Commission (PSC) and approval from the State Board of Education.

Will this program lead to certification?

Yes \_\_\_\_\_ No X \_\_\_\_\_

If yes, on what date was the Program Approval for Certification Request submitted to the Professional Standards Commission?

**14. Three-Year Plan: If this is a new proposed program, is it on your institution’s approved 3-year plan?**

Yes \_\_\_\_\_ No X \_\_\_\_\_

If yes, proceed to question 15. If no:

**a. Which of the following statements address the reason for adding this program outside of the regular three-year planning process.**

Indicate (X) by each applicable statement:

	Program is important for meeting your institution’s regional or statewide program responsibilities.
--	---



X	The program is in response to a specific industry need or workforce opportunity.
	The program is reliant on external funding (grants, donations) with a deadline for acceptance of funding.
	There is a contractual obligation or partnership opportunity related to this program.
	The program is in response to accreditation requirements or recommendations.
	The program is in response to recent changes to teacher certification/endorsement requirements.

**b. Provide an explanation for all statements you selected.**

**Response:** The program is in response to a specific industry need or workforce opportunity. As evidenced by the above-noted needs and current program offerings in Idaho, there is a critical shortage of expertise on aging and healthy aging and the proposed program will help full this state need and student demand.

**Educational Offerings: Curriculum, Intended Learning Outcomes, and Assessment Plan**

**15. Curriculum. Provide descriptive information of the educational offering.**

**a. Summary of requirements.** Provide a summary of program requirements using the following table.

Credit hours in required courses offered by the department (s) offering the program.	30
Credit hours in required courses offered by other departments:	
Credit hours in institutional general education curriculum	
Credit hours in free electives	
Total credit hours required for degree program:	30

**b. Curriculum.** Provide the curriculum for the program, including credits to completion, courses by title and assigned academic credit granted.

Courses to fulfill the above requirements: 30 credits required

1. Required:

- a. GERO 5xx: Theoretic foundations and introduction to gerontology: Examines historical developments of the field of gerontology from a multidisciplinary perspective and how gerontology fits into the health and social service landscape. Introduction to theories and critical issues of aging. 3 Credits.
- b. GERO 5xx: Research methods in Gerontology: research, data analysis, research report. Subject matter will include ethics, sampling, reliability and validity, hypothesis testing, study designs, dissemination of research findings, and critical appraisal of research, with a central requirement of designing and writing a study proposal. 3 Credits.

- c. GERO 6xx: Biological aspects of Aging: Theory and science of senescence and longevity, focusing on normal aging versus pathological changes to health status in the aging processes. 3 Credits.
  - d. GERO 6xx: Mental and Cognitive health in aging: Covers the complex topic of psychological health in aging, evidence-based interventions (first half of term) as well as cognitive aging and dementia (second half of term). 3 Credits.
  - e. GERO 6xx: Health promotion and preventative care in aging: Founded on principles of health education and promotion, the course covers evidence-based factors that reduce age-related injuries and illnesses and how to promote behavioral change, focusing on maximizing quality of life. 3 Credits.
  - f. GERO 6xx: Diversity and ethics in aging: This course covers a wide range of topics related to culture and diversity, focusing on social determinants of health, health culture in aging, historical factors that have shaped culture and diversity in the aging US population, and covers rights and safety of vulnerable populations (ADA law and other elder law principles). 3 Credits.
  - g. GERO 6xx: Integrative Capstone: Requires a faculty sponsor to direct a capstone project. This may include a service-based project, program development or review, research experience, and another field experience as appropriate and approved by the faculty sponsor. Students will demonstrate the integration of gerontology content from didactics. 3 Credits.
2. Electives:
- a. GERO 6xx: Community-Engagement and Leisure Arts in Aging: Interdisciplinary approaches to recreational therapy and leisure accessibility in aging and how engagement promotes physical and mental health in aging. 3 Credits.
  - b. GERO 6xx: The Business of Geriatric Care Management: Reviews business and ethical fundamentals of geriatric care management across multiple levels of care, from independent living communities to intensive long-term care models. 3 Credits.
  - c. GERO 6xx: Program Development and Evaluation for Aging: Examine components of successful program development, implementation science, identification of and involvement of stakeholders, fundraising, grant writing, and the processes of evaluation program outcomes. 3 Credits.
  - d. Rural Health and Aging: Survey course of the application of healthy aging and health intervention limitations in rural settings. 3 Credits.
  - e. Seminar on Aging in the Arts: How aging is accurately and inaccurately depicted in media and arts. 3 Credits.
- c. **Additional requirements.** Describe additional requirements such as comprehensive examination, senior thesis or other capstone experience, practicum, or internship, some of which may carry credit hours included in the list above.
- a. GERO 6xx: Integrative Capstone: Requires a faculty sponsor to direct a capstone project. This may include a service-based project, program development or review, research experience, and another field experience as appropriate and approved by the faculty sponsor. Students will demonstrate the integration of gerontology content from didactics. 3 Credits.

**16. Learning Outcomes: Expected Student Learning Outcomes and Connection to Curriculum.**

- a. Intended Learning Outcomes.** List the Intended Learning Outcomes for the proposed program, using learner-centered statements that indicate what students will know, understand, and be able to do, and value or appreciate as a result of completing the program.

**Based on item 11 above, learning outcomes are structured based on the** Academy for Gerontology in Higher Education (AGHE) expected competencies in gerontology. These profession-wide competencies are expected of all graduates and are partially demonstrated via:

- Coursework: Students will obtain a grade of B or higher.
- Other didactics: Capstone Project in gerontology

While not required at the national level, there is a gerontology accreditation process put forth by the Accreditation for Gerontology Education Council based on standards for gerontology programs by the Academy for Gerontology in Higher Education (AGHE). The University of Idaho has structured the curriculum based on the distal goal of pursuing accreditation and the courses are designed to align with the accreditation process.

The AGHE offers competencies for graduate-level education in gerontology in three categories. These include the following:

1. Category 1 - Core competencies (expected of all programs)
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  - b. Biological aspects of aging.
  - c. Psychological aspects of aging.
  - d. Social aspects of aging.
  - e. The humanities and aging
  - f. Research and Critical Thinking.
2. Category 2 - Interactional Competencies (should be broadly represented):
  - a. Attitudes and prospectives: Developing a gerontological perspective
  - b. Ethics and Professional Standards
  - c. Communication with and on behalf of older persons.
  - d. Interdisciplinary and community collaboration
3. Category 3 – Contextual Competencies Across Fields of Gerontology
  - a. Well-being, health and mental health.
  - b. Social Health
  - c. Program/service development
  - d. Arts and Humanities
  - e. Business and finances
  - f. Policy
  - g. Research, application, and evaluation

Based on these competencies, student learning outcomes will include the following:

- Students will be able to identify and explain developmental perspectives associated with aging.
- Students will be able to compare and contrast biological and psychosocial aspects of aging and apply this knowledge in health and human service settings to have a positive impact on the health of older adults.
- Develop comprehensive and meaningful concepts, definitions, and measures for well-being of older adults.
- Students will be able to critically analyze ethical and professional standards in gerontology.

- Students will demonstrate effective communication skills through their interactions with older adults and they will demonstrate knowledge of community resources related to the health and well-being of older adults.
- Develop a gerontological perspective through knowledge and self-reflection as achieved through class discussions and group assignments.
- Students will demonstrate the ability to collaborate with others to promote integrated approaches to aging. Achieved via class work, group projects, and capstone projects.
- Students will promote quality of life among older adults. They will also promote older individual's strengths to maximize well-being, health, and mental health, including promoting engagement in the arts and the community.
- Students will demonstrate knowledge of the science of gerontology via class work on research methods and via writing projects that require integration of empirical literature. The capstone project may include a research project.

## 17. Assessment plans.

- a. Assessment Process.** Describe the assessment plan for student learning outcomes that will be used to evaluate student achievement and how the results will be used to improve the program.

Assessment Process:

To evaluate how well students are achieving the intended learning outcomes, the following assessment processes will be employed:

1. Examinations and Quizzes: Regular assessments will include written examinations and quizzes to evaluate knowledge acquisition and critical thinking skills.

3. Case Studies and Care Plans: Students will complete case studies and care plans to demonstrate their ability to apply theoretical knowledge to real-world patient care scenarios.

4. Reflective Journals and Portfolios: Students will maintain reflective journals and e-portfolios, providing insights into their personal and professional growth.

5. Peer and Self-Assessment: Peer evaluations and self-assessment will be incorporated for group projects and personal reflection on skills development.

Using Assessment Findings for Program Improvement:

Assessment findings will be used for continuous program improvement through the following mechanisms:

1. Faculty Meetings: Regular faculty meetings will involve discussions of assessment results, with a focus on identifying areas of improvement and refining teaching methods and curriculum.

2. Curriculum Review: Assessment data will inform curriculum revisions, ensuring alignment with current healthcare trends and best practices.

3. Faculty Development: Faculty will receive training and support to enhance assessment

techniques and teaching strategies, addressing areas where student performance needs improvement.

4. Feedback Loops: Continuous feedback loops will be established with students, incorporating their input to make program enhancements.

Assessment Activity Timing:

Assessment activities will occur throughout the program at various frequencies:

- Formative assessments (quizzes, in-class discussions) will be ongoing throughout each semester.
- Summative assessments (midterm, final examinations) will occur at the end of relevant courses and following year one and year two. Alumni and industry surveys will be completed two years following graduation.
- Case studies, care plans, and projects will be assigned within courses.

### **Resources Required for Implementation – fiscal impact and budget.**

Organizational arrangements required within the institution to accommodate the change including administrative, staff, and faculty hires, facilities, student services, library; etc.

**18. Physical Facilities and Equipment:** Describe the provision for physical facilities and equipment.

- a. Existing resources.** Describe equipment, space, laboratory instruments, computer(s), or other physical equipment presently available to support the successful implementation of the program.

The MS in Gerontology is designed to be remote and asynchronous. There would not be a direct impact on space from the students.

**Impact of new program.** What will be the impact on existing programs of increased use of physical resources by the proposed program? How will the increased use be accommodated?

The MS in Gerontology is designed to be remote and asynchronous. There would not be a direct impact on space from the students.

- b. Needed resources.** List equipment, space, laboratory instruments, etc., that must be obtained to support the proposed program. Enter the costs of those physical resources into the budget sheet.

The online delivery of the MS in Gerontology would use a Learning Management System, such as Canvas. Initial creation and management of course content (videos and PowerPoint presentations) would come at a cost. UI has an excellent A/V lab that can be utilized to ensure high fidelity of recordings and material presented to students.

<https://www.lib.uidaho.edu/studio/>

Additionally, there would be some start-up costs associated with the creation of each

course, which will require consultation with and hiring adjunct faculty.

**19. Library and Information Resources:** Describe adequacy and availability of library and information resources.

- a. Existing resources and impact of new program.** Evaluate library resources, including personnel and space. Are they adequate for the operation of the present program? Will there be an impact on existing programs of increased library usage caused by the proposed program? For off-campus programs, clearly indicate how the library resources are to be provided.

The University of Idaho houses the largest library in the state of Idaho servicing students and faculty on our campuses and virtually in all 44 counties. Students will have remote access to needed search databases, digital journals, and scholarly works related to aging, gerontology, and healthcare. It is not expected that the gerontology program will have a noticeable impact on library usage. Library resources for students and faculty attending online <https://www.lib.uidaho.edu/services/distance.html>

- b. Needed resources.** What new library resources will be required to ensure successful implementation of the program? Enter the costs of those library resources into the budget sheet.

No additional costs are needed.

**20. Faculty/Personnel resources**

- a. Needed resources.** Give an overview of the personnel resources that will be needed to implement the program. How many additional sections of existing courses will be needed? Referring to the list of new courses to be created, what instructional capacity will be needed to offer the necessary number of sections?

The courses are enumerated above in item 15.B and these will have one section. The courses can be created and offered with existing WWAMI faculty and adjunct faculty. The Gerontology program will require 2 FTE (full-time employees). This will include the following personnel: Program Director, Assistant and Adjunct or Affiliate professors.

- b. Existing resources.** Describe the existing instructional, support, and administrative resources that can be brought to bear to support the successful implementation of the program.

Faculty and staff within WWAMI will be redirected to the College of Graduate Studies. Please see the organizational chart under supportive documentation.

- c. Impact on existing programs.** What will be the impact on existing programs of increased use of existing personnel resources by the proposed program? How will quality and productivity of existing programs be maintained?

This will have minimal impact and can operate with existing WWAMI faculty and adjuncts. The program will undergo annual program prioritization as part of the University of Idaho quality improvement plan <https://www.uidaho.edu/provost/ir/assessment-evaluation/program-review>

- d. **Needed resources.** List the new personnel that must be hired to support the proposed program. Enter the costs of those personnel resources into the budget sheet.

New personnel will include a Program Director, Associate, Assistant, Adjunct or Associate professors which will equal 2 FTEs. Please refer to section III.A. for personnel cost breakdown.

## 21. Revenue Sources

- a) **Reallocation of funds:** If funding is to come from the reallocation of existing state-appropriated funds, please indicate the sources of the reallocation. What impact will the reallocation of funds in support of the program have on other programs?

The MS Gerontology degree will be self-support and will not include reallocation of funds.

- b) **New appropriation.** If an above Maintenance of Current Operations (MCO) appropriation is required to fund the program, indicate when the institution plans to include the program in the legislative budget request.

No state funding was requested for this degree program.

- c) **Non-ongoing sources:**

- i. If the funding is to come from one-time sources such as a donation, indicate the sources of other funding. What are the institution's plans for sustaining the program when that funding ends? **Not applicable.**
- ii. Describe the federal grant, other grant(s), special fee arrangements, or contract(s) that will be valid to fund the program. What does the institution propose to do with the program upon termination of those funds? **Not applicable.**

- d) **Student Fees:**

- i. If the proposed program is intended to levy any institutional local fees, explain how doing so meets the requirements of Board Policy V.R., 3.b. **Not applicable at the present time.**
- ii. Provide estimated cost to students and total revenue for self-support programs and for professional fees and other fees anticipated to be requested under Board Policy V.R., if applicable.

The cost per student\* for this graduate online program is \$12,000 per student/per year.

\*This program is defined as a self-support fee program in accordance with the policies set forth in Sections V.R.3.b.iv of the Idaho State Board of Education Governing Policies and Procedures.

22. Using the excel **budget template** provided by the Office of the State Board of Education, provide the following information:

- Indicate all resources needed including the planned FTE enrollment, projected revenues, and estimated expenditures for the first **four** fiscal years of the program.
- Include reallocation of existing personnel and resources and anticipated or requested new

resources.

- Second and third year estimates should be in constant dollars.
- Amounts should reconcile subsequent pages where budget explanations are provided.
- If the program is contract related, explain the fiscal sources and the year-to-year commitment from the contracting agency(ies) or party(ies).
- Provide an explanation of the fiscal impact of any proposed discontinuance to include impacts to faculty (i.e., salary savings, re-assignments).



**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**Program Resource Requirements. MS GERO**

- Indicate all resources needed including the planned FTE enrollment, projected revenues, and estimated expenditures for the first **four** fiscal years of the program
- Include reallocation of existing personnel and resources and anticipated or requested new resources.
- Second and third year estimates should be in constant dollars.
- Amounts should reconcile subsequent pages where budget explanations are provided.
- If the program is contract related, explain the fiscal sources and the year-to-year commitment from the contracting agency(ies) or party(ies).
- Provide an explanation of the fiscal impact of any proposed discontinuance to include impacts to faculty (i.e., salary savings, re-assignments).

**I. PLANNED STUDENT ENROLLMENT**

	<u>FY 26</u>		<u>FY 27</u>		<u>FY 28</u>		<u>FY 29</u>	
	FTE	Headcount	FTE	Headcount	FTE	Headcount	FTE	Headcount
A. New enrollments		20		40		60		60
B. Shifting enrollments								
<b>Total Enrollment</b>	0	20	0	40	0	60	0	60

**II. REVENUE**

	<u>FY 26</u>		<u>FY 27</u>		<u>FY 28</u>		<u>FY 29</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
1. New Appropriated Funding Request	\$0.00		\$0.00		\$0.00		\$0.00	
2. Institution Funds		\$130,000.00						
3. Federal								
4. New Tuition Revenues from Increased Enrollments								
5. Student Fees	\$240,000.00		\$480,000.00		\$720,000.00		\$720,000.00	
6. Other (i.e., Gifts)	\$0.00		\$0.00		\$0.00		\$0.00	
<b>Total Revenue</b>	\$240,000	\$130,000	\$480,000	\$0	\$720,000	\$0	\$720,000	\$0

*Ongoing is defined as ongoing operating budget for the program which will become part of the base.*

*One-time is defined as one-time funding in a fiscal year and not part of the base.*

**III. EXPENDITURES**

	<u>FY 26</u>		<u>FY 27</u>		<u>FY 28</u>		<u>FY 29</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

**A. Personnel Costs**

1. FTE	<u>2.0</u>		<u>2.0</u>		<u>2.0</u>		<u>2.0</u>	
2. Faculty	<u>\$85,000.00</u>		<u>\$85,000.00</u>		<u>\$85,000.00</u>		<u>\$85,000.00</u>	
3. Adjunct Faculty		<u>50000</u>						
4. Graduate/Undergrad Assistants								
5. Research Personnel								
6. Directors/Administrators	<u>103,500</u>		<u>103,500</u>		<u>103,500</u>		<u>103,500</u>	
7. Administrative Support Personnel								
8. Fringe Benefits	<u>58,435.00</u>		<u>58,435.00</u>		<u>58,435.00</u>		<u>58,435.00</u>	
9. Other:								
<b>Total Personnel and Costs</b>	<u>\$246,935</u>	<u>\$50,000</u>	<u>\$246,935</u>	<u>\$0</u>	<u>\$246,935</u>	<u>\$0</u>	<u>\$246,935</u>	<u>\$0</u>

	<u>FY 26</u>		<u>FY 27</u>		<u>FY 28</u>		<u>FY 29</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b>B. Operating Expenditures</b>								
1. Travel	<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>		<u>\$5,000.00</u>	
2. Professional Services	<u>\$10,000.00</u>		<u>\$10,000.00</u>		<u>\$10,000.00</u>		<u>\$10,000.00</u>	
3. Other Services								
4. Communications	<u>\$20,000.00</u>		<u>\$30,000.00</u>		<u>\$30,000.00</u>		<u>\$30,000.00</u>	
5. Materials and Supplies	<u>\$10,000.00</u>		<u>\$10,000.00</u>		<u>\$10,000.00</u>		<u>\$10,000.00</u>	
6. Rentals								
7. Materials & Goods for Manufacture & Resale								
8. Miscellaneous								
<b>Total Operating Expenditures</b>	<u>\$45,000</u>	<u>\$0</u>	<u>\$55,000</u>	<u>\$0</u>	<u>\$55,000</u>	<u>\$0</u>	<u>\$55,000</u>	<u>\$0</u>

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**

**JUNE 13, 2024**

**ATTACHMENT 1**

	<u>FY 26</u>		<u>FY 27</u>		<u>FY 28</u>		<u>FY 29</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b>C. Capital Outlay</b>								
1. Library Resources								
2. Equipment		\$10,000.00						
<b>Total Capital Outlay</b>	<b>\$0</b>	<b>\$10,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>D. Capital Facilities Construction or Major Renovation</b>								
<b>E. Other Costs</b>								
Utilities								
Maintenance & Repairs								
Other								
<b>Total Other Costs</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>TOTAL EXPENDITURES:</b>	<b>\$291,935</b>	<b>\$60,000</b>	<b>\$301,935</b>	<b>\$0</b>	<b>\$301,935</b>	<b>\$0</b>	<b>\$301,935</b>	<b>\$0</b>
<b>Net Income (Deficit)</b>	<b>-\$51,935</b>	<b>\$70,000</b>	<b>\$178,065</b>	<b>\$0</b>	<b>\$418,065</b>	<b>\$0</b>	<b>\$418,065</b>	<b>\$0</b>

Budget Notes (specify row and add explanation where needed; e.g., "I.A.,B. FTE is calculated using..."):

I.A.	Enrollment projections, matching the SBOE and CIM documentation
I.B.	Because this program is designed as a one year master's degree, there will be no shifting enrollments.
II.2	Initial WWAMI supported institutional funds for start up.
II.5	Student fees are self support fees in the amount of \$12,000 per year, per student.
III.A.1	2 FTEs include 1 Director, and additional part time faculty members adding up to 1 FTE.
III.A.8	Faculty fringe benefits are based on the UI CFR rates at 31.0%

September 16, 2021

Page 3

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

III.B.1	Travel for conferences for faculty.
III.B.4	Marketing and communications costs are for recruitment and retention.
III.C.2	Equipment includes computers and peripheral equipment as well as software
	The budget numbers submitted were based on estimated program rates, we will be bringing forward specific rates for approval in April 2025
	Please see attached Masters of Science - Gerontology Budget Addendum

### **Master's of Science - Gerontology Program Budget Addendum**

#### iv. Self-Support Academic Program Fees

a) Self-support programs fees are charged in lieu of resident or non-resident tuition for programs that lead to degrees or certificates. To bring a Self support program fee to the Board for approval, all of the following criteria must be met:

1) An institution shall follow the program approval guidelines set forth in policy III.G.

**Per Policy III.G. we are submitting a proposal for the Master of Science – Gerontology**

2) The Self-support program shall be an academic program.

**This is a health care professions master's degree program.**

3) The Self-support program shall be distinct from the traditional offerings of the institution by serving a population that does not access the same activities, services and features as full-time, resident and non-resident tuition paying students, such as programs designed specifically for working professionals, programs offered off-campus, or programs delivered completely online.

**These distance learners will not need campus services.**

4) No appropriated funds may be used in support of Self-support programs. The Self-support program fee shall be all-inclusive and no other fees shall be charged in connection with participation in the program.

**Students in the Master of Science - Gerontology program will be charged only a self support fee and no other fee.**

5) Self-support program finances shall be segregated, tracked and accounted for separately from all other programs of the institution except as provided for in subsection 3.B.iv.b.

**Self support program finances will be segregated, tracked and accounted for separately from all other programs.**

April 15, 2024

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Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

I am writing to express my support for the University of Idaho and the proposed health professions program, including the proposed School of Health and Medical Professions.

As a practicing neurosurgeon in Coeur D'Alene, Idaho since 2001 I have seen rapid growth of our population, but unfortunately I have not seen commensurate growth in health care professionals. The recent Covid 19 pandemic exposed the marginal health care workforce and because of over-worked health care professionals, many of our best nurses, physician assistants, respiratory therapists, OR technicians, physical and occupational therapists retired from the workforce. Even a number of physicians retired early because of the workload burnout. As you may be aware, Idaho ranks near the bottom in the ratio of physicians and nurses to patients. There is no sign of decreased population growth in Idaho and we need to be prepared to train more physicians, nurses, PAs and other health care workers to care for our growing population.

I am encouraged to learn of the direct entry Master of Science in Nursing(MSN), the Doctor of Psychology in Clinical Psychology(PsyD), the Doctor of Anatomical Sciences(DAS), the Certified Nurse Anesthetist(CRNA) DNP degree, the Masters of Science in Gerontology(MS), and the Physician Assistant(PA) training programs. In my experience, Physician Assistants are particularly in short supply and difficult to recruit from out of our state. Also, there is an acute need for Clinical Neuropsychologists; there are none practicing in North Idaho and it is a significant need.

As you are aware, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. These are daunting deficits in our ability to deliver health care to the citizens of our state.

The best way to recruit health care workers to our state is to train them in our state. There is a critical shortage in training programs in the State of Idaho. This initiative by the University of Idaho is key starting solution to address this issue which is getting worse each year. This what our educational institutions should be addressing and promptly! Have you tried getting in to see

a health care provider lately? It typically takes weeks to get into see a physician: primary care and specialists, which is not good care.

I fully support these proposed academic programs and urge the Idaho State Board of Education to act expeditiously to approve these programs. The School of Health and Medical Professions is a vital asset to our state, but needs to grow to meet the needs of our growing population.

Sincerely,

A handwritten signature in black ink that reads "William F. Ganz, MD, FACS". The signature is written in a cursive style.

William F. Ganz, MD, FACS

Kootenai Neurosurgery and Spine

Steven E. Ozeran, MD, FACS



Steven E. Ozeran,  
MD, FACS

Board-Certified  
American Board  
of Plastic Surgery,  
American Board of  
Surgery

Fellow  
American College of  
Surgeons

Residency  
Plastic Surgery,  
University of  
Wisconsin-Madison;  
General Surgery,  
University of  
California-Davis

MD  
University of  
Chicago-Pritzker

Member  
American Society  
of Plastic Surgeons,  
American Medical  
Association,  
Idaho Medical  
Association

Surgical  
procedures:

- Breast enlargement
- Breast reduction
- Breast lift
- Breast reconstruction
- Blepharoplasty (eyelid surgery)
- Gynecomastia (male breast reduction)
- Tummy tuck
- SmartLipo MPX body contouring
- Body lift after weight loss
- Reconstructive surgery
- Hand surgery
- Scar Revision

Non surgical  
enhancements:

- Botox® Cosmetic
- Restylane®
- Radiesse®
- Cosmetic peels
- Dermabrasion
- Obagi® skin care products

For your comfort &  
convenience:

- Caring, highly experienced staff
- Accredited surgery center
- Insurance accepted
- Visa & MasterCard welcome

Jeff Seegmiller, Ed.D., AT

Regional Dean/Director, Professor

Idaho WWAMI Medical Education Program

University of Idaho

Dear Dr. Seegmiller:

I am writing to express my support for the University of Idaho and their proposed health professions programs. I understand that these include the direct entry Master of Science in Nursing, the Doctor of Psychology, in Clinical Psychology, the Doctor of Anatomical Sciences, the Certified RN Anesthetist degree (CRNA), the Master's of Science in Gerontology, and Physician's Assistant (PA) training programs. All of these programs would greatly help improve the state's healthcare infrastructure and help with medical provider shortages across the state. As a physician in Idaho for nearly 30 years, I can personally attest to decline in patients' ability to access necessary healthcare evaluations and treatments; it's quite common for patients to wait weeks, sometimes months for appointments with their doctors or healthcare providers. Emergency rooms have become overburdened as patients need somewhere to go for care and this adds further to the financial stress on our healthcare systems. Some patient delays can result in delayed diagnoses with associated increased morbidity and even death. The value in the establishment of these training programs as there is already tremendous stress on our local healthcare systems. We need more qualified healthcare providers. And as the population of the state has shown tremendous growth, further adding stress to an already strained system, educating more healthcare providers is definitely needed as this is not a short-term problem.

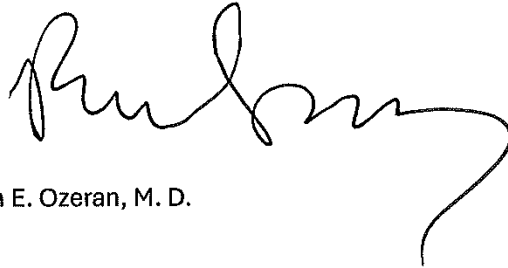
I believe that these proposed programs will not complete with existing healthcare programs at other institutions as this phenomenon is not unique to Idaho. There is currently a national shortage of healthcare providers, but more dire in Idaho and some other states; and it would behoove us to educate our own. One of the things we see with local training programs is that many of these providers continue to practice in this state which further helps Idaho meet its goal of treating its citizens. These needs are not only limited to the present, but with population growth, they are expected to worsen. Currently, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HPSA's) for medical care, and 100% are HPSA's for mental health. With



the continued population growth and the current shortage of training facilities, these crises will only become more dire.

I thus fully support these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

A handwritten signature in black ink, appearing to read "Steven E. Ozeran". The signature is fluid and cursive, with a long, sweeping tail that extends to the right.

Steven E. Ozeran, M. D.



Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Northwest Specialty Hospital, I am writing to express our support for the University of Idaho and their proposed health professions programs, including the direct entry Master of Science in Nursing (MSN) and the Physician Assistant (PA) training programs. As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) and Idahoans are left with severe shortages of healthcare access.

Importantly, these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs.

Sincerely,



Rick Rasmussen

CEO, Northwest Specialty Hospital

[Rick.Rasmussen@nwsh.com](mailto:Rick.Rasmussen@nwsh.com) // 208-262-2310

To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

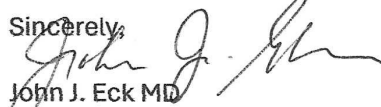
Thank you for your continued focus on the critical shortages in medical providers that Idahoans experience and for providing solutions to this challenge. I was very happy that the state legislature approved funding for the Doctorate Psychology (PsyD), Direct-Entry Master of Science in Nursing (MSN), Doctorate - Anatomical Science Education (DAS), Master of Science, Gerontology, Certified Registered Nurse Anesthetist (CRNA) Doctorate, and the Physician Assistant (PA)/Masters programs. This approval was imperative and reflects the core values of Idahoans to create solutions that reflect the unique needs of our state and our communities.

As an independent primary care physician practicing for over 30 years and a business owner, I have seen the need first-hand for more medical professionals and the consequences of provider shortages. Workforce shortages in the medical professions affect everyone: Patients, other employees, business owners, medical providers, and our great state. The strain on our current system not only affects individuals personally but also affects society at large by decreasing productivity, decreasing revenues, and making it more difficult for businesses to find and retain talent. Our future workforce throughout all sectors will continue to be affected if we do not respond to the current healthcare challenge.

As a physician, patient, business owner, and medical provider working in and with health organizations, I believe the University of Idaho health professions programs, including the proposed School of Health and Medical Professions are essential to the health of Idaho. Of note, these programs will not compete with existing healthcare programs at other institutions but will contribute to improving the diversity of the healthcare workforce which will be required in the future for a healthy Idaho.

I stand in full support of these academic programs and strongly encourage the State Board of Education to approve these programs as well as the School of Health and Medical Professions quickly.

Sincerely,



John J. Eck MD  
208 Solutions LLC  
188 W. Hulls Ridge Ct.  
Boise, Idaho 83702



Jeff Seegmiller, Ed.D., AT  
Regional Dean/Director, Preofessor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

I retired 2 years ago after 41 years of emergency medicine practice at St. Joseph's Regional Medical Center in Lewiston, Idaho. I am writing to support the proposed School of Health and Medical Professions.

As an emergency physician, I was acutely aware of the shortage of mental health professionals, nurses and physician assistants. The need for mental health care grew exponentially during my years in practice, but when I left my hospital, our mental health services had been reduced by 75% from the level of care 15 years earlier. Due to difficulties in nurse recruitment, we had to staff positions with locum tenens who, although well qualified, had no commitment to the community and were much more expensive than hiring a local person. A training program at the University of Idaho would undoubtedly help alleviate these shortages.

I am especially excited about the prospect of the Masters of Gerontology program (and not just because I am now a senior citizen.) Gerontology was historically a neglected area of medicine and given our aging population, the need for practitioners specializing in care of the aged continues to grow.

I believe that people often choose to work close to where they have received their medical training, so a program at the University of Idaho would benefit Idaho. I urge the Idaho State Board of Education to approve these programs.

Sincerely,



Jay Hunter M.D.

PO Box 415  
Hayden, ID 83835  
April 8, 2024

Jeff Seegmiller, Ed.D.  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
The University of Idaho

Dear Dr. Seegmiller,

As a retired general surgeon and strong supporter of medical education, I am writing to express my support for the University of Idaho and their proposed health professions programs, including the establishment of the School of Health and Medical Professions.

I am pleased to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs. The demand for medical professionals in these fields is high. Expanded medical education in these particular areas will help Idaho address serious health provider shortages.

The University of Idaho is well-positioned to develop and implement expanded medical education programs. It is important to note that the proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed

Expanded medical education is essential for the overall future of healthcare. Developing the next generation of medical professionals will help to ensure that patients have access to high-quality care.

I fully support these academic programs and urge the Idaho State Board of Education to move quickly with their approval for the establishment of the School of Health and Medical Professions.

Sincerely,

Thomas K. Thilo, MD  
tomthilo@hotmail.com  
(208) 661-1114

# John Huckabay

7800 S Swan Ct Coeur dAlene ID 83814

[dhuckabay@aol.com](mailto:dhuckabay@aol.com) (208) 771 4426

14 April 2024

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Jeff:

A few comments on your proposed expansion of the Medical School in Moscow. It can go without saying that I am deeply vested in the School. I fully believe that your proposed expansion of programs is badly needed. All help address the critical shortage of health care in Idaho. As the lowest ranked State in the US in medical professionals per population we need to do all we can to reverse this trend to provide better care for our population.

The program that I believe has the potential for quickest results is the Physician Assistant one. I work with other institutions with these programs. It fits very well with the MD instruction in that 23 of the 25 month program is identical. I realize that the purpose of the Education Board is to assure that costs are not duplicated with competing programs. This is not the case with your proposal as there are very few new costs and by adding to the existing classes you will actually lower the per student cost.

I have my personal medical care provided by practices that have PA's as the first line in patient care. I am always amazed at the quality and empathy that I see. Several of these practices are run by past students that I have supported that are now MD's. I get to chat with them about their experiences with the PA's and have never had a negative comment.

I will tell you a bit of a story on the CRNA program. As you are aware I worked in the military. I used to need to put in the nerve blocks for certain surgeries. It normally takes three, my average time was about 30 minutes, and I did a lot of them. I had emergency surgery a few years back. The CRNA completed the block procedure in less than 10 minutes, and was gentle in doing it. Obviously, I was impressed.

I believe that your proposed expansion is needed quickly. You have shown that you manage the School with limited overhead. I work with many other School's and none have a lower support and administration to student ratio. This shows me that you are not trying to build an empire at the burden of the taxpayers.

I fully support your proposals to the point that should they come to pass I will increase my financial support to the students in these programs to help assure their success. At least with the PA and CRNA ones you will find that most of the applicants will be alternative students, meaning they have come from the workforce and have obligations. It is critical to assist these people to rapidly become productive.

I certainly hope that you gain rapid approval for the expansion of education in Moscow.

Regards,

John Huckabay  
Via email



## JACK T. RIGGS, M.D.

04-25-24

To: Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

From: Jack T. Riggs, MD

Dear Dr. Seegmiller,

I am writing today to express my enthusiastic support for the **University of Idaho** and their newly proposed health professions programs, including the proposed **School of Health and Medical Professions (SHAMP)**.

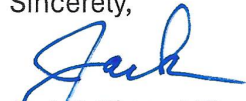
The addition of direct entry Master of Science in Nursing (MSN), Doctor of Psychology in Clinical Psychology (PsyD), Doctor of Anatomical Sciences (DAS), Certified Registered Nurse Anesthetist (CRNA) DNP degree, Master of Science in Gerontology (MS), and Physician Assistant (PA) training programs at the University of Idaho will truly benefit all the citizens of Idaho.

As you know, there is a critical need for increased access to specialized professionals in our state. Currently, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. Too many Idahoans are left with severe shortages of healthcare access.

I believe these proposed programs would improve and increase a healthcare workforce that is highly needed. A statewide shortage in healthcare workers is a combination of significant population growth combined with too few academic programs to meet the state needs. A growing and aging population will continue to strain the state's healthcare system, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

I fully support these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,



Jack T. Riggs, MD  
Former Lt. Governor of Idaho  
Former WWAMI Student E-76  
Member, WWAMI Advisory Board  
[jack@rephasing.com](mailto:jack@rephasing.com)  
208-818-1763



J-U-B ENGINEERS, INC.

J-U-B COMPANIES



THE  
LANGDON  
GROUP



GATEWAY  
MAPPING  
INC.

April 24, 2024

Dr. Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of J-U-B ENGINEERS, Inc., we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are excited to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As a midsize employer with our entire employee base residing in the intermountain west, we recognize the critical need for increased access to specialized professionals in our community and state. In recent years there has been a decline in healthcare access or services for many populations in our region. Quality healthcare is a primary concern for our employees and a critical recruitment aspect for attracting quality talent to our organization.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

J-U-B ENGINEERS, Inc.

A handwritten signature in black ink, appearing to read "Brian Smith", written over a white background.

Brian Smith, P.E.  
President/CEO





## Coeur d'Alene Public Schools

DISTRICT ADMINISTRATIVE CENTER  
1400 N. Northwood Center Court, Coeur d'Alene, ID 83814

OFFICE 208.664.8241

FAX 208.664.1748

[www.cdaschools.org](http://www.cdaschools.org)

April 29, 2024

Jeff Seegmiller, Ed.D., LAT, ATC  
Regional Dean and Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho  
1875 Perimeter Drive MS 4061  
Moscow, ID 83844-4061

Dear Dr. Seegmiller,

On behalf of Coeur d'Alene District 271, we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

Health education plays a pivotal role in improving community well-being by promoting knowledge and healthy practices across all age groups. As an academic organization we know the importance of health education and development allowing increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

Dr. Shon Hocker  
Superintendent of Schools  
Coeur d'Alene Public School District 271  
[shon.hocker@cdaschools.org](mailto:shon.hocker@cdaschools.org)  
208-664-8241 ext. 10008

**INVEST | INSPIRE | INNOVATE**

We invest in each student to prepare, challenge and advance  
well-educated, resilient and future-ready citizens.



2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

Dear Dr. Seegmiller,

In my capacity as the Chief Nursing Officer of Kootenai Health, I wish to express our strong support for the University of Idaho's proposed School of Health and Medical Professions (SHMP).

The introduction of the direct entry Master of Science in Nursing (MSN), Doctor of Psychology in Clinical Psychology (PsyD), Doctor of Anatomical Sciences (DAS), Certified Registered Nurse Anesthetist (CRNA) DNP degree, Master's of Science in Gerontology (MS), and Physician Assistant (PA) training programs reflects a proactive response to the escalating health care needs of our community and state.

At Kootenai Health, we recognize the critical shortage of healthcare professionals across Idaho, especially in medically underserved areas. This shortage not only challenges our ability to meet the diverse healthcare needs of our population but also underscores the importance of expanding access to specialized health care education.

These proposed programs align closely with our commitment to excellence in patient care and nursing education. By enhancing the availability of advanced nursing education opportunities, we can cultivate a highly skilled workforce capable of delivering comprehensive and compassionate care to our patients.

Moreover, we firmly believe that these programs will complement existing health care initiatives, contributing to the overall enhancement of health care services throughout Idaho. As our population continues to grow and age, the demand for qualified health care professionals will only intensify, making the approval of these programs all the more urgent.

In conclusion, I am proud to lend my full support to the University of Idaho's efforts to establish the School of Health and Medical Professions and its associated programs. I urge the Idaho State Board of Education to approve these initiatives, as they represent a significant step forward in addressing our state's healthcare challenges.

Thank you for your dedication to advancing healthcare education and improving the health and well-being of all Idahoans.

Sincerely,

A handwritten signature in black ink, appearing to read "Kelly Espinoza", is written over a circular stamp or seal.

Kelly Espinoza, PhD, RN

Chief Nursing Officer, Kootenai Health



2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

To:  
Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

As the Executive Vice President of Kootenai Clinic, I am pleased to convey our organization's support for the University of Idaho's proposed School of Health and Medical Professions (SHMP).

We are excited about the potential of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs to address the pressing health care needs in our community and state.

At Kootenai Clinic, we are keenly aware of the challenges posed by the shortage of specialized health care professionals across Idaho. With 98% of Idaho counties designated as Health Provider Shortage Areas (HSPAs) for medical care and 100% for mental health, there is an urgent need to expand access to quality health care services.

We firmly believe these proposed programs will not only alleviate the shortage of health care professionals, but also enhance the overall quality of care provided to Idaho residents. By addressing the growing demand for health care services, we can improve health outcomes and enhance the well-being of our community.

Moreover, we view these programs as complementary rather than competitive, recognizing the need for collaboration among academic institutions to meet the evolving health care needs of our state. As Idaho's population continues to grow and age, the strain on our health care infrastructure will only increase, further highlighting the importance of expanding health care services within the state.

In conclusion, I urge the Idaho State Board of Education to approve the establishment of the School of Health and Medical Professions and its associated programs. Kootenai Clinic stands ready to support these initiatives and looks forward to collaborating with the University of Idaho to advance health care education and improve access to quality care for all Idahoans.

Sincerely,



John Weinsheim

Executive Vice President of Kootenai Clinic



2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

As a dedicated board member of Kootenai Health, I am pleased to convey our steadfast support for the University of Idaho's proposed health professions programs, including the establishment of the School of Health and Medical Professions.

The inclusion of the direct entry Master of Science in Nursing (MSN), Doctor of Psychology in Clinical Psychology (PsyD), Doctor of Anatomical Sciences (DAS), Certified Registered Nurse Anesthetist (CRNA) DNP degree, Master's of Science in Gerontology (MS), and Physician Assistant (PA) training programs exemplifies a proactive approach to addressing the pressing health care needs of our community and state.

Kootenai Health recognizes the profound impact of health care workforce shortages on our region, with the majority of Idaho counties designated as Health Provider Shortage Areas (HSPAs) for medical and mental health care. These shortages underscore the critical need for expanded access to specialized health care professionals.

Importantly, we view these proposed programs as complementary rather than competitive, aimed at bolstering the existing health care workforce to better serve our growing population. The demographic surge of aging Idahoans further emphasizes the urgency of expanding health care services within the state.

Therefore, we wholeheartedly endorse these academic programs and urge the Idaho State Board of Education to expeditiously approve the establishment of the School of Health and Medical Professions, along with the proposed programs.

Thank you for your dedication to advancing health care education and improving access to quality care for all Idahoans.

Sincerely,



Dave Bobbitt

Secretary and Treasurer, Kootenai Health Board of Trustees





KootenaiHealth

2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

To:  
Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

I am writing to express Kootenai Health's support for the proposed School of Health and Medical Professions (SHAMP) at the University of Idaho. As the CEO of Kootenai Health, the regional referral center for the ten northern counties of Idaho, I can confidently say the creation of SHAMP will greatly contribute to the advancement of health care delivery in our state.

The programs outlined in the proposal for SHAMP align closely with the evolving health care needs of Idahoans. We recognize the immense value they would bring to our health system and the patients we care for. In particular, there is a critical shortage of Advanced Practice Providers (APPs) in North Idaho, and the only programs in our region are offered through private, out-of-state universities.

Each degree, Clinical Psychology (PsyD), Direct-Entry Master of Science in Nursing (MSN), Doctorate in Anatomical Science Education (DAS), Master of Science in Gerontology, Certified Registered Nurse Anesthetist (CRNA) DNP degree, and Physician Assistant (PA) Master's programs are all critical in preparing highly skilled health care professionals to meet the complex demands of quality health care delivery.

We firmly believe the establishment of SHAMP will enhance educational opportunities for aspiring health care professionals in our community, fostering a pipeline of talent that will contribute to the improvement of health care delivery and patient outcomes. Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

Kootenai Health fully supports the establishment of the School of Health and Medical Professions at the University of Idaho. We are confident that SHAMP will play a pivotal role in shaping the future of health care education and practice, and we look forward to the opportunity to collaborate closely with the university in realizing this vision.

Sincerely,



Jameson C. Smith  
CEO, Kootenai Health



COEUR D'ALENE AREA  
ECONOMIC DEVELOPMENT CORPORATION  
3731 N Ramsey Rd, Suite 110B ~ Coeur d'Alene, ID 83814 ~ 1.208.667.4753

April 29, 2024

To: Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of the Coeur d'Alene Area Economic Development Corporation/Jobs Plus, Inc., we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As an organization dedicated to economic development and assisting businesses with workforce challenges, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages for healthcare access.

We strongly believe these proposed programs will not compete with existing healthcare programs at other institutions, but rather, would improve talent supply that is highly needed. Statewide shortages in our healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

Gynii A Gilliam, President/CEO  
Email: [gynii@cdaedc.org](mailto:gynii@cdaedc.org); Phone: (208)667-4753

BOARD OF DIRECTORS

**Mike Kennedy, Chair**  
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Jobs+ Action Committee  
**Wally Jacobson**  
Panhandle Area Council  
**Gynii A. Gilliam**  
President & CEO

**KootenaiHealth**

2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Kootenai Health, we are writing to express our support for the University of Idaho and its proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care, and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would improve a highly needed workforce. Statewide shortages in the healthcare workforce are related to drastic population growth in the state and a paucity of academic programs to meet the state's needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We fully support these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

**Kelly McCarthy Pöl**, DNP, RN, NP-D, CHSE  
Manager Clinical Education and Simulation

Kootenai Health  
2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.5189  
kpol@kh.org



To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Syringa Hospital & Clinics, we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are excited to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As a rural hospital dedicated to advancing improving the health and well-being of our community, we recognize the critical need for increased access to specialized professionals in both our local community and in our state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

We believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather grow and develop a workforce that is greatly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

Abner King, FACHE  
Chief Executive Officer  
[aking@syringahospital.org](mailto:aking@syringahospital.org)  
208-983-8525





To:  
Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Bonner General Hospital, we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

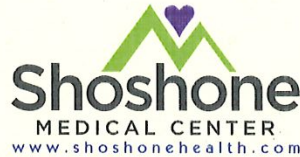
As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

John Hennessy  
Chief Executive Officer  
Bonner General Hospital



25 Jacobs Gulch • Kellogg, Idaho 83837 • (208) 784-1221 • Fax (208) 784-0961

To:  
Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Shoshone Medical Center, I am writing to express support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

Several of the planned programs would help expand access to critical healthcare and mental health services in Idaho. As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. Shoshone county is a designated Health Provider Shortage Area (HSPA) for both medical care and mental health services. Providing these educational pathways will help alleviate the critical shortage of services we currently experience. Population growth and an aging population will continue to increase demand for medical and mental health services, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

Thank you for the opportunity to express support for these academic programs; I urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

Paul Lewis  
CEO

[plewis@shomed.org](mailto:plewis@shomed.org)

To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of the Coeur d'Alene Casino Resort Hotel, we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

Laura Penney, CEO

[lpenny@cdacasino.com](mailto:lpenny@cdacasino.com)



# North Idaho College

1000 West Garden Avenue, Coeur d'Alene, Idaho 83814  
[www.nic.edu](http://www.nic.edu)

**President's Office**  
(208)769-3303 phone  
[nick.swayne@nic.edu](mailto:nick.swayne@nic.edu)

18 March 2024

Idaho State Board of Education  
650 West State Street, 3rd Floor  
Boise, ID 83702

Dear Idaho State Board of Education,

I am writing to express my wholehearted support for the University of Idaho and their proposed health professions programs. As President of North Idaho College, I am acutely aware of the healthcare challenges facing our state, particularly in northern Idaho, where shortages of healthcare providers have reached unprecedented levels.

The statistics paint a stark picture: with 98% of the state designated as health professional shortage areas, our citizens are left grappling with limited access to essential healthcare services. This not only impacts our economy but, more importantly, jeopardizes the well-being of our community members.

The University of Idaho's proposal to introduce a doctorate in clinical psychology (PsyD), a Physician Assistant program, and a direct entry Master of Science in Nursing are much-needed steps towards addressing these critical shortages. These programs are tailored to meet the specific needs of our region, where the shortage of healthcare professionals is most acute.

It's important to emphasize that these proposed programs are not intended to compete with existing offerings at other universities, but rather to complement and enhance the range of healthcare education available within the state. There is a clear and demonstrated need for these programs, with a level of interest that is currently underserved.

As we look towards the future, it is imperative that we invest in the growth of all health professional programs to ensure the vitality of our healthcare workforce. The University of Idaho, as our state's top research institution, is well-positioned to play a leading role in this endeavor.

(continued)

I am enthusiastic about the prospect of collaboration between the University of Idaho's new health programs and our own North Idaho College health professions programs to expand collaborative initiatives. Together, we can work towards meeting the healthcare needs of northern Idaho and the state as a whole.

Thank you for your attention to this matter. I stand ready to offer any assistance or support necessary to bring these vital programs to fruition.

Sincerely,

A handwritten signature in black ink that reads "Nick Swayne". The signature is written in a cursive style with a large, looping initial "N".

Nick Swayne, PhD  
President, North Idaho College

April 3, 2024

Idaho State Board of Education  
650 West State Street  
Boise ID, 83702

Members of the Idaho State Board of Education,

This letter represents the collective response of Idaho State University, Boise State University, and Lewis-Clark State College to the recent proposals forwarded by the University of Idaho to inaugurate a School of Health and Medical Professions and launch several programs in the health sciences. Institutional responses to individual program proposals have been submitted, but we write to express our collective concern related to how these proposals have emerged. The State Board of Education has encouraged collaboration among our institutions and a preference for “systemness” in our approach to building out programming. For the past half-decade we have worked together to meet the State’s education needs leveraging systemness. We support and believe that leveraging existing programming with collaboration and partnerships is the best way to attend to critical workforce needs across a range of industries thanks to significant public and institutional resources already invested in these programs. We are committed to providing a diverse range of educational opportunities to Idahoans who desire them and acting as stewards of tax-payer funds by avoiding program duplication as we work collaboratively. Our goal should be to increase the production of critical health care professionals, not to needlessly increase the number of professional health care programs. The path forward needs to leverage existing institutional-specific strengths and investments in educational capacity and infrastructure. We stand ready to collaborate as a system of higher education to create needed programming to increase the healthcare education capacity of the state and are open to working with the University of Idaho to meet these goals.

The recently submitted proposals do not support collaboration among the institutions in their existing form. Although discussions have occurred in the past related to partnerships between our institutions, these current proposals were drafted without further conversation. Additionally, these proposals have the potential to make health sciences education in some disciplines more costly and result in the unnecessary expenditure of tax-payer funds and cost increases to students. Finally, the rhetoric that has been used to advance these proposals in communications to the legislature and the broader public, about the mortality rate of Idahoans, has been misleading and does not recognize the important educational efforts by state institutions that include public-private partnerships in key geographic areas. The individual program proposal responses include specific information on current programming and we encourage you to review all submitted responses. Should the State Board of Education wish to see additional data beyond that found in our individual proposal responses to assess the validity of these concerns, we welcome the opportunity to provide such data.

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We are committed to collaborative engagement and working among all eight Idaho institutions to identify opportunities to build program partnerships. These partnerships should leverage our existing programmatic areas of expertise—thus, building effective collaborations without unnecessary competition. We urge the Board to set aside these proposals and facilitate collective dialogue about how we might collaboratively address Idaho’s healthcare workforce demands. We urge all institutions to come to that dialogue with a substantive commitment to the principles the Board has long expected.

DocuSigned by:  
*Robert Wagner*  
567879ED5373439...  
Dr. Robert W. Wagner  
President, Idaho State University

DocuSigned by:  
*Cynthia Pemberton*  
E88DEFB474D14C3...  
Dr. Cynthia Pemberton  
President, Lewis-Clark State College

DocuSigned by:  
*Dr. Marlene Tromp*  
2274E655BAD240D...  
Dr. Marlene Tromp  
President, Boise State University

LEGISLATURE OF THE STATE OF IDAHO  
 Sixty-seventh Legislature Second Regular Session - 2024

IN THE HOUSE OF REPRESENTATIVES

HOUSE BILL NO. 734

BY APPROPRIATIONS COMMITTEE

AN ACT

RELATING TO THE APPROPRIATION TO THE STATE BOARD OF EDUCATION AND THE BOARD OF REGENTS OF THE UNIVERSITY OF IDAHO; APPROPRIATING ADDITIONAL MONEYS TO THE STATE BOARD OF EDUCATION AND THE BOARD OF REGENTS OF THE UNIVERSITY OF IDAHO FOR COLLEGE AND UNIVERSITIES AND THE OFFICE OF THE STATE BOARD OF EDUCATION FOR FISCAL YEAR 2025; REDUCING THE APPROPRIATION TO THE STATE BOARD OF EDUCATION AND THE BOARD OF REGENTS OF THE UNIVERSITY OF IDAHO FOR COLLEGE AND UNIVERSITIES AND THE OFFICE OF THE STATE BOARD OF EDUCATION FOR FISCAL YEAR 2025; PROVIDING FOR THE USE OF APPROPRIATED FUNDS; PROVIDING FOR THE USE OF APPROPRIATED FUNDS; AND DECLARING AN EMERGENCY AND PROVIDING AN EFFECTIVE DATE.

Be It Enacted by the Legislature of the State of Idaho:

SECTION 1. In addition to any other appropriation provided by law, there is hereby appropriated to the State Board of Education and the Board of Regents of the University of Idaho for College and Universities and the Office of the State Board of Education the following amounts to be expended according to the designated programs and expense classes from the listed funds for the period July 1, 2024, through June 30, 2025:

	FOR PERSONNEL COSTS	FOR OPERATING EXPENDITURES	TOTAL
I. BOISE STATE UNIVERSITY:			
FROM:			
General			
Fund	\$4,292,600		\$4,292,600
Unrestricted			
Fund	<u>521,000</u>		<u>521,000</u>
TOTAL	\$4,813,600		\$4,813,600
II. IDAHO STATE UNIVERSITY:			
FROM:			
General			
Fund	\$2,991,900	\$552,100	\$3,544,000
Charitable Institutions Endowment Income			
Fund	31,700		31,700
Normal School Endowment Income			
Fund	357,200		357,200



**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**

**JUNE 13, 2024**

**ATTACHMENT 4**

2

	FOR	FOR	
	PERSONNEL	OPERATING	
	COSTS	EXPENDITURES	TOTAL
4	Unrestricted		
5			Fund
	<u>589,700</u>	<u>0</u>	<u>589,700</u>
6	TOTAL	\$3,970,500	\$552,100
			\$4,522,600
7	III. LEWIS-CLARK STATE COLLEGE:		
8	FROM:		
9	General		
10			Fund
	\$551,700	\$268,800	\$820,500
11	Normal School Endowment Income		
12			Fund
		352,200	352,200
13	Unrestricted		
14			Fund
	<u>225,000</u>	<u>0</u>	<u>225,000</u>
15	TOTAL	\$776,700	\$621,000
			\$1,397,700
16	IV. UNIVERSITY OF IDAHO:		
17	FROM:		
18	General		
19			Fund
	\$3,548,200	\$290,000	\$3,838,200
20	Agricultural College Endowment Income		
21			Fund
		65,700	65,700
22	Scientific School Endowment Income		
23			Fund
		49,700	49,700
24	University Endowment Income		
25			Fund
		266,500	266,500
26	Unrestricted		
27			Fund
	<u>942,900</u>	<u>0</u>	<u>942,900</u>
28	TOTAL	\$4,491,100	\$671,900
			\$5,163,000
29	GRAND TOTAL	\$14,051,900	\$1,845,000
			\$15,896,900

30 SECTION 2. Notwithstanding any other provision of law to the contrary,  
 31 the appropriation to the State Board of Education and the Board of Regents of  
 32 the University of Idaho for College and Universities for Boise State Univer-  
 33 sity is hereby reduced by \$4,600 from the General Fund from operating expen-  
 34 ditures for the period July 1, 2024, through June 30, 2025.

35 SECTION 3. USE OF APPROPRIATED FUNDS. State-appropriated funds shall  
 36 not be utilized to support diversity, equity, inclusion, or social justice  
 37 ideology as part of any student activities, clubs, events, or organizations

1 on campus. Each college and university shall submit a written report of its  
2 expenditures related to these activities to the Joint Finance-Appropria-  
3 tions Committee no later than December 1, 2024.

4 SECTION 4. USE OF APPROPRIATED FUNDS. State-appropriated funds for  
5 capacity enhancement at the University of Idaho shall not be utilized to  
6 support undergraduate nursing or physician assistant programs that are pro-  
7 vided by other colleges, universities, and community colleges that receive  
8 state appropriated funds.

9 SECTION 5. An emergency existing therefor, which emergency is hereby  
10 declared to exist, this act shall be in full force and effect on and after  
11 July 1, 2024.

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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**UNIVERSITY OF IDAHO**

**SUBJECT**

Master of Physician Assistant Studies

**APPLICABLE STATUTE, RULE, OR POLICY**

Idaho State Board of Education Governing Policies & Procedures, Sections III.G., and III.Z.

H734, Section 4 (2024)

Idaho Code § 33-113

**BACKGROUND/DISCUSSION**

University of Idaho proposes to establish a Master of Physician Assistant Studies (MPAS) program in a proposed School of Health and Medical Professions (SHAMP) in the College of Graduate Studies. The University of Idaho has a foundation of faculty and facilities that can be leveraged to develop an MPAS degree. Working interdependently with physicians, a physician assistant provides diagnostic and therapeutic patient care in virtually all medical specialties and settings. They take patient histories, perform physical examinations, order laboratory and diagnostic studies, prescribe medications, and develop patient treatment plans. Their job descriptions are as diverse as those of their supervising physicians, and include clinical practice, patient education, team leadership, medical education, health administration, and research.

Currently, Idaho ranks at the bottom of all the states for number of practicing physicians per capita. The Idaho Department of Health and Welfare data indicates 98% of the state has a shortage of primary care physicians and 100% of the state has a shortage of mental health professionals. Further, 41% of Idaho physicians are age 55 or older, with higher populations of older physicians in Idaho's rural communities. Physician assistants can fill these gaps in the Idaho healthcare system, especially in rural communities; thus, our state has an immediate need and rising demand for physician assistants. The increasing shortage of health care professionals is an Idaho issue that needs to be addressed by higher education institutions within the state.

**IMPACT**

Idaho's population has been growing at an exceptional rate for five consecutive years, surpassing the national growth rate by a substantial margin. This population surge has strained the state's healthcare system, underscoring the necessity for expanding healthcare services within Idaho. It is quite evident that we simply do not have enough healthcare workers to take care of us and the situation could get worse if we do not act.

Certified Physician Assistants/Associates (PA-Cs) are essential members of the healthcare workforce and play a crucial role in expanding access to quality healthcare for Idaho's most rural communities. PAs are qualified to work in just

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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about every area of clinical medicine, from family medicine to surgical specialties. The three top specialties for PAs are family medicine (30.6%), emergency medicine (14.8%), and urgent care (10.1%). This versatility allows for PAs to be employed wherever a physician might be employed; by educating more PAs in Idaho, we can serve Idaho citizens with healthcare who may not receive it otherwise due the physician shortage.

The MPAS program at UI will serve baccalaureate prepared students from a variety of backgrounds who may enroll directly after completion of their undergraduate degree or as is often the case, after working in another health care field for a variable length of time. Our goal is to find qualified Idaho residents for at least two-thirds of the available seats in the program. We intend to attract individuals who want to serve their communities as providers of quality health care with an emphasis on evidence-based medicine. To that end, we will make a concerted effort to attract and accept a diverse student body to create a student-centered educational environment that engages individuals to become compassionate, competent physician assistants who possess the clinical skills to contribute positively to the dynamic health care needs of rural and underserved Idaho communities.

Healthcare jobs in Idaho are projected to be the fastest growing professions this decade, with nearly 10,000 new jobs being projected, according to the Idaho Department of Labor. The population that the PA program will serve encompasses a broad demographic from the classroom to the bedside, by training a healthcare workforce who will in turn provide essential healthcare services to the people of Idaho.

Based on this important need, we propose to create the PA degree to fill this critical workforce shortage. The areas of justification include the following:

- Critical Workforce Shortage
- Enhancing Access to Care
- Addressing Rural Healthcare Need
- Future Demand

In summary, if this request is granted, the primary beneficiaries are the individuals and communities who will be served by future PAs. In addition, Idahoans who desire to seek this MPAS degree will be able to remain in the state for their training, and therefore, increasing the likelihood they will stay in Idaho to practice.

The program will utilize facilities currently under the WWAMI program. Facilities include three active learning classrooms, a cadaver anatomy lab, nine standardized patient rooms, research offices and student common study areas. All of which will be shared with MPAS students. Impact to WWAMI program will be minimal. Classes for the PA students will be scheduled when WWAMI is not using the facilities. Current staff with capacity will be reassigned within the new school,

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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but new hires will be made to prevent detrimental effects on existing programs and personnel.

Resources will be needed for simulation training and clinical skills training. The MPAS program will be adding 108 credits in 35 new courses developed for the program. UI anticipates program will require 3.0 faculty FTE to implement teaching of the content (including the program director), 0.5 FTE for a Medical Director administrative position, and 2.0 FTE staff positions to execute the program and deliver on the clinical training experiences.

Total expenditures are \$927,145 - \$1,901,173 of ongoing funds over a four-year period which will cover faculty and personnel costs, travel, and other operational expenses. The program is requesting a professional fee of \$23,000 per year. A budget addendum is included to demonstrate how the program aligns with State Board Policy V.R requirements.

**ATTACHMENTS**

- Attachment 1 – Master of Physician Assistant Studies Proposal
- Attachment 2 – Letters of Support
- Attachment 3 – Institution Responses
- Attachment 4 – Presidents’ Response to Health Proposals
- Attachment 5 – HB 734 College and Universities 2025 Appropriation
- Attachment 6 – MOU Between Idaho State University and LC-State

**BOARD STAFF COMMENTS AND RECOMMENDATIONS**

The university provides many factors to demonstrate the need for another physician assistant studies program in Idaho such as the growth rate for PA positions in the state, the number of applicants not admitted to ISU’s program and the comparable PA program at the University of Utah. The university asserts that the proposed program is tailored to serve the specific needs of their service region and allows for program design differences between ISU and UI, such as a more extensive emphasis on rural healthcare.

The program projects 20 students in its first year reaching 75 by year five and graduating 18 starting in year two. Based on the proposal, the program has capacity to equal enrollments at ISU and University of Utah based on regional application numbers and the expected growth of PA jobs in Idaho and the Pacific Northwest. The projected numbers were based on the capacity of the program based on its design, the capacity of northern Idaho to train PA students, and the cost structure of the program.

The program proposal identified a minimum class size of 15 students per cohort or 30 students overall to maintain sustainability. These minimums are based on revenues needed to sustain program delivery. If minimums are not met the program will be evaluated after three years of concurrent enrollment deficiency.

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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The program will sunset following four years of enrollment deficiency. Teach-outs will occur for matriculating students and a new cohort will not be filled.

The proposed program is not presently listed in the university's current approved three-year plan; however, it has been added to their updated plan which will be reviewed by the Board in August of this year. In accordance with State Board Policy III.Z responsibilities, Idaho State University has statewide program responsibility for the Master of Physician Assistant Studies and currently offers the program face-to-face in Regions III and V. Staff notes that ISU has added a potential expansion of their existing MPAS program to Regions I and II as part of a collaboration between Idaho State and Lewis-Clark State College.

The proposal completed the program review process and was presented to the Council on Academic Affairs and Programs on March 28, 2024; and to the Instruction, Research, and Student Affairs on May 30, 2024. At the IRSA committee meeting, several Board members expressed concerns that this program is being proposed prematurely. Some collaborative programmatic strategies were shared, including joint degree programs, that might lead to a more efficient use of resources and better serve students.

Boise State University, Lewis-Clark State College, and Idaho State University have shared comments and concerns about the program proposal, including claims the proposal is not responsive to requirements set forth in Board Policy III.Z. regarding criteria for high-demand programs, statewide program responsibilities and memoranda of understanding. Particularly, institutions raised concerns around collaboration efforts, unnecessary and costly duplication of an existing program (including duplicate accreditation costs), competition of clinical placements, increased cost of state resources, impacts to system-ness, and unnecessary competition. Detailed concerns from the institutions are provided in Attachment 2 for the Board's review.

Additionally, as part of the College and Universities FY2025 appropriation (H734), the Legislature adopted the following language: "State appropriated funds for capacity enhancement at the University of Idaho shall not be utilized to support undergraduate nursing or physician assistant programs that are provided by other colleges, universities, and community colleges that receive state appropriated funds." HB 734 is included for reference.

The Board should carefully consider all concerns and observations raised by the other institutions, to determine the need for the proposed program in Region II and whether it can be met solely by UI based on workforce needs and capacity identified in the proposal. The Board should also consider the letter and spirit of the legislative prohibition noted above. Staff notes the Board *must* consider Idaho State University's statewide program responsibilities for the Master of Physician Assistant Studies program and current Board policy related to statewide program responsibilities.

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

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If the Board desires to approve this program, it must follow the procedures outlined in the “High-Demand Programs” section of Board Policy III.Z., including making the determination that the proposed program meets the criteria for high-demand programs, determine that an “emergency need” exists, and direct UI and ISU to enter an MOU to offer the program in Regions I and II. The Board may need to establish the terms of this MOU if the institutions cannot agree to acceptable terms on their own.

Staff recommends the Board direct Idaho State University and the University of Idaho to come back with a joint proposal for Idaho State University to offer a MPAS program in Regions I and II in collaboration with the University of Idaho. Any such agreement should take into account the recently signed MOU between Idaho State University and Lewis-Clark State College to offer the MPAS program in Region II.

**BOARD ACTION**

I move to approve the request by the University of Idaho to create a Master of Physician Assistant Studies, as presented in Attachment 1.

Moved by \_\_\_\_\_ Seconded by \_\_\_\_\_ Carried Yes \_\_\_\_\_ No \_\_\_\_\_

AND

I move to approve the request by the University of Idaho to charge a professional fee of \$23,000 per year in addition to standard graduate tuition and fees for the Master of Physician Assistant Studies, in conformance with the program budget submitted to the Board in Attachment 1.

Moved by \_\_\_\_\_ Seconded by \_\_\_\_\_ Carried Yes \_\_\_\_\_ No \_\_\_\_\_



Institutional Tracking No. \_\_\_\_\_

Revised 5/8/2024-ps

FULL PROPOSAL FORM

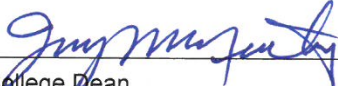
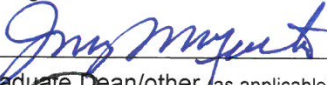
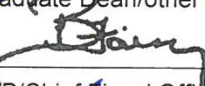
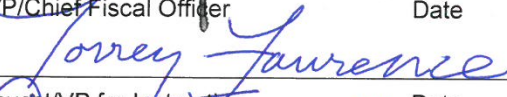

Academic Degree and Certificate Program

Date of Proposal Submission:	October 9, 2023		
Institution Submitting Proposal:	University of Idaho		
Name of College, School, or Division:	College of Graduate Studies		
Name of Department(s) or Area(s):	College of Graduate Studies		
Official Name of the Program:	Direct-Entry Master of Physician Assistant Studies		
Implementation Date:	Fall of 2025		
Degree Information:	Degree Level: Graduate	Degree Type: MPAS	
CIP code (consult IR /Registrar):			
Method of Delivery: Indicate percentage of face-to-face, hybrid, distance delivery, etc.	Face-to-face		
Geographical Delivery:	Location(s)	Moscow	Region(s) 2
Indicate (X) if the program is/has: (Consistent with Board Policy V.R.)	<input checked="" type="checkbox"/> Self-Support fee	<input checked="" type="checkbox"/> Professional Fee	<input type="checkbox"/> Online Program Fee
Indicate (X) if the program is: (Consistent with Board Policy III.Z.)	<input checked="" type="checkbox"/> Regional Program Responsibility: University of Idaho	<input type="checkbox"/> Statewide Program Responsibility	

Proposed Action

- New program offering
  - Undergraduate program
  - Graduate program
  - Undergraduate certificate (30 credits or more)
  - Graduate certificate (30 credits or more)
- New branch campus or change in location

- Modification of Existing Academic Programs
  - Converting one program option to a stand-alone program
  - Consolidating two or more undergraduate programs into one
  - Consolidating two or more graduate programs into one
  - Splitting an existing program into two or more programs
  - Program expansion outside an institution's Designated Service Region as defined in Board Policy III.Z.
  - Adding certificate or degrees to existing programs

	3/21/24		
College Dean	Date	Vice President for Research (as applicable)	Date
	3/20/24		
Graduate Dean/other (as applicable)	Date	Academic Affairs Program Manager, OSBE	Date
	3/20/24		
FVP/Chief Fiscal Officer	Date	Chief Financial Officer, OSBE	Date
			
Provost/VP for Instruction	Date	Chief Academic Officer, OSBE	Date
			
President	Date	SBOE/Executive Director or Designee Approval	Date



Before completing this form, refer to Board Policy Section III.G., Postsecondary Program Approval and Discontinuance. This proposal form must be completed for the creation of each new program. All questions must be answered.

### **Rationale for Creation or Modification of the Program**

- 1. Describe the request and give an overview of the changes that will result.** What type of substantive change are you requesting? Will this program be related or tied to other programs on campus? Identify any existing program that this program will replace. If this is an Associate degree, please describe transferability.

The direct-entry Master of Physician Assistant Studies (MPAS) is a new proposed graduate program designed to prepare students to become a Physician Assistant. The MPAS program is an independent program and will be housed in the College of Graduate Studies at the University of Idaho. A School of Health and Medical Professions is currently being created and processed to eventually house these health care programs, under the College of Graduate Studies.

- 2. Need for the Program.** Describe evidence of the student, regional, and statewide needs that will be addressed by this proposal to include student clientele to be served and address the ways in which the proposed program will meet those needs.
  - a. Workforce and economic need:** Provide verification of state workforce needs that will be met by this program. Include job titles and cite the data source. Describe how the proposed program will stimulate the state economy by advancing the field, providing research results, etc.

Idaho has been one of the fastest growing states for 5 consecutive years: our population increased by 11.1% since 2016 and is expected to grow 10.5% between 2021 and 2026. The population increase in Idaho substantially outpaced the national growth rate of 1.8% by 13.5%. Additionally, Idaho's percentage of the population over the age of 65 has grown from 15% (2015) to 16% (2021). The rapid population growth and increased percentage of an aging population further burden a struggling healthcare system, exacerbating the industry need for expansion of healthcare services in Idaho. The Idaho Department of Labor predicts a 23% growth rate for PA positions in Idaho through 2030.

Idaho is facing a severe healthcare workforce crisis; for example, in June of 2022, Idaho had 9,000 health care jobs that could not be filled. While a shortage of healthcare professionals is not unique to Idaho, the worsening shortages nationwide, and Idaho population increases has resulted in a need for more healthcare professionals and a decrease in the per capita healthcare provider ratio. This change in our population and a decrease in the healthcare provider ratio justifies seeking new solutions to increase the number of health care professionals who will care for the people of Idaho.

Currently, Idaho ranks at the bottom of all the states for number of practicing physicians per capita. The Idaho Department of Health and Welfare data indicates 98% of the state has a shortage of primary care physicians and 100% of the state has a shortage of mental health professionals. Further, 41% of Idaho physicians are age 55 or older, with higher populations of older physicians in Idaho's rural communities. Physician assistants can fill these gaps in the Idaho healthcare system, especially in rural communities; thus, our state has an immediate need and rising demand for physician assistants. The increasing shortage of health care professionals is an Idaho issue that needs to be addressed by higher education institutions within the state.

Certified Physician Assistants/Associates (PA-Cs) are essential members of the healthcare workforce and play a crucial role in expanding access to quality healthcare for Idaho's most rural communities. PAs are qualified to work in just about every area of clinical medicine, from family medicine to surgical specialties. The three top specialties for PAs are family medicine (30.6%), emergency medicine (14.8%), and urgent care (10.1%). This versatility allows for PAs to be employed wherever a physician might be employed; by educating more PAs in Idaho, we can serve Idaho citizens with healthcare who may not receive it otherwise due to the physician shortage.

- b. Student demand.** What is the most likely source of students who will be expected to enroll (full-time, part-time, outreach, etc.). Provide evidence of student demand/ interest from inside and outside of the institution.

Currently, Idaho State University runs the only PA program in the state, with cohorts enrolled in three locations: Pocatello, Meridian, and Caldwell. It is a distance learning model that leverages the talents of faculty at all locations to serve students. Seventy-two students are admitted each year (out of ~650 to 900 applications), and the applicant pool of students not accepted has a large portion of Idaho residents (e.g., the ISU applicant 'alternate list' has been made up by 40% or more Idaho residents in 3 of the past 4 years).

Idaho State PA Program Admissions Information:

	2019	2020	2021	2022	Total
<b>Number of complete applications</b>	762	857	887	653	3159
<b>Interviewed</b>	147	163	129	177	616
<b>Number enrolled</b>	72	72	72	72	288

A comparable PA program at the University of Utah has similar PA production (i.e., 60-68 students per cohort out of ~2500 applicants per year). The University of Utah self-reports a 3% admission rate for their PA program. In short, more than 90% of applicants are not accepted to either of these programs. Further, in-state accredited PA programs do not exist in most of the Pacific Northwest (e.g., Montana, Wyoming, Alaska) and the regional admissions data supports a great student desire to pursue a career as a PA that is not being met in Idaho, as well as the Pacific Northwest. Low production of PAs in the region, combined with the great demand for PA graduates in the healthcare system, indicate that student and healthcare system demand are greater than ISU can meet, which supports the establishment of a program at UI to allow for student to be trained and prepared to meet the needs of northern Idaho and our rural communities (e.g., not training students in the Treasure Valley who are likely to remain in the Treasure Valley for clinical practice). The U of I's expansion into PA education, especially since our program will focus on recruitment from – and training in – Northern Idaho is needed for our students and our state.

The PA program at UI will serve baccalaureate prepared students from a variety of backgrounds who may enroll directly after completion of their undergraduate degree or as is often the case, after working in another health care field for a variable length of time. Our goal is to find qualified Idaho residents for at least two-thirds of the available seats in the program. We intend to attract individuals who want to serve their communities as providers of quality health care with an emphasis on evidence-based medicine. To that end, we will make a concerted effort to attract and accept a diverse student body to create a student-centered educational environment that engages individuals to become compassionate, competent physician assistants who possess the clinical skills to contribute positively to the dynamic health care needs of rural and underserved Idaho communities.

- c. **Societal Need:** Describe additional societal benefits and cultural benefits of the program.

Idahoans, especially those in rural areas, face critical healthcare access challenges. The shortage of healthcare providers requires many Idahoans to go without care or to overcome substantial barriers to access healthcare within and outside of their communities. The University of Idaho, and the WWAMI Medical Education program, have a 50+ year history of training medical professionals in rural communities and returning a greater rate of providers to rural communities than is found nationwide. Communities would benefit from the training of MPAS students in their communities, as well greater benefit that would occur from the result of the recruitment and training of students who call those communities' home. The increased retention of UI MPAS graduates in Idaho communities would enhance physical health and quality of life for residents in those communities, while supporting the Idaho economy.

### 3. Program Prioritization

Is the proposed new program a result of program prioritization?

Yes \_\_\_\_\_ No X \_\_\_\_\_

If yes, how does the proposed program fit within the recommended actions of the most recent program prioritization findings.

### 4. Credit for Prior Learning

Indicate from the various crosswalks where credit for prior learning will be available. If no PLA has been identified for this program, enter 'Not Applicable'.

Not Applicable

### 5. Affordability Opportunities

Describe any program-specific steps taken to maximize affordability, such as: textbook options (e.g., Open Educational Resources), online delivery methods, reduced fees, compressed course scheduling, etc. This question applies to certificates, undergraduate, and graduate programs alike.

Our institution is deeply committed to ensuring that students pursuing the Master of Physician Assistant Studies (MPAS) degree have access to an affordable, high-quality education. To that end, we have implemented several measures aimed at maximizing affordability for our students:

1. Open Educational Resources (OER) for Textbooks: Recognizing the high cost of textbooks, our faculty have made a concerted effort to adopt Open Educational Resources wherever possible. These OER materials are freely accessible, openly licensed, and can be used, reused, or adapted, thus significantly reducing or even eliminating the cost of textbooks for our students.

2. Online Delivery Methods: We offer many of our MPAS courses hybrid-online, providing students the flexibility to learn from anywhere and reducing the need for physical attendance. This can lead to savings in terms of transportation, accommodation, and other related expenses.

3. Reduced Fees: We have worked diligently to minimize additional fees associated with the program.

4. Compressed Course Scheduling: Our MPAS program offers a compressed course schedule that allows students to complete their degree in a shorter timeframe. This not only gets them into the workforce faster but also reduces the overall cost of their education in terms of time and associated living expenses.

5. Cost-effective Clinical Placements: We coordinate with local healthcare providers to ensure that clinical placements are within reasonable commuting distances for students, minimizing travel-related expenses.

6. Digital Resources and Libraries: Our digital library resources are extensive, reducing the need for students to purchase additional materials or subscriptions. Students have access to a wide range of e-journals, e-books, and databases relevant to the MPAS program.

**Enrollments and Graduates**

6. **Existing similar programs at Idaho Public Institutions.** Using the chart below, provide enrollments and numbers of graduates for similar existing programs at your institution and other Idaho public institutions for the most past four years.

Instit .	Program Name	Fall Headcount Enrollment in Program				Number of Graduates From Program (Summer, Fall, Spring)			
		FY_20_	FY_21_	FY_22_	FY_23_ (most recent)	FY19	FY20_	FY21_	FY22_ (most recent)
<b>ISU</b>	<b>Physician Assistant Studies</b>	145	146	143	143	72	71	68	73

\*Notes: Fiscal Year is Summer, Fall, and Spring. Data provided by Idaho State University.

7. **Justification for Duplication** (if applicable). If the proposed program is similar to another program offered by an Idaho public higher education institution, provide a rationale as to why any resulting duplication is a net benefit to the state and its citizens. Describe why it is not feasible for existing programs at other institutions to fulfill the need for the proposed program.

The Idaho Department of Labor projects a substantial 23% growth rate for PA positions in the state through 2030, signifying a pressing need for an expanded PA workforce. The introduction of a new program can effectively address this demand by increasing the capacity for training new PAs. Importantly, the new program can focus on training in underserved and rural areas, as well as Northern Idaho, filling a gap not fully accounted for in the current educational structure.

Currently, Idaho State University (ISU) runs the sole PA program in the state, admitting 72 students each year out of a vast applicant pool of 650 to 900 candidates. Notably, a substantial number of Idaho residents who apply to ISU's program are unable to secure admission. Adding a new PA program at the University of Idaho (UI) would enhance geographic accessibility, reducing the need for aspiring Idaho PAs to relocate for their education. This, in turn, opens opportunities for students in underserved regions of Idaho.

Furthermore, a comparable PA program at the University of Utah experiences similarly high competition, with more than 95% of applicants being turned away (i.e., 60-68 students per cohort out of ~2500 applicants; a 3% self-reported admission rate for the PA program). This data underscores the significant unmet demand for PA education in the region. The healthcare system also faces a growing need for PA graduates. The combination of student and healthcare system demand exceeds what ISU can currently accommodate. Establishing a program at UI would ensure that students are adequately trained to meet the needs of northern Idaho and rural communities, rather than concentrating on regions like the Treasure Valley.

Additionally, the diversification of PA programs in Idaho enhances the state's resilience in case of unforeseen circumstances, such as capacity constraints at a single institution. This not only supports the

state's ability to produce qualified PAs but also ensures a steady supply of healthcare professionals, critical for the state's healthcare system's stability.

UI's expansion into PA education, given our focus on recruitment from and training in Northern Idaho, is indispensable for both students and the state. The addition of a program at UI, tailored to serve the specific needs of the region, allows for program design differences between ISU and UI, such as a more extensive emphasis on rural healthcare. This diversification will better prepare PAs to meet Idaho's diverse healthcare challenges and contribute to the state's healthcare workforce by producing well-rounded, specialized healthcare professionals ready to address the unique healthcare needs of Idaho's communities.

- 8. Projections for proposed program:** Using the chart below, provide projected enrollments and number of graduates for the proposed program:

<b>Proposed Program: Projected Enrollments and Graduates First Five Years</b>											
<b>Program Name: Master of Physician Assistant Studies</b>											
<b>Projected Fall Term Headcount Enrollment in Program</b>						<b>Projected Annual Number of Graduates From Program</b>					
FY26_ (first year)	FY27_	FY28_	FY29_	FY30_		FY26_ (first year)	FY27_	FY28_	FY29_	FY30_	
20	45	55	65	75		0	18	24	29	34	

- 9. Describe the methodology for determining enrollment and graduation projections.** Refer to information provided in Question #2 "Need for the Program" above. What is the capacity for the program? Describe your recruitment efforts? How did you determine the projected numbers above?

The program has the capacity to equal enrollments at Idaho State University and the University of Utah based on regional application numbers and the expected growth of PA jobs in Idaho and the Pacific Northwest. Recruitment efforts will occur at the University of Idaho, which has large student interest in pre-health undergraduate related majors and clubs. Further, recruitment efforts will be focused on other Idaho institutions given the number of applicants from those institutions who apply but are not admitted to the PA programs at Idaho State university and the University of Utah and our desire to train Idahoans to return to their communities to practice. Finally, regional recruitment will occur in other Pacific Northwest states that lack PA programs (e.g., Montana, Wyoming) or have an abundance of applicants to their PA programs based on the success of the WWAMI model to return physicians to Idaho. The projected numbers were based on the capacity of our program based on its design (e.g., desire to train students in rural Idaho communities), the capacity of North Idaho to train PA students, and the cost structure of the program.

- 10. Minimum Enrollments and Graduates.**

- a. What are the minimums that the program will need to meet in order to be continued, and what is the logical basis for those minimums?

The minimum class size is 15 students per cohort or 30 students overall. These minimums are based on revenues needed to sustain program delivery.

- b. If those minimums are not met, what is the sunset clause by which the program will be considered for discontinuance?

In the event enrollment minimums are not met the program will undergo evaluation after three years of concurrent enrollment deficiency. The program will be sun-set following four years of enrolment deficiency. Teach-outs will occur for matriculating students and a new cohort will not be filled.

- 11. **Assurance of Quality.** Describe how the institution will ensure the quality of the program. Describe the institutional process of program review. Where appropriate, describe applicable specialized accreditation and explain why you do or do not plan to seek accreditation.

The program will undergo annual program prioritization as part of the University of Idaho quality improvement plan (<https://www.uidaho.edu/provost/ir/assessment-evaluation/program-review>).

The program will also undergo external accreditation through the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA).

- 12. **In accordance with Board Policy III.G., an external peer review is required for any new doctoral program.** Attach the peer review report as **Appendix A.**

Not Applicable

- 13. **Teacher Education/Certification Programs** All Educator Preparation programs that lead to certification require review and recommendation from the Professional Standards Commission (PSC) and approval from the State Board of Education.

Will this program lead to certification?

Yes \_\_\_\_\_ No X \_\_\_\_\_

If yes, on what date was the Program Approval for Certification Request submitted to the Professional Standards Commission?

- 14. **Three-Year Plan: If this is a new proposed program, is it on your institution’s approved 3-year plan?**

Yes \_\_\_\_\_ No X \_\_\_\_\_

If yes, proceed to question 15. If no:

- a. **Which of the following statements address the reason for adding this program outside of the regular three-year planning process.**

Indicate (X) by each applicable statement:

X	Program is important for meeting your institution’s regional or statewide program responsibilities.
X	The program is in response to a specific industry need or workforce opportunity.
	The program is reliant on external funding (grants, donations) with a deadline for

	acceptance of funding.
	There is a contractual obligation or partnership opportunity related to this program.
	The program is in response to accreditation requirements or recommendations.
	The program is in response to recent changes to teacher certification/endorsement requirements.

**b. Provide an explanation for all statements you selected.**

The University of Idaho, located in Northern Idaho, is the state's Land Grant institution. As a university in this region, we bear the responsibility of meeting the academic and career pipeline needs of the area. Further, being the premier research institution for the state and a leader in medical education, it is fitting for the university to develop and cater to the needs of students and citizens from our region, as well as the rest of the state, through an MPAS program.

**Educational Offerings: Curriculum, Intended Learning Outcomes, and Assessment Plan**

**15. Curriculum. Provide descriptive information of the educational offering.**

**a. Summary of requirements.** Provide a summary of program requirements using the following table.

Credit hours in required courses offered by the department (s) offering the program.	108
Credit hours in required courses offered by other departments:	0
Credit hours in institutional general education curriculum	0
Credit hours in free electives	0
Total credit hours required for degree program:	108

**b. Curriculum.** Provide the curriculum for the program, including credits to completion, courses by title and assigned academic credit granted.

First Semester (18 credits):

1. Anatomy (4 credits):
  - a. This course provides students with exposure to human anatomy. Students will learn the structure of the human body through active participation in the classroom, interactive software programs, and in the planning, dissection, and presentation of findings in the laboratory setting. Students will apply this foundational, anatomical knowledge to diseases and disorders in humans.
2. Physiology (2 credits separate or part of anatomy)
  - a. The basic concepts and principles that are essential to comprehending the fundamental mechanisms of human physiology at the cellular, tissue and organ levels and the requirements for the maintenance of homeostatic control. This course lays the foundation for understanding the underlying principles of the etiology, management, and prevention of human disease processes.
3. Foundations of Medical Science (4 credits)
  - a. This course provides students with exposure to the basic sciences related to the practice of medicine. Students will learn select topics in physiology, microbiology, pharmacology, laboratory studies, infectious disease and immunology and be introduced to diagnostic imaging (e.g., point of care ultrasound, magnetic



resonance imaging). Students will apply this foundational, science knowledge to diseases and disorders in humans.

4. Introduction to Patient Care (5 credits)
  - a. This course provides students with the tools to conduct a comprehensive medical interview and introduces skills to assist in performing a physical examination to support patient evaluation and management. Students will learn effective methods for obtaining and documenting historical information, developing communication skills with patients and health care providers, and providing patient counseling. Further, students will learn critical thinking skills, physical examination techniques, and interpretation and documentation of medical findings. Students will learn through lectures, case discussions, laboratory sessions and patient simulations, and small group discussions.
5. Introduction to Epidemiology & Biostatistics (2 credits)
  - a. This course provides students with exposure to the basic concepts of descriptive and analytic epidemiology. Students will learn to read and interpret medical literature as it relates to disease frequency, probability, study design, sample size, hypothesis testing, test significance, measures of data quality and bias, multivariate models, survival analysis, and causality for the practice of evidence-based medicine. Students will develop these skills through lectures, journal article discussions, assignments, readings, and projects.
6. Humanism & Ethics in Health Care (1 credit)
  - a. This course is designed to provide an exposure to ethical principles and practice in healthcare, while also service as a foundation for PA students to appreciate and apply humanism in health and healthcare in their professional practice. Topics covered in this course include ethical theories, the history and future of humanism in medicine, medicalization and over diagnosis, the science of empathy, and the intersection of marginalization, otherness and cultural competency. Students will engage with multiple learning modalities such as articles, videos, interactive group activities, and short written reflections and quizzes.

Second Semester (18 credits):

1. Patient Assessment and Diagnosis I (5 credits)
  - a. The first class in a series that provides preparation on history-taking, physical examination techniques, counseling, documentation and presenting clinical information, the practical application of these clinical skills, along with the essentials of ordering, interpreting, and performing diagnostic studies used in the screening, diagnosis, management, and monitoring of common diseases. Emphasis is placed on acquiring the skills, knowledge and sensitivity needed to communicate and intervene effectively in a wide variety of patient encounters. Teaching methods include lectures, small group demonstrations and hands-on laboratory and practice sessions as well as clinical assignments to examine and/or interview standardized patients and patients in hospital, and outpatient settings. Students also access standardized patients in a controlled setting. Audiovisuals and asynchronous learning are also used. The topics of this course will be sequenced with the other content areas (e.g., clinical medicine, pharmacology) in the curriculum.
2. Clinical Medicine I (5 credits)
  - a. The first course of a sequence of courses to explore the essentials of diagnosis and management of the most common clinical problems seen by primary care practitioners using an organ systems and life stages approach. Clinical information is presented in lectures, small group learning experiences, modules, and practicums. Content covered in this course is correlated with preceding courses on physiology, anatomy, and basic medical science to build upon and develop a learner's foundational understanding of pathophysiology and related mechanisms of health and disease. This course supports the development of clinical reasoning and problem-solving skills applied to inform preventative, emergent, chronic, and rehabilitative care. Patient cases are used in modules, practicums, and small group settings to enhance readings and lectures. These core courses serve as the foundation of clinical medicine and most other courses are organized and built around the curricular content provided.
3. Pharmacology I (2 credits)
  - a. The essentials of basic pharmacological principles and disease process therapeutics. Topics for this course are sequenced with Clinical Medicine I, II and III (PHYASST 220, 221, 222) and are provided in lecture format.
4. Foundations in Community and Social Medicine (2 credits)
  - a. This course provides students with an understanding of the social, economic, and environmental factors that impact the health of populations and communities. Students will learn about social determinants of health, implicit bias and how to engage patients as upstanders for patient and community health.
5. Evidence-based Medicine I (1 credit)
  - a. A lecture and seminar course that provides a practical approach to making sound medical decisions based on current evidence in medical literature. Through a series of didactic presentations, group exercises, and reading, students will learn the basic principles of evidence-based medicine. Basic skills in using MEDLINE

and other medical databases will be emphasized and practiced. Research principles, research ethics, and basic statistical review are introduced.

6. Practice and the Health System I (1 credit)
  - a. Provide an overview of the U.S. health care system with a focus on the PA profession. An interprofessional faculty will provide lectures and lead conversations on various aspects of PA practice and the health care system, including topics such as: the history of the PA profession, population health, health disparities, and health policy. The first part of the course sequence (PHS 1) will focus on sociocultural influences on health, wellness, and health care.
7. Complementary Medicine and Nutrition (2 credits)
  - a. This course provides an overview of the importance of and role of the human lifestyle in healthcare, and the principles for maintaining good health through nutrition, sleep, exercise, stress, risky behavior reduction, and social connection. It will address the health hazards associated with dietary deficiencies including obesity, fad dieting, food contamination, and diet management of selected diseases. It will address the use of therapeutic lifestyle interventions as a primary modality to both prevent and treat chronic diseases including, but not limited to, cardiovascular disease, type 2 diabetes, and obesity.

Third Semester (18 credits):

1. Patient Assessment and Diagnosis II (5 credits)
  - a. The second class in a series that provides preparation on history-taking, physical examination techniques, counseling, documentation and presenting clinical information, the practical application of these clinical skills, along with the essentials of ordering, interpreting, and performing diagnostic studies used in the screening, diagnosis, management, and monitoring of common diseases. Emphasis is placed on acquiring the skills, knowledge and sensitivity needed to communicate and intervene effectively in a wide variety of patient encounters. Teaching methods include lectures, small group demonstrations and hands-on laboratory and practice sessions as well as clinical assignments to examine and/or interview standardized patients and patients in hospital, and outpatient settings. Students also access standardized patients in a controlled setting. Audiovisuals and asynchronous learning are also used. The topics of this course will be sequenced with the other content areas (e.g., clinical medicine, pharmacology) in the curriculum.
2. Clinical Medicine II (5 credits)
  - a. The second course of a sequence of courses to explore the essentials of diagnosis and management of the most common clinical problems seen by primary care practitioners using an organ systems and life stages approach. Clinical information is presented in lectures, small group learning experiences, modules, and practicums. Content covered in this course is correlated with preceding courses on physiology, anatomy, and basic medical science to build upon and develop a learner's foundational understanding of pathophysiology and related mechanisms of health and disease. This course supports the development of clinical reasoning and problem-solving skills applied to inform preventative, emergent, chronic, and rehabilitative care. Patient cases are used in modules, practicums, and small group settings to enhance readings and lectures. These core courses serve as the foundation of clinical medicine and most other courses are organized and built around the curricular content provided.
3. Pharmacology II (2 credits)
  - a. The essentials of basic pharmacological principles and disease process therapeutics. Topics for this course are sequenced with Clinical Medicine I, II and III (PHYASST 220, 221, 222) and are provided in lecture format.
4. Evidence-based Medicine II (1 credit)
  - a. A lecture and seminar course that provides a practical approach to making sound medical decisions on the basis of current evidence in the medical literature. Through a series of didactic presentations, group exercises, and reading, students will learn the basic principles of evidence-based medicine. Basic skills in using MEDLINE and other medical databases will be emphasized and practiced. Research principles, research ethics, and basic statistical review are introduced.
5. Practice and the Health System II (1 credit)
  - a. Provide an overview of the U.S. health care system with a focus on the PA profession. An interprofessional faculty will provide lectures and lead conversations on various aspects of PA practice and the health care system, including topics such as: the history of the PA profession, population health, health disparities, and health policy. The second portion of the course sequence (PHS II) will continue discussion of the PA professional role, including interactions in the health care system and health policy, and practical application of content in professional settings.
6. Fundamentals of Surgery II (3 credits)
  - a. The course focuses on the basic surgical concepts needed for the PA to function in primary care settings as well as major surgical areas. The course emphasizes surgical concepts, topics and surgical technique. A substantial part of this course consists of essential hands-on laboratory exercises emphasizing surgical skills required in a primary care setting.

7. Electrocardiography (ECG) and Life Support Procedures and Skills (1 credit)
  - a. This course provides the basics for learning to interpret normal ECG tracings and applying those principles to interpret the ECG tracings of common cardiac disease. This course will also introduce the principles of advanced life support utilized in medical and surgical emergencies. Includes a review of the most common emergency situations encountered and provides hands-on practical training that will assist the clinician in developing the skills required to stabilize patients with life threatening conditions. Includes certification in Basic (BLS), Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS), and Advanced Trauma Life Support (ATLS).

**Fourth Semester (18 credits):**

1. Patient Assessment and Diagnosis III (5 credits)
  - a. The third class in a series that provides preparation on history-taking, physical examination techniques, counseling, documentation and presenting clinical information, the practical application of these clinical skills, along with the essentials of ordering, interpreting, and performing diagnostic studies used in the screening, diagnosis, management, and monitoring of common diseases. Emphasis is placed on acquiring the skills, knowledge and sensitivity needed to communicate and intervene effectively in a wide variety of patient encounters. Teaching methods include lectures, small group demonstrations and hands-on laboratory and practice sessions as well as clinical assignments to examine and/or interview standardized patients and patients in hospital, and outpatient settings. Students also access standardized patients in a controlled setting. Audiovisuals and asynchronous learning are also used. The topics of this course will be sequenced with the other content areas (e.g., clinical medicine, pharmacology) in the curriculum.
2. Clinical Medicine III (5 credits)
  - a. The third course of a sequence of courses to explore the essentials of diagnosis and management of the most common clinical problems seen by primary care practitioners using an organ systems and life stages approach. Clinical information is presented in lectures, small group learning experiences, modules, and practicums. Content covered in this course is correlated with preceding courses on physiology, anatomy, and basic medical science to build upon and develop a learner's foundational understanding of pathophysiology and related mechanisms of health and disease. This course supports the development of clinical reasoning and problem-solving skills applied to inform preventative, emergent, chronic, and rehabilitative care. Patient cases are used in modules, practicums, and small group settings to enhance readings and lectures. These core courses serve as the foundation of clinical medicine and most other courses are organized and built around the curricular content provided.
3. Pharmacology III (2 credits)
  - a. The essentials of basic pharmacological principles and disease process therapeutics. Topics for this course are sequenced with Clinical Medicine I, II and III (PHYASST 220, 221, 222) and are provided in lecture format.
4. Evidence-based Medicine III (3 credits):
  - a. During this course PA students complete an evidence-based review paper on a clinical question of interest. Students will present their findings to faculty and student colleagues.
5. Practice and the Health System III (1 credit):
  - a. The Practice & the Health System courses (PHS I, II, and III) provide an overview of the U.S. health care system with a focus on the PA profession. PHS III is the culmination of the course sequence. An interprofessional faculty approach provides lectures and leads discussions on various aspects of PA practice and the health care system, including topics such as: transition to professional practice, social and cultural determinants of health, medical billing and coding, advanced clinical medicine, licensure and certification, medication-assisted therapy training (MAT), professional ethics, team skills and communication, leadership development, and prescription writing/medication errors. The program's final summative evaluation is part of this course, which also serves as preparation for the PA National Certifying Examination (PANCE).
6. The Pathway to Patient Care (2 credits)
  - a. This two-week course provides physician assistant students with preparation to begin the clinical year rotations. Topics covered include preceptor expectations, self-care, electronic medical records access, professionalism and formative and summative assessment of readiness to enter the clinical training environment.

**Semesters 5-6**

1. General Surgery (4 credits)
  - a. This required 4-week clinical clerkship provides the student with exposure to the principles and practices of general surgery. Emphasis is placed on the management of patients who present with surgical issues. The students will participate in the pre-operative evaluation of patients, including history taking, physical examination, assessment and formulation of a plan and problem list, ordering and interpreting diagnostic tests, proper medical documentation, and reporting to the healthcare team as appropriate for the clerkship.

They will assist in the operating room, learn to write pre and post-operative notes, care for the post-operative patient, and report to the healthcare team as appropriate for the clerkship. During this clerkship, students may additionally participate in inpatient rounds, provide patient presentations to clinical team members, and perform bedside procedures. They will develop an understanding of how to function as part of the surgical team, develop effective communication with the patient, the healthcare team, and the patient's family.

2. Emergency Medicine (4 credits)

a. This required 4-week clinical clerkship provides the student with exposure to the principles and practice of emergency medicine. Emphasis is placed on caring for patients presenting to the emergency department. Students will participate in the assessment of patient acuity, disease state, and appropriate management within the setting of the emergency department. They will participate in history-taking, physical examination, assessment and formulation of a plan and problem list, ordering and interpreting diagnostic tests, proper medical documentation, and reporting to the healthcare team as appropriate for the clerkship. During this clerkship, students may additionally participate in inpatient rounds, provide patient presentations to clinical team members, and bedside procedures. Students will develop an understanding of how to function as part of the medical team, develop effective communication with the patient, the healthcare team, and the patient's family.

3. Obstetrics and Gynecology (4 credits)

a. This required 4-week clinical clerkship provides students with exposure to the principles and practice of obstetrics and gynecology, including health maintenance and screening. Emphasis is placed on caring for female patients across their life span, including menarche, family planning, childbearing years, perimenopause, menopause, and post-menopause. Students will learn how to recognize and treat sexually transmitted diseases, ovarian, breast, and uterine cancer, and evaluate and treat common ambulatory gynecologic problems. Students will learn prenatal counseling and care and may have exposure to labor and delivery. They will participate in history-taking, physical examination, assessment and formulation of a plan and problem list, ordering and interpreting diagnostic tests, proper medical documentation, and reporting to the healthcare team as appropriate for the clerkship. During this clerkship, students may additionally participate in inpatient rounds, provide patient presentations to clinical team members, and perform bedside procedures. They will develop an understanding of how to function as part of the medical team, improve effective communication with the patient, the healthcare team, and the patient's family.

4. Pediatrics (4 credits)

a. This required 4-week clinical clerkship provides the student with exposure to the principles and practice of pediatric medicine in the ambulatory setting. Students will gain experience caring for neonates, infants, children, and adolescents, providing parental education and guidance, recognizing the appropriate milestone, preventing illness, injury, and accidents, and providing care unique to the pediatric patient. Students will participate in history-taking, physical examination, assessment and formulation of a plan and problem list, ordering and interpreting diagnostic tests, proper medical documentation, and reporting to the healthcare team as appropriate for the clerkship. During this clerkship, students may additionally participate in inpatient rounds, provide patient presentations to clinical team members, and perform bedside procedures. They will develop an understanding of how to function as part of the medical team, improve effective communication with the patient, the healthcare team, and the patient's family.

5. Internal Medicine (4 credits)

a. This required 4-week clinical clerkship provides students with exposure to the principles and practice of internal medicine. Emphasis is placed on caring for the acutely and chronically ill adult patient who requires hospitalization. Students will participate in admission history taking, physical examination, assessment and formulation of a plan and problem list, ordering and interpreting diagnostic tests, proper medical documentation, and reporting to the healthcare team as appropriate for the clerkship. During this clerkship, students may additionally participate in inpatient rounds; provide patient presentations to clinical team members, and perform bedside procedures. Students will develop an understanding of how to function as part of the medical team, develop effective communication with the patient, the healthcare team, and the patient's family.

6. Family Medicine (4 credits)

a. This required 4-week clinical clerkship provides the student with exposure to the principles and practice of family medicine. Emphasis is placed on disease prevention and health maintenance in adults and children. The students will develop an increased understanding of the social, economic, and environmental factors related to caring for the patient and extended family. They will participate in history-taking, physical examination, assessment and formulation of a plan and problem list, ordering and interpreting diagnostic tests, proper medical documentation, and reporting to the healthcare team as appropriate for the clerkship. During this clerkship, students may additionally participate in inpatient rounds, provide patient presentations to clinical team members, and perform bedside procedures. Students will develop an understanding of how to

function as part of the medical team, develop effective communication with the patient, the healthcare team, and the patient's family.

7. Primary Care Directive (4 credits)
  - a. This required 4-week clinical clerkship provides students with further exposure to the principles and practice of Primary Care. Emphasis is placed on caring for patients with general medical problems in the outpatient or the inpatient setting. Students will participate in taking medical histories, physical examination, assessment and formulation of a plan and problem list, ordering, and interpreting diagnostic tests, proper medical documentation, and reporting to the healthcare team as appropriate for the clerkship. During this clerkship, students may additionally participate in rounds; provide patient presentations to clinical team members and perform procedures. Students will develop an understanding of how to function as part of the medical team, develop effective communication with the patient, the healthcare team, and the patient's family.
8. Clinical Elective I (4 credits)
  - a. These elective 4-week clinical clerkships provide the student with the opportunity to gain additional experience in one of the core clerkship areas or to supplement the foundational core clerkships with specialty disciplines in medicine and surgery. Emphasis is placed on the management of patients within the specialty discipline. Students will utilize these electives to better understand how a primary care provider should manage a patient presenting with a disease/condition prior to specialty referral and upon follow up. They will participate in history-taking, physical examination, assessment and formulation of a plan and problem list, ordering and interpreting diagnostic tests, proper medical documentation, and reporting to the healthcare team as appropriate for the clerkship. During this clerkship, students may additionally participate in inpatient rounds, provide patient presentations to clinical team members, and perform bedside procedures. Students will develop an understanding of how to function as part of the medical team, develop effective communication with the patient, the healthcare team, and the patient's family.
9. Clinical Elective II (4 credits)
  - a. These elective 4-week clinical clerkships provide the student with the opportunity to gain additional experience in one of the core clerkship areas or to supplement the foundational core clerkships with specialty disciplines in medicine and surgery. Emphasis is placed on the management of patients within the specialty discipline. Students will utilize these electives to better understand how a primary care provider should manage a patient presenting with a disease/condition prior to specialty referral and upon follow up. They will participate in history-taking, physical examination, assessment and formulation of a plan and problem list, ordering and interpreting diagnostic tests, proper medical documentation, and reporting to the healthcare team as appropriate for the clerkship. During this clerkship, students may additionally participate in inpatient rounds, provide patient presentations to clinical team members, and perform bedside procedures. Students will develop an understanding of how to function as part of the medical team, develop effective communication with the patient, the healthcare team, and the patient's family.
  - c. **Additional requirements.** Describe additional requirements such as comprehensive examination, senior thesis or other capstone experience, practicum, or internship, some of which may carry credit hours included in the list above.

MPAS students will complete 8 courses (3 credits) of practicum experience in the clinical setting. These courses are described in the curriculum above. Students will also complete a capstone research experience (i.e., research paper and presentation) in Evidence-Based Medicine III, as described above in the curriculum.

## 16. Learning Outcomes: Expected Student Learning Outcomes and Connection to Curriculum.

- a. **Intended Learning Outcomes.** List the Intended Learning Outcomes for the proposed program, using learner-centered statements that indicate what students will know, understand, and be able to do, and value or appreciate as a result of completing the program.
  - o Our graduates will demonstrate entry-level proficiency as PAs in the following program defined learning outcomes:
    - Medical Knowledge for Practice

- Demonstrate knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care. PAs should be able to:
- Demonstrate investigative and critical thinking in clinical situations.
- Access and interpret current and credible sources of medical information.
- Apply principles of epidemiology to identify health problems, risk factors, treatment strategies, resources, and disease prevention/health promotion efforts for individuals and populations.
- Differentiate among acute, chronic, and emergent disease states.
- Apply principles of clinical sciences to diagnose disease and utilize therapeutic decision-making, clinical problem-solving, and other evidence-based practice skills.
- Adhere to standards of care, and to relevant laws, policies, and regulations that govern the delivery of care in the United States.
- Consider cost-effectiveness when allocating resources for individual patients or population-based care.
- Work effectively and efficiently in various health care delivery settings and systems relevant to the PA's clinical specialty.
- Identify and address social determinants that affect access to care and deliver high quality care in a value-based system.
- Participate in surveillance of community resources to determine if they are adequate to sustain and improve health.
- Utilize technological advancements that decrease costs, improve quality, and increase access to sustain and improve healthcare.
- **Interpersonal and Communication Skills**
  - Demonstrate interpersonal and communication skills (verbal, nonverbal, written, and electronic) that result in the effective exchange of information and collaboration with patients, their families, and health professionals. PAs should be able to:
  - Establish meaningful therapeutic relationships with patients and families to ensure that patients' values and preferences are addressed and that needs and goals are met to deliver patient-centered care.
  - Provide effective, equitable, understandable, respectful, quality, and culturally competent care that is responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.
  - Accurately and adequately document information regarding care for medical, legal, quality, and financial purposes.
  - Demonstrate sensitivity, honesty, and compassion in all conversations.
  - Demonstrate emotional resilience, stability, adaptability, flexibility, and tolerance of ambiguity.
  - Recognize communication barriers and provide solutions.
- **Patient-centered Care**
  - Provide person-centered care that includes patient- and setting-specific assessment, evaluation, and management and healthcare that is evidence-based, supports patient safety, and advances in health equity. PAs should be able to:

- Accumulate accurate and essential information about patients through history-taking, physical examination, and diagnostic testing.
- Develop, implement, and monitor effectiveness of patient management plans.
- Maintain proficiency to perform safely all medical, diagnostic, and surgical procedures considered essential for primary care.
- Counsel, education, and empower patients and their families to participate in their care and enable shared decision-making.
- Refer patients appropriately, ensure continuity of care throughout transitions between providers or settings and follow-up on patient progress and outcomes.
- Provide health care service to patients, families, and communities to prevent health problems and to maintain health.
- Professionalism
  - Adhere to the standards of care in the role of the PA in the health care team.
  - Demonstrate responsiveness to patient needs that supersedes self-interest.
  - Demonstrate a high level of responsibility, ethical practice, and adherence to legal and regulatory requirements.
  - Demonstrate sensitivity to a diverse patient population by identifying the socio-cultural, familial, psychological, economic, environmental, and spiritual factors impacting health care and health care delivery; and responding to these factors by planning and advocating the appropriate course of action at both the individual and the community level.
- Practice-based Learning and Improvement
  - Demonstrate the ability to learn and implement quality improvement practices by engaging in critical analysis of one's own practice experience, the medical literature, and other information resources of the purpose of self-evaluation, lifelong learning, and practice management. PAs should be able to:
    - Use practice performance data and metrics to identify areas for improvement.
    - Critically evaluate the medical literature in order to use current practice guidelines and apply the principles of evidence-based medicine to patient care.
- Society and Population Health
  - Recognize and understand the influences of the ecosystem of person, family, population, environment, and policy on health of patients and integrate knowledge of these determinants of health into patient care decisions. PAs should be able to:
    - Apply principles of social-behavioral sciences by assessing the impact of psychosocial and cultural influences on health, disease, care seeking, and compliance.
    - Improve the health of patient populations through recognition of the influences of genetic, socioeconomic, environmental, and other determinants on the health of the individual and the community.

- Demonstrate accountability, responsibility, and leadership for removing barriers to health.

## 17. Assessment plans.

- a. Assessment Process.** Describe the assessment plan for student learning outcomes that will be used to evaluate student achievement and how the results will be used to improve the program.

To evaluate how well students are achieving the intended learning outcomes, the following assessment processes will be employed:

1. **Examinations and Quizzes:** Regular assessments will include written examinations and quizzes to evaluate knowledge acquisition and critical thinking skills.
2. **Clinical Skills Assessment:** Clinical skills will be assessed through direct observation, practical examinations, and skills checklists during clinical rotations.
3. **Case Studies and Care Plans:** Students will complete case studies and care plans to demonstrate their ability to apply theoretical knowledge to real-world patient care scenarios.
4. **Reflective Journals and Portfolios:** Students will maintain reflective journals and e-portfolios, providing insights into their personal and professional growth.
5. **Peer and Self-Assessment:** Peer evaluations and self-assessment will be incorporated for group projects and personal reflection on skills development.

Assessment findings will be used for continuous program improvement through the following mechanisms:

1. **Faculty Meetings:** Regular faculty meetings will involve discussions of assessment results, with a focus on identifying areas of improvement and refining teaching methods and curriculum.
2. **Curriculum Review:** Assessment data will inform curriculum revisions, ensuring alignment with current healthcare trends and best practices.
3. **Faculty Development:** Faculty will receive training and support to enhance assessment techniques and teaching strategies, addressing areas where student performance needs improvement.
4. **Feedback Loops:** Continuous feedback loops will be established with students, incorporating their input to make program enhancements.

Assessment Activity Timing (assessment activities will occur throughout the program at various frequencies):

- Formative assessments (quizzes, in-class discussions) will be ongoing throughout each semester.
- Summative assessments (midterm, final examinations) will occur at the end of relevant courses and following year one and year two. Alumni and industry surveys will be completed two years following graduation.



- Clinical skills assessments and evaluations will be conducted during clinical rotations.
- Case studies, care plans, and projects will be assigned periodically.

**Resources Required for Implementation – fiscal impact and budget.**

Organizational arrangements required within the institution to accommodate the change including administrative, staff, and faculty hires, facilities, student services, library; etc.

**18. Physical Facilities and Equipment:** Describe the provision for physical facilities and equipment.

- a. Existing resources.** Describe equipment, space, laboratory instruments, computer(s), or other physical equipment presently available to support the successful implementation of the program.

The University of Idaho is the home of the WWAMI Medical Education Program. This program is located in two buildings on the University of Idaho Moscow Campus. Facilities include three active learning classrooms, a cadaver anatomy lab, 9 standardized patient rooms, research offices and student common study areas. In the WWAMI program, we have access to Laboratory equipment and clinical assessment tools as well as a full suite of low-fidelity simulation equipment and supplies, all of which will be shared with MPAS students.

- b. Impact of new program.** What will be the impact on existing programs of increased use of physical resources by the proposed program? How will the increased use be accommodated?

The existing program is the WWAMI Medical Education Program. The impact will be minimal as the PA students will share the same buildings, classrooms, laboratories, and clinical spaces though the use will not overlap the medical student curriculum. In-person classes for the PA students will be scheduled when WWAMI is not using the facilities.

- c. Needed resources.** List equipment, space, laboratory instruments, etc., that must be obtained to support the proposed program. Enter the costs of those physical resources into the budget sheet.

Resources (e.g., clinical examination instruments, clinical exam tables, simulation equipment) will be needed for simulation training (e.g., Manikin-Based Simulation, Skills-Training Simulation, Tissue-based Simulation, etc.) and clinical skills training.

**19. Library and Information Resources:** Describe adequacy and availability of library and information resources.

- a. Existing resources and impact of new program.** Evaluate library resources, including personnel and space. Are they adequate for the operation of the present program? Will there be an impact on existing programs of increased library usage caused by the proposed program? For off-campus programs, clearly indicate how the library resources are to be provided.

The University of Idaho houses the largest library in the state of Idaho servicing students and faculty on our campuses and virtually in all 44 counties. Students on campus or attending online will have access to needed search databases, journals and scholarly

works related to medicine and healthcare. It is not expected that the MPAS program will have a noticeable impact on library usage. Library resources for students and faculty attending online <https://www.lib.uidaho.edu/services/distance.html>

- b. Needed resources.** What new library resources will be required to ensure successful implementation of the program? Enter the costs of those library resources into the budget sheet.

No additional costs are needed.

## 20. Faculty/Personnel resources

- a. Needed resources.** Give an overview of the personnel resources that will be needed to implement the program. How many additional sections of existing courses will be needed? Referring to the list of new courses to be created, what instructional capacity will be needed to offer the necessary number of sections?

The MPAS program will be adding 108 credits in 35 new courses developed for the degree (see curriculum provided above). We anticipate that we will require 3.0 faculty FTE to implement teaching of the content (including the program director), 0.5 FTE for a Medical Director administrative position, and 2.0 FTE staff positions to execute the program and deliver on the clinical training experiences.

- b. Existing resources.** Describe the existing instructional, support, and administrative resources that can be brought to bear to support the successful implementation of the program.

The University of Idaho has a state-of-the-art cadaver lab and anatomy facility supported by the State Board of Education. The facility is not utilized during certain months or parts of the semester by medical students in WWAMI program and is therefore available for use by the MPAS program. The WWAMI medical education program has a core of faculty and facilities that can be utilized for this degree. It is possible that some of these faculty will be able to teach in the MPAS program without detracting from their WWAMI teaching via distance education. The WWAMI program also has an administrative core in place and will be able to support FTE buyout to support the MPAS program. Please see the organizational chart under supportive documentation.

- c. Impact on existing programs.** What will be the impact on existing programs of increased use of existing personnel resources by the proposed program? How will quality and productivity of existing programs be maintained?

The MPAS program will use WWAMI resources when they are not currently used by other programs. Current staff with capacity will be reassigned within the new school (see new organizational chart), but new hires will be made to prevent detrimental effects on existing programs and personnel. The addition of new programming will allow for enhanced training and interprofessional team building of all students that will enhance their educational experiences.

- d. Needed resources.** List the new personnel that must be hired to support the proposed program. Enter the costs of those personnel resources into the budget sheet.

The MPAS program will require 3.0 FTE faculty (including a program director), 0.5 FTE for a Medical Director (MD/DO), and 2.0 FTE for staff support.

## 21. Revenue Sources

- a) **Reallocation of funds:** If funding is to come from the reallocation of existing state

appropriated funds, please indicate the sources of the reallocation. What impact will the reallocation of funds in support of the program have on other programs?

Not applicable.

- b) **New appropriation.** If an above Maintenance of Current Operations (MCO) appropriation is required to fund the program, indicate when the institution plans to include the program in the legislative budget request.

No state general fund resources for capacity enhancement are going to the program. This complies with House Bill 734, Section 4.

- c) **Non-ongoing sources:**

- i. If the funding is to come from one-time sources such as a donation, indicate the sources of other funding. What are the institution's plans for sustaining the program when that funding ends?

Not applicable.

- ii. Describe the federal grant, other grant(s), special fee arrangements, or contract(s) that will be valid to fund the program. What does the institution propose to do with the program upon termination of those funds?

Not applicable.

- d) **Student Fees:**

- i. If the proposed program is intended to levy any institutional local fees, explain how doing so meets the requirements of Board Policy V.R., 3.b.

This program is requesting professional fee of \$23,000 per year (3 semesters) as it falls within the cited SBOE policy (V.R.3.b.iii).

- ii. Provide estimated cost to students and total revenue for self-support programs and for professional fees and other fees anticipated to be requested under Board Policy V.R., if applicable.

The estimated program cost for PA programs is estimated as:

- In state for 3 semesters (1 year) \$17,848 and the professional fee is \$23,000.
- Out of-state cost is \$37,238 for 3 semesters (1 year) and the professional fee is \$23,000.
- Summer tuition: \$7032 x 20 students (in-state & out of state) = \$140,640.

22. Using the excel **budget template** provided by the Office of the State Board of Education, provide the following information:

- Indicate all resources needed including the planned FTE enrollment, projected revenues, and estimated expenditures for the first **four** fiscal years of the program.
- Include reallocation of existing personnel and resources and anticipated or requested new resources.

- Second and third year estimates should be in constant dollars.
- Amounts should reconcile subsequent pages where budget explanations are provided.
- If the program is contract related, explain the fiscal sources and the year-to-year commitment from the contracting agency(ies) or party(ies).
- Provide an explanation of the fiscal impact of any proposed discontinuance to include impacts to faculty (i.e., salary savings, re-assignments).

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

**Program Resource Requirements.**

- Indicate all resources needed including the planned FTE enrollment, projected revenues, and estimated expenditures for the first **four** fiscal years of the program
- Include reallocation of existing personnel and resources and anticipated or requested new resources.
- Second and third year estimates should be in constant dollars.
- Amounts should reconcile subsequent pages where budget explanations are provided.
- If the program is contract related, explain the fiscal sources and the year-to-year commitment from the contracting agency(ies) or party(ies).
- Provide an explanation of the fiscal impact of any proposed discontinuance to include impacts to faculty (i.e., salary savings, re-assignments).

**I. PLANNED STUDENT ENROLLMENT**

	<u>FY 26</u>		<u>FY 27</u>		<u>FY 28</u>		<u>FY 29</u>	
	FTE	Headcount	FTE	Headcount	FTE	Headcount	FTE	Headcount
A. New enrollments		20		25		30		35
B. Shifting enrollments				20		25		30
<b>Total Enrollment</b>	0	20	0	45	0	55	0	65

**II. REVENUE**

	<u>FY 26</u>		<u>FY 27</u>		<u>FY 28</u>		<u>FY 29</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
1. New Appropriated Funding Request								
2. Institution Funds								
3. Federal								
4. New Tuition Revenues from Increased Enrollments	\$552,400.00		\$1,233,282.00		\$1,509,482.00		\$1,804,918.00	
5. Student Fees	\$460,000.00		\$1,035,000.00		\$1,265,000.00		\$1,495,000.00	
6. Other (i.e., Gifts)								
<b>Total Revenue</b>	\$1,012,400	\$0	\$2,268,282	\$0	\$2,774,482	\$0	\$3,299,918	\$0

*Ongoing is defined as ongoing operating budget for the program which will become part of the base.*

*One-time is defined as one-time funding in a fiscal year and not part of the base.*

**III. EXPENDITURES**

	<u>FY 26</u>		<u>FY 27</u>		<u>FY 28</u>		<u>FY 29</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time

**A. Personnel Costs**

# INSTRUCTION, RESEARCH AND STUDENT AFFAIRS

**JUNE 13, 2024**

**ATTACHMENT 1**

1. FTE	5.5		5.5		7.5		8.5
2. Faculty	\$240,000.00		\$240,000.00		\$480,000.00		\$600,000.00
3. Adjunct Faculty							
4. Graduate/Undergrad Assistants							
5. Research Personnel							
6. Directors/Administrators	275000		275000		275000		275000
7. Administrative Support Personnel	115000		115000		115000		115000
8. Fringe Benefits	207145		207145		281545		318745
9. Other:							
<b>Total Personnel and Costs</b>	<u>\$837,145</u>	<u>\$0</u>	<u>\$837,145</u>	<u>\$0</u>	<u>\$1,151,545</u>	<u>\$0</u>	<u>\$1,308,745</u>

	<u>FY 26</u>		<u>FY 27</u>		<u>FY 28</u>		<u>FY 29</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b>B. Operating Expenditures</b>								
1. Travel	\$20,000.00		\$20,000.00		\$20,000.00		\$20,000.00	
2. Professional Services	\$10,000.00		\$10,000.00		\$10,000.00		\$10,000.00	
3. Other Services								
4. Communications	\$20,000.00		\$20,000.00		\$20,000.00		\$20,000.00	
5. Materials and Supplies	\$25,000.00		\$25,000.00		\$25,000.00		\$25,000.00	
6. Rentals								
7. Materials & Goods for Manufacture & Resale								
8. Miscellaneous	\$15,000.00		\$15,000.00		\$15,000.00		\$15,000.00	
<b>Total Operating Expenditures</b>	<u>\$90,000</u>	<u>\$0</u>	<u>\$90,000</u>	<u>\$0</u>	<u>\$90,000</u>	<u>\$0</u>	<u>\$90,000</u>	<u>\$0</u>

	<u>FY 26</u>		<u>FY 27</u>		<u>FY 28</u>		<u>FY 29</u>	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time

September 16, 2021

Page 2

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

**ATTACHMENT 1**

**C. Capital Outlay**

1. Library Resources								
2. Equipment								
<b>Total Capital Outlay</b>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>

	FY _____		FY _____		FY _____		FY _____	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b>D. Capital Facilities Construction or Major Renovation</b>								

**E. Other Costs**

Utilites								
Maintenance & Repairs								
Other								
<b>Total Other Costs</b>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>

<b>TOTAL EXPENDITURES:</b>	<u>\$927,145</u>	<u>\$0</u>	<u>\$927,145</u>	<u>\$0</u>	<u>\$1,241,545</u>	<u>\$0</u>	<u>\$1,398,745</u>	<u>\$0</u>
<b>Net Income (Deficit)</b>	<u>\$85,255</u>	<u>\$0</u>	<u>\$1,341,137</u>	<u>\$0</u>	<u>\$1,532,937</u>	<u>\$0</u>	<u>\$1,901,173</u>	<u>\$0</u>

Budget Notes (specify row and add explanation where needed; e.g., "I.A.,B. FTE is calculated using..."):

I.A.B.	20 students in the first year and a 5 student increase in cohort size each subsequent year. These enrollment projections are conservative.
II.4	New tuition revenue is based on university instate and out of state tuition.
II.5	Professional fee is based on a set amount of \$23,000 per year (3 semesters)
III.B	Conference travel for professional development; professional services; program communciations; accreditation costs; program supplies.
	Please refer to the attached Physician Assistant Budget Addendum for an explanation of how this program meets the criterion for the self-support fee

**Direct-Entry Master of Physician Assistant Studies Budget Addendum**

a) Requirements. To designate a professional fee for a Board approved professional program, all of the following criteria must be met:

1) Credential or Licensure Requirement:

i) A professional fee may be charged for an academic professional program if graduates of the program obtain a specialized higher education certificate or degree that qualifies them to practice a professional service involving expert and specialized knowledge for which credentialing or licensing may be required.

The Direct-Entry Master of Physician Assistant Studies is designed to be consistent with the required training to be eligible to sit for the licensing examination (Physician Assistant National Certifying Examination) and the minimum requirements for state licensure in Idaho.

ii) Any such professional program must provide at least the minimum capabilities required for entry to the practice of a profession.

MPAS students will complete 8 courses (3 credits) of practicum experience in the clinical setting. Students will also complete a capstone research experience (i.e., research paper and presentation) in Evidence-Based Medicine III, as described in the attached full proposal. As a result, our graduates will demonstrate entry-level proficiency as PAs.

2) Accreditation Requirement: The program:

i) is accredited within the institution's regional accreditation; or

ii) is actively seeking accreditation if a new program; or

We will be applying for Provisional Accreditation from the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA).

iii) will be actively seeking program accreditation after the first full year of existence if a new program by a regional or specialized accrediting agency.

3) Demonstration of Program Costs: Institutions may propose professional fees for Board approval based on the costs to deliver the program and other related costs. An institution must provide justification for the pricing of the professional program. Professional program fees must be additional fees above and beyond the normal resident and non-resident tuition rates.

The PA program is a significant financial investment, often requiring substantial resources to ensure high-quality education and compliance with accreditation standards. A professional fee of \$23,000 per semester for three semesters per year (Fall, Spring & Summer). This fee will be charged in addition to the University of Idaho's graduate tuition rates and mandatory fees. These costs are necessary to cover the required resources that include but are not limited to (e.g., clinical examination instruments, clinical exam tables, simulation equipment) will be needed for simulation training (e.g., Manikin-Based Simulation, Skills-Training Simulation, Tissue-based Simulation, etc.) and clinical skills



training. As well as covering the costs of the personnel, instructors, and staff that will be needed to deliver the program.

b) Program Guidelines

1) The program must be consistent with academic offerings of the institution serving a population that accesses the same activities, services, and features as full-time, tuition-paying students.

These students will be on campus and will be utilizing the campus services.

2) Upon the approval and establishment of a professional fee, course fees associated with the same program shall be prohibited.

PA students will be charged both a professional program fee and tuition for this program.



Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Northwest Specialty Hospital, I am writing to express our support for the University of Idaho and their proposed health professions programs, including the direct entry Master of Science in Nursing (MSN) and the Physician Assistant (PA) training programs. As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) and Idahoans are left with severe shortages of healthcare access.

Importantly, these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs.

Sincerely,



Rick Rasmussen

CEO, Northwest Specialty Hospital

[Rick.Rasmussen@nwsh.com](mailto:Rick.Rasmussen@nwsh.com) // 208-262-2310



2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4003  
kootenaihealth.org

March 27, 2024

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Kootenai Health, we are writing to express our support for the University of Idaho and their proposed health professions programs, including the direct entry Master of Science in Nursing (MSN) and the Physician Assistant (PA) training programs. As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) and Idahoans are left with severe shortages of healthcare access.

Importantly, these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs.

Sincerely,



Karen Cabell, DO  
Chief Physician Executive  
kcabell@kh.org

PO Box 415  
Hayden, ID 83835  
April 8, 2024

Jeff Seegmiller, Ed.D.  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
The University of Idaho

Dear Dr. Seegmiller,

As a retired general surgeon and strong supporter of medical education, I am writing to express my support for the University of Idaho and their proposed health professions programs, including the establishment of the School of Health and Medical Professions.

I am pleased to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs. The demand for medical professionals in these fields is high. Expanded medical education in these particular areas will help Idaho address serious health provider shortages.

The University of Idaho is well-positioned to develop and implement expanded medical education programs. It is important to note that the proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed

Expanded medical education is essential for the overall future of healthcare. Developing the next generation of medical professionals will help to ensure that patients have access to high-quality care.

I fully support these academic programs and urge the Idaho State Board of Education to move quickly with their approval for the establishment of the School of Health and Medical Professions.

Sincerely,

Thomas K. Thilo, MD  
tomthilo@hotmail.com  
(208) 661-1114

To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

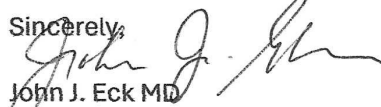
Thank you for your continued focus on the critical shortages in medical providers that Idahoans experience and for providing solutions to this challenge. I was very happy that the state legislature approved funding for the Doctorate Psychology (PsyD), Direct-Entry Master of Science in Nursing (MSN), Doctorate - Anatomical Science Education (DAS), Master of Science, Gerontology, Certified Registered Nurse Anesthetist (CRNA) Doctorate, and the Physician Assistant (PA)/Masters programs. This approval was imperative and reflects the core values of Idahoans to create solutions that reflect the unique needs of our state and our communities.

As an independent primary care physician practicing for over 30 years and a business owner, I have seen the need first-hand for more medical professionals and the consequences of provider shortages. Workforce shortages in the medical professions affect everyone: Patients, other employees, business owners, medical providers, and our great state. The strain on our current system not only affects individuals personally but also affects society at large by decreasing productivity, decreasing revenues, and making it more difficult for businesses to find and retain talent. Our future workforce throughout all sectors will continue to be affected if we do not respond to the current healthcare challenge.

As a physician, patient, business owner, and medical provider working in and with health organizations, I believe the University of Idaho health professions programs, including the proposed School of Health and Medical Professions are essential to the health of Idaho. Of note, these programs will not compete with existing healthcare programs at other institutions but will contribute to improving the diversity of the healthcare workforce which will be required in the future for a healthy Idaho.

I stand in full support of these academic programs and strongly encourage the State Board of Education to approve these programs as well as the School of Health and Medical Professions quickly.

Sincerely,



John J. Eck MD  
208 Solutions LLC  
188 W. Hulls Ridge Ct.  
Boise, Idaho 83702



## JACK T. RIGGS, M.D.

04-25-24

To: Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

From: Jack T. Riggs, MD

Dear Dr. Seegmiller,

I am writing today to express my enthusiastic support for the **University of Idaho** and their newly proposed health professions programs, including the proposed **School of Health and Medical Professions (SHAMP)**.

The addition of direct entry Master of Science in Nursing (MSN), Doctor of Psychology in Clinical Psychology (PsyD), Doctor of Anatomical Sciences (DAS), Certified Registered Nurse Anesthetist (CRNA) DNP degree, Master of Science in Gerontology (MS), and Physician Assistant (PA) training programs at the University of Idaho will truly benefit all the citizens of Idaho.

As you know, there is a critical need for increased access to specialized professionals in our state. Currently, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. Too many Idahoans are left with severe shortages of healthcare access.

I believe these proposed programs would improve and increase a healthcare workforce that is highly needed. A statewide shortage in healthcare workers is a combination of significant population growth combined with too few academic programs to meet the state needs. A growing and aging population will continue to strain the state's healthcare system, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

I fully support these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,



Jack T. Riggs, MD  
Former Lt. Governor of Idaho  
Former WWAMI Student E-76  
Member, WWAMI Advisory Board  
[jack@rephasing.com](mailto:jack@rephasing.com)  
208-818-1763



**J-U-B ENGINEERS, INC.**

J-U-B COMPANIES



THE  
LANGDON  
GROUP



GATEWAY  
MAPPING  
INC.

April 24, 2024

Dr. Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of J-U-B ENGINEERS, Inc., we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are excited to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As a midsize employer with our entire employee base residing in the intermountain west, we recognize the critical need for increased access to specialized professionals in our community and state. In recent years there has been a decline in healthcare access or services for many populations in our region. Quality healthcare is a primary concern for our employees and a critical recruitment aspect for attracting quality talent to our organization.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

**J-U-B ENGINEERS, Inc.**

A handwritten signature in black ink, appearing to read 'Brian Smith', written over a white background.

Brian Smith, P.E.  
President/CEO



## Coeur d'Alene Public Schools

DISTRICT ADMINISTRATIVE CENTER  
1400 N. Northwood Center Court, Coeur d'Alene, ID 83814

OFFICE 208.664.8241

FAX 208.664.1748

[www.cdaschools.org](http://www.cdaschools.org)

April 29, 2024

Jeff Seegmiller, Ed.D., LAT, ATC  
Regional Dean and Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho  
1875 Perimeter Drive MS 4061  
Moscow, ID 83844-4061

Dear Dr. Seegmiller,

On behalf of Coeur d'Alene District 271, we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

Health education plays a pivotal role in improving community well-being by promoting knowledge and healthy practices across all age groups. As an academic organization we know the importance of health education and development allowing increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

A handwritten signature in black ink, appearing to read 'Shon Hocker', is written over a horizontal line.

Dr. Shon Hocker  
Superintendent of Schools  
Coeur d'Alene Public School District 271  
[shon.hocker@cdaschools.org](mailto:shon.hocker@cdaschools.org)  
208-664-8241 ext. 10008

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2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

Dear Dr. Seegmiller,

In my capacity as the Chief Nursing Officer of Kootenai Health, I wish to express our strong support for the University of Idaho's proposed School of Health and Medical Professions (SHMP).

The introduction of the direct entry Master of Science in Nursing (MSN), Doctor of Psychology in Clinical Psychology (PsyD), Doctor of Anatomical Sciences (DAS), Certified Registered Nurse Anesthetist (CRNA) DNP degree, Master's of Science in Gerontology (MS), and Physician Assistant (PA) training programs reflects a proactive response to the escalating health care needs of our community and state.

At Kootenai Health, we recognize the critical shortage of healthcare professionals across Idaho, especially in medically underserved areas. This shortage not only challenges our ability to meet the diverse healthcare needs of our population but also underscores the importance of expanding access to specialized health care education.

These proposed programs align closely with our commitment to excellence in patient care and nursing education. By enhancing the availability of advanced nursing education opportunities, we can cultivate a highly skilled workforce capable of delivering comprehensive and compassionate care to our patients.

Moreover, we firmly believe that these programs will complement existing health care initiatives, contributing to the overall enhancement of health care services throughout Idaho. As our population continues to grow and age, the demand for qualified health care professionals will only intensify, making the approval of these programs all the more urgent.

In conclusion, I am proud to lend my full support to the University of Idaho's efforts to establish the School of Health and Medical Professions and its associated programs. I urge the Idaho State Board of Education to approve these initiatives, as they represent a significant step forward in addressing our state's healthcare challenges.

Thank you for your dedication to advancing healthcare education and improving the health and well-being of all Idahoans.

Sincerely,

A handwritten signature in black ink, appearing to read "Kelly Espinoza", is written over a circular stamp or seal.

Kelly Espinoza, PhD, RN

Chief Nursing Officer, Kootenai Health



2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

To:  
Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

As the Executive Vice President of Kootenai Clinic, I am pleased to convey our organization's support for the University of Idaho's proposed School of Health and Medical Professions (SHMP).

We are excited about the potential of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs to address the pressing health care needs in our community and state.

At Kootenai Clinic, we are keenly aware of the challenges posed by the shortage of specialized health care professionals across Idaho. With 98% of Idaho counties designated as Health Provider Shortage Areas (HSPAs) for medical care and 100% for mental health, there is an urgent need to expand access to quality health care services.

We firmly believe these proposed programs will not only alleviate the shortage of health care professionals, but also enhance the overall quality of care provided to Idaho residents. By addressing the growing demand for health care services, we can improve health outcomes and enhance the well-being of our community.

Moreover, we view these programs as complementary rather than competitive, recognizing the need for collaboration among academic institutions to meet the evolving health care needs of our state. As Idaho's population continues to grow and age, the strain on our health care infrastructure will only increase, further highlighting the importance of expanding health care services within the state.

In conclusion, I urge the Idaho State Board of Education to approve the establishment of the School of Health and Medical Professions and its associated programs. Kootenai Clinic stands ready to support these initiatives and looks forward to collaborating with the University of Idaho to advance health care education and improve access to quality care for all Idahoans.

Sincerely,



John Weinsheim

Executive Vice President of Kootenai Clinic



2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

As a dedicated board member of Kootenai Health, I am pleased to convey our steadfast support for the University of Idaho's proposed health professions programs, including the establishment of the School of Health and Medical Professions.

The inclusion of the direct entry Master of Science in Nursing (MSN), Doctor of Psychology in Clinical Psychology (PsyD), Doctor of Anatomical Sciences (DAS), Certified Registered Nurse Anesthetist (CRNA) DNP degree, Master's of Science in Gerontology (MS), and Physician Assistant (PA) training programs exemplifies a proactive approach to addressing the pressing health care needs of our community and state.

Kootenai Health recognizes the profound impact of health care workforce shortages on our region, with the majority of Idaho counties designated as Health Provider Shortage Areas (HSPAs) for medical and mental health care. These shortages underscore the critical need for expanded access to specialized health care professionals.

Importantly, we view these proposed programs as complementary rather than competitive, aimed at bolstering the existing health care workforce to better serve our growing population. The demographic surge of aging Idahoans further emphasizes the urgency of expanding health care services within the state.

Therefore, we wholeheartedly endorse these academic programs and urge the Idaho State Board of Education to expeditiously approve the establishment of the School of Health and Medical Professions, along with the proposed programs.

Thank you for your dedication to advancing health care education and improving access to quality care for all Idahoans.

Sincerely,



Dave Bobbitt

Secretary and Treasurer, Kootenai Health Board of Trustees





KootenaiHealth

2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

To:  
Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

I am writing to express Kootenai Health's support for the proposed School of Health and Medical Professions (SHAMP) at the University of Idaho. As the CEO of Kootenai Health, the regional referral center for the ten northern counties of Idaho, I can confidently say the creation of SHAMP will greatly contribute to the advancement of health care delivery in our state.

The programs outlined in the proposal for SHAMP align closely with the evolving health care needs of Idahoans. We recognize the immense value they would bring to our health system and the patients we care for. In particular, there is a critical shortage of Advanced Practice Providers (APPs) in North Idaho, and the only programs in our region are offered through private, out-of-state universities.

Each degree, Clinical Psychology (PsyD), Direct-Entry Master of Science in Nursing (MSN), Doctorate in Anatomical Science Education (DAS), Master of Science in Gerontology, Certified Registered Nurse Anesthetist (CRNA) DNP degree, and Physician Assistant (PA) Master's programs are all critical in preparing highly skilled health care professionals to meet the complex demands of quality health care delivery.

We firmly believe the establishment of SHAMP will enhance educational opportunities for aspiring health care professionals in our community, fostering a pipeline of talent that will contribute to the improvement of health care delivery and patient outcomes. Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

Kootenai Health fully supports the establishment of the School of Health and Medical Professions at the University of Idaho. We are confident that SHAMP will play a pivotal role in shaping the future of health care education and practice, and we look forward to the opportunity to collaborate closely with the university in realizing this vision.

Sincerely,



Jameson C. Smith  
CEO, Kootenai Health



COEUR D'ALENE AREA  
ECONOMIC DEVELOPMENT CORPORATION

3731 N Ramsey Rd, Suite 110B ~ Coeur d'Alene, ID 83814 ~ 1.208.667.4753

April 29, 2024

To: Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of the Coeur d'Alene Area Economic Development Corporation/Jobs Plus, Inc., we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As an organization dedicated to economic development and assisting businesses with workforce challenges, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages for healthcare access.

We strongly believe these proposed programs will not compete with existing healthcare programs at other institutions, but rather, would improve talent supply that is highly needed. Statewide shortages in our healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

Gynii A Gilliam, President/CEO  
Email: [gynii@cdaedc.org](mailto:gynii@cdaedc.org); Phone: (208)667-4753

BOARD OF DIRECTORS

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**Gynii A. Gilliam**  
President & CEO

**KootenaiHealth**

2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Kootenai Health, we are writing to express our support for the University of Idaho and its proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care, and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would improve a highly needed workforce. Statewide shortages in the healthcare workforce are related to drastic population growth in the state and a paucity of academic programs to meet the state's needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We fully support these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

**Kelly McCarthy Pöl**, DNP, RN, NP-D, CHSE  
Manager Clinical Education and Simulation

Kootenai Health  
2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.5189  
kpol@kh.org



To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Syringa Hospital & Clinics, we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are excited to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As a rural hospital dedicated to advancing improving the health and well-being of our community, we recognize the critical need for increased access to specialized professionals in both our local community and in our state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

We believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather grow and develop a workforce that is greatly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

Abner King, FACHE  
Chief Executive Officer  
[aking@syringahospital.org](mailto:aking@syringahospital.org)  
208-983-8525





25 Jacobs Gulch • Kellogg, Idaho 83837 • (208) 784-1221 • Fax (208) 784-0961

To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Shoshone Medical Center, I am writing to express support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

Several of the planned programs would help expand access to critical healthcare and mental health services in Idaho. As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. Shoshone county is a designated Health Provider Shortage Area (HSPA) for both medical care and mental health services. Providing these educational pathways will help alleviate the critical shortage of services we currently experience. Population growth and an aging population will continue to increase demand for medical and mental health services, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

Thank you for the opportunity to express support for these academic programs; I urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

Paul Lewis  
CEO

[plewis@shomed.org](mailto:plewis@shomed.org)





To:  
Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Bonner General Hospital, we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

John Hennessy  
Chief Executive Officer  
Bonner General Hospital



Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program, University of Idaho

April 2024

Dear Dr. Seegmiller,

I'm writing to express our strong support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

Intermax has 83 employees in North Idaho with families (older and younger) who rely upon the best professional health care we can get in our region. As the flagship institution in Idaho, the University of Idaho is a critical partner in expanding the area's professional medical education.

We are very encouraged to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

We are a company who provides rural broadband. We've been active in telehealth with our rural local communities and the need is great. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in the healthcare workforce are real and evident in our community. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services to meet this need.

We support these academic programs and urge the Idaho State Board of Education to move quickly and approve them - as well as the School of Health and Medical Professions.

Sincerely,

A handwritten signature in blue ink that reads "M.R.K." followed by a stylized flourish.

Michael R. Kennedy  
President and CEO  
[mkennedy@intermaxteam.com](mailto:mkennedy@intermaxteam.com)  
208-415-1772

To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of the Coeur d'Alene Casino Resort Hotel, we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

Laura Penney, CEO

[lpenny@cdacasino.com](mailto:lpenny@cdacasino.com)



# North Idaho College

1000 West Garden Avenue, Coeur d'Alene, Idaho 83814  
[www.nic.edu](http://www.nic.edu)

**President's Office**  
(208)769-3303 phone  
[nick.swayne@nic.edu](mailto:nick.swayne@nic.edu)

18 March 2024

Idaho State Board of Education  
650 West State Street, 3rd Floor  
Boise, ID 83702

Dear Idaho State Board of Education,

I am writing to express my wholehearted support for the University of Idaho and their proposed health professions programs. As President of North Idaho College, I am acutely aware of the healthcare challenges facing our state, particularly in northern Idaho, where shortages of healthcare providers have reached unprecedented levels.

The statistics paint a stark picture: with 98% of the state designated as health professional shortage areas, our citizens are left grappling with limited access to essential healthcare services. This not only impacts our economy but, more importantly, jeopardizes the well-being of our community members.

The University of Idaho's proposal to introduce a doctorate in clinical psychology (PsyD), a Physician Assistant program, and a direct entry Master of Science in Nursing are much-needed steps towards addressing these critical shortages. These programs are tailored to meet the specific needs of our region, where the shortage of healthcare professionals is most acute.

It's important to emphasize that these proposed programs are not intended to compete with existing offerings at other universities, but rather to complement and enhance the range of healthcare education available within the state. There is a clear and demonstrated need for these programs, with a level of interest that is currently underserved.

As we look towards the future, it is imperative that we invest in the growth of all health professional programs to ensure the vitality of our healthcare workforce. The University of Idaho, as our state's top research institution, is well-positioned to play a leading role in this endeavor.

(continued)

I am enthusiastic about the prospect of collaboration between the University of Idaho's new health programs and our own North Idaho College health professions programs to expand collaborative initiatives. Together, we can work towards meeting the healthcare needs of northern Idaho and the state as a whole.

Thank you for your attention to this matter. I stand ready to offer any assistance or support necessary to bring these vital programs to fruition.

Sincerely,

A handwritten signature in black ink that reads "Nick Swayne". The signature is written in a cursive style with a large initial "N" and a long, sweeping underline.

Nick Swayne, PhD  
President, North Idaho College

**Comments on two program proposals by University of Idaho: 1) Direct Entry MS in Nursing Program and 2) Masters of Physician Assistant Studies Program****Boise State University**

It is our belief that the two programs, **Direct Entry MS in Nursing Program** and **Masters of Physician Assistant Studies Program**, proposed by University of Idaho, are or can be allowed under Idaho State Board of Education (SBOE) Policy III.Z, provided they follow the prescribed steps outlined by the Board and the SBOE governing policies and ensure the existing criteria are met. However, we have concerns that the process and criteria outlined in the Policy III.Z have yet to be met.

In particular, these two program proposals, as they are put forward, are violating Policy III.Z in two important ways. Firstly, statewide responsibility for these programs belongs to Idaho State University, and there is a clear process detailed in the Policy III.Z (pages 9 - 11 of the policy document) describing the Memorandum of Understanding (MOU) that needs to be established, in this case between University of Idaho and Idaho State University, and submitted as an addendum to the program proposal.

Secondly, these proposals are not following the specific steps identified for “high demand programs” in Policy III.Z (pages 5 - 6 of the policy document). This section specifically requires the proposals to meet a minimum of four criteria, demonstrating high demand and declaring that the submission of these proposals are “requested by the Board.” The proposals do not indicate that these proposals are requested by the Board. More importantly, the requirement of establishing an MOU with the institution with the Statewide Responsibility, in this case Idaho State University, is not met.

“An institution wishing to offer a high-demand program that does not have statewide responsibility in the program area must meet the criteria above, have a signed MOU with the Institution with the Statewide Program Responsibility, and the approval of the Board’s Executive Director or designee. At that point, the Partnering Institution shall include the program in its Institution Plan. If the Board determines that an emergency need exists for a program that the Institution with Statewide Program Responsibility cannot meet, then upon Board approval the two Institutions shall enter into an MOU for the delivery of such program.” (SBOE Policy III.Z, page 6).

Finally, these proposals do not meet the spirit of “systemness” or “managed competition” that the SBOE has put forth for higher education in Idaho, nor the goals of the Healthcare Committee Education and Training Workgroup that has been working for a coordinated and a collaborative approach to healthcare workforce shortage in Idaho. Proposals by University of Idaho to offer these two programs do not align with the Idaho State Board of Education’s fundamental principles to “[...]plan and coordinate] educational programs in a manner that enhances access to quality programs, while concurrently increasing efficiency, avoiding

unnecessary duplication and maximizing the cost-effective use of educational resources through coordination between institutions" (SBOE Governing Policies and Procedures, Policy III.Z, p. 1).

It is commendable that the University of Idaho would like to shoulder some of the responsibility to contribute to workforce needs in healthcare in Idaho by investing in programs that are *not yet offered* in Idaho, such as Master of Science in Gerontology. However, increasing the healthcare workforce in Idaho is not synonymous with creating duplicated healthcare programs. Creating the same healthcare programs is not avoiding unnecessary duplication and nor maximizing the cost-effective use of educational resources or taxpayer investment. Universities and colleges with existing healthcare programs have dedicated buildings, labs and most importantly decades of investment in building relationships with the healthcare industry, which we need to build upon.



Idaho State Board of Education

March 28th, 2024

Re: University of Idaho Proposal Related to Physician Assistant Program

## OVERVIEW

Idaho State University welcomes the opportunity to respond to the current Masters of Physician Assistant Studies program proposal brought to the State Board of Education by the University of Idaho. At the outset, we acknowledge that Idaho State University has a responsibility delegated to it by the State Board of Education to assess, understand, and manage the statewide needs related to physician assistant training under policy III.Z, and as the information below will show, we are unequivocally committed to doing so. We believe this response represents a significant opportunity for ISU to accurately inform the Board and the proposing institution about the nature of PA needs in the State of Idaho and how additional programming will impact the landscape of healthcare and healthcare training in the state. ISU spends considerable time and resources monitoring the healthcare landscape and responding strategically to emergent needs, and has developed unparalleled expertise in Idaho in doing so (for context, ISU's PA program is ranked in the [Top 50 of best PA programs of 300+ programs in the nation](#)). Unfortunately, we were not contacted by the proposing institution for conversation related to this particular proposal, or about their plans to build out healthcare programming more broadly – a fact which not only runs contrary to the Board's expectations under current policy, but which has resulted in a proposal which will have a number of negative implications for both students and the state if it were to be approved. We hope this response is useful to our sister institution as they consider offering broader programming in the health sciences, and that it will encourage them to reach out to us for more direct and collaborative conversation.

## EXECUTIVE SUMMARY

*Key Points for Consideration:*

- **The current deficits in primary care providers are not in physician assistants, but rather in primary care physicians – and simply increasing the overall numbers of physician assistants will not appropriately address Idaho's primary care needs.** Idaho currently ranks [11th in the nation](#) for the number of physician assistants (PAs) per capita and the majority of these are already engaged in providing primary care. Idaho State University has consistently increased the number of physician assistants it trains per year to meet state workforce demands and has successfully attended to the market demand for overall numbers of PAs required by the state (ex., 30 per year in 2002 to 72 per year currently). With ISU's base program, Lewis-Clark State College and College of Idaho expansions raising numbers to approximately 98 over the next 3 years, ISU and its current partners will essentially meet the [Idaho Department of Labor's currently stated demand](#), which stands at 103 annually with a projected annual growth of only 2.1%. Any future needs will continue to be assessed and addressed. At present, because of in-migration and existing production, ISU exports many PAs out-of-state (more data below). The real issue with deficits in primary care access lies

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with the overall numbers of primary care physicians. Idaho currently [ranks 49th in the nation](#) for the number of primary care physicians (M.D./D.O.) per capita. Unfortunately, both the size of the WWAMI cohort (40 per year) and the retention of those Idaho trained physicians within the state (50%-51% – or ~20 primary care physicians) appear to have [remained largely stagnant](#). Despite the proposal's assertion to the contrary, *primary care physicians and physician assistants are not fully interchangeable members of the healthcare workforce, and the lack of primary care physicians cannot be adequately addressed by simply producing additional physician assistants*. ISU is interested in and willing to collaborate with our sister institution in the production of primary care physicians (M.D.s) through Graduate Medical Education (GME) in an effort to improve the production levels and outcomes they are currently experiencing. In fact, for 30 years ISU's Family Medicine Residency Program has been producing primary care physicians and of the program's 167 graduates more than 50% have remained in Idaho. Overall, Idaho ranks 4th in the nation for GME retention. Expanding GME opportunities would have a greater impact on addressing the shortage of primary care physicians than the proposed Physician Assistant program.

- **As the above data suggest, our current production of physician assistants is sufficient to meet current demand for PAs, and our partnerships with Lewis-Clark State College and College of Idaho will allow us to meet future demand that will emerge as a result of expected population growth.** There may be geographic disparities in the distribution of these PAs in certain rural areas of the state, but this is not a problem of overall production – it is a problem of incentivization for adequate distribution into high need areas, and one we are solving, in part, through our recent partnership with Lewis-Clark State College and increased use of training sites in North Idaho. The ISU PA program has had longstanding affiliations with clinical partners for training in North Idaho. In fact, *current clinical year students* are being educated in Cottonwood, Moscow, Coeur d'Alene, Kooskia, Bonners Ferry, Sandpoint, and Lewiston. Ultimately, practicing in some areas of the state is less desirable for some PAs and the answer to this problem is not overproduction of PAs through duplication of programming, but rather through the expansion of incentives to help direct PAs into these underserved areas. ISU is interested in assessing the viability of expanding the Rural Physician Incentive Program (RPIP) program to include physician assistants, and would welcome the support of the State Board of Education and our sister institution in supporting our efforts to lobby the legislature for the expansion of this program to better support the distribution of PAs into these areas. Of note, the ISU PA program has received several grants (more detail below) in recent years to enhance training opportunities in rural areas and to improve access for students from medically underserved areas and populations. The ISU program has expanded over the last 20 years without any investment from the state. If even a modest portion of the funding our sister institution recently sought to duplicate programming were instead used to expand the RPIP program it would have the desired effect (more on this below).
- **The admission numbers and narrative related to admissions in the proposal forwarded by our sister institution fails to account for, or accurately understand, the nature and dynamics of PA student recruitment, and erroneous conclusions are reached as a result.** Overall, the number of

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applicants for our PA program have been in decline as a result of significant increases in the number of PA programs launching in the region, which has doubled since 2015 – with even more in development (20 programs to 42 – 50 by 2025). In 2022, we received 887 total applications, and by 2024 that number had declined to 490. In addition to this, the data below shows that well over half of our current applicant cohort (and likely the virtual entirety of it) is applying to a large number of other PA programs in the region. Had we admitted 100% of our final applicant pool, we would only increase our enrolled students by a modest number – as any applicant meeting acceptance standards is likely to be admitted to multiple schools. One concerning development accompanying our applicant declines has been a modest decline in the quality of these applicants. Further declines, which would be exacerbated by an additional program in the state, are likely to impact student success and retention negatively.

- **The addition of another PA program in Idaho will unnecessarily compound the significant challenges associated with securing and affording clinical training sites.** With two stand alone programs in the state, competition for clinical site placements, which is already significant given programs external to Idaho seeking training in Idaho clinics, will only be exacerbated. This will mean that the cost to secure those clinical sites is likely to increase. These costs will have to be passed on to by the students or absorbed by the universities in order to secure those clinical placements. Thus, the expansion of a second program in the state is likely to make PA education more rather than less costly at the same time it fails to significantly address the real primary care issues Idaho currently experiences.
- It is worth noting that ISU had conversations in the summer of 2023 with the proposing institution about collaborating on the delivery of Physician Assistant programming. **Those conversations broke down when it became apparent that University of Idaho was intent on seeking stand-alone accreditation, which would have prevented both institutions from responding productively to future constrictions in the market for PAs** (the current significant overhaul of our College of Pharmacy has made us acutely aware of the need to plan for such constrictions). This was explained, and offers to co-affiliate faculty, share revenue, and enter into MOU agreements that would ensure we maintain institutional connections even should such constrictions manifest were made. It was then communicated to ISU that there was no longer interest in pursuing a collaboration. In response, we offered to assist with the development of undergraduate nursing programming and we have made multiple attempts to develop articulation agreements for U of I students to path into ISU's health programs, but no response to these offers have been forthcoming either.
- **Finally, the Board should be aware that currently, there are several misleading and factually incorrect statements in University of Idaho's proposal.** We have responded to the original proposal with requests to correct factual errors, and the Office of the State Board will be able to confirm if these have since been corrected. Statements which are misleading include:

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- “23% growth rate through 2030” (projected growth rate is 2.1% per year until 2030, not 23% growth rate per year until 2030).
- “Low production of PAs in the region” (repeated multiple times but is factually inaccurate, as data below shows).
- The suggestion that the UI program “offers a compressed course schedule that allows students to complete their degree in a shorter timeframe...[which] not only gets them into the workforce faster but also reduces the overall cost of their education in terms of time and associated living expenses.” However, the total number of enrolled semesters is the same as ISU’s current program (6), and the cost of UIs program is higher (In-state: UI \$91,462.00 vs ISU \$90,636.00, Out of State: UI \$150,478.00 vs ISU \$148,596.00 & COI \$147,808.00).
- The erroneous statement that “in-state accredited PA programs do not exist in most of the Pacific Northwest (e.g., Montana, Wyoming, Alaska).” This is misleading, as both Montana and Alaska have accredited PA programs in their states (see below).
- The lumping together of both ISU’s application and admission data together with the University of Utah’s is used to distort ISU’s decline rate and make it appear as if it were greater than 90% (our rejection rate of total applicants in the most recent year is 85%, but of applicants who are academically qualified for an interview, let alone admission, is only 50%). This data is then used to defend the idea that “student desire to pursue a career as a PA... is not being met in Idaho,” that “low production of PAs in the region” exists, and that the “healthcare system demand [is] greater than ISU can meet.” None of these is factually accurate as the below will show. PA students routinely apply to significant numbers of schools and select among multiple admission offers (we shared almost 300 applications with the UofU alone); that rather than low PA levels, PA levels are high in Western States (and the 11th highest in the nation in Idaho, as stated above); and that we are positioned to meet current and future demand with our institutional collaborations. Data explicating our claims is provided below in detail.

## ADDITIONAL INFORMATION

### Physician Assistant Training – Supply and Demand in Historical Context

The ISU PA program has always been attuned and responsive to the workforce demands and patient care needs of Idaho since its creation in 1995. That first class graduated 19 students with a Bachelor’s degree. As the demand for more PAs grew, the program expanded to 30 students in 2002 and elevated its training to a Master’s degree. As Idaho grew, the program was the first of ISU’s health programs, along with pharmacy, to expand to the western side of the state from Pocatello to Boise and added 20 more students in 2007 (50 students total). The program added another 10 students just 2 years later in 2009 to have 60 (30 in Pocatello and 30 in Meridian). With continued population growth the ISU PA program formed a first of its kind Public/Private institution partnership with the College of Idaho (College of Idaho) to expand an additional 12 students to the College of Idaho Caldwell campus in 2012. With additional commitments

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from College of Idaho, we are currently in the process of expanding by 8 students, raising the cohort to a total of 20. Knowing the health care needs of Northern Idaho, ISU announced a partnership with Lewis-Clark State College to expand its PA program to Lewiston, ID, and is engaged in a variety of measures to onboard an additional 18 students into the program (relocating/identifying additional training sites to/in North Idaho, meeting accreditation requirements for class expansion, co-affiliating faculty, and strengthening facility infrastructure) .

Summary of Growth:

Year	Number of students	Location
1995	19	Pocatello
2002	30	Pocatello
2007	50	30 Pocatello, 20 Boise
2009	60	30 Pocatello, 30 Meridian
2012	72	30 Pocatello, 30 Meridian, 12 Caldwell
TBD/2025	98	30 Pocatello, 30 Meridian, 20 Caldwell, + Lewiston

For the past 30 years the ISU PA program has been a beacon of success consistently responding to meeting the needs of Idaho's growing population. Part of that response has also been our commitment to serving rural populations. Since 2015 the ISU PA program has secured 4 Federal HRSA funded grants exceeding \$5 million to increase the number of PAs who serve Idaho's rural and underserved communities. These grants include:

- Pipeline to Diversity. HRSA 15-054 Grants for Primary Care Training and Enhancement.(2015-2020). (5 year: \$1,035,126, funded).
- Increasing Grit and Effectiveness in Rural Physician Assistants. HRSA 19-087 Grants for Primary Care Training and Enhancement. (2019-2024), (5 year: \$1,420,485 funded).
- Physician Assistant Collaborative Advancement for Rural Education (PACARE). HRSA-22-044 Grants for Primary Care Training and Enhancement - Physician Assistant Rural Training. (2022-2027). (5 year: \$1,478,624 funded).
- The Physician Assistant Limited English Advocacy Project (PALEAP): HRSA-23-123 Grants for Primary Care Training and Enhancement - Language and Disability Access. Funded September 11, 2023 (5 year grant duration 2023-2028: \$1,312,037 funded).

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With these grants the PA program has sought to recruit students from rural communities and underserved backgrounds who want to return to these areas and populations to work. Additionally, these funds provide clinical site payment and training specific to rural and underserved areas of the state. Through these grants the PA program has created a Rural Health Track (RHT), Rural Opportunity Interdisciplinary Training (ROITS) experiences, a Latino Health Track (LHT) and a Hispanic Health Track (HHT) where PA students train in designated locations in Idaho to advance their experience and ability to work in rural and underserved communities upon graduation. In addition to training students who choose to work in rural and underserved Idaho these grants provide training to primary care providers already working in these communities to advance their capacity to meet the needs of the patients they serve. Hence, the ISU PA program is helping Idaho meet the need for well trained rural primary care providers without any expense to the state.

However, despite these efforts, ISU concedes that there may be a lack of primary care providers servicing some rural areas of the state. This, however, is not a problem of lack of supply of PAs. Rather, as the WWAMI program has already experienced, this is a problem of incentivization. Physician assistants, much like primary care physicians, are financially disincentivized from setting up practices in small volume areas. Expansion of the RPIP program to include physician assistants would help ameliorate this problem, while the instantiation of a new, stand-alone Physician Assistant program would not.

As final evidence of the fact that the creation of additional Physician Assistant programming beyond current plans is both unnecessary and an unwise use of tax-payer funding, we would ask the board to consider the following data. Idaho is 11<sup>th</sup> in the nation in PAs per capita with 75.2 PAs per 100,000 population. (Source: [2022 NCCPA Statistical Profile of Board Certified PAs](#)). Per the [Idaho Department of Labor](#) there are 103 PA job openings annually with 980 total employed PAs and a projected 2.1% growth through 2030. With the ISU PA program graduating 72 students per year currently, with plans to expand that to 98, there is and will continue to be high competition for the 103 jobs when considering the 42 (soon to be 50) PA programs in the western region. With the average PA program class size of 48, there would be approximately 1,900 PA graduates from regional programs potentially applying to those jobs. Furthermore, in the June 2023 publication of PAEA's [Student Report 5](#) – Table 83: Geographic Distribution of Accepted Jobs - it shows that of 444 reported jobs accepted by new graduates, 34 (7%) were in the western region. This is the second lowest in the nation of the listed regions because the area is already highly saturated with PAs. Similarly when the ISU PA program reviewed where 200 state licensing requests for education verifications from its graduates were coming from for January 2022 to August 2023, 69% were for out of state boards of medicine and 31% for Idaho – again suggesting that we have reached a point where we are exporting a significant number of PAs outside of Idaho. The accumulation of this information suggests that finding a PA job in Idaho may be difficult. It is far more likely that any new Physician Assistant program approved by the board will result in training providers that will practice in other states than it will be that they will be retained in Idaho.

#### **Relevant Admissions Information and Data**

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Admissions trends in ISU's PA program have historically benefited from the popularity and growth of the PA profession over the last several decades. However, in the past few years it has experienced a nearly 50% decline in its number of applicants in addition to a decrease in the competitive quality of those applicants. While there are multiple variables in a student's choice to apply to a program, the principal factors leading to the decline in student applicants to the ISU PA program is an increase in the number of options (more PA programs) in the region.

In a 10 year span, 2015 to 2025, the number of PA programs in the Western Region will have more than doubled from 20 programs to 50, an increase of 30, as the following table shows.

#### Western Regional PA Programs

**Bold – New PA program in last 5 years**

*Italics – Currently Developing/Proposing PA program*

	Location (State)	University	Year Accredited
1	AZ	Arizona School of Health Sciences	1996
<b>2</b>	<b>AZ</b>	<b>Franklin Pierce University (Goodyear)</b>	<b>2022</b>
3	AZ	Midwestern University (Glendale)	1999
4	AZ	Northern Arizona University	2012
<b>5</b>	<b>AZ</b>	<b>Creighton University</b>	<b>2023</b>
6	AZ	<i>University of Arizona</i>	<i>2024-2025</i>
7	CA	<i>California State University – San Bernardino</i>	<i>2024-2025</i>
8	CA	<i>Alliant International University, CA</i>	<i>2024-2025</i>
9	CA	<i>Touro University California, Los Angeles</i>	<i>2024-2025</i>
<b>10</b>	<b>CA</b>	<b>University of California, San Diego</b>	<b>2023</b>
11	CA	<i>University of St. Augustine</i>	<i>2024-2025</i>
<b>12</b>	<b>CA</b>	<b>A.T. Still University of Health Sciences (Central Coast)</b>	<b>2021</b>
13	CA	California Baptist University	2016
<b>14</b>	<b>CA</b>	<b>California State University - Monterey Bay</b>	<b>2018</b>
15	CA	Chapman University	2016
16	CA	Charles R. Drew University of Medicine and Science	2016
17	CA	Dominican University of California	2017

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<b>18</b>	<b>CA</b>	<b>Keck Graduate Institute</b>	<b>2022</b>
19	CA	Loma Linda University	2000
20	CA	Marshall B. Ketchum University	2014
<b>21</b>	<b>CA</b>	<b>Point Loma Nazarene University</b>	<b>2021</b>
22	CA	Samuel Merritt University	1999
23	CA	Southern California University of Health Sciences	2016
24	CA	Stanford University	1976
25	CA	Touro University California	2002
26	CA	University of California-Davis	1974
<b>27</b>	<b>CA</b>	<b>University of La Verne</b>	<b>2018</b>
28	CA	University of Southern California (LA)	1975
29	CA	University of the Pacific	2016
<b>30</b>	<b>CA</b>	<b>West Coast University - California</b>	<b>2022</b>
31	CA	Western University of Health Sciences	1990
<b>32</b>	<b>CO</b>	<b>Colorado Mesa University</b>	<b>2018</b>
33	CO	Red Rocks Community College	1998
<b>34</b>	<b>CO</b>	<b>Rocky Vista University</b>	<b>2018</b>
35	CO	University of Colorado	1973
36	MT	Rocky Mountain College	1996
37	<i>MT</i>	<i>Carroll College</i>	<i>2024-2025</i>
38	<i>MT</i>	<i>University of Montana</i>	<i>2024-2025</i>
39	NV	Touro University Nevada	2004
<b>40</b>	<b>NV</b>	<b>University of Nevada, Reno</b>	<b>2018</b>
<b>41</b>	<b>OR</b>	<b>George Fox University</b>	<b>2020</b>
42	OR	Oregon Health & Science University	1996
43	OR	Pacific University	1997
44	UT	Rocky Mountain University of Health Professions	2015
45	UT	University of Utah	1972
<b>46</b>	<b>UT</b>	<b>University of Utah - St. George expansion</b>	<b>2018</b>
<b>47</b>	<b>UT</b>	<b>Utah Valley University</b>	<b>2021</b>
<b>48</b>	<b>UT</b>	<b>Weber State University</b>	<b>2022</b>

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**Idaho State University**

49	WA	University of Washington	1973
50	WA	Northwest University	2024-2025

1- <https://www.arc-pa.org/accreditation/accredited-programs/>

2- <https://www.arc-pa.org/provisional-accreditation/applicant-programs/>

3- <https://paeaonline.org/wp-content/uploads/2020/11/program-report35-20201014.pdf>

As the above table indicates, states bordering Idaho will have seen 9 new or expanded PA programs emerge in the last 10 years including:

- 1- Carroll College, Helena, MT - 2025
- 2- University of Montana, Missoula, MT - 2025
- 3- Northwest University, Kirkland, WA - 2024
- 4- Weber State University, Ogden, UT - 2023
- 5- Utah Valley University, Orem, UT - 2021
- 6- George Fox University, Newberg, OR - 2020
- 7- University of Nevada, Reno, NV - 2018
- 8- University of Utah Expanded to St. George, UT - 2018
- 9- Rocky Mountain University, Provo, UT - 2015

Students interested in the ISU PA program typically apply to these neighboring programs, which is a significant reason for the drastic decrease in the number of applicants to ISU (ex., 887 - Class of 2024 declines to 490 - Class of 2026). Additionally, the applicant's file score, the score used to rate the quality of the student, has steadily decreased from 4.95 for the class of 2022 to 4.64 for the class of 2026. This decline in quality is likely to be exacerbated by the opening of additional PA programs in our region.

	Class of 2022	Class of 2023	Class of 2024	Class of 2025	Class of 2026
# of CASPA Applications	762	857	887	653	490
File Score Review Threshold	4.95	4.96	4.825	4.70	4.64
# of Interviews	147	163	129	177	144
# of Offers Made	98	115	103	125	94 (YTD)
# of	72	72	72	72	72

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Matriculated students					
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It should also be noted that we offer interviews to a number of students that meet or exceed our minimum criteria, as indicated in the above row entitled “# of interviews.” Not all applicants are qualified, and not all of those students who merit interviews are ultimately found to qualify for admittance. Finally, not all of those who are qualified for admittance and offered it choose to attend ISU. For example, in the class of 2025, we found 177 students met the institution’s minimum qualifications for an interview. Of those students, we ultimately had to make 125 offers in order to secure a class of 72. This is a roughly 58% yield rate (meaning that only 58% of the students offered ultimately accepted that offer). If we applied that yield rate to the remaining students in our interview pool, we might only have feasibly anticipated enrolling an additional 30 students – which would have raised our class size to 102 students. When our current expansion plans are fully executed and we are matriculating approximately 98 students per year, it is very likely that we will be matriculating virtually all qualified students willing to choose ISU – and we will essentially be fulfilling the workforce needs currently anticipated by the [Idaho Department of Labor for Physician Assistants](#). Any suggestion that we are turning away hundreds of otherwise qualified students every year who would otherwise enroll in a second Idaho-based program is simply not accurate.

To help further illustrate this, please consider that the current national student clearinghouse indicates that in our 2022 cohort the below numbers of students applied to both Idaho State University as well as the University indicated.

School/Program	Number of Applications shared with ISU
University of Utah	297
Rosalind Franklin University of Medicine	273
Pacific University	248
University of Colorado	237
University of Washington	208
Arizona School of Health Sciences	194
Midwestern University - Glendale	178
Rocky Mountain University of Health Professions	178
Duke University Medical Center	176
Touro University - Nevada	161

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Additional data related to various aspects of applications and admissions for the PA program is maintained by ISU and is available to Board members upon request, if interested.

### **Clinical Training Impacts**

It is well documented in the field of medicine that physicians stay where they train as residents, not where they completed medical school. Similarly, it is expected that PA's stay where they complete their clinical training, not the location of the PA program, many finding and being offered jobs at the clinical sites where they do rotations. Knowing this, the ISU PA program has forged strong relationships with a number of Idaho health care institutions to form clinical "training tracks". The PA student in their clinical year trains for 2 or more of their 8 rotations within the same institution. As the potential employer works and interacts with the PA student for 2 or more months they get to know the PAs and hire the PAs they've trained whom they know is a good fit over the unknown applicant. The PA program has 5 tracks for its students and intends to create more in collaboration with North Idaho institutions including expansion to Lewis-Clark State College. This represents one recent attempt to rectify any potential maldistribution of PAs in the state by placing more of these students in North Idaho with the hope that past trends related to rotational placements and final residential location of practitioners will hold true.

Having said as much, it is also true that Idaho has a mixed track record of retaining primary care providers in rural areas. Idaho has put millions of tax dollars into advancing physician residencies in hopes of retaining more physicians in targeted rural areas, and rightfully so given Idaho has been last in the US in physicians per capita. For fiscal year 2024 appropriation, the Idaho legislature approved \$824,000 to fund 16 Graduate Medical Education (GME) physician residents and fellow positions. This equates with the state funding \$51,500 per year per physician trained. Rather than investing significant additional resources in funding the start up of a new physician assistant program, the Board would be wise to instead consider assisting ISU to further expand its efforts to secure clinical training sites in North Idaho by advocating for funding to help ISU secure these sites. Almost all physician and PA programs pay preceptors per student they train in clinical rotations. Most programs pay \$1,000 per student for a 4 or 5 week rotation. The ISU PA program does not pay preceptors other than through HRSA funded grants and funding provided by the College of Idaho. With allocated funds, the ISU PA program could create clinical training tracks in North Idaho. For example, with \$8,000 (\$1,000 per rotation) the PA program could pay training site preceptors for all 8, five week clinical rotations a student needs to complete their training. As stewards of taxpayer funds, assisting in ISU's efforts to secure additional clinical sites in North Idaho seems a better investment than in duplicating programs at many times the cost.

#### *Deleterious impacts on Clinical Placements*

It should also be noted that with two stand alone programs competing for clinical site placements, the cost to secure those clinical sites is likely to increase. These costs will have to be either funded by the students or by the universities in order to secure those clinical placements. Again, expanding the volume of students is not a wise solution as it will ultimately drive up costs – the best investment for the state and



the most beneficial for students would be to keep competition for clinical sites at a minimum so that the price paid for access to these sites remains correspondingly modest. Increased costs of attendance linked to financing clinical site procurement and maintenance results in higher costs to Idahoans who want to pursue a physician assistant degree. These cost escalations negatively impact Idahoans from more modest means and limit the opportunity for students to return to rural areas due to high student loan repayment costs. As a result, these students are often attracted to larger cities with higher paying positions, strong schools and social amenities. This is also true of early career physicians and dentists who cannot afford to sustain practices in rural areas due to financial constraints. Student scholarships, loan repayment and financial recruitment incentives, such as those that accompany the RPIP, are warranted to build our rural practices that often rely on a solo practitioner. This approach would be more strategic than deploying significant resources to create a second public university financed program as it solves the real problems at hand. It is imperative that we keep the cost of attendance in reach of our rural students and those from more financially modest homes. Higher education should not be exclusive to those of high financial means. These programs are costly to run and maintain. For these reasons, we again suggest that the Board would be wise to consider supporting a request from ISU to include physician assistants in the RPIP program.

*Clinical Rotations in North Idaho*

Finally, we recognize the board may be interested in better understanding where ISU is currently partnering with institutions in North Idaho to provide clinical rotations. Below are lists of current preceptors the ISU PA program has in North Idaho with the rotation date.

Rotation	Activity	Site
R7: 5/13-6/1 4/2024	EM	Lewiston
R2: 10/2-11/ 3/2023	OB/GYN	Kootenai Health
R8: 6/24-7/2 6/2024	ELEC	Lewiston -
R4: 1/02-2/0 2/2024	IM	Moscow
R6: 3/25-4/2 6/2024	IM	Moscow
R3: 11/13-12 /15/2023	ELEC	Lewiston
R5:	PEDS	Cottonwood

2/12-3/1 5/2024		
R7: 5/13-6/1 4/2024	PEDS	Cottonwood
R4: 1/02-2/0 2/2024	PEDS	Kooskia

Rotation	Activity	Site
R2: 10/2-11/3/2 023	PEDS	Bonnerr's Ferry
R8: 6/24-7/26/2 024	IM	Bonnerr's Ferry
R2: 10/2-11/3/2 023	PEDS	Bonnerr's Ferry
R8: 6/24-7/26/2	IM	Bonnerr's Ferry

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**Idaho State University**

024		
R2: 10/2-11/3/2 023	GS	Sandpoint
R4: 1/02-2/02/2 024	GS	Sandpoint
R6:	GS	Sandpoint

3/25-4/26/2 024		
R8: 6/24-7/26/2 024	GS	Sandpoint

Also, for the Board’s information, please note that there are locations in North Idaho where ISU PA students have completed clinical rotations in the past. These include Orofino, Post Falls and even Pullman, WA.

**Past Attempts to Collaborate with UI on Physician Assistant Programming**

Finally, ISU would like to clarify for the Board its perspective on previous attempts at collaboration with the University of Idaho related to partnering on the delivery of Physician Assistant programming. We believe this is necessary as we have come to understand that a narrative has been proffered that suggests ISU is responsible for walking away from this collaboration. This is a narrative that ISU strongly rejects.

Discussions between former ISU President Kevin Satterlee and current U of I President Scott Green related to PA programming were occurring during the 2022-2023 academic year. ISU Interim Provost, Dr. Adam Bradford, was made aware of those conversations shortly after assuming his role in March of 2023. In an effort to move forward with this collaboration, Dr. Bradford requested that President Satterlee consider scheduling a meeting with President Green and his executive team at U of I to discuss how to structure such a collaboration. Up to this point, President Satterlee had not offered any specifics to the ISU executive team related to this structure, but merely indicated his desire to see both institutions collaborate on the delivery of this program.

In the summer of 2023, President Satterlee, President Green, Interim Provost Bradford, ISU Chief of Staff Jenn Forshee, ISU Vice President for Health Sciences Rex Force, WWAMI Director Jeff Seegmiller, and a UI Legislative Affairs representative met via Zoom to discuss the collaboration. In the course of that conversation, President Green indicated that his “bright line” was that U of I needed to have its own accreditation, which, in effect, meant a program that would require duplicative faculty, facilities, operational expenses, etc., and which would effectively be able to exit any collaborative agreement with ISU at will. Just as concerning, it would limit both institutions’ ability to navigate potential decreases in demand for PAs successfully, as both would have to maintain minimum numbers of students in each program in order to retain programmatic viability. Instead of working in collaborative concert, this arrangement seemed to place us on an inevitable path towards deleterious and duplicative competition. To avoid this, we offered to co-affiliate faculty, share programmatic revenue, and sign MOUs related to



expansion and contraction of the program. Again, President Green reiterated that his “bright line” was stand-alone accreditation.

While President Satterlee remained interested in finding a way to collaborate with U of I, and while subsequent conversations between the institutions’ Provosts sought to identify possibilities, ISU could not see how this course of action would benefit both institutions and the state. We remained committed to finding a way to collaborate, and expressed this, but we rejected U of I’s demand of stand-alone accreditation as unwise for the reasons listed above. Shortly thereafter, we were told that U of I was no longer interested in partnering with us on PA expansion. We offered to assist them with standing up an accelerated nursing program, should they be interested in that, and that offer was not accepted, either. This fall, we submitted several potential MOUs related to creating pathways from their institution into ISU health sciences programs of interest. We are still awaiting responses from U of I on these, as well.

In short, ISU came to the table in good faith looking for ways to collaborate that made sense for all stakeholders – ISU, U of I, the State of Idaho, and most importantly, our students. It would be unjust and injurious to suggest that we have failed to be collaborative; our longstanding collaboration with the College of Idaho and our recent actions in partnering with Lewis-Clark State College are tangible evidence of our willingness to collaborate. We would have been happy to partner with U of I, and moved forward with a partnership with Lewis-Clark State College only when U of I claimed to no longer be interested in finding a way to collaborate with ISU. Despite this disappointing series of events, and the subsequent portrayal of those events, ISU remains open to conversations with U of I about possible partnerships in health sciences and other programming.



March 29, 2024

Idaho State Board of Education  
650 West State Street  
Boise, ID 83702

RE: University of Idaho Proposal to Offer a Physician Assistant (PA) Program

Members of the Idaho State Board of Education,

This letter is written in response to the University of Idaho's recent proposal to create a Physician Assistant (PA) program. Lewis-Clark State College (LC State) has concerns regarding this proposal as it not only violates Policy III.Z, but it duplicates existing Physician Assistant education programming in Idaho, currently offered by Idaho State University (ISU).

If the University of Idaho is granted approval to create a new stand-alone PA program, the following will result:

- Increased utilization of state resources to support duplicative programs
- Promotion of direct competition for clinical placements that:
  - will further exacerbate the current challenges with clinical placement
  - leads to increased cost of securing clinical placements

It is recognized that per policy, Idaho State University has delegated responsibility to assess, understand, and manage the statewide offering of health professions education programs in Idaho. Per Policy III.Z., "Statewide Program means an education program identified by the Board to be delivered by a particular institution which meets statewide educational and workforce needs" and "Statewide Program Responsibility shall mean an institution's responsibility to offer and deliver a Statewide Program in all regions of the state". It is clear that Policy III.Z. requires collaboration, development of MOUs, and non-duplication of programs when an institution that desires to offer a program, does not have statewide responsibility or wishes to offer a program outside their designated service area.

[III.Z. - Planning and Delivery of Postsecondary Programs and Courses | Idaho State Board of Education](#)

LC State fully recognizes the significant need in Idaho for more health care providers. This need includes nurses, advanced practice nurses, physician assistants, and physicians. Specifically, LC State recognizes there may be geographic disparities in the distribution of health care providers in the state. As Idaho State University (ISU) has statewide responsibility for health education programs, and specifically for Physician Assistant education in Idaho, LC State has partnered with ISU to establish collaborative efforts regarding health education programs, focused on the north regions of Idaho.

Recognizing that collaboration and partnership between higher education institutions, rather than duplication of programming, is expected and provides synergy, LC State and ISU entered into an MOU in December 2023, to collaborate on the Master of Physician Assistant Studies (MPAS) degree, with plans to initiate expanded clinical placements opportunities and to ultimately, offer

a cohort of the program in northern Idaho. MPAS student clinical rotations will occur in the northern part of the state beginning summer 2024. ISU's existing program is well established and fully accredited. Compared to initiating a new, stand-alone program, adding a cohort under the umbrella of the existing ISU accreditation allows for an efficient, timely expansion, and avoids additional costs to the state of Idaho. The strategic collaboration between ISU and LC State seeks to expand the existing physician assistant program throughout Idaho rather than duplicate programming that would lead to competition for scarce resources.

LC State has a 60-year history of providing nursing and allied health professions education. With long established and robustly developed clinical partnerships throughout Regions 1 and 2, LC State is engaged with clinical partners to establish additional learning sites for the PA program expansion. Through this collaborative partnership, expansion of the PA program throughout Idaho helps to address the health care professional shortage in the state.

Idaho State University receives an annual appropriation of approximately \$120,000 to support the PA program. By capitalizing on a Board encouraged "systemness" approach, and utilizing shared resources, expansion of the PA program with the ISU-LC State partnership negates the need for the requested start-up funding of \$500,000 to initiate a duplicative program.

ISU and LC State are well known and respected for their health professions education programs. In partnership, with a focus on maintaining high-quality, cost-effective programming, we will continue to address the health care workforce needs in Idaho,



Dr. Cynthia Pemberton  
President, Lewis-Clark State College

April 3, 2024

Idaho State Board of Education  
650 West State Street  
Boise ID, 83702

Members of the Idaho State Board of Education,

This letter represents the collective response of Idaho State University, Boise State University, and Lewis-Clark State College to the recent proposals forwarded by the University of Idaho to inaugurate a School of Health and Medical Professions and launch several programs in the health sciences. Institutional responses to individual program proposals have been submitted, but we write to express our collective concern related to how these proposals have emerged. The State Board of Education has encouraged collaboration among our institutions and a preference for “systemness” in our approach to building out programming. For the past half-decade we have worked together to meet the State’s education needs leveraging systemness. We support and believe that leveraging existing programming with collaboration and partnerships is the best way to attend to critical workforce needs across a range of industries thanks to significant public and institutional resources already invested in these programs. We are committed to providing a diverse range of educational opportunities to Idahoans who desire them and acting as stewards of tax-payer funds by avoiding program duplication as we work collaboratively. Our goal should be to increase the production of critical health care professionals, not to needlessly increase the number of professional health care programs. The path forward needs to leverage existing institutional-specific strengths and investments in educational capacity and infrastructure. We stand ready to collaborate as a system of higher education to create needed programming to increase the healthcare education capacity of the state and are open to working with the University of Idaho to meet these goals.

The recently submitted proposals do not support collaboration among the institutions in their existing form. Although discussions have occurred in the past related to partnerships between our institutions, these current proposals were drafted without further conversation. Additionally, these proposals have the potential to make health sciences education in some disciplines more costly and result in the unnecessary expenditure of tax-payer funds and cost increases to students. Finally, the rhetoric that has been used to advance these proposals in communications to the legislature and the broader public, about the mortality rate of Idahoans, has been misleading and does not recognize the important educational efforts by state institutions that include public-private partnerships in key geographic areas. The individual program proposal responses include specific information on current programming and we encourage you to review all submitted responses. Should the State Board of Education wish to see additional data beyond that found in our individual proposal responses to assess the validity of these concerns, we welcome the opportunity to provide such data.



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We are committed to collaborative engagement and working among all eight Idaho institutions to identify opportunities to build program partnerships. These partnerships should leverage our existing programmatic areas of expertise—thus, building effective collaborations without unnecessary competition. We urge the Board to set aside these proposals and facilitate collective dialogue about how we might collaboratively address Idaho’s healthcare workforce demands. We urge all institutions to come to that dialogue with a substantive commitment to the principles the Board has long expected.

DocuSigned by:  
*Robert Wagner*  
567879ED5373439...  
Dr. Robert W. Wagner  
President, Idaho State University

DocuSigned by:  
*Cynthia Pemberton*  
E88DEFB474D14C3...  
Dr. Cynthia Pemberton  
President, Lewis-Clark State College

DocuSigned by:  
*Dr. Marlene Tromp*  
2274E655BAD240D...  
Dr. Marlene Tromp  
President, Boise State University

LEGISLATURE OF THE STATE OF IDAHO  
Sixty-seventh Legislature Second Regular Session - 2024

IN THE HOUSE OF REPRESENTATIVES

HOUSE BILL NO. 734

BY APPROPRIATIONS COMMITTEE

AN ACT

RELATING TO THE APPROPRIATION TO THE STATE BOARD OF EDUCATION AND THE BOARD OF REGENTS OF THE UNIVERSITY OF IDAHO; APPROPRIATING ADDITIONAL MONEYS TO THE STATE BOARD OF EDUCATION AND THE BOARD OF REGENTS OF THE UNIVERSITY OF IDAHO FOR COLLEGE AND UNIVERSITIES AND THE OFFICE OF THE STATE BOARD OF EDUCATION FOR FISCAL YEAR 2025; REDUCING THE APPROPRIATION TO THE STATE BOARD OF EDUCATION AND THE BOARD OF REGENTS OF THE UNIVERSITY OF IDAHO FOR COLLEGE AND UNIVERSITIES AND THE OFFICE OF THE STATE BOARD OF EDUCATION FOR FISCAL YEAR 2025; PROVIDING FOR THE USE OF APPROPRIATED FUNDS; PROVIDING FOR THE USE OF APPROPRIATED FUNDS; AND DECLARING AN EMERGENCY AND PROVIDING AN EFFECTIVE DATE.

Be It Enacted by the Legislature of the State of Idaho:

SECTION 1. In addition to any other appropriation provided by law, there is hereby appropriated to the State Board of Education and the Board of Regents of the University of Idaho for College and Universities and the Office of the State Board of Education the following amounts to be expended according to the designated programs and expense classes from the listed funds for the period July 1, 2024, through June 30, 2025:

	FOR PERSONNEL COSTS	FOR OPERATING EXPENDITURES	TOTAL
I. BOISE STATE UNIVERSITY:			
FROM:			
General			
Fund	\$4,292,600		\$4,292,600
Unrestricted			
Fund	<u>521,000</u>		<u>521,000</u>
TOTAL	\$4,813,600		\$4,813,600
II. IDAHO STATE UNIVERSITY:			
FROM:			
General			
Fund	\$2,991,900	\$552,100	\$3,544,000
Charitable Institutions Endowment Income			
Fund	31,700		31,700
Normal School Endowment Income			
Fund	357,200		357,200

	FOR PERSONNEL COSTS	FOR OPERATING EXPENDITURES	TOTAL
1           Unrestricted			
2           Fund	<u>589,700</u>	<u>0</u>	<u>589,700</u>
3           TOTAL	\$3,970,500	\$552,100	\$4,522,600
4			
5           III. LEWIS-CLARK STATE COLLEGE:			
6           FROM:			
7           General			
8           Fund	\$551,700	\$268,800	\$820,500
9           Normal School Endowment Income			
10          Fund		352,200	352,200
11          Unrestricted			
12          Fund	<u>225,000</u>	<u>0</u>	<u>225,000</u>
13          TOTAL	\$776,700	\$621,000	\$1,397,700
14			
15          IV. UNIVERSITY OF IDAHO:			
16          FROM:			
17          General			
18          Fund	\$3,548,200	\$290,000	\$3,838,200
19          Agricultural College Endowment Income			
20          Fund		65,700	65,700
21          Scientific School Endowment Income			
22          Fund		49,700	49,700
23          University Endowment Income			
24          Fund		266,500	266,500
25          Unrestricted			
26          Fund	<u>942,900</u>	<u>0</u>	<u>942,900</u>
27          TOTAL	\$4,491,100	\$671,900	\$5,163,000
28			
29          GRAND TOTAL	\$14,051,900	\$1,845,000	\$15,896,900

30           SECTION 2. Notwithstanding any other provision of law to the contrary,  
31           the appropriation to the State Board of Education and the Board of Regents of  
32           the University of Idaho for College and Universities for Boise State Univer-  
33           sity is hereby reduced by \$4,600 from the General Fund from operating expen-  
34           ditures for the period July 1, 2024, through June 30, 2025.

35           SECTION 3. USE OF APPROPRIATED FUNDS. State-appropriated funds shall  
36           not be utilized to support diversity, equity, inclusion, or social justice  
37           ideology as part of any student activities, clubs, events, or organizations

1 on campus. Each college and university shall submit a written report of its  
2 expenditures related to these activities to the Joint Finance-Appropriations  
3 Committee no later than December 1, 2024.

4 SECTION 4. USE OF APPROPRIATED FUNDS. State-appropriated funds for  
5 capacity enhancement at the University of Idaho shall not be utilized to  
6 support undergraduate nursing or physician assistant programs that are pro-  
7 vided by other colleges, universities, and community colleges that receive  
8 state appropriated funds.

9 SECTION 5. An emergency existing therefor, which emergency is hereby  
10 declared to exist, this act shall be in full force and effect on and after  
11 July 1, 2024.



**Memorandum of Understanding (MOU)  
Idaho State University and Lewis-Clark State College**

This Agreement is by and between Idaho State University ("ISU") and Lewis-Clark State College ("LCSC"), collectively the "Parties".

**Background**

LCSC and ISU intend to develop a collaboration to provide high-priority health programs ("Programs") for the Northern Idaho region. This MOU is intended to create an agreement whereby the Parties agree to collaborate in developing a cohort of ISU physician assistant students at LCSC facilities and explore collaboration in other areas of health professions education. Didactic curricula may be delivered locally and/or with synchronous online delivery. Dedicated placements would be identified throughout Northern Idaho for students to complete experiential (clinical) rotations required for the Program curriculum. Facilities suitable for the Programs' curricula, which meet accreditation standards, would be developed. Other agreements will be executed for specific programmatic needs such as local faculty, other personnel, facilities, budget allocation and distribution, and other financial arrangements. A collaboration between ISU and LCSC will benefit both parties by meeting the region's need for qualified healthcare workers and furthering both Parties' educational missions.

**Agreement**

**1. Mutual Responsibilities and Coordination.**

- a. **Cooperation.** The Parties shall cooperate in establishing a cohort of Physician Assistant students on the LCSC campus as well as other mutually agreeable programs that meet the needs of students and the goals of ISU and LCSC. Accreditation standards shall be understood and programmatic needs shall be met prior to placing students enrolled in ISU programs on the LCSC campus. The Parties agree to work together in identifying and implementing the following:
  - i. Identification of potential facilities
  - ii. Sharing business services
  - iii. Providing classroom technology
  - iv. Collaborating for startup expenses, infrastructure, and construction of physical plant, as necessary
  - v. Coordinating the recruitment of faculty, staff, and students
  - vi. Fundraising and grant applications to support program development and sustainability
- b. **Nondiscrimination.** The Parties will not discriminate on the basis of race, creed, sex, national origin, disability, or any other protected class.



- c. **Individual Representative.** The Parties shall each designate an individual representative to serve as a point of contact for matters relevant to this MOU.
  - d. **Governance Structure.** The Parties shall collaborate on developing a governance structure for the partnership that is consistent with the intent of this MOU and mutually agreed upon in writing by the Parties.
  - e. **Negotiate in Good Faith.** The Parties agree that they shall enter into good faith negotiations for the purpose of establishing any further legal agreements necessary to continue this collaborative relationship.
2. **Term.** The Agreement begins on full execution of this Agreement and shall continue for five (5) years. The Parties agree that at the end of year three (3) of this Agreement the parties will meet to review the Agreement and determine future steps including but not limited to: Renewing the existing Agreement, negotiating a future Agreement, reinvestment, personnel, facilities, or termination.
3. **Termination.** This Agreement may be terminated for the following reasons:
  - a. By mutual written consent of the parties.
  - b. Breach: In the event of non-compliance or breach by one of the parties of the obligations binding upon it, the parties agree to attempt to resolve the matter through good faith negotiations between the parties. Should good faith negotiations fail, the non-breaching party may terminate the agreement. The non-breaching party must give written notice of the breach and the breaching party shall have 30 days to cure.
  - c. Either party may terminate this Agreement with prior written notice if it determines a cancellation is in the best interest of public health or because any public health situation or government order, guideline, or action related to public health makes the performance of the Agreement impossible, reasonably impracticable, or frustrates the purpose of the Agreement.
  - d. ISU and LCSC are government entities and this Agreement shall in no way or manner be construed so as to bind or obligate the State of Idaho or the Parties beyond the term of any particular appropriation of funds by the State's Legislature. The Parties reserve the right to terminate this Agreement in whole or in part (or any order placed under it) if, in its sole judgment, the Legislature of the State of Idaho fails, neglects, or refuses to appropriate sufficient funds as may be required for the Parties to continue such payments, or requires any return or "give-back" of funds required for the University to continue payments, or if the Executive Branch mandates any cuts or holdbacks in spending. The terminating party shall provide the other party with the date the termination shall take effect. Each party shall be liable only for the payment, or prorated portion of that payment, owed to the other party, if any, as of the date of termination.



4. **Compliance with Laws.** The Parties agree to comply with any and all applicable Federal and State laws.
5. **Amendment.** Any change to this arrangement requires a written amendment that each Party's authorized signatory must sign.
6. **Notice.** All notices relating to this Agreement shall be in writing and shall be deemed to have been delivered when delivered in person or by e-mail with electronic confirmation of delivery. All notices shall be delivered to the signatories below or the individual representatives appointed by ISU and LCSC as outlined in this Agreement.
7. **Force Majeure:** Neither party is responsible for failure to fulfill its obligations due to causes beyond its reasonable control that make the contract impossible, impracticable, or frustrate the purpose of the contract, including but not limited to: acts or omissions of government or military authority; acts of God; government or court orders, guidelines, regulations, or actions related to communicable diseases, epidemics, pandemics, or other dangers to public health; materials shortages; transportation delays; fires; floods; labor disturbances; riots; wars; terrorist acts; or any other causes, directly or indirectly beyond the reasonable control of the non performing party, so long as such party uses its best efforts to remedy such failure or delays if reasonable to do so. A party affected by a force majeure condition shall provide written notice to the other party within a reasonable time of the onset of the condition. A force majeure condition suspends a party's obligations under this contract unless the parties mutually agree that the obligation is excused because of the condition.
8. **Mutual Liability.** Each party agrees to be responsible and assume liability for its own wrongful or negligent acts or omissions, or those of its officers, agents or employees to the full extent required by law. Each party agrees to maintain reasonable coverage for such liabilities either through commercial insurance or a reasonable self-insurance mechanism, and the nature of such insurance coverage or self- insurance mechanism will be reasonably provided to the other party upon request.
9. **Assignment.** There will be no assignment or transfer of this Agreement, or of any interest in this Agreement, unless both parties agree in writing. No services required under this Agreement may be performed under subcontract unless both parties agree in writing.
10. **Severability.** If any part of this Agreement is held to be illegal, void, or in conflict with any Idaho law, the remainder of this Agreement remains operative and binding.
11. **Entire Agreement and Modification.** This Agreement represents the entire Agreement between the Parties and may not be altered, amended, or modified except in writing signed by all Parties.



Idaho State  
University

12. **Financials.** All documents, invoices, monetary transactions between the parties shall follow accounting guidelines with any applicable state and federal laws.

*SIGNATURE PAGE TO FOLLOW*





**Idaho State  
University**

To express the Parties' intent to be bound by the terms of this Agreement they have executed this document on the dates set forth below.

**IDAHO STATE UNIVERSITY**

BY: *Kevin Satterlee*

NAME: Kevin Satterlee

TITLE: President

DATE: 12/22/2023

**LEWIS-CLARK STATE COLLEGE**

BY: *Cynthia Pemberton*

NAME: Cynthia Pemberton, Ed.D.

TITLE: President

DATE: 01/05/2024

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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**UNIVERSITY OF IDAHO**

**SUBJECT**

Direct-Entry Master of Science in Nursing Program

**APPLICABLE STATUTE, RULE, OR POLICY**

Idaho State Board of Education Governing Policies & Procedures, Sections III.G., and III.Z.

Idaho Code § 33-113

**BACKGROUND/DISCUSSION**

University of Idaho proposes to establish a Direct-Entry Master of Science in Nursing (MSN) in a proposed School of Health and Medical Professions in the College of Graduate Studies. The University of Idaho has a foundation of faculty and facilities that can be leveraged to develop a Master of Science in Nursing. The MSN prepares the graduate for a position as a Registered Nurse, as well as a leadership role in varied settings such as hospitals, health department, clinics, among other practice areas.

Currently, no institution in Idaho offers a Direct Entry Master of Science in Nursing (MSN) and there are only 41 programs of this type in the nation. Idaho students who have already obtained a bachelor's degree in a non-nursing field, must complete a second bachelor's degree, or leave the state if they want to enter the nursing profession. This is an inefficient use of human resources and an obstacle that keeps many nontraditional students from entering the nursing field. The proposed Direct Entry (aka Entry to Practice) MSN program fills this educational gap for Idaho. The proposed MSN Direct Entry program is a full-time accelerated nursing program that prepares students of all academic backgrounds who have a degree in a field other than nursing to become practicing nurses. Upon graduation, students will be prepared to take the nursing licensure exam NCLEX-RN to be licensed as an RN.

**IMPACT**

Idaho's population has been growing at an exceptional rate for five consecutive years, surpassing the national growth rate by a substantial margin. This population surge has strained the state's healthcare system, underscoring the necessity for expanding healthcare services within Idaho. It is quite evident that we simply do not have enough healthcare workers to take care of us and the situation could get worse if we do not act.

The MSN will provide the citizens of the State of Idaho an opportunity to fill a critical workforce shortage in healthcare. Rural areas are struggling to find adequate numbers of nurses and data shows that there has been a profound urban shift in practicing registered nurses. In 2005, 17% of registered nurses worked in rural areas, but that number dropped to 14.4% by 2018. In 2005, 16.4% of nurses

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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worked in rural hospitals, but in 2018, that figure dropped to 13.4%. The percentage of registered nurses working at rural critical access hospitals in 2018 was 38.5%, but the Covid-19 pandemic accelerated retirement of many older nurses and rural facilities with tight budgets could not compete with better funded urban healthcare centers and the rural nursing workforce dropped even further. Although efforts to train and recruit more nurses are ongoing and projections show enough new nurses to replace retiring baby boomer registered nurses, the replacement distribution is expected to be uneven with urban locales attracting more new nurses than rural regions (National Academies Press, 2021).

Research shows that graduate-level direct-entry nursing students demonstrate discipline and independent learning skills that transfer well to nursing and outperform younger nursing students. With an average age of 26, direct-entry graduate students are motivated, engaged learners who demonstrate emotional maturity well-suited for healthcare employment (Everrett et al., 2013). With calls for educational leadership that meets actual needs by delivering innovative educational programs that harness technology to transform curricular offerings (Thompson, 2016), a direct-entry nursing education program addresses unmet needs for both an able student population and a struggling rural workforce.

Healthcare jobs in Idaho are projected to be the fastest growing professions this decade, with nearly 10,000 new jobs being projected, according to the Idaho Department of Labor. The population that the MSN program will serve encompasses a broad demographic from the classroom to the bedside, by training a healthcare workforce who will in turn provide essential healthcare services to the people of Idaho.

Based on this important need, we propose to create the MSN degree to fill this critical workforce shortage. The areas of justification include the following:

- Critical Workforce Shortage
- Enhancing Access to Care
- Addressing Rural Healthcare Need
- Future Demand

In summary, if this request is granted, the primary beneficiaries are the individuals and communities who will be served by future nurses. In addition, Idahoans who desire to seek this MSN Direct Entry degree will be able to remain in the state for their training, and therefore, increasing the likelihood they will stay in Idaho to practice.

The program will utilize facilities currently under the WWAMI program. Facilities include three active learning classrooms, a cadaver anatomy lab, nine standardize patient rooms, research offices and student common study areas all of which will be shared with nursing students. The program anticipates the impact to WWAMI program to be minimal. Classes for the nursing students will be scheduled when WWAMI is not using the facilities.

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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The program is requesting \$417,600 of ongoing annual state funding to support the program. The university will provide \$212,400 for the first year. The program will also require \$200,000 to supplement the university's simulation supplies and accommodate specific nursing education training. Additionally, the program will require 5.5 FTE to include faculty, directors/administrators, and administrative support. Current WWAMI administrative staff will also help support the program. Total expenditures are \$1,005,000 of ongoing funds annually and \$200,000 of one-time funds.

The program is requesting a professional fee of \$15,032 per year. The total estimated costs for the proposed program is \$25,085 per year. A budget addendum is included to demonstrate how the program aligns with State Board Policy V.R requirements.

**ATTACHMENTS**

- Attachment 1 – Direct-Entry Master of Science in Nursing Program Proposal
- Attachment 2 – Letters of Support
- Attachment 3 – Institution Responses
- Attachment 4 – Presidents' Response to Health Proposals
- Attachment 5 – HB 734 College and Universities 2025 Appropriation

**BOARD STAFF COMMENTS AND RECOMMENDATIONS**

University of Idaho is requesting approval to establish a new direct-entry Master of Science in Nursing that is designed to prepare students to become Registered Nurses (RNs). By establishing a direct-entry option, students who have already obtained a bachelor's degree in a non-nursing field will be able to earn an MSN degree in an accelerated format.

The program anticipates 15 initial enrollments reaching 25 by year five and graduating 12 starting in year two. As provided in their proposal, projections are based on the number of students who identified "pre-nursing" in the UI VandalStar System. There are no "pre-nursing" majors at U of I, so students declare their professional interest/intent through a "pre-nursing" cohort code. This is approximately 43 students. This information was used to project a cohort of 25 students in the 5<sup>th</sup> year of program delivery. The program identified a minimum class size of 10 students per cohort or 20 students overall. These minimums are based on revenues needed to sustain program delivery. If these are not met, the program will be evaluated after three years of concurrent enrollment deficiency. The program will sunset following four years of enrollment deficiency. Teach-outs will occur for matriculating students and a new cohort will not be filled.

The proposed program is not presently listed in the university's current approved three-year plan; however, it has been added to their updated plan which will be reviewed by the Board in August of this year. In accordance with State Board Policy III.Z program responsibilities, Idaho State University has statewide program

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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responsibility for the Master of Science in Nursing and shares responsibility with Boise State University in Region III. Staff notes that Lewis-Clark State College has also added a Direct-Entry Master of Science in Nursing to their updated three-year plan for delivery in Region II.

Currently no institution in Idaho offers a Direct-Entry MSN. Staff notes that the proposed Direct-Entry MSN program will differ from other nursing graduate programs. The Direct-Entry MSN will create another pathway for students with a non-nursing bachelor's degree to become a Registered Nurse without having to obtain a second bachelor's degree in nursing. The chart below represents the status of graduate nursing program offerings.

<b>Instit.</b>	<b>Program</b>	<b>Degree</b>	<b>Location</b>	<b>Responsibility</b>	<b>Method of Delivery</b>
BSU	Nursing <b>(suspended)</b>	MN/MSN	Boise	Regional	Online
BSU	Adult-Gerontology Nurse Practitioner – Acute Care option <b>(scheduled for discontinuation)</b>	MN	Boise	Regional	Online
BSU	Adult-Gerontology Nurse Practitioner-Primary Care option <b>(scheduled for discontinuation)</b>	MN	Boise	Regional	Online
ISU	Nursing: Education Option	MS Option	Online	Regional	Online
LCSC	Nursing Leadership in Healthcare	MSN	Online	Regional	Online

Boise State has an Adult-Gerontology Nurse Practitioner program, which is scheduled for discontinuation. This program's admission requirements indicate that applicants require an undergraduate degree in nursing and an RN license. ISU offers an MSN Education option. This program's admission requirements indicate that applicants must have an undergraduate degree in nursing.

The University of Idaho also requests approval to assess a professional program fee of \$15,032 per year for the Direct-entry MSN program. Based on the information for the professional program fee provided in the proposal, staff finds that the criteria have been met for this program per Board Policy V.R.

The proposal completed the program review process and was presented to the Council on Academic Affairs and Programs on March 28, 2024; and to the Instruction, Research, and Student Affairs on April 4, 2024. At the IRSA committee meeting, several Board members expressed concerns that this program is being proposed prematurely.

Boise State University, Lewis-Clark State College, and Idaho State University have shared comments and concerns about the program proposal, including claims the proposal is not responsive to requirements set forth in Board Policy III.Z. regarding criteria for high-demand programs, statewide program responsibilities and memoranda of understanding. Particularly, institutions raised concerns around collaboration efforts, impacts to existing nursing programs, impacts to securing clinical placements, impacts to system-ness, and unnecessary competition with

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS**  
**JUNE 13, 2024**

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existing and future nursing programming. Detailed concerns from the institutions are provided in Attachment 2 and a joint response from three presidents in Attachment 3 for the Board's review.

Additionally, as part of the College and Universities FY2025 appropriation (H734), the Legislature adopted the following language: "State appropriated funds for capacity enhancement at the University of Idaho shall not be utilized to support undergraduate nursing or physician assistant programs that are provided by other colleges, universities, and community colleges that receive state appropriated funds." Staff recognizes the proposed program is technically a graduate program at the master's degree level, however the curriculum and outcomes (especially the NCLEX-RN licensure) are the same as undergraduate nursing programs throughout the state. Therefore, an argument could be made that the proposed MSN program is the functional equivalent of an accelerated BSN program; so there is some uncertainty as to whether the program could fall within the scope of legislative intent language cited above.

The Board should carefully consider all concerns and observations raised by the other institutions to determine the need for the proposed program in Region II and whether it can be met solely by UI based on workforce needs and capacity identified in the proposal. The Board should also consider the letter and spirit of the legislative prohibition noted above. If the Board desires to approve the program, then there are two options within current policy requirements:

1. The Board could determine that the proposed program is materially different from the Master of Science-Nursing program on Idaho State University's statewide program responsibility list and therefore does not trigger Policy III.Z. requirements.
2. If the Board determines the proposed program is *not materially different* from the Master of Science-Nursing on Idaho State's statewide responsibility, then in order to approve the proposed program the Board must follow the procedures outlined in the "High-Demand Programs" section of Policy III.Z., including making the determination that the proposed program meets the criteria for high-demand programs, determine that an "emergency need" exists, and direct UI and ISU to enter an MOU to offer the program in Regions I and II. The Board may need to establish the terms of this MOU if the institutions cannot agree to acceptable terms on their own.

Staff recommends the Board direct Idaho State University and the University of Idaho to come back with a joint proposal for Idaho State University to offer an MSN program in Region II in collaboration with the University of Idaho.

**BOARD ACTION**

I move to approve the request by the University of Idaho to create a Direct-Entry Master of Science in Nursing, as presented in Attachment 1.

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS  
JUNE 13, 2024**

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Moved by \_\_\_\_\_ Seconded by \_\_\_\_\_ Carried Yes \_\_\_\_\_ No \_\_\_\_\_

AND

I move to approve the request by the University of Idaho to charge a professional fee of \$15,032 per year in addition to standard graduate tuition and fees for the Direct-Entry Master of Science in Nursing, in conformance with the program budget submitted to the Board in Attachment 1.

Moved by \_\_\_\_\_ Seconded by \_\_\_\_\_ Carried Yes \_\_\_\_\_ No \_\_\_\_\_



Institutional Tracking No. \_\_\_\_\_

FULL PROPOSAL FORM


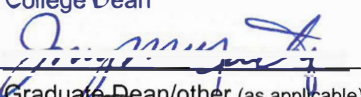
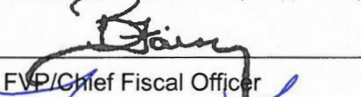
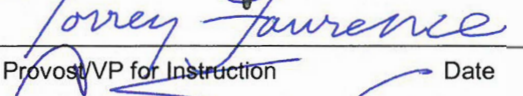
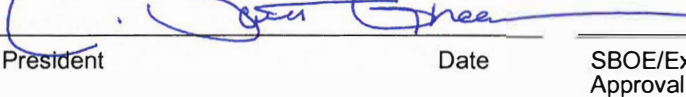
Academic Degree and Certificate Program

Date of Proposal Submission:	October 9 <sup>th</sup> 2023	<i>Revised 5/8/2024</i>		
Institution Submitting Proposal:	University of Idaho			
Name of College, School, or Division:	College of Graduate Studies			
Name of Department(s) or Area(s):	College of Graduate Studies			
Official Name of the Program:	Direct-Entry Master of Science in Nursing (MSN)			
Implementation Date:	Fall of 2025			
Degree Information:	Degree Level: Graduate	Degree Type: MSN		
CIP code (consult IR /Registrar):	51.3801			
Method of Delivery: Indicate percentage of face-to-face, hybrid, distance delivery, etc.	80% HYBRID			
Geographical Delivery:	Location(s)	Moscow	Region(s)	2
Indicate (X) if the program is/has: (Consistent with Board Policy V.R.)	Self-Support fee	X	Professional Fee \$15,032	Online Program Fee
Indicate (X) if the program is: (Consistent with Board Policy III.Z.)	X	Regional Program Responsibility: <b>University of Idaho</b>	Statewide Program Responsibility <b>Program does not exist in Idaho</b>	

Proposed Action

- New program offering**
  - Undergraduate program
  - Graduate program
  - Undergraduate certificate (30 credits or more)
  - Graduate certificate (30 credits or more)
- New branch campus or change in location**

- Modification of Existing Academic Programs**
  - Converting one program option to a stand-alone program
  - Consolidating two or more undergraduate programs into one
  - Consolidating two or more graduate programs into one
  - Splitting an existing program into two or more programs
  - Program expansion outside an institution's Designated Service Region as defined in Board Policy III.Z.
  - Adding certificate or degrees to existing programs

	3/20/24	_____	_____
College Dean	Date	Vice President for Research (as applicable)	Date
	3/20/24	_____	_____
Graduate Dean/other (as applicable)	Date	Academic Affairs Program Manager, OSBE	Date
	3/20/24	_____	_____
FVP/Chief Fiscal Officer	Date	Chief Financial Officer, OSBE	Date
	_____	_____	_____
Provost/VP for Instruction	Date	Chief Academic Officer, OSBE	Date
	_____	_____	_____
President	Date	SBOE/Executive Director or Designee Approval	Date



Before completing this form, refer to Board Policy Section III.G., Postsecondary Program Approval and Discontinuance. This proposal form must be completed for the creation of each new program. All questions must be answered.

### **Rationale for Creation or Modification of the Program**

- 1. Describe the request and give an overview of the changes that will result.** What type of substantive change are you requesting? Will this program be related or tied to other programs on campus? Identify any existing program that this program will replace. If this is an associate degree, please describe transferability.

The Direct-Entry Master of Science in Nursing is a newly proposed graduate program designed to prepare students to become a Registered Nurse. The MSN program is an independent program and will be housed in the College of Graduate Studies at the University of Idaho. A School of Health and Medical Professions is currently being created and processed to eventually house these health care programs, under the College of Graduate Studies.

- 2. Need for the Program.** Describe evidence of the student, regional, and statewide needs that will be addressed by this proposal to include student clientele to be served and address the ways in which the proposed program will meet those needs.

- a. Workforce and economic need:** Provide verification of state workforce needs that will be met by this program. Include job titles and cite the data source. Describe how the proposed program will stimulate the state economy by advancing the field, providing research results, etc.

The need for nursing professionals is seeing a significant surge and is anticipated to grow even more. As the older generation from the baby boomer era steps into retirement and healthcare necessities expand, especially with an older population and the rise in long-term diseases, the urgency for nurses becomes paramount. Data from the US Bureau of Labor Statistics for the period 2016-2026 highlights that Registered Nursing will be among the leading professions in terms of employment growth up to 2026. It is predicted that the RN workforce will see a growth from 2.9 million in 2016 to 3.4 million by 2026, marking a 15% increase. Additionally, there's an anticipated need for 203,700 fresh RNs annually until 2026 to accommodate new roles and replace those retiring.

By June 2022, Idaho faced a shortage of over 2,000 registered nurses. Reports from the Idaho Center for Nursing indicate that the weekly average of travel nurse deployments in healthcare facilities throughout the state surpasses 1,500. This comes with a substantial financial burden in both populated and remote areas. Relying heavily on travel nurses is a costly approach and doesn't cater to the essential requirement of nurturing a proficient nursing workforce within Idaho.

Data from the Idaho Department of Labor in 2022 reveals that there were 8,922 job openings for Registered Nurses, anticipating a growth rate of 19.9% from 2020 to 2030.

Echoing a nationwide trend, Idaho's nursing professionals are aging: 28% of RNs are 55 or older, and 9% have crossed the age of 65.

Annually, Idaho's nursing educational institutions produce between 750 and 825 graduates. This figure falls short in addressing the escalating demand for RNs. By 2022, hospitals in Idaho felt the pinch with only 41% of RNs working there, a drop from the 60% seen in 2018, as per the Idaho Center for Nursing. Healthcare leaders in Idaho label the shortage of nurses as reaching a "critical stage," impacting patient care, hiring and retaining staff, and the overall well-being of individuals and communities. The challenge of preparing the upcoming nursing workforce is intensified by the projected one-third reduction in presently licensed nurses in Idaho, attributed to retirements. Nevertheless, nursing institutions in Idaho are gearing up to boost their intake and provide quality education to RNs, leveraging expanded collaborations and introducing novel clinical training methods.

Rural areas struggle to find adequate numbers of nurses and data shows that there has been a profound urban shift in practicing registered nurses. In 2005, 17% of registered nurses worked in rural areas, but that number dropped to 14.4% by 2018. In 2005, 16.4% of nurses worked in rural hospitals, but in 2018, that figure dropped to 13.4%. The percentage of registered nurses working at rural critical access hospitals in 2018 was 38.5%, but the Covid-19 pandemic accelerated retirement of many older nurses and rural facilities with tight budgets could not compete with better funded urban healthcare centers and the rural nursing workforce dropped even further. Although efforts to train and recruit more nurses are ongoing and projections show enough new nurses to replace retiring baby boomer registered nurses, the replacement distribution is expected to be uneven with urban locales attracting more new nurses than rural regions (National Academies Press, 2021).

Research shows that graduate level direct-entry nursing students demonstrate discipline and independent learning skills that transfer well to nursing and outperform younger nursing students. With an average age of 26, direct-entry graduate students are motivated, engaged learners who demonstrate emotional maturity well-suited for healthcare employment (Everrett et al., 2013). With calls for educational leadership that meets actual needs by delivering innovative educational programs that harness technology to transform curricular offerings (Thompson, 2016), a direct-entry nursing education program addresses unmet needs for both an able student population and a struggling rural workforce.

Currently, no institution in Idaho offers a Direct Entry Master of Science in Nursing (MSN) and there are only 41 programs of this type in the nation. Idaho students who have already obtained a bachelor's degree in a non-nursing field, must complete a second bachelor's degree, or leave the state if they want to enter the nursing profession. This is an inefficient use of human resources and an obstacle that keeps

many nontraditional students from entering the nursing field. The proposed Direct Entry (aka Entry to Practice) MSN program fills this need.

**b. Student demand.** What is the most likely source of students who will be expected to enroll (full-time, part-time, outreach, etc.). Provide evidence of student demand/ interest from inside and outside of the institution.

**c. Societal Need:** Describe additional societal benefits and cultural benefits of the program.

Rural areas struggle to find adequate numbers of nurses and data shows that there has been a profound urban shift in practicing registered nurses. In 2005, 17% of registered nurses worked in rural areas, but that number dropped to 14.4% by 2018. In 2005, 16.4% of nurses worked in rural hospitals, but in 2018, that figure dropped to 13.4%. The percentage of registered nurses working at rural critical access hospitals in 2018 was 38.5%, but the Covid-19 pandemic accelerated retirement of many older nurses and rural facilities with tight budgets could not compete with better funded urban healthcare centers and the rural nursing workforce dropped even further. Although efforts to train and recruit more nurses are ongoing and projections show enough new nurses to replace retiring baby boomer registered nurses, the replacement distribution is expected to be uneven with urban locales attracting more new nurses than rural regions (National Academies Press, 2021).

Research shows that graduate level direct-entry nursing students demonstrate discipline and independent learning skills that transfer well to nursing and outperform younger nursing students. With an average age of 26, direct-entry graduate students are motivated, engaged learners who demonstrate emotional maturity well-suited for healthcare employment (Everrett et al., 2013). With calls for educational leadership that meets actual needs by delivering innovative educational programs that harness technology to transform curricular offerings (Thompson, 2016), a direct-entry nursing education program addresses unmet needs for both an able student population and a struggling rural workforce.

Currently, no institution in Idaho offers a Direct Entry Master of Science in Nursing (MSN) and there are only 41 programs of this type in the nation. Idaho students who have already obtained a bachelor's degree in a non-nursing field, must complete a second bachelor's degree, or leave the state if they want to enter the nursing profession. This is an inefficient use of human resources and an obstacle that keeps many nontraditional students from entering the nursing field. The proposed Direct Entry (aka Entry to Practice) MSN program fills this need.

**3. Program Prioritization**

Is the proposed new program a result of program prioritization?

Yes \_\_\_\_\_ No X \_\_\_\_\_

If yes, how does the proposed program fit within the recommended actions of the most recent program prioritization findings.

**4. Credit for Prior Learning**

Indicate from the various cross walks where credit for prior learning will be available. If no PLA has been identified for this program, enter 'Not Applicable'.

Not Applicable

**5. Affordability Opportunities**

Describe any program-specific steps taken to maximize affordability, such as: textbook options (e.g., Open Educational Resources), online delivery methods, reduced fees, compressed course scheduling, etc. This question applies to certificates, undergraduate, graduate programs alike.

Our institution is deeply committed to ensuring that students pursuing the Master of Science in Nursing (MSN) degree have access to an affordable, high-quality education. To that end, we have implemented several measures aimed at maximizing affordability for our students:

1. **Open Educational Resources (OER) for Textbooks:** Recognizing the high cost of textbooks, our faculty have made a concerted effort to adopt Open Educational Resources wherever possible. These OER materials are freely accessible, openly licensed, and can be used, reused, or adapted, thus significantly reducing or even eliminating the cost of textbooks for our students.
2. **Online Delivery Methods:** We offer a majority of our MSN courses hybrid-online, providing students the flexibility to learn from anywhere and reducing the need for physical attendance. This can lead to savings in terms of transportation, accommodation, and other related expenses.
3. **Reduced Fees:** We have worked diligently to minimize additional fees associated with the program.
4. **Compressed Course Scheduling:** Our MSN program offers a compressed course schedule that allows students to complete their degree in a shorter timeframe. This not only gets them into the workforce faster but also reduces the overall cost of their education in terms of time and associated living expenses.
5. **Cost-effective Clinical Placements:** We coordinate with local healthcare providers to ensure that clinical placements are within reasonable commuting distances for students, minimizing travel-related expenses.
6. **Digital Resources and Libraries:** Our digital library resources are extensive, reducing the need for students to purchase additional materials or subscriptions. Students have access to a wide range of e-journals, e-books, and databases relevant to nursing.

**Enrollments and Graduates**

6. **Existing similar programs at Idaho Public Institutions.** Using the chart below, provide enrollments and numbers of graduates for similar existing programs at your institution and other Idaho public institutions for the most past four years.

There are no public supported Direct-Entry MSN programs in Idaho.

Instit .	Program Name	Fall Headcount Enrollment in Program				Number of Graduates From Program (Summer, Fall, Spring)			
		FY__	FY__	FY__	FY__ (most recent)	FY__	FY__	FY__	FY__ (most recent)

7. **Justification for Duplication** (if applicable). If the proposed program is similar to another program offered by an Idaho public higher education institution, provide a rationale as to why any resulting duplication is a net benefit to the state and its citizens. Describe why it is not feasible for existing programs at other institutions to fulfill the need for the proposed program.

Our proposed MSN degree is a “direct entry” master’s degree in nursing. Currently, there are no other direct-entry MSN degrees in Idaho. There are two other graduate-level nursing degrees in Idaho.

- **Boise State University:** BSU offers an Adult-Gerontology Nurse Practitioner program at the master’s level. This program’s admission requirements indicate that applicants require an undergraduate degree in nursing and an RN license. <https://www.boisestate.edu/nursing-agnp/agnp-master-nursing/admission/#application-requirements>
- **Idaho State University:** ISU offers an MSN graduate degree in nursing as well. This program’s admission requirements indicate that applicants must have an undergraduate degree in nursing. <https://www.isu.edu/nursing/programs/master-of-science-in-nursing-msn/>

How these differ from the proposed direct entry MSN: In Idaho, students with a non-nursing bachelor’s degree and who desire to become a nurse must enroll in a nursing program to obtain a second bachelor’s degree. Each year there are students who graduate and then decide later to pursue nursing. Our premise is that having a direct-entry MSN would improve the number of individuals deciding to pursue nursing because it supports a career progression for applicants who already have a bachelor’s degree. The existing master’s programs available at other state institutions currently require applicants to have a prior degree in nursing, typically a BS in nursing (i.e., BSN). However, the direct entry MSN program is suitable for individuals who already hold a bachelor’s degree in another non-nursing field and are committed to

transitioning into a nursing career. The proposed program would be the only direct entry master's in nursing degree in Idaho.

8. **Projections for proposed program:** Using the chart below, provide projected enrollments and number of graduates for the proposed program:

Proposed Program: Projected Enrollments and Graduates First Five Years											
Program Name: Direct-Entry MSN											
Projected Fall Term Headcount Enrollment in Program						Projected Annual Number of Graduates From Program					
FY26_ (first year)	FY27_	FY28_	FY29_	FY20_		FY26_ (first year)	FY27_	FY28_	FY29_	FY30_	
15	15	20	20	25		0	12	12	17	17	

\*Projected graduation based on 85% graduation rate

9. **Describe the methodology for determining enrollment and graduation projections.** Refer to information provided in Question #2 "Need for the Program" above. What is the capacity for the program? Describe your recruitment efforts? How did you determine the projected numbers above?

Research shows that graduate level direct-entry nursing students demonstrate discipline and independent learning skills that transfer well to nursing and outperform younger nursing students. With an average age of 26, direct-entry graduate students are motivated, engaged learners who demonstrate emotional maturity well-suited for healthcare employment (Everett et al., 2013). With calls for educational leadership that meets actual needs by delivering innovative educational programs that harness technology to transform curricular offerings (Thompson, 2016), a direct-entry nursing education program addresses unmet needs for both an able student population and a struggling rural workforce.

Currently, no institution in Idaho offers a Direct Entry Master of Science in Nursing (MSN) and there are only 41 programs of this type in the nation. Idaho students who have already obtained a bachelor's degree in a non-nursing field, must complete a second bachelor's degree, or leave the state if they want to enter the nursing profession. This is an inefficient use of human resources and an obstacle that keeps many nontraditional students from entering the nursing field. The proposed Direct Entry (aka Entry to Practice) MSN program fills this need.

Recruitment efforts include internal institutional recruiting and regional recruiting. There are currently 43 students identified as "pre-nursing" in the UI VandalStar system. As there is no "pre-nursing" major, students can declare their professional interest/intent through a "pre-nursing" cohort code. Of these 43, there may be students who are working on prerequisites at UI with

intent to transfer to a school of nursing before completing their degree at UI, students who intend to finish their degree at UI before matriculating to another institution to complete a second undergraduate degree in nursing, and/or students who intend to finish their degree at UI before matriculating to another institution to complete a master's degree in nursing. We used this internal information to project a cohort of 25 students in the fifth year of program delivery. Our model begins at 15 per cohort and grows every two years for the first 4 years. This stepwise growth is intentional as our model allows a measured increase in clinical rotations over time.

**10. Minimum Enrollments and Graduates.**

- a. What are the minimums that the program will need to meet in order to be continued, and what is the logical basis for those minimums?

The minimum class size is 10 students per cohort or 20 students overall. These minimums are based on revenues needed to sustain program delivery.

- b. If those minimums are not met, what is the sunset clause by which the program will be considered for discontinuance?

In the event enrollment minimums are not met the program will undergo evaluation after three years of concurrent enrollment deficiency. The program will be sunsetted following four years of enrolment deficiency. Teach-outs will occur for matriculating students and a new cohort will not be filled.

**11. Assurance of Quality.** Describe how the institution will ensure the quality of the program. Describe the institutional process of program review. Where appropriate, describe applicable specialized accreditation and explain why you do or do not plan to seek accreditation.

The program will undergo annual program prioritization as part of the University of Idaho quality improvement plan <https://www.uidaho.edu/provost/ir/assessment-evaluation/program-review>  
The program will also undergo external accreditation through the Commission on Collegiate Nursing Education (CCNE).

**12. In accordance with Board Policy III.G., an external peer review is required for any new doctoral program.** Attach the peer review report as **Appendix A**. Not applicable to this program.

**13. Teacher Education/Certification Programs** All Educator Preparation programs that lead to certification require review and recommendation from the Professional Standards Commission (PSC) and approval from the State Board of Education.

Will this program lead to certification?

Yes \_\_\_\_\_ No X \_\_\_\_\_

If yes, on what date was the Program Approval for Certification Request submitted to the Professional Standards Commission?

**14. Three-Year Plan: If this is a new proposed program, is it on your institution’s approved 3-year plan?**

Yes \_\_\_ No X

If yes, proceed to question 15. If no:

**a. Which of the following statements address the reason for adding this program outside of the regular three-year planning process.**

Indicate (X) by each applicable statement:

X	Program is important for meeting your institution’s regional or statewide program responsibilities.
X	The program is in response to a specific industry need or workforce opportunity.
	The program is reliant on external funding (grants, donations) with a deadline for acceptance of funding.
	There is a contractual obligation or partnership opportunity related to this program.
	The program is in response to accreditation requirements or recommendations.
	The program is in response to recent changes to teacher certification/endorsement requirements.

**b. Provide an explanation for all statements you selected.**

The University of Idaho, located in Northern Idaho, is the state's Land Grant institution. As a university in this region, we bear the responsibility of meeting the academic and career pipeline needs of the area. Being the premier research institution for the state and a leader in medical education, it is fitting for the university to develop and cater to the needs of graduates from our region through a Direct-Entry MSN program.

**Educational Offerings: Curriculum, Intended Learning Outcomes, and Assessment Plan**

**15. Curriculum. Provide descriptive information of the educational offering.**

**a. Summary of requirements.** Provide a summary of program requirements using the following table.

Credit hours in required courses offered by the department (s) offering the program.	67
Credit hours in required courses offered by other departments:	
Credit hours in institutional general education curriculum	
Credit hours in free electives	
Total credit hours required for degree program:	67



- b. **Curriculum.** Provide the curriculum for the program, including credits to completion, courses by title and assigned academic credit granted.

The Direct Entry MSN Nursing Curriculum is an accelerated program that requires 67 credit hours of training. Coursework is designed to build knowledge and skills in a stepwise manner in context of patient care. Hybrid mode of course delivery with in-person and online didactic instruction followed by in-person skills labs and clinical immersion experiences.

### Semester One

Course	Description	Credits
MSN 506	Foundations of Nursing Practice	3
MSN 507	Health Assessment	2
MSN 508	Health Assessment lab	1
MSN 509	Pathophysiology	3
MSN 510	Integrated Clinical Management 1: concepts and interventions to promote mental health	3
MSN 511	Integrated Clinical Management 1: concepts and interventions to promote mental health clinical	2
MSN 512	Pharmacotherapeutics	3
Total credits		17

### Semester Two

Course	Description	Credits
MSN 513	Nursing Fundamentals and Professional Practices	3
MSN 514	Theoretical Foundations for Nursing Practice	3
MSN 515	Integrated Clinical Management 2: adult and gerontological chronic health alterations	3
MSN 516	Integrated Clinical Management 2: adult and Gerontological Chronic Health Alterations clinical	2
MSN 517	Ethics, Policy, and Health Care Advocacy	3
MSN 518	Health Promotion and Risk Reduction Across the Lifespan	3
Total credits		17

### Semester Three

Course	Description	Credits
MSN 519	Healthcare Research and Evidence-based Practice	3
MSN 520	Interprofessional Collaboration and Population Health	3
MSN 521	Quality and Patient Safety in Health Care	3
MSN 522	Integrated Clinical Management 3: adult and gerontological acute health alterations	3

MSN 523	Integrated Clinical Management 3: adult and Gerontological Acute Health Alterations clinical	2
MSN 524	Informatics, Technology, and Professional Issues	3
Total credits		17

#### Semester Four

Course	Description	Credits
MSN 525	Healthcare Organizational and Systems Leadership	3
MSN 526	Integrated Clinical Management 4: Pediatric, Obstetric, and Women's Health	3
MSN 527	Integrated Clinical Management 4: Pediatric, Obstetric, and Women's Health clinical	2
MSN 528	Professional Nursing Practice Capstone Experience	5
MSN 529	Emerging Topics and Transition to Nursing Practice	3
Total credits		16

- c. **Additional requirements.** Describe additional requirements such as comprehensive examination, senior thesis or other capstone experience, practicum, or internship, some of which may carry credit hours included in the list above.

MSN students will complete 8 credits of practicum as part of the clinical learning curriculum. Courses include: Integrated Clinical Management 1: Concepts and Interventions to Promote Mental Health Clinical, Integrated Clinical Management 2: adult and Gerontological Chronic Health Alterations Clinical, Integrated Clinical Management 3: adult and Gerontological Acute Health Alterations Clinical, and Integrated Clinical Management 4: Pediatric, Obstetric, and Women's Health clinical.

#### 16. Learning Outcomes: Expected Student Learning Outcomes and Connection to Curriculum.

- a. **Intended Learning Outcomes.** List the Intended Learning Outcomes for the proposed program, using learner-centered statements that indicate what students will know, understand, and be able to do, and value or appreciate as a result of completing the program.

See the attached document: The Essentials: Competencies for Nursing Education 2021.

The Competencies for nursing education include competencies and student learning outcomes required for successful program accreditation by the Commission on the Collegiate Nursing Education (CCNE)

These learning outcomes also prepare students for the national board examination for nursing practice (National Council Licensure Examination).

Student Learning Outcomes:

Intended Learning Outcomes for the Nursing Program Component:

1. Knowledge Acquisition and Application: Upon completion of the program component, students will demonstrate a comprehensive understanding of core nursing concepts, theories, and evidence-based practices. They will be able to apply this knowledge to solve complex healthcare challenges.
2. Clinical Competence: Students will develop clinical competence in patient care, including assessment, planning, implementation, and evaluation of nursing interventions. They will be capable of delivering safe and effective nursing care across diverse healthcare settings.
3. Critical Thinking and Problem-Solving: Graduates will possess strong critical thinking skills, enabling them to analyze clinical situations, identify potential problems, and make informed decisions to optimize patient outcomes.
4. Communication and Interpersonal Skills: Students will exhibit effective communication and interpersonal skills, fostering therapeutic relationships with patients, families, and the healthcare team.
5. Professionalism and Ethical Practice: Graduates will uphold the highest standards of professionalism and ethics, adhering to legal and ethical guidelines while demonstrating cultural competence, empathy, and respect for patient autonomy.
6. Leadership and Collaboration: Students will acquire leadership and collaboration skills, enabling them to work effectively within interdisciplinary healthcare teams, advocate for patients, and contribute to improving healthcare systems.

#### 17. Assessment plans.

- a. **Assessment Process.** Describe the assessment plan for student learning outcomes that will be used to evaluate student achievement and how the results will be used to improve the program.

Assessment Process:

To evaluate how well students are achieving the intended learning outcomes, the following assessment processes will be employed:

1. Examinations and Quizzes: Regular assessments will include written examinations and quizzes to evaluate knowledge acquisition and critical thinking skills.
2. Clinical Skills Assessment: Clinical skills will be assessed through direct observation, practical examinations, and skills checklists during clinical rotations.
3. Case Studies and Care Plans: Students will complete case studies and care plans to demonstrate their ability to apply theoretical knowledge to real-world patient care scenarios.
4. Reflective Journals and Portfolios: Students will maintain reflective journals and e-portfolios, providing insights into their personal and professional growth.
5. Peer and Self-Assessment: Peer evaluations and self-assessments will be incorporated for group projects and personal reflection on skills development.

Using Assessment Findings for Program Improvement:

Assessment findings will be used for continuous program improvement through the following mechanisms:

1. Faculty Meetings: Regular faculty meetings will involve discussions of assessment results, with a focus on identifying areas of improvement and refining teaching methods and curriculum.
2. Curriculum Review: Assessment data will inform curriculum revisions, ensuring alignment with current healthcare trends and best practices.
3. Faculty Development: Faculty will receive training and support to enhance assessment techniques and teaching strategies, addressing areas where student performance needs improvement.
4. Feedback Loops: Continuous feedback loops will be established with students, incorporating their input to make program enhancements.

Assessment Activity Timing:

Assessment activities will occur throughout the program at various frequencies:

- Formative assessments (quizzes, in-class discussions) will be ongoing throughout each semester.
- Summative assessments (midterm, final examinations) will occur at the end of relevant courses and following year one and year two. Alumni and industry surveys will be completed two years following graduation.
- Clinical skills assessments and evaluations will be conducted during clinical rotations.
- Case studies, care plans, and projects will be assigned periodically.

#### **Resources Required for Implementation – fiscal impact and budget.**

Organizational arrangements required within the institution to accommodate the change including administrative, staff, and faculty hires, facilities, student services, library; etc.

**18. Physical Facilities and Equipment:** Describe the provision for physical facilities and equipment.

**a. Existing resources.** Describe equipment, space, laboratory instruments, computer(s), or other physical equipment presently available to support the successful implementation of the program. The University of Idaho is the home of the WWAMI Medical Education Program. This program is located in two building on the University of Idaho Moscow Campus. Facilities include three active learning classrooms, a cadaver anatomy lab, 9 standardize patient rooms, research offices and student common study areas. In the WWAMI program we have access to Laboratory equipment and clinical assessment tools as well as a full sweet of low-fidelity simulation equipment and supplies, all of which will be shared with nursing students.

**b. Impact of new program.** What will be the impact on existing programs of increased use of physical resources by the proposed program? How will the increased use be accommodated? The existing program is the WWAMI Medical Education Program. The Impact will be minimal as the nursing students will share the same buildings, classrooms, laboratories, and clinical spaces though the use will not overlap the medical student curriculum. Classes for the nursing students

will be scheduled when WWAMI is not using the facilities.

- c. **Needed resources.** List equipment, space, laboratory instruments, etc., that must be obtained to support the proposed program. Enter the costs of those physical resources into the budget sheet.

Resources will be needed for simulation training. There are four types of simulation training:

- Manikin-Based Simulation.
- Skills-Training Simulation.
- Tissue-based Simulation.
- Virtual Reality Simulation.
- Standardized Patient Simulation.

We are requesting \$200,000.00 to supplement our simulation supplies to accommodate specific nursing education training. Resources will be spent on the five areas listed above.

19. **Library and Information Resources:** Describe adequacy and availability of library and information resources.

- a. **Existing resources and impact of new program.** Evaluate library resources, including personnel and space. Are they adequate for the operation of the present program? Will there be an impact on existing programs of increased library usage caused by the proposed program? For off-campus programs, clearly indicate how the library resources are to be provided.

The University of Idaho houses the largest library in the state of Idaho servicing students and faculty on our campuses and virtually in all 44 counties. Students on campus or attending online will have access to needed search databases, journals, and scholarly works related to medicine and healthcare. It is not expected that the direct-entry MSN program will have a noticeable impact on library usage. Library resources for students and faculty attending online <https://www.lib.uidaho.edu/services/distance.html>

- b. **Needed resources.** What new library resources will be required to ensure successful implementation of the program? Enter the costs of those library resources into the budget sheet.

No additional costs are needed.

20. **Faculty/Personnel resources**

- a. **Needed resources.** Give an overview of the personnel resources that will be needed to implement the program. How many additional sections of existing courses will be needed? Referring to the list of new courses to be created, what instructional capacity will be needed to offer the necessary number of sections?

MSN program will be adding 67 credits in 24 new courses (See course information). Instructional capacity includes 5.5 FTE (Faculty, Directors/Administrators, and Administrative Support Personnel) is included in this request.

- b. **Existing resources.** Describe the existing instructional, support, and administrative resources that can be brought to bear to support the successful implementation of the program.

The University of Idaho WWAMI Medical Education program currently has administrative staff that will help support this program.

- c. **Impact on existing programs.** What will be the impact on existing programs of increased use of existing personnel resources by the proposed program? How will the quality and productivity of existing programs be maintained?

This will have minimal impact and can operate with existing WWAMI faculty and adjuncts. The program will undergo annual prioritization as part of the University of Idaho quality improvement plan <https://www.uidaho.edu/provost/ir/assessment-evaluation/program-review>.

- d. **Needed resources.** List the new personnel that must be hired to support the proposed program. Enter the costs of those personnel resources into the budget sheet.

MSN will require 5.5FTE, which includes the following personnel: Faculty, Directors/Administrators, and Administrative Support Personnel.

## 21. Revenue Sources

- a) **Reallocation of funds:** If funding is to come from the reallocation of existing state appropriated funds, please indicate the sources of the reallocation. What impact will the reallocation of funds in support of the program have on other programs?

Not applicable

- b) **New appropriation.** If an above Maintenance of Current Operations (MCO) appropriation is required to fund the program, indicate when the institution plans to include the program in the legislative budget request.

The new MSN program was submitted to the State of Idaho for FY25.

- c) **Non-ongoing sources:**

- i. If the funding is to come from one-time sources such as a donation, indicate the sources of other funding. What are the institution's plans for sustaining the program when that funding ends?

Not applicable

- ii. Describe the federal grant, other grant(s), special fee arrangements, or contract(s) that will be valid to fund the program. What does the institution propose to do with the program upon termination of those funds?

Not applicable

- d) **Student Fees:**

- i. If the proposed program is intended to levy any institutional local fees, explain how doing so meets the requirements of Board Policy V.R., 3.b.

Not applicable

- ii. Provide estimated cost to students and total revenue for self-support programs and for professional fees and other fees anticipated to be requested under Board Policy V.R., if applicable.

This program will be assessing a professional fee in accordance with Board Policy V.R.3.b.iii. A professional fee may be charged for an academic professional program if graduates of the program obtain a specialized higher education certificate or degree that qualifies them to practice a professional service involving expert and specialized knowledge for which credentialing or licensing may be required. The professional fee for this program will be \$15,032 per year. The estimated costs for Direct Entry Nursing Students\* \$25,085 per year. Direct Entry MSN program is not a self-support program.

\*This program is defined as a professional fee program in accordance with the policies set forth in Sections V.R.3.b.iii of the Idaho State Board of Education Governing Policies and Procedures.

22. Using the excel **budget template** provided by the Office of the State Board of Education, provide the following information:

- Indicate all resources needed including the planned FTE enrollment, projected revenues, and estimated expenditures for the first **four** fiscal years of the program.
- Include reallocation of existing personnel and resources and anticipated or requested new resources.
- Second and third year estimates should be in constant dollars.
- Amounts should reconcile subsequent pages where budget explanations are provided.
- If the program is contract-related, explain the fiscal sources and the year-to-year commitment from the contracting agency(ies) or party(ies).
- Provide an explanation of the fiscal impact of any proposed discontinuance to include impacts to faculty (i.e., salary savings, re-assignments).

# INSTRUCTION, RESEARCH AND STUDENT AFFAIRS JUNE 13, 2024

## ATTACHMENT 1

### Program Resource Requirements.

- Indicate all resources needed including the planned FTE enrollment, projected revenues, and estimated expenditures for the first four fiscal years of the program
- Include reallocation of existing personnel and resources and anticipated or requested new resources.
- Second and third year estimates should be in constant dollars.
- Amounts should reconcile subsequent pages where budget explanations are provided.
- If the program is contract related, explain the fiscal sources and the year-to-year commitment from the contracting agency(ies) or party(ies).
- Provide an explanation of the fiscal impact of any proposed discontinuance to include impacts to faculty (i.e., salary savings, re-assignments).

### I. PLANNED STUDENT ENROLLMENT

	FY 26		FY 27		FY 28		FY 29	
	FTE	Headcount	FTE	Headcount	FTE	Headcount	FTE	Headcount
A. New enrollments		15		15		20		20
B. Shifting enrollments				12		17		17
<b>Total Enrollment</b>	<b>0</b>	<b>15</b>	<b>0</b>	<b>27</b>	<b>0</b>	<b>37</b>	<b>0</b>	<b>37</b>

### II. REVENUE

	FY 26		FY 27		FY 28		FY 29	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
1. New Appropriated Funding Request	\$417,600.00		\$417,600.00		\$417,600.00		\$417,600.00	
2. Institution Funds	\$212,400.00	\$200,000.00	\$0.00		\$0.00		\$0.00	
3. Federal	\$0.00		\$0.00		\$0.00		\$0.00	
4. New Tuition Revenues from Increased Enrollments	\$407,970.00		\$734,346.00		\$1,006,326.00		\$1,006,326.00	
5. Student Fees	\$225,480.00		\$405,864.00		\$556,184.00		\$556,184.00	
6. Other (i.e., Gifts)								
<b>Total Revenue</b>	<b>\$1,263,450</b>	<b>\$200,000</b>	<b>\$1,557,810</b>	<b>\$0</b>	<b>\$1,980,110</b>	<b>\$0</b>	<b>\$1,980,110</b>	<b>\$0</b>

Ongoing is defined as ongoing operating budget for the program which will become part of the base.  
One-time is defined as one-time funding in a fiscal year and not part of the base.

### III. EXPENDITURES

	FY 26		FY 27		FY 28		FY 29	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b>A. Personnel Costs</b>								
1. FTE	5.5		5.5		5.5		5.5	
2. Faculty	\$315,000.00		\$315,000.00		\$315,000.00		\$315,000.00	
3. Adjunct Faculty								
4. Graduate/Undergrad Assistants								
5. Research Personnel								
6. Directors/Administrators	200,000		200,000		200,000		200,000	
7. Administrative Support Personnel	115,000		115,000		115,000		115,000	
8. Fringe Benefits	207,145		207,145		207,145		207,145	
9. Other:								
<b>Total Personnel and Costs</b>	<b>\$837,145</b>	<b>\$0</b>	<b>\$837,145</b>	<b>\$0</b>	<b>\$837,145</b>	<b>\$0</b>	<b>\$837,145</b>	<b>\$0</b>

	FY26	FY27	FY28	FY29
Student Credit Hours	15	27	37	37
HC	180	324	444	444
FT Enrollment				
PT Enrollment				
Rates:				
Res Tuition - FT	\$ 8,272	\$ 62,040	\$ 111,672	\$ 153,032
NR Tuition - FT	\$ 27,508	\$ 371,358	\$ 508,898	\$ 508,898
Fees - FT	\$ 2,276	\$ 34,140	\$ 61,452	\$ 84,212
Summer Tuition - PT	\$ 534	\$ 96,120	\$ 173,016	\$ 237,096
Summer Fees - PT	\$ 52	\$ 9,360	\$ 16,848	\$ 23,088
Profession Fee - Annual	\$ 15,032	\$ 225,480	\$ 405,864	\$ 556,184
	\$ 633,450	\$ 1,140,210	\$ 1,562,510	\$ 1,562,510
<b>TUITION</b>	<b>\$ 364,470</b>	<b>\$ 656,046</b>	<b>\$ 899,026</b>	<b>\$ 899,026</b>
<b>FEES</b>	<b>\$ 268,980</b>	<b>\$ 484,164</b>	<b>\$ 663,484</b>	<b>\$ 663,484</b>
	\$ 633,450	\$ 1,140,210	\$ 1,562,510	\$ 1,562,510
from template	\$633,450	\$1,140,210	\$1,562,510	\$1,562,510



# INSTRUCTION, RESEARCH AND STUDENT AFFAIRS

## JUNE 13, 2024

## ATTACHMENT 1

	FY 26		FY 27		FY 28		FY 29	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b>B. Operating Expenditures</b>								
1. Travel	\$25,000.00		\$25,000.00		\$25,000.00		\$25,000.00	
2. Professional Services	\$50,000.00		\$50,000.00		\$50,000.00		\$50,000.00	
3. Other Services	\$5,000.00		\$5,000.00		\$5,000.00		\$5,000.00	
4. Communications	\$20,000.00		\$20,000.00		\$20,000.00		\$20,000.00	
5. Materials and Supplies	\$62,855.00		\$62,855.00		\$62,855.00		\$62,855.00	
6. Rentals								
7. Materials & Goods for Manufacture & Resale								
8. Miscellaneous	\$5,000.00		\$5,000.00		\$5,000.00		\$5,000.00	
<b>Total Operating Expenditures</b>	<b>\$167,855</b>	<b>\$0</b>	<b>\$167,855</b>	<b>\$0</b>	<b>\$167,855</b>	<b>\$0</b>	<b>\$167,855</b>	<b>\$0</b>

	FY 26		FY 27		FY 28		FY 29	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b>C. Capital Outlay</b>								
1. Library Resources								
2. Equipment		\$200,000.00						
<b>Total Capital Outlay</b>	<b>\$0</b>	<b>\$200,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

	FY _____		FY _____		FY _____		FY _____	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
<b>D. Capital Facilities Construction or Major Renovation</b>								
<b>E. Other Costs</b>								
Utilities								
Maintenance & Repairs								
Other								
<b>Total Other Costs</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>TOTAL EXPENDITURES:</b>	<b>\$1,005,000</b>	<b>\$200,000</b>	<b>\$1,005,000</b>	<b>\$0</b>	<b>\$1,005,000</b>	<b>\$0</b>	<b>\$1,005,000</b>	<b>\$0</b>
<b>Net Income (Deficit)</b>	<b>\$258,450</b>	<b>\$0</b>	<b>\$552,810</b>	<b>\$0</b>	<b>\$975,110</b>	<b>\$0</b>	<b>\$975,110</b>	<b>\$0</b>

# INSTRUCTION, RESEARCH AND STUDENT AFFAIRS JUNE 13, 2024

## ATTACHMENT 1

Budget Notes (specify row and add explanation where needed; e.g., "I.A.B. FTE is calculated using..."):

II.1	Request for \$417,600 to support the new Masters of Nursing program.
II.2	Institutional funds \$212,400 will be provided for the first year, along with 1 time \$200,000 for simulation and laboratory equipment
II.4 & 5	Line 4 represents standard graduate tuition rates. Line 5 represents mandatory fees and the professional program fee. The estimated costs for Direct Entry Nursing Students is broken down as follows: <ul style="list-style-type: none"> <li>•Resident: \$10,548 + \$15,032 professional fee = \$25,580 / year (shifting enrollment is divided 50/50 with in-state and out of state numbers each year)</li> <li>•Non-Resident: \$29,784 + \$15,032 professional fee = \$44,816 / year</li> <li>•Summer tuition and fees: \$7,032 x 15 students (in-state &amp; out of state) = \$105,480</li> </ul>
III. A	Personnel - 5.5 FTE (Faculty, Administration and Staff)
C.2	Simulation and laboratory equipment
II.	Please see attached Master's of Science – Nursing Budget Addendum

**Master's of Science – Nursing Budget Addendum**

a) Requirements. To designate a professional fee for a Board approved professional program, all of the following criteria must be met:

1) Credential or Licensure Requirement:

i) A professional fee may be charged for an academic professional program if graduates of the program obtain a specialized higher education certificate or degree that qualifies them to practice a professional service involving expert and specialized knowledge for which credentialing or licensing may be required.

The graduates qualify to sit for the National Council Licensure Examination (NCLEX) and obtain licensure as Registered Nurse (RN).

ii) Any such professional program must provide at least the minimum capabilities required for entry to the practice of a profession.

Nurses with an MSN degree often take on a managerial or leadership roles including those of a healthcare administrator, department manager, and patient safety director. These roles are typically not available to nurses with a BSN degree. Some nurses may use their MSN as a steppingstone toward becoming a Nurse Practitioner (NP) or other nursing specializations.

2) Accreditation Requirement: The program:

i) is accredited within the institution's regional accreditation; or

ii) is actively seeking accreditation if a new program; or

The Competencies for nursing education include competencies and student learning outcomes required for successful program accreditation by the Commission on the Collegiate Nursing Education (CCNE). We will seek accreditation from CCNE.

These learning outcomes also prepare students for the national board examination for nursing practice (National Council Licensure Examination).

iii) will be actively seeking program accreditation after the first full year of existence if a new program by a regional or specialized accrediting agency.

3) Demonstration of Program Costs: Institutions may propose professional fees for Board approval based on the costs to deliver the program and other related costs. An institution must provide justification for the pricing of the professional program. Professional program fees must be additional fees above and beyond the normal resident and non-resident tuition rates.

The MSN is the most expensive health professions program we will deliver.

MSN programs have multiple reoccurring costs, for example disposable gloves, bandages, IV supplies, lab coats, uniforms, diagnostic supplies, etc.

Resources will be needed for infrastructure related to laboratories and learning facilities and simulation units. There are four types of simulation training:

- Manikin-Based Simulation.
- Skills-Training Simulation.
- Tissue-based Simulation.
- Virtual Reality Simulation.
- Standardized Patient Simulation.

We are requesting \$200,000.00 to supplement our simulation supplies to accommodate specific nursing education training. Resources will be spent on the five areas listed above.

This rate is consistent with tuition charged by other national MSN programs.

#### b) Program Guidelines

1) The program must be consistent with academic offerings of the institution serving a population that accesses the same activities, services, and features as full-time, tuition-paying students.

These students will be on campus and will use those campus services.

2) Upon the approval and establishment of a professional fee, course fees associated with the same program shall be prohibited.

MSN students will be charged a professional program fee and no additional course fees.



Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Northwest Specialty Hospital, I am writing to express our support for the University of Idaho and their proposed health professions programs, including the direct entry Master of Science in Nursing (MSN) and the Physician Assistant (PA) training programs. As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) and Idahoans are left with severe shortages of healthcare access.

Importantly, these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs.

Sincerely,

Rick Rasmussen

CEO, Northwest Specialty Hospital

[Rick.Rasmussen@nwsh.com](mailto:Rick.Rasmussen@nwsh.com) // 208-262-2310



2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4003  
kootenaihealth.org

March 27, 2024

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Kootenai Health, we are writing to express our support for the University of Idaho and their proposed health professions programs, including the direct entry Master of Science in Nursing (MSN) and the Physician Assistant (PA) training programs. As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) and Idahoans are left with severe shortages of healthcare access.

Importantly, these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs.

Sincerely,



Karen Cabell, DO  
Chief Physician Executive  
kcabell@kh.org

PO Box 415  
Hayden, ID 83835  
April 8, 2024

Jeff Seegmiller, Ed.D.  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
The University of Idaho

Dear Dr. Seegmiller,

As a retired general surgeon and strong supporter of medical education, I am writing to express my support for the University of Idaho and their proposed health professions programs, including the establishment of the School of Health and Medical Professions.

I am pleased to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs. The demand for medical professionals in these fields is high. Expanded medical education in these particular areas will help Idaho address serious health provider shortages.

The University of Idaho is well-positioned to develop and implement expanded medical education programs. It is important to note that the proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed

Expanded medical education is essential for the overall future of healthcare. Developing the next generation of medical professionals will help to ensure that patients have access to high-quality care.

I fully support these academic programs and urge the Idaho State Board of Education to move quickly with their approval for the establishment of the School of Health and Medical Professions.

Sincerely,

Thomas K. Thilo, MD  
tomthilo@hotmail.com  
(208) 661-1114



To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

Thank you for your continued focus on the critical shortages in medical providers that Idahoans experience and for providing solutions to this challenge. I was very happy that the state legislature approved funding for the Doctorate Psychology (PsyD), Direct-Entry Master of Science in Nursing (MSN), Doctorate - Anatomical Science Education (DAS), Master of Science, Gerontology, Certified Registered Nurse Anesthetist (CRNA) Doctorate, and the Physician Assistant (PA)/Masters programs. This approval was imperative and reflects the core values of Idahoans to create solutions that reflect the unique needs of our state and our communities.

As an independent primary care physician practicing for over 30 years and a business owner, I have seen the need first-hand for more medical professionals and the consequences of provider shortages. Workforce shortages in the medical professions affect everyone: Patients, other employees, business owners, medical providers, and our great state. The strain on our current system not only affects individuals personally but also affects society at large by decreasing productivity, decreasing revenues, and making it more difficult for businesses to find and retain talent. Our future workforce throughout all sectors will continue to be affected if we do not respond to the current healthcare challenge.

As a physician, patient, business owner, and medical provider working in and with health organizations, I believe the University of Idaho health professions programs, including the proposed School of Health and Medical Professions are essential to the health of Idaho. Of note, these programs will not compete with existing healthcare programs at other institutions but will contribute to improving the diversity of the healthcare workforce which will be required in the future for a healthy Idaho.

I stand in full support of these academic programs and strongly encourage the State Board of Education to approve these programs as well as the School of Health and Medical Professions quickly.

Sincerely,



John J. Eck MD  
208 Solutions LLC  
188 W. Hulls Ridge Ct.  
Boise, Idaho 83702



## JACK T. RIGGS, M.D.

04-25-24

To: Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

From: Jack T. Riggs, MD

Dear Dr. Seegmiller,

I am writing today to express my enthusiastic support for the **University of Idaho** and their newly proposed health professions programs, including the proposed **School of Health and Medical Professions (SHAMP)**.

The addition of direct entry Master of Science in Nursing (MSN), Doctor of Psychology in Clinical Psychology (PsyD), Doctor of Anatomical Sciences (DAS), Certified Registered Nurse Anesthetist (CRNA) DNP degree, Master of Science in Gerontology (MS), and Physician Assistant (PA) training programs at the University of Idaho will truly benefit all the citizens of Idaho.

As you know, there is a critical need for increased access to specialized professionals in our state. Currently, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. Too many Idahoans are left with severe shortages of healthcare access.

I believe these proposed programs would improve and increase a healthcare workforce that is highly needed. A statewide shortage in healthcare workers is a combination of significant population growth combined with too few academic programs to meet the state needs. A growing and aging population will continue to strain the state's healthcare system, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

I fully support these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,



Jack T. Riggs, MD  
Former Lt. Governor of Idaho  
Former WWAMI Student E-76  
Member, WWAMI Advisory Board  
[jack@rephasing.com](mailto:jack@rephasing.com)  
208-818-1763



J-U-B ENGINEERS, INC.

J-U-B COMPANIES



THE  
LANGDON  
GROUP



GATEWAY  
MAPPING  
INC.

April 24, 2024

Dr. Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of J-U-B ENGINEERS, Inc., we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are excited to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As a midsize employer with our entire employee base residing in the intermountain west, we recognize the critical need for increased access to specialized professionals in our community and state. In recent years there has been a decline in healthcare access or services for many populations in our region. Quality healthcare is a primary concern for our employees and a critical recruitment aspect for attracting quality talent to our organization.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

J-U-B ENGINEERS, Inc.

A handwritten signature in black ink, appearing to read 'Brian Smith', written over a white background.

Brian Smith, P.E.  
President/CEO



## Coeur d'Alene Public Schools

DISTRICT ADMINISTRATIVE CENTER  
1400 N. Northwood Center Court, Coeur d'Alene, ID 83814

OFFICE 208.664.8241

FAX 208.664.1748

[www.cdaschools.org](http://www.cdaschools.org)

April 29, 2024

Jeff Seegmiller, Ed.D., LAT, ATC  
Regional Dean and Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho  
1875 Perimeter Drive MS 4061  
Moscow, ID 83844-4061

Dear Dr. Seegmiller,

On behalf of Coeur d'Alene District 271, we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

Health education plays a pivotal role in improving community well-being by promoting knowledge and healthy practices across all age groups. As an academic organization we know the importance of health education and development allowing increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

Dr. Shon Hocker  
Superintendent of Schools  
Coeur d'Alene Public School District 271  
[shon.hocker@cdaschools.org](mailto:shon.hocker@cdaschools.org)  
208-664-8241 ext. 10008

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2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

Dear Dr. Seegmiller,

In my capacity as the Chief Nursing Officer of Kootenai Health, I wish to express our strong support for the University of Idaho's proposed School of Health and Medical Professions (SHMP).

The introduction of the direct entry Master of Science in Nursing (MSN), Doctor of Psychology in Clinical Psychology (PsyD), Doctor of Anatomical Sciences (DAS), Certified Registered Nurse Anesthetist (CRNA) DNP degree, Master's of Science in Gerontology (MS), and Physician Assistant (PA) training programs reflects a proactive response to the escalating health care needs of our community and state.

At Kootenai Health, we recognize the critical shortage of healthcare professionals across Idaho, especially in medically underserved areas. This shortage not only challenges our ability to meet the diverse healthcare needs of our population but also underscores the importance of expanding access to specialized health care education.

These proposed programs align closely with our commitment to excellence in patient care and nursing education. By enhancing the availability of advanced nursing education opportunities, we can cultivate a highly skilled workforce capable of delivering comprehensive and compassionate care to our patients.

Moreover, we firmly believe that these programs will complement existing health care initiatives, contributing to the overall enhancement of health care services throughout Idaho. As our population continues to grow and age, the demand for qualified health care professionals will only intensify, making the approval of these programs all the more urgent.

In conclusion, I am proud to lend my full support to the University of Idaho's efforts to establish the School of Health and Medical Professions and its associated programs. I urge the Idaho State Board of Education to approve these initiatives, as they represent a significant step forward in addressing our state's healthcare challenges.

Thank you for your dedication to advancing healthcare education and improving the health and well-being of all Idahoans.

Sincerely,

A handwritten signature in black ink, appearing to read "Kelly Espinoza", is written over a circular stamp or seal.

Kelly Espinoza, PhD, RN

Chief Nursing Officer, Kootenai Health





2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

To:  
Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

As the Executive Vice President of Kootenai Clinic, I am pleased to convey our organization's support for the University of Idaho's proposed School of Health and Medical Professions (SHMP).

We are excited about the potential of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs to address the pressing health care needs in our community and state.

At Kootenai Clinic, we are keenly aware of the challenges posed by the shortage of specialized health care professionals across Idaho. With 98% of Idaho counties designated as Health Provider Shortage Areas (HSPAs) for medical care and 100% for mental health, there is an urgent need to expand access to quality health care services.

We firmly believe these proposed programs will not only alleviate the shortage of health care professionals, but also enhance the overall quality of care provided to Idaho residents. By addressing the growing demand for health care services, we can improve health outcomes and enhance the well-being of our community.

Moreover, we view these programs as complementary rather than competitive, recognizing the need for collaboration among academic institutions to meet the evolving health care needs of our state. As Idaho's population continues to grow and age, the strain on our health care infrastructure will only increase, further highlighting the importance of expanding health care services within the state.

In conclusion, I urge the Idaho State Board of Education to approve the establishment of the School of Health and Medical Professions and its associated programs. Kootenai Clinic stands ready to support these initiatives and looks forward to collaborating with the University of Idaho to advance health care education and improve access to quality care for all Idahoans.

Sincerely,



John Weinsheim

Executive Vice President of Kootenai Clinic



2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

As a dedicated board member of Kootenai Health, I am pleased to convey our steadfast support for the University of Idaho's proposed health professions programs, including the establishment of the School of Health and Medical Professions.

The inclusion of the direct entry Master of Science in Nursing (MSN), Doctor of Psychology in Clinical Psychology (PsyD), Doctor of Anatomical Sciences (DAS), Certified Registered Nurse Anesthetist (CRNA) DNP degree, Master's of Science in Gerontology (MS), and Physician Assistant (PA) training programs exemplifies a proactive approach to addressing the pressing health care needs of our community and state.

Kootenai Health recognizes the profound impact of health care workforce shortages on our region, with the majority of Idaho counties designated as Health Provider Shortage Areas (HSPAs) for medical and mental health care. These shortages underscore the critical need for expanded access to specialized health care professionals.

Importantly, we view these proposed programs as complementary rather than competitive, aimed at bolstering the existing health care workforce to better serve our growing population. The demographic surge of aging Idahoans further emphasizes the urgency of expanding health care services within the state.

Therefore, we wholeheartedly endorse these academic programs and urge the Idaho State Board of Education to expeditiously approve the establishment of the School of Health and Medical Professions, along with the proposed programs.

Thank you for your dedication to advancing health care education and improving access to quality care for all Idahoans.

Sincerely,



Dave Bobbitt

Secretary and Treasurer, Kootenai Health Board of Trustees



KootenaiHealth

2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

To:  
Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

I am writing to express Kootenai Health's support for the proposed School of Health and Medical Professions (SHAMP) at the University of Idaho. As the CEO of Kootenai Health, the regional referral center for the ten northern counties of Idaho, I can confidently say the creation of SHAMP will greatly contribute to the advancement of health care delivery in our state.

The programs outlined in the proposal for SHAMP align closely with the evolving health care needs of Idahoans. We recognize the immense value they would bring to our health system and the patients we care for. In particular, there is a critical shortage of Advanced Practice Providers (APPs) in North Idaho, and the only programs in our region are offered through private, out-of-state universities.

Each degree, Clinical Psychology (PsyD), Direct-Entry Master of Science in Nursing (MSN), Doctorate in Anatomical Science Education (DAS), Master of Science in Gerontology, Certified Registered Nurse Anesthetist (CRNA) DNP degree, and Physician Assistant (PA) Master's programs are all critical in preparing highly skilled health care professionals to meet the complex demands of quality health care delivery.

We firmly believe the establishment of SHAMP will enhance educational opportunities for aspiring health care professionals in our community, fostering a pipeline of talent that will contribute to the improvement of health care delivery and patient outcomes. Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

Kootenai Health fully supports the establishment of the School of Health and Medical Professions at the University of Idaho. We are confident that SHAMP will play a pivotal role in shaping the future of health care education and practice, and we look forward to the opportunity to collaborate closely with the university in realizing this vision.

Sincerely,



Jameson C. Smith  
CEO, Kootenai Health





COEUR D'ALENE AREA  
ECONOMIC DEVELOPMENT CORPORATION  
3731 N Ramsey Rd, Suite 110B ~ Coeur d'Alene, ID 83814 ~ 1.208.667.4753

April 29, 2024

To: Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of the Coeur d'Alene Area Economic Development Corporation/Jobs Plus, Inc., we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As an organization dedicated to economic development and assisting businesses with workforce challenges, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages for healthcare access.

We strongly believe these proposed programs will not compete with existing healthcare programs at other institutions, but rather, would improve talent supply that is highly needed. Statewide shortages in our healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

Gynii A Gilliam, President/CEO  
Email: [gynii@cdaedc.org](mailto:gynii@cdaedc.org); Phone: (208)667-4753

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Avista Utilities  
**Richard Young**  
Idaho Central Credit Union  
**Carla Cicero**  
Numerica Credit Union  
**Marty Dickinson**  
STCU  
**Chris Meyer**  
Parkwood Business Properties  
**John Hemmingson & David Weeks**  
Lakeside Companies  
**Duffy Smock**  
Windermere Realty  
**Scott Marikis & Reed Chase**  
Empire Airlines  
**Alivia Metts**  
ignitecda  
**Jessica Bauman**  
Express Employment Professionals  
**Eve Knudtsen**  
Knudtsen Chevrolet  
**Pam Houser**  
Jobs+ Action Committee  
**Wally Jacobson**  
Panhandle Area Council  
**Gynii A. Gilliam**  
President & CEO





**KootenaiHealth**

2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.4000 tel  
kh.org

To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Kootenai Health, we are writing to express our support for the University of Idaho and its proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care, and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would improve a highly needed workforce. Statewide shortages in the healthcare workforce are related to drastic population growth in the state and a paucity of academic programs to meet the state's needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We fully support these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

**Kelly McCarthy Pöl**, DNP, RN, NP-D, CHSE  
Manager Clinical Education and Simulation

Kootenai Health  
2003 Kootenai Health Way  
Coeur d'Alene, ID 83814  
208.625.5189  
kpol@kh.org



To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Syringa Hospital & Clinics, we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are excited to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

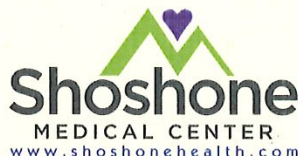
As a rural hospital dedicated to advancing improving the health and well-being of our community, we recognize the critical need for increased access to specialized professionals in both our local community and in our state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

We believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather grow and develop a workforce that is greatly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

Abner King, FACHE  
Chief Executive Officer  
[aking@syringahospital.org](mailto:aking@syringahospital.org)  
208-983-8525



25 Jacobs Gulch • Kellogg, Idaho 83837 • (208) 784-1221 • Fax (208) 784-0961

To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Shoshone Medical Center, I am writing to express support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

Several of the planned programs would help expand access to critical healthcare and mental health services in Idaho. As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. Shoshone county is a designated Health Provider Shortage Area (HSPA) for both medical care and mental health services. Providing these educational pathways will help alleviate the critical shortage of services we currently experience. Population growth and an aging population will continue to increase demand for medical and mental health services, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

Thank you for the opportunity to express support for these academic programs; I urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

Paul Lewis  
CEO

[plewis@shomed.org](mailto:plewis@shomed.org)



To:  
Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of Bonner General Hospital, we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

John Hennessy  
Chief Executive Officer  
Bonner General Hospital



Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program, University of Idaho

April 2024

Dear Dr. Seegmiller,

I'm writing to express our strong support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

Intermax has 83 employees in North Idaho with families (older and younger) who rely upon the best professional health care we can get in our region. As the flagship institution in Idaho, the University of Idaho is a critical partner in expanding the area's professional medical education.

We are very encouraged to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

We are a company who provides rural broadband. We've been active in telehealth with our rural local communities and the need is great. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in the healthcare workforce are real and evident in our community. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services to meet this need.

We support these academic programs and urge the Idaho State Board of Education to move quickly and approve them - as well as the School of Health and Medical Professions.

Sincerely,

A handwritten signature in blue ink that reads "M.R.K." followed by a stylized flourish.

Michael R. Kennedy  
President and CEO  
[mkennedy@intermaxteam.com](mailto:mkennedy@intermaxteam.com)  
208-415-1772



To:

Jeff Seegmiller, Ed.D., AT  
Regional Dean/ Director, Professor  
Idaho WWAMI Medical Education Program  
University of Idaho

Dear Dr. Seegmiller,

On behalf of the Coeur d'Alene Casino Resort Hotel, we are writing to express our support for the University of Idaho and their proposed health professions programs, including the proposed School of Health and Medical Professions.

We are thrilled to learn of the direct entry Master of Science in Nursing (MSN), the Doctor of Psychology in Clinical Psychology (PsyD), the Doctor of Anatomical Sciences (DAS), the Certified Registered Nurse Anesthetist (CRNA) DNP degree, the Master's of Science in Gerontology (MS), and the Physician Assistant (PA) training programs.

As an organization dedicated to advancing healthcare and well-being, we recognize the critical need for increased access to specialized professionals in our community and state. At present, 98% of the counties in Idaho are designated Health Provider Shortage Areas (HSPAs) for medical care and 100% of the counties are HSPAs for mental health. As such, Idahoans are left with severe shortages of healthcare access.

Importantly, we believe these proposed programs will not compete with existing healthcare programs at other institutions but would rather improve a workforce that is highly needed. Statewide shortages in a healthcare workforce are related both to drastic population growth in the state, as well as a paucity of academic programs to meet the state needs. Increases in the number of Idaho residents and a demographic surge of aging Idahoans will continue to strain the state's healthcare infrastructure, underscoring the necessity for universities to expand healthcare services within Idaho to meet this need.

We stand in full support of these academic programs and urge the Idaho State Board of Education to move quickly and approve these programs, as well as the School of Health and Medical Professions.

Sincerely,

Laura Penney, CEO

[lpenny@cdacasino.com](mailto:lpenny@cdacasino.com)



# North Idaho College

1000 West Garden Avenue, Coeur d'Alene, Idaho 83814  
[www.nic.edu](http://www.nic.edu)

18 March 2024

Idaho State Board of Education  
650 West State Street, 3rd Floor  
Boise, ID 83702

Dear Idaho State Board of Education,

I am writing to express my wholehearted support for the University of Idaho and their proposed health professions programs. As President of North Idaho College, I am acutely aware of the healthcare challenges facing our state, particularly in northern Idaho, where shortages of healthcare providers have reached unprecedented levels.

The statistics paint a stark picture: with 98% of the state designated as health professional shortage areas, our citizens are left grappling with limited access to essential healthcare services. This not only impacts our economy but, more importantly, jeopardizes the well-being of our community members.

The University of Idaho's proposal to introduce a doctorate in clinical psychology (PsyD), a Physician Assistant program, and a direct entry Master of Science in Nursing are much-needed steps towards addressing these critical shortages. These programs are tailored to meet the specific needs of our region, where the shortage of healthcare professionals is most acute.


It's important to emphasize that these proposed programs are not intended to compete with existing offerings at other universities, but rather to complement and enhance the range of healthcare education available within the state. There is a clear and demonstrated need for these programs, with a level of interest that is currently underserved.

As we look towards the future, it is imperative that we invest in the growth of all health professional programs to ensure the vitality of our healthcare workforce. The University of Idaho, as our state's top research institution, is well-positioned to play a leading role in this endeavor.

I am enthusiastic about the prospect of collaboration between the University of Idaho's new health programs and our own North Idaho College health professions programs to expand collaborative initiatives. Together, we can work towards meeting the healthcare needs of northern Idaho and the state as a whole.

Thank you for your attention to this matter. I stand ready to offer any assistance or support necessary to bring these vital programs to fruition.

Sincerely,

A handwritten signature in black ink that reads "Nick Swayne". The signature is written in a cursive style with a large initial "N" and a long, sweeping underline.

Nick Swayne, PhD  
President, North Idaho College



**Comments on two program proposals by University of Idaho: 1) Direct Entry MS in Nursing Program and 2) Masters of Physician Assistant Studies Program****Boise State University**

It is our belief that the two programs, **Direct Entry MS in Nursing Program** and **Masters of Physician Assistant Studies Program**, proposed by University of Idaho, are or can be allowed under Idaho State Board of Education (SBOE) Policy III.Z, provided they follow the prescribed steps outlined by the Board and the SBOE governing policies and ensure the existing criteria are met. However, we have concerns that the process and criteria outlined in the Policy III.Z have yet to be met.

In particular, these two program proposals, as they are put forward, are violating Policy III.Z in two important ways. Firstly, statewide responsibility for these programs belongs to Idaho State University, and there is a clear process detailed in the Policy III.Z (pages 9 - 11 of the policy document) describing the Memorandum of Understanding (MOU) that needs to be established, in this case between University of Idaho and Idaho State University, and submitted as an addendum to the program proposal.

Secondly, these proposals are not following the specific steps identified for “high demand programs” in Policy III.Z (pages 5 - 6 of the policy document). This section specifically requires the proposals to meet a minimum of four criteria, demonstrating high demand and declaring that the submission of these proposals are “requested by the Board.” The proposals do not indicate that these proposals are requested by the Board. More importantly, the requirement of establishing an MOU with the institution with the Statewide Responsibility, in this case Idaho State University, is not met.

“An institution wishing to offer a high-demand program that does not have statewide responsibility in the program area must meet the criteria above, have a signed MOU with the Institution with the Statewide Program Responsibility, and the approval of the Board’s Executive Director or designee. At that point, the Partnering Institution shall include the program in its Institution Plan. If the Board determines that an emergency need exists for a program that the Institution with Statewide Program Responsibility cannot meet, then upon Board approval the two Institutions shall enter into an MOU for the delivery of such program.” (SBOE Policy III.Z, page 6).

Finally, these proposals do not meet the spirit of “systemness” or “managed competition” that the SBOE has put forth for higher education in Idaho, nor the goals of the Healthcare Committee Education and Training Workgroup that has been working for a coordinated and a collaborative approach to healthcare workforce shortage in Idaho. Proposals by University of Idaho to offer these two programs do not align with the Idaho State Board of Education’s fundamental principles to “[...]plan and coordinate] educational programs in a manner that enhances access to quality programs, while concurrently increasing efficiency, avoiding

unnecessary duplication and maximizing the cost-effective use of educational resources through coordination between institutions" (SBOE Governing Policies and Procedures, Policy III.Z, p. 1).

It is commendable that the University of Idaho would like to shoulder some of the responsibility to contribute to workforce needs in healthcare in Idaho by investing in programs that are *not yet offered* in Idaho, such as Master of Science in Gerontology. However, increasing the healthcare workforce in Idaho is not synonymous with creating duplicated healthcare programs. Creating the same healthcare programs is not avoiding unnecessary duplication and nor maximizing the cost-effective use of educational resources or taxpayer investment. Universities and colleges with existing healthcare programs have dedicated buildings, labs and most importantly decades of investment in building relationships with the healthcare industry, which we need to build upon.



Idaho State Board of Education

March 28th, 2024

Re: University of Idaho Proposal Related to MSN Direct Entry Program

This letter constitutes Idaho State University's response to the University of Idaho's recent proposal to create a Master of Science in Nursing Direct Entry Program. ISU has significant concerns about the nature of this proposal and believes it not only violates the letter, if not the spirit, of Policy III.Z, but that given the recent expansion of MSN programming by Lewis Clark State College as well as their current plans to expand a Direct Entry option with ISU's support, that UofI's program represents problematic duplication of programming that will ultimately do little to address nursing health care needs in the state and will incur unnecessary educational costs for both institutions.

Idaho State University has a responsibility delegated to it by the State Board of Education to assess, understand, and manage the statewide needs related to clinical nurses trained at the Master's level. We have not been approached by University of Idaho with requests for collaboration or conversation about the need/intent to launch such programming, as required by III.Z. We have, recently, supported Lewis Clark State College in their efforts to expand their own programmatic offerings in nursing to train additional clinical nurses at the Master's level who have a special interest in nursing leadership (whereas ISU's program focuses primarily on nursing education). This collaboration has been successful, in large part, because the focus of the two programs is complementary in nature and ISU came to understand that LCSC could train nurses to fill a niche in the healthcare landscape that ISU agrees is present to a modest degree, but which we were not currently prepared to fill. ISU sees this as a productive and welcome collaboration that operates according to the spirit of III.Z, and the two institutions have continued conversations on how Direct Entry into the existing MSN program at LCSC might further help students interested in becoming clinical nurses prepared to assume leadership positions might benefit from such a pathway. ISU is supportive of LCSC's goals in this regard.

Part of the reason that LCSC's engagement in this sphere seems warranted is because they already have a successful and robust undergraduate nursing program. Through this, they are investing significantly in meeting the state's needs for additional nurses. Undergraduate nursing programs that train clinical nurses (LPNs/RNs/BSNs) are, and should continue to be, the means by which the state meets the demand for additional nurses because it is in these programs that significant potential for adding additional clinical nurses to our nursing ranks exists. ISU's own enrollment data for our MSN program testifies to this, as we only have between 4-7 students enrolled in our MSN program per semester. If the state needs to increase the volume of nurses, expanding MSN programming is not the way to achieve it. There is likely a relatively modest number of individuals in North Idaho who will be interested in acquiring the MSN degree – certainly not enough to sustain two full MSN programs in the area. LCSC has the expertise, facilities, and faculty to attend to those needs.

**Office of Academic Affairs**

921 South 8th Avenue, Stop 4092 | Pocatello, ID 83209 | (208) 282-4026 | [isu.edu/provost](http://isu.edu/provost)



In ISU's opinion, a better pathway forward for Uofl would be to consider reaching out to LCSC to inquire about the possibility of collaborating on undergraduate nursing education - which would unquestionably be a better way to increase the numbers of RN/BSN nurses in the state, which is where our real needs in this area lie. 2+2 pathways, co-admit models, or other such options might be possible ways forward if Uofl wishes to make an appreciable difference in helping train additional nurses and make an appreciable difference in addressing the nursing needs in service of the State of Idaho.

Not only would Uofl's offering of an MSN program compete directly with LCSC's program in ways that would lead to under-enrollment at both institutions, but it would likely lead to unhelpful competition for clinical sites that would result in the two institutions potentially bidding against one another for site access. Such costs would inevitably be passed along to students or absorbed by the university – either way, this would be a detriment to our key stakeholders.

Finally, ISU has significant concerns about the tuition and fees associated with the proposed program. University of Idaho is proposing to charge \$15,000 per year to each student enrolling in this program. For comparison, ISU's MSN program charges roughly half this amount at \$12,800 per year. As a Direct Entry Masters program, Uofl's program is also 24 credit hours longer than ISU's program. Idaho students enrolling in this program will pay a hefty premium for this educational option, whereas accelerated nursing programs targeting the same population of students would be a much less costly option. Idaho students seeking to gain post-baccalaureate training to become a nurse should not have to face such a significant financial hurdle when less costlier options are available, and could be expanded. The fact that Uofl is seeking to pursue this option instead of a less costlier, shorter one for potential students calls into question the wisdom of pursuing this degree over other more needed nursing degrees.

In short, University of Idaho's desire to attend to the nursing needs of the state is laudable, but their chosen program, the Direct Entry MSN, will do little to attend to the nursing shortage, compete unnecessarily with already established programs, drive up clinical site costs, and expose Idaho students to high educational costs unnecessarily. Collaborative conversations with one of their sister institutions about partnerships to increase the production of undergraduate trained nurses would be a more productive, less duplicative, less costly route to pursue and should be encouraged.



March 29, 2024

Idaho State Board of Education  
650 West State Street  
Boise, ID 83702

RE: University of Idaho Proposal to Offer a Direct-Entry MSN Degree

Members of the Idaho State Board of Education,

This letter is written in response to the University of Idaho's intent to enter the Nursing education arena. Lewis-Clark State College (LC State) has significant concerns regarding the proposal as it will directly compete with and duplicate LC State nursing program offerings. Further, we wish to make clear that we have programmatic capacity (both in-person and online) to meet expanding nursing education needs.

As the Board may recall, in FY22 the Legislature approved the Governor's recommendation to build nursing education program capacities. LC State received a line-item appropriation of \$400,000 (Idaho's 2-yr schools, with nursing programs, also received a line-item appropriation so that 2-yr programs and 2-yr to 4-yr pipeline nursing programs could be expanded). LC State utilized this appropriation to add instructional FTE (i.e., 3 faculty positions, increase 2 program advisors from part-time to full-time, and increase the simulation suite coordinator from a .8 FTE to .85 FTE); and leveraged the State's investment, using donation and institutional funds to renovate space and expand the simulation suite, which further supported increased program capacity. During this same timeframe LC State's proposal to Blue Cross of Idaho, for a 10-year, \$1M nursing scholarship fund was awarded. These funds provide additional support to LC State's program capacity expansion. Overall, these investments have allowed LC State to expand capacity by over 30%, with more room yet to grow into!

Continuing to build on the program capacity expansion described, LC State is in process of proposing a Direct-Entry MSN program to meet the needs of our current students as well as those from Region 2 north. Up to 20% of LC State's pre-licensure BSN program students have previously earned a non-nursing baccalaureate degree. As a Direct-Entry MSN program specifically targets this group of students, if the University of Idaho is allowed to offer this program, it will directly compete with, and negatively impact, LC State.

Background: In December of 2023, LC State received an email from a third-party, advising that the University of Idaho had intentions of proposing to offer a Direct-Entry MSN program. The email stated that the University already had support from legislative and State Board of Education members. For 60 years, LC State has been a primary nursing education institution in Idaho and, specifically, in Region 2. LC State was surprised and disappointed by the University of Idaho's declaration of intent, and the fact that there had been no attempt to discuss collaboration on health professions programming. LC State's Provost and Associate Dean reached out to schedule a meeting with the University of Idaho representatives for discussion. The meeting took place in January 2024, with the University of Idaho Provost and Dean of the WWAMI program.

It was evident from the conversation that the University of Idaho intended to proceed with proposing a nursing program, without regard for the impact to LC State. It was stated that to implement this program, the University of Idaho would seek support from LC State nursing faculty to assist with development of the nursing program curriculum, and with navigating the external accreditation process. It was stated that they recognize the University of Idaho has more resources than LC State to recruit nursing faculty. This was quite disheartening as LC State has always intentionally collaborated with all Idaho institutions to support state needs, support “system-ness”, and avoid program duplication.

Region 2 is the only region in Idaho that has two state 4-year higher education institutions. If the University of Idaho is granted approval to offer a nursing program (including a Direct-Entry MSN), the following will result:

- negative impact to enrollment of LC State’s pre-licensure nursing program
- negative impact to existing clinical placements for LC State nursing students
- negative impact on recruitment and retention of LC State nursing faculty

History & Programmatic Expertise: LC State has a long, successful history of providing nursing education. Since the early 1900’s, nursing in the Lewis-Clark Valley has been grounded in deep historical roots and received sustained support from its communities of interest. In 1919, the second RN training program in Idaho was established at St. Joseph Hospital in Lewiston. A contract was negotiated for nursing students at the hospital school to take courses in chemistry, child care, and dietetics through North Idaho College of Education (what has now become Lewis-Clark State College). In 1965, after much lobbying by Sister Helen Francis of St. Joseph Hospital, other local hospital administrators, and members of the Idaho Medical Association, a two-year associate degree nursing program was developed at Lewis Clark Normal School. A baccalaureate completion program for nursing (RN-BSN) was approved by the State Board of Education in 1977 and the first students graduated in 1982. In 1996, the pre-licensure BSN program was implemented and the associate degree program was discontinued, with the last class graduating in 1996.

With 60 years of nursing education, LC State has well-developed, long-standing partnerships across the state. With a wide network of clinical partners, the LC state nursing students engage in a variety of exceptional clinical experiences that provides them the foundation to enter practice safely and successfully. The LC State nursing program includes a high-quality curriculum that prepares graduates for entry into practice. LC nursing graduates consistently exceed the national average for first-time NCLEX (national licensure exam) pass rates, with 100% pass rate for SP 23 graduates (last cohort for full test results). Additionally, LC State BSN graduates are highly sought due to the known quality of preparation for practice (100% placement rate). As is expected of all nursing programs accredited by the Commission on Collegiate Nursing Education (CCNE), the LC State BSN program faculty have been engaged in review and revision of the BSN curriculum in alignment with the re-envisioned 2021 AACN Essentials. Implementation of the revised curriculum will begin fall 2024.

The LC State RN completion program received full accreditation with the National League for Nursing (NLN) in 1986 with reaccreditation in 1993. Upon implementation, the BSN program received preliminary accreditation approval by the CCNE in 1998. Following completion of the

required on-site visit, full accreditation approval was received in 2000 with successful accreditation reaffirmations in 2010 and 2020. The LC State BSN program maintains full accreditation with CCNE, with the next review planned for 2030.

LC State provides four tracks for completion of the BSN program and was recently approved by the Idaho State Board of Education (SBOE) to offer a Master of Science in Nursing (MSN) degree: Nursing Leadership in Healthcare. The MSN program proposal is in review with the Northwest Commission on Colleges and Universities (NWCCU) and upon approval will be offered fall 2024 or spring 2025.

Faculty in the nursing program at LC State are experts in their content areas. Faculty hold graduate degrees and represent a wide array of clinical specialties. For example, the program faculty includes several advanced practice nurses (Adult and Pediatric Nurse Practitioners and a Certified Registered Nurse Anesthetist), medical-surgical nurses, nurses that are oncology certified and population health certified, nurse informatics and evidence-based practice experts, and a Life Flight nurse. Many of the faculty maintain clinical practice to remain current in nursing and this expertise benefits program students.

LC State fully recognizes the continued demand for nurses in Idaho. In ongoing efforts to continue meeting the needs of our stakeholders, including residents of Idaho, our regional communities, and healthcare agencies in our state, LC State increased capacity in the pre-licensure BSN program. Traditionally, the program admitted 45-48 students each fall and each spring. For the past several semesters, admission capacity was increased to 60 students each fall and each spring.

The Nursing & Health Sciences division houses a state-of-the art simulation suite designed to replicate an in-patient hospital setting. The suite includes 6 patient bays with high-fidelity manikins together with all necessary ancillary equipment to support extensive and varied patient care scenarios. There are two fully equipped nursing clinical practice labs, each with eight beds housing low-fidelity and static manikins, a bariatric manikin and over-bed lift, medication and crash carts, IV poles, pumps, and a multitude of additional nursing care equipment. There are 5 report rooms utilized for simulation debriefing and small group work.

LC State currently has a cadaver lab for pre-health professions education students and is developing a high-technology, immersive health care education learning lab to be utilized by all health professions students on campus. Planned for this lab are two Anatomage virtual cadaver tables, virtual reality equipment, and additional technology to support immersive learning.

The LC State BSN program maintains several pathway agreements with our Idaho sister institutions. For example, the Community College to BSN (CC-BSN) pathway allows students enrolled in community colleges in Idaho (NIC, CWI, CEI) to concurrently enroll in the bachelor's completion track at LC. In this pathway, students graduate with their associate degree, obtain their RN license, and graduate with their BSN degree typically one semester later. This pathway is a successful partnership between multiple Idaho education institutions allowing students to efficiently earn a BSN. Additionally, Registered Nurses possessing an associate degree in nursing can complete the LC State baccalaureate completion track. This is offered fully online with flexible scheduling, allowing students to work as a nurse and complete the BSN program in a manner that best fits their situation.

With approval of the MSN: Nursing Leadership in Healthcare degree by the SBOE, LC State will also be proposing a Direct-Entry MSN degree. This degree will allow students that have previously earned a baccalaureate degree to pursue nursing education, culminating in a master's degree rather than a second baccalaureate degree. For the past several years, up to 20% of each LC State pre-licensure BSN cohort have a previously-earned baccalaureate degree. This Direct-Entry MSN will focus on developing graduates prepared to be strong leaders within healthcare. We anticipate the Direct-Entry MSN pathway will be very attractive to our students.

LC State is well positioned to efficiently implement a Direct-Entry MSN degree. As LC State already has in place the necessary infrastructure, qualified faculty, learning labs, simulation technology, and necessary clinical placement opportunities, limited financial support will be needed to offer a Direct-Entry MSN degree. As the program expands, and we continue to increase capacity in the pre-licensure BSN program, additional resources would be limited to instruction and updating lab equipment. Student course fees are maintained at a reasonable level for students. Fees are collected for items such as practice lab and simulation experience consumables. Total course fees for this program are anticipated to be less than \$5,000 for the entire program. This cost to students is significantly less than the \$25,000 per year program fee included in the University of Idaho's proposed program.

As Idaho State University (ISU) has statewide responsibility for health education programs, LC State has partnered with ISU to establish collaborative efforts regarding health education programs. LC and ISU entered into an MOU in December 2023, to collaborate on the Master of Physician Assistant Studies (MPAS) degree, with plans to offer a cohort of the program in northern Idaho. MPAS student clinical rotations will occur in the northern part of the state beginning summer 2024. ISU's existing program is well established and accredited. Adding a cohort under the umbrella of the existing ISU accreditation would be an efficient and timely process compared to initiating a new program with a separate accreditation application.

Recognizing that collaboration and partnership between higher education institutions, rather than duplication of programming, is expected and provides synergy, LC State consulted with ISU regarding plans to propose a Direct-Entry MSN program in north Idaho. ISU supports LC State in this endeavor. LC State and ISU are expanding partnerships regarding additional health education programs. An MOU for the ISU PharmD program has been completed. Additional program partnerships and pathways in development include Master of Occupational Therapy, Doctor of Physical Therapy, Master of Science in Nursing: Education, CRNA, and others.

LC State is well known and respected for nursing education in Idaho. LC State is well positioned to efficiently and cost-effectively continue to expand nursing education programming in Region 2 to support the needs of Idaho.



Dr. Cynthia Pemberton  
President, Lewis-Clark State College



April 3, 2024

Idaho State Board of Education  
650 West State Street  
Boise ID, 83702

Members of the Idaho State Board of Education,

This letter represents the collective response of Idaho State University, Boise State University, and Lewis-Clark State College to the recent proposals forwarded by the University of Idaho to inaugurate a School of Health and Medical Professions and launch several programs in the health sciences. Institutional responses to individual program proposals have been submitted, but we write to express our collective concern related to how these proposals have emerged. The State Board of Education has encouraged collaboration among our institutions and a preference for “systemness” in our approach to building out programming. For the past half-decade we have worked together to meet the State’s education needs leveraging systemness. We support and believe that leveraging existing programming with collaboration and partnerships is the best way to attend to critical workforce needs across a range of industries thanks to significant public and institutional resources already invested in these programs. We are committed to providing a diverse range of educational opportunities to Idahoans who desire them and acting as stewards of tax-payer funds by avoiding program duplication as we work collaboratively. Our goal should be to increase the production of critical health care professionals, not to needlessly increase the number of professional health care programs. The path forward needs to leverage existing institutional-specific strengths and investments in educational capacity and infrastructure. We stand ready to collaborate as a system of higher education to create needed programming to increase the healthcare education capacity of the state and are open to working with the University of Idaho to meet these goals.

The recently submitted proposals do not support collaboration among the institutions in their existing form. Although discussions have occurred in the past related to partnerships between our institutions, these current proposals were drafted without further conversation. Additionally, these proposals have the potential to make health sciences education in some disciplines more costly and result in the unnecessary expenditure of tax-payer funds and cost increases to students. Finally, the rhetoric that has been used to advance these proposals in communications to the legislature and the broader public, about the mortality rate of Idahoans, has been misleading and does not recognize the important educational efforts by state institutions that include public-private partnerships in key geographic areas. The individual program proposal responses include specific information on current programming and we encourage you to review all submitted responses. Should the State Board of Education wish to see additional data beyond that found in our individual proposal responses to assess the validity of these concerns, we welcome the opportunity to provide such data.

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We are committed to collaborative engagement and working among all eight Idaho institutions to identify opportunities to build program partnerships. These partnerships should leverage our existing programmatic areas of expertise—thus, building effective collaborations without unnecessary competition. We urge the Board to set aside these proposals and facilitate collective dialogue about how we might collaboratively address Idaho’s healthcare workforce demands. We urge all institutions to come to that dialogue with a substantive commitment to the principles the Board has long expected.

DocuSigned by:  
*Robert Wagner*  
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Dr. Robert W. Wagner  
President, Idaho State University

DocuSigned by:  
*Cynthia Pemberton*  
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Dr. Cynthia Pemberton  
President, Lewis-Clark State College

DocuSigned by:  
*Dr. Marlene Tromp*  
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Dr. Marlene Tromp  
President, Boise State University

LEGISLATURE OF THE STATE OF IDAHO  
Sixty-seventh Legislature Second Regular Session - 2024

IN THE HOUSE OF REPRESENTATIVES

HOUSE BILL NO. 734

BY APPROPRIATIONS COMMITTEE

AN ACT

RELATING TO THE APPROPRIATION TO THE STATE BOARD OF EDUCATION AND THE BOARD OF REGENTS OF THE UNIVERSITY OF IDAHO; APPROPRIATING ADDITIONAL MONEYS TO THE STATE BOARD OF EDUCATION AND THE BOARD OF REGENTS OF THE UNIVERSITY OF IDAHO FOR COLLEGE AND UNIVERSITIES AND THE OFFICE OF THE STATE BOARD OF EDUCATION FOR FISCAL YEAR 2025; REDUCING THE APPROPRIATION TO THE STATE BOARD OF EDUCATION AND THE BOARD OF REGENTS OF THE UNIVERSITY OF IDAHO FOR COLLEGE AND UNIVERSITIES AND THE OFFICE OF THE STATE BOARD OF EDUCATION FOR FISCAL YEAR 2025; PROVIDING FOR THE USE OF APPROPRIATED FUNDS; PROVIDING FOR THE USE OF APPROPRIATED FUNDS; AND DECLARING AN EMERGENCY AND PROVIDING AN EFFECTIVE DATE.

Be It Enacted by the Legislature of the State of Idaho:

SECTION 1. In addition to any other appropriation provided by law, there is hereby appropriated to the State Board of Education and the Board of Regents of the University of Idaho for College and Universities and the Office of the State Board of Education the following amounts to be expended according to the designated programs and expense classes from the listed funds for the period July 1, 2024, through June 30, 2025:

	FOR PERSONNEL COSTS	FOR OPERATING EXPENDITURES	TOTAL
I. BOISE STATE UNIVERSITY:			
FROM:			
General			
Fund	\$4,292,600		\$4,292,600
Unrestricted			
Fund	<u>521,000</u>		<u>521,000</u>
TOTAL	\$4,813,600		\$4,813,600
II. IDAHO STATE UNIVERSITY:			
FROM:			
General			
Fund	\$2,991,900	\$552,100	\$3,544,000
Charitable Institutions Endowment Income			
Fund	31,700		31,700
Normal School Endowment Income			
Fund	357,200		357,200

	FOR PERSONNEL COSTS	FOR OPERATING EXPENDITURES	TOTAL
1           Unrestricted			
2           Fund	<u>589,700</u>	<u>0</u>	<u>589,700</u>
3           TOTAL	\$3,970,500	\$552,100	\$4,522,600
7    III. LEWIS-CLARK STATE COLLEGE:			
8    FROM:			
9    General			
10       Fund	\$551,700	\$268,800	\$820,500
11       Normal School Endowment Income			
12       Fund		352,200	352,200
13       Unrestricted			
14       Fund	<u>225,000</u>	<u>0</u>	<u>225,000</u>
15       TOTAL	\$776,700	\$621,000	\$1,397,700
16   IV. UNIVERSITY OF IDAHO:			
17   FROM:			
18   General			
19       Fund	\$3,548,200	\$290,000	\$3,838,200
20       Agricultural College Endowment Income			
21       Fund		65,700	65,700
22       Scientific School Endowment Income			
23       Fund		49,700	49,700
24       University Endowment Income			
25       Fund		266,500	266,500
26       Unrestricted			
27       Fund	<u>942,900</u>	<u>0</u>	<u>942,900</u>
28       TOTAL	\$4,491,100	\$671,900	\$5,163,000
29       GRAND TOTAL	\$14,051,900	\$1,845,000	\$15,896,900

30           SECTION 2. Notwithstanding any other provision of law to the contrary,  
31 the appropriation to the State Board of Education and the Board of Regents of  
32 the University of Idaho for College and Universities for Boise State Univer-  
33 sity is hereby reduced by \$4,600 from the General Fund from operating expen-  
34 ditures for the period July 1, 2024, through June 30, 2025.

35           SECTION 3. USE OF APPROPRIATED FUNDS. State-appropriated funds shall  
36 not be utilized to support diversity, equity, inclusion, or social justice  
37 ideology as part of any student activities, clubs, events, or organizations

1 on campus. Each college and university shall submit a written report of its  
2 expenditures related to these activities to the Joint Finance-Appropriations  
3 Committee no later than December 1, 2024.

4 SECTION 4. USE OF APPROPRIATED FUNDS. State-appropriated funds for  
5 capacity enhancement at the University of Idaho shall not be utilized to  
6 support undergraduate nursing or physician assistant programs that are pro-  
7 vided by other colleges, universities, and community colleges that receive  
8 state appropriated funds.

9 SECTION 5. An emergency existing therefor, which emergency is hereby  
10 declared to exist, this act shall be in full force and effect on and after  
11 July 1, 2024.